

DRUG SERVICES IN MERSEYSIDE & CHESHIRE 2000/1

Prevalence & Outcomes

*Specialist Drug Services, Syringe Exchange Schemes and
Outreach Services in Merseyside & Cheshire*

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Acknowledgements

The authors would like to thank Mr Rod Thomson of Sefton Health Authority, all the staff at the agencies who provided data for this report, including specialist drug services, agency based syringe exchange schemes, pharmacy based syringe exchange schemes and outreach services. We would also like to thank the staff at the Public Health Sector, LJMU in particular: Clare Dickson, Pauline Rimmer, Jim McVeigh, Diana Leighton and Juliet Hounscome and all the administrative staff for their support and valuable contribution.

SECTION 1

EXECUTIVE SUMMARY



EXECUTIVE SUMMARY

Introduction

This is the fifth annual Prevalence and Outcomes report on drug misuse but differs slightly from the preceding ones in that it covers the reporting period 1st April 2000 to 31st March 2001 as this system will now replace the Drug Misuse Database (DMD) on both a regional and national basis. As such, this report provides a preview of what data are expected from the new National Drug Treatment Monitoring System (NDTMS) and therefore represents the first report for the new system. It is however similar in that it reports data from a spectrum of services in Merseyside and Cheshire; Specialist Drug Services (SDS), Agency Syringe Exchange Schemes (SES), Pharmacy Syringe Exchange Schemes (Pharmacy) and Outreach Services (Outreach). It enables evaluation of the key performance indicators of the Government's ten-year anti-drug strategy¹ and provides information regarding the outcomes of drug treatment. With five years of reporting it is possible to look at trends, for example, in the proportion of females accessing services, the proportion of users aged less than 25 and the changes in the prevalence of different drugs. Importantly it is now possible to quantify relapse by considering the number of users that re-contact services following drug free discharge in previous years. Whilst the actual reporting period of this report covers 1st April 2000 to 31st March 2001, it is referred to as '2000' throughout.

Specialist Drug Services

In 2000, 8,173 individuals were reported by 30 Specialist Drug Services (SDS) based in Merseyside and Cheshire. A map and list of reporting agencies can be found in Appendices II and III. For this report, information is collected every six months on every individual that has been seen at any time within the reporting period at each organisation. The Drug Misuse Database differs in that it collects information on individuals that are new to treatment or are beginning a new episode of drug use intervention or service contact. Therefore, whilst information is available for 9,062 individuals in the SDS section (double counting across agencies included) of the report only 3,120 individuals were reported to the DMD in the same time period (Table 1.1). The Prevalence and Outcome Database (and the NDTMS) therefore offers a more comprehensive assessment of drug use in the North West, with information available on all clients in contact with services. Additionally, outcome data is available to evaluate what happens to clients once contact with drug services has been made.

All agencies reported a greater number of male users than female users with females accounting for 31.3% of the overall number (Table 1.3 and Table 1.4). This constitutes a small rise since 1996 when females accounted for 28.6% of users at SDS. Recent research suggests that females are not more reluctant to contact services than males² and the greater proportion of male users in contact with services is likely to represent a greater number of problematic male drug users in the population as a whole. The largest proportion of clients was aged between 30 and 34 (31.6%) with female clients being younger on the whole (Table 1.2). A main focus of the Government's anti-drug strategy is to reduce the proportion of people under the age of 25 reporting the use of illegal drugs¹ and a higher percentage of females than males fell into this age category, 18.9% and 11.7% respectively

(Table 1.2). Overall, the proportion aged less than 25 has decreased in recent years from 17.0% in 1997 to 13.9% in 2000. However this reduction may be due to services failing to attract younger users and not a decline in the numbers using drugs. The majority of clients contacted services in the health authority within which they were resident. Supra-District Agencies (SDA) are typically residential units and take clients from a range of health authorities. Not surprisingly, such agencies reported the greatest spread geographically of their clients with 42 (9.3%) being resident outside the North West of England (Table 1.5).

The proportion of clients who were still active (i.e. in contact with a treatment agency) at the end of the reporting period had increased from 59.0% in 1996 to 75.3% in 1999 but has fallen slightly in 2000 to 73.7% (Table 1.6). Of those that are active at the end of reporting (5,611) the majority (77.8%) were in receipt of a methadone prescription (Table 1.7). Of those that were not in contact with a treatment agency at the end of the reporting period (2,005), 24.5% were discharged drug free. However, Table 1.8 indicates the extent to which those discharged drug free re-contact services at a later date. Of the 1,284 clients that were discharged drug free in 1997, 48% had been seen again by treatment services by 2000. The relapse rate would be even higher when those who have relapsed but not re-contacted services are considered. Additionally, of the 1,284 individuals discharged drug free in 1997, 364 (28.3%) had contacted services in all three subsequent years.

Agency Based Syringe Exchange Schemes

In 2000, The Drug Monitoring Unit received reports from 15 Agency Based Syringe Exchange Schemes, the same number as the previous two years. Between 1996 and 1998 there has been a steady decline in the number of users reported by SES agencies, falling from 3,852 in 1996 to 3,646 in 1998. This decline was attenuated in 1999 when the number of users was 3,690. A further decline has been observed this year, with 3,513 users being reported. Other than the increase in 1999, the number of new users reported has also declined each year. Whilst the decline in the proportion of new users has fallen only slightly since 1999 the overall decline in the percentage of new users has been considerable since 1996 with new users making up 48.5% of all users in 1996 compared to 38.0% in 2000. The average number of visits made by each client has remained relatively steady over the five years, with rates of 4.9, 4.6, 5.2, 5.1 and 4.9 for the years 1996 through to 2000 respectively (Table 2.1).

As with previous years, males constituted a larger percentage of both all users and new users than female clients. Males accounted for 86.6% of all users and 88.2% of new users, giving female to male ratios of 1:6.6 and 1:7.5 respectively. This represents a reduction in the proportion of females reported since 1999 when female to male ratios were 1:6.0 for all users and 1:6.7 for new users. Liverpool, North Cheshire and St Helens & Knowsley had a particularly low proportion of new female users (Table 2.3). A variety of reasons may contribute to low female uptake of SES services including increasing levels of anabolic steroid use (which is predominantly male³), the perceived stigma attached to females that inject or the increased uptake of females into treatment services which then actively aim to reduce injecting behaviour. Alternatively, the smaller number of females in contact with services probably reflects the smaller number of problematic female drug

users in general². The most common age group for all and new users was 25 to 29 but there was a wider variation of ages when females were considered in isolation, with 26.8% and 27.4% of all and new female users respectively aged 30 to 34 and 27.4% of new female users aged 20 to 24 (Table 2.4). The Government's anti-drug strategy places emphasis on reducing the proportion of people aged less than 25 reporting use of illegal drugs¹. In 2000 the number of new users aged between 15 and 24 was 28.2%, compared to 30.6% in 1999. The proportion of all users aged under 25 has also decreased this year (18.9% in 2000 compared to 20.9% in 1999).

Since recording began, the most commonly reported drug of use has been heroin. Since 1997, the proportion of users reporting heroin as the main drug has fallen slightly, with a further decline in 2000. Heroin use for all users was 48.5% in 2000 compared to 49.1% in 1999. Similarly, in 2000, 45.9% of new users stated heroin as their main drug compared to 48.7% in 1999 (Table 2.6a). Heroin use remains highest in South Cheshire. Anabolic steroid use has increased considerably since 1996 when it was the main drug of 22.3% of users and 26.9% of new users compared to the year 2000 when 32.6% of all users and 43.9% of new users stated this as their main drug. North Cheshire has particularly high levels of anabolic steroid use (Tables 2.7a and 2.7b). Of particular concern is the age of anabolic steroid users. Out of a total of 947 anabolic steroid users, 59 and 262 were aged 15 to 19 and 20 to 24 respectively. Therefore 33.9% of all anabolic steroid users were aged less than 25, compared with 12.3% of heroin users, 12.0% of amphetamine users, 7.9% of cocaine users and 4.4% of methadone users. The proportion of new users reporting use of methadone increased slightly this year from 2.9% in 1999 to 3.4% in 2000. However it is still well below 1996 levels, when 10.6% of new users stated this as their main drug. Use of cocaine and crack as a main drug remains small, constituting 2.1% and 0.1% of all users respectively (Tables 2.7a and 2.7b). Cocaine as the main drug of use has declined consistently each year from 3.2% in 1996. Crack was first analysed independently from cocaine only in 1999 so trend analysis for this drug is not possible. Drug data are collected at the first contact with the client at SES so data regarding new users better reflects the current situation.

Pharmacy Based Syringe Exchange Schemes

A total of 56 Pharmacies reported data on 4,762 individuals in 2000 compared to 59 Pharmacies that reported in the previous two years. When users that contacted services in different health authorities were counted once in each health authority, 5,001 individuals were reported in 2000 compared to 5,536 in 1999. Liverpool Health Authority began collecting attributable data in 1999 when almost all users in this health authority were classified as new users. In 2000 client details were compared to 1999 and the number of users classed as new users dropped considerably. This partly accounts for the reduction in new users from 3,880 in 1999 to 2,098 in 2000 (Table 3.1). The number of Pharmacies reporting data in Liverpool Health Authority continued to fall this year with 11 Pharmacies reporting in 2000 compared to 12 in 1999 and 17 in 1998. The number of visits made to Pharmacies increased this year to 31,200 and the visit rate therefore rose accordingly from 11.4 in 1999 to 13.5 in 2000. Whilst the number of users has fluctuated significantly over the five years of reporting, the number of visits has remained more stable since 1997 and

the large variations in the number of users reported may therefore be due to the method of recording. The number of users reported fell in each health authority the year following the introduction of collecting attributable data.

The proportion of Pharmacy clients that were female has increased over the last four years but in 2000 the proportion of female users declined slightly to 19.6% and 18.1% for all users and new users respectively (1999; all female users; 20.3%, new female users; 20.7%). The most common age group of both female and male users and new users was 25 to 29 although generally female users accessing Pharmacies tended to be slightly younger, with more females than males in the under 25 age category (Table 3.2). In 2000, there was an increase of 1.2% in the percentage of new male users that fell into this age category (20.8% in 1999, 22.0% in 2000) but for all males users and both all female users and new female users the proportion that were aged less than 25 had decreased since 1999.

Outreach Services

In 2000, the most common type of client for Outreach were non-injecting drug users, although Liverpool Health Authority's main client group were predominantly prostitutes (Table 4.5). The main methods by which Outreach workers made contact with their clients were either to be introduced by another client or to make a direct approach to the client depending on the health authority (Table 4.6). A total of 2,933 users were reported by Merseyside and Cheshire Outreach services, 11.6% fewer than were reported in 1999. Data were not available for Chester CDT Outreach service for the period between January and March 2001 and results for this agency therefore represents nine months of data. This may account partially for the considerable decrease in the numbers reported by South Cheshire but the decrease in this health authority is more attributable to the reduced numbers reported by South Cheshire CDT where 600 users were reported in 1999 compared to just 78 in 2000 (Table 4.2). Wirral Health Authority reported the most service users, a total of 1,235. Of the 2,933 users reported this year, 1,319 (45.0%) were new users. New users accounted for 69.5% of all users in Liverpool Health Authority compared to South Cheshire where 27.5% of users were new to Outreach services (Table 4.1). Similarly to 1999, more females than males were reported to the Drug Monitoring Unit. Females constituted 55.9% of all users and 53.7% of new users although there were considerable differences across health authorities (Table 4.3). Outreach remains the service that reports the highest percentage of females although the proportion of females reported has decreased since 1999 when females accounted for 65.6% of all users and 65.0% of new users.

The most commonly reported drug of use was heroin, accounting for 51.7% and 45.6% of all users and new users respectively. As drug of use is recorded on the first contact only, figures for new users better represent current patterns and there has been a rise in the proportion of new users reporting heroin as their main drug from 50.5% in 1998 and 43.3% in 1999 to 54.6% this year. Liverpool Health Authority has by far the highest proportion of heroin use, with 72.1% of new users recording this as their main drug compared to 27.5% of new users in South Cheshire. Whilst the number of Outreach clients reporting the use of crack remains low compared to other drugs, use had increased since 1999. The greatest increase has been in Liverpool where, in 1999, 0.9% of all users and

1.6% of new users cited crack as their main drug compared to 2000 when it was cited by 7.6% and 8.7% of all users and new users respectively. The proportion of Outreach clients reporting anabolic steroid use remains low (0.7% of all users, 0.9% of new users) despite a continuing increase in the reporting of this drug at SES, with 31.9% of all users and 42.8% of new users reporting primary use of this drug at SES in 2000 (Table 4.4).

Clients of Outreach services were asked if they received a prescription as part of their treatment for drug dependency and 30.8% indicated that they were. The proportion of new users that were in receipt of a prescription varied across health authorities, with 5.5% of new users receiving a prescription in South Cheshire compared to 28.3% in Wirral. Overall, 19.0% of new users had a prescription (Table 4.7). Outreach clients were also asked if they were attending SES at the time of first contact. A total of 18.2% of all users and 14.0% of new users indicated they were. Sefton had the greatest proportion (30.1%) of new users that also attended SES compared to 4.6% of new users in South Cheshire (Table 4.8).

Multi-Agency-Type Visitors

Attributor data are collect by SDS, SES and Pharmacy and can be used to indicate the number of individuals that attended more than one of these services. Of the 8,173 individuals that were in contact with SDS, 1,881 (23.0%) were also in contact with either Pharmacy or SES, indicating that a proportion of those in contact with treatment services continue to inject. Additionally 411 (5.0%) of those in contact with SDS visited both Pharmacy and SES. Only 606 (8.1%) individuals visited both Pharmacy and SES (irrespective of whether they were in contact with SDS or not) indicating that these two types of syringe exchange scheme attract different populations and offer complementary services.

SECTION 2

INTRODUCTION



INTRODUCTION

Monitoring Drug Misuse in Merseyside and Cheshire

In 1990-1991 the Department of Health established the Drug Misuse Database (DMD) to quantify the number of users contacting drug treatment services. The DMD collects data on new users or users that had contacted services following a break of six months or more. Whilst providing valuable data, the DMD underestimates the number of users in contact with services because no data were collected on existing clients. The Prevalence and Outcomes database was established in 1996 to address this limitation, collecting information on all clients in contact with services in Merseyside and Cheshire. In April 2001 the new DMD became operational and was renamed the National Drug Treatment Monitoring System (NDTMS). The new database is based upon the Prevalence and Outcomes database of Merseyside and Cheshire in that it collects information on all clients in contact with services. It provides an annual review of the status of each client so that outcomes of treatment can be monitored. Unlike previous Prevalence and Outcomes reports that cover a calendar year, this report covers the period 1st April 2000 to 31st March 2001 (although this period is referred to as 2000 throughout this report) so that the end of reporting coincided with the beginning of the new NDTMS. The NDTMS database will replace both the old DMD and the Prevalence and Outcome database and as such this report represents the last in this series and the first in the new NDTMS series.

In Merseyside and Cheshire, the DMD and the Prevalence and Outcome database both collect information on users in contact with treatment services but additional data are available for all users in contact with Agency Based Syringe Exchange Schemes (SES), Pharmacy Based Syringe Exchange Schemes (Pharmacy) and Outreach services (Outreach). The information presented here therefore provides a more comprehensive understanding of the situation in Merseyside and Cheshire and allows for better monitoring of the Government's anti-drug strategy¹. Boxes 1 and 2 indicate objectives detailed in the Government's ten-year anti-drugs strategy Tackling Drugs to Build a Better Britain¹ and the Second National Plan⁴ respectively. These objectives need to be monitored at both the local and national level.

Drug Treatment and the Criminal Justice System

The link between crime and drug use is well established^{5,6} and key objectives of the Government's anti-drug strategy are to reduce the levels of crime committed to pay for drug misuse and increase the number of offenders referred to and entering treatment. Long-term incarceration has not been observed to curtail drug use⁷ but drug treatment has been shown to have a positive effect on both drug taking and criminal behaviour⁸. With this in mind, recent schemes have attempted to divert drug-taking individuals into treatment, by making contact with them at a time of crisis; the time of arrest or at the pre-sentence report stage. In 1999, Drug Treatment and Testing Orders (DTTO), Youth Offending Teams (YOT) and the Arrest Referral Scheme (ARS) all became operational and information on each scheme has been presented in the 1999 Prevalence and Outcomes report⁹. The links between controlling drug use and the criminal justice system are likely to be strengthened since the June 2001 election when tackling drug misuse became under the auspices of the Home Office.

**BOX 1: Tackling Drugs to Build a Better Britain:
Key Performance Indicators (KPI) and Objectives**

- KPI 1 Reduce the proportion of people under 25 reporting use of illegal drugs in the last month and previous year.
- 1.1 Increase levels of knowledge of 5 - 16 year olds about risks and consequences of drug misuse
 - 1.2 Delay age of first use of illegal drugs
 - 1.3 Reduce exclusions from schools arising from drug-related incidents
 - 1.4 Reduce number of people under 25 using heroin
 - 1.5 Increase access to information and services for vulnerable groups
- KPI 2 Reduce levels of repeat offending amongst drug misusing offenders.
- 2.1 Increase the number of offenders referred to and entering treatment programmes as a result of arrest referral schemes, the court process and post-sentencing provision
 - 2.2 Reduce levels of crime committed to pay for drug misuse
 - 2.3 Reduce drugs market places of particular concern to local communities
 - 2.4 Reduce levels of drug-related absenteeism/dismissals from work
 - 2.5 Reduce numbers of road deaths/injuries where drugs are a contributory factor
- KPI 3 Increase participation of problem drug misusers, including prisoners, in drug treatment programmes which have a positive impact on health and crime.
- 3.1 Increase the proportion of drug misusers in contact with drug services
 - 3.2 Reduce the proportion of drug misusers who inject and the proportion of those sharing injecting equipment over the previous three months.
 - 3.3 Reduce numbers of drug related deaths
 - 3.4 Reduce the number of drug misusers being denied immediate access to appropriate treatment
- KPI 4 Reduce access to drugs amongst 5-16 year olds.
- 4.1 Increase the effectiveness of the overseas diplomatic and operational effort
 - 4.2 Increase the value of illegal drugs seized in or prevented from entering the UK
 - 4.3 Increase the number of trafficking groups disrupted or dismantled
 - 4.4 Increase the number of offenders dealt with for supply offences
 - 4.5 Increase the proportion of trafficker assets identified, and the proportion confiscated/recovered
 - 4.6 Reduce prisoner access to drugs

BOX 2: Second National Plan of the UKACDU: Key Performance Targets

- KPT 1 Reduce the proportion of people under 25 reporting use of illegal drugs in the last month and previous year substantially and to reduce the proportion of young people using the drugs which cause the greatest harm - heroin and cocaine - by 50% by 2008 (25% by 2005).
- KPT 2 To reduce the levels of repeat offending amongst drug misusing offenders by 50% by 2008 (25% by 2005).
- KPT 3 To increase the participation of problem drug users, including prisoners in drug treatment programmes which have a positive impact on health and crime by 100% by 2008 (66% by 2005).
- KPT 4 Reduce access to all drugs amongst young people (under 25) significantly, and to reduce access to the drugs which cause the greatest harm, particularly heroin and cocaine, by 50% by 2008 (25% by 2005).

Initially, Arrest Referral involved Police staff giving out information about local services to those who had been arrested for a drug related crime. The service has developed greatly and now involves drugs workers situated in custody suites with the authority to access the cells to make contact with prospective clients. All detainees, regardless of the offence they have committed, are now asked if they wish to speak to the drugs worker. The initial assessment is made in the custody suite and the individual is then referred to the appropriate service. The Drug Monitoring Unit has been receiving monitoring forms for over a year but reporting was patchy prior to October 2000. Box 3 presents some key findings for the period covering 1st October 2000 to 31st March 2001 and therefore represents six months of data.

**BOX 3: Key Findings from Arrest Referral in Merseyside and Cheshire
1st October 2000 – 31st March 2001**

| | |
|---|-------|
| Number of forms received | 1,524 |
| Number who have received drug related treatment | 988 |
| Number who were in treatment at the time of arrest | 353 |
| Number reporting use of heroin (most commonly reported drug of use) | 1,063 |
| Number who indicated they had injected in month prior to arrest | 435 |
| Number referred to a specialist drug agency* | 875 |
| New referrals to a specialist drug agency** | 736 |

**includes CARAT, Bail Support Scheme and alcohol services*

***number that are referred to a specialist drug agency minus those who indicated they were currently receiving treatment*

Arrest Referral workers are required to ascertain from treatment agencies attendance data for those individuals that they refer from the ARS. Attendance data for the January to March 2001 quarter were not available at the time of writing. When data for October to December 2000 is considered, 349 arrest referrals were referred to a Specialist Drug Services and 34.7% of these attended their first appointment. However, attendance data were not available for 180 individuals that were referred to a Specialist Drug Service.

With criminal justice interventions aiming to direct people not previously in contact with drug services towards treatment it is important to ascertain the number of users that may potentially be accessing services to plan future provision. A recent Capture-Recapture report gave estimations of the total number of problematic drug users (i.e. both those in contact and not in contact with drug related agencies) in the Merseyside Health Authorities². This was achieved by applying log linear modelling to different data sets of drug users with the overlap between data sets providing an estimation of the drug using population as a whole. When numbers were given as rates of problem drug users per 1,000 of population, Liverpool Health Authority was found to have 33 drug users per 1,000 and a male rate as high as 52 per 1,000 of population. Female rates were lower at 17 per 1,000 of population (estimates exclude users of only cannabis, amphetamine, ecstasy or anabolic steroids, refer only to the 15-44 age group and are based on 1998 data). When the number known to be in contact with treatment agencies was expressed as a percentage of all users, female uptake of services was far greater than for their male counterparts. Overall in

Merseyside, 47.1% of the estimated total number of female users were already in contact with services compared to just 27.3% of the estimated total number of males. Female users are therefore not reluctant to contact services and the smaller number of females in contact with services reflects the smaller number of problematic female drug users in the population as a whole².

The Government aims to reduce the number of individuals denied immediate access to treatment. The recent Capture-Recapture report suggests that less than half of all problematic drug users are already in contact with treatment agencies. Consequently any measure to tackle drug use problems must consider the substantial expansion of current treatment provision if all new referrals are to be accommodated. The ARS in Merseyside and Cheshire reported 736 new referrals within a six-month period. Success of such schemes is dependent on adequate treatment provision as the likelihood of an individual attending their first appointment declines if the appointment is not in the immediate future.

Key Issues

The Government's ten-year anti-drug strategy contains key performance indicators (KPI) that need to be monitored at both a local and national level. Reports in the Prevalence and Outcome series provide information designed to assist monitoring and in particular give an idea of trends towards achieving these key objectives. Tables 1.2, 2.4 and 3.2 and Figure 2.2 assist in monitoring KPI 1 by providing data by age groups. More specifically, KPI 1.4 can be evaluated using Table 2.8 which provides data regarding the drugs used by individuals of different age categories. Tables 1.3, 1.4, 2.3, 3.3 and 4.3 assist in monitoring the progress of female users contacting services.

Data from SES and Pharmacy also provide valid means by which to assess the strategy by indicating the number of users that inject (KPI 3.2). Tables 2.1 and 3.1 indicate the number of individuals in contact with Syringe Exchange Services whilst Tables 2.6a and Figures 2.4a, 2.4b and 2.4c provide data on injecting broken down by drug of use. Table 1.13 gives an indication of sharing behaviour. The final chapter considers multi-agency visitors and enables the number of individuals in contact with a SDS that are still in contact with a needle exchange service to be evaluated.

It is also essential to monitor outcomes of treatment and thus the success of drug treatment initiatives in general. Tables 1.6 and 1.7 assist in this as they provide data regarding the numbers still in contact with services at the end of the year and treatment outcomes for those who had terminated their contact with treatment agencies. For those that leave services with a drug free status monitoring return to treatment provides data on relapse rates and therefore additional treatment demands.

SECTION 3

SPECIALIST DRUG SERVICES



SPECIALIST DRUG SERVICES

Introduction

Since 1996, the Drug Monitoring Unit has been collecting prevalence data on all users in contact with drug treatment agencies in Merseyside and Cheshire. This assists in both the evaluation and planning of future provision and the assessment of the Government's anti-drug strategy; in particular KPI 3.4 requires knowledge of agency activity and more specifically retention and throughput. The prevalence data reported here shows that the number of users in contact with SDS has increased slightly in 2000 but remained relatively stable over the last three years (7,835 in 1998, 7,772 in 1999, 8,173 in 2000) despite changes in individual agencies. Individuals may visit more than one agency in Merseyside and Cheshire in the period of reporting giving rise to double counting. Double counting is included in Table 1.1 but has been excluded in other analyses by identifying individuals by their attributor data; initials, date of birth and sex. Each individual is therefore recorded only at the last agency they visited (providing the most recent drug use history for each client) with the exception of analyses by health authority, when an individual visiting two agencies in two different health authorities will be included in each health authority.

When the demographics of those accessing services are considered, approximately one third (31.3%) are female giving a female to male ratio of 1:2.2 compared to ratios of 1:6.6 at SES and 1.4:1 at Pharmacy. Recent research indicates that females are not less willing than males to access treatment services² and that the consistently smaller number of females in contact with services is probably due to the smaller number of drug taking females in the population as a whole. When age of users in contact with services is considered, most clients fall into the 30 to 34 category (31.6%). However, female users tend to be younger with 18.9% aged less than 25 compared to 11.7% of males and a greater percentage of males aged over 35. Overall the proportion aged less than 25 has decreased in recent years from 17.0% in 1997 to 13.9% in 2000.

Outcome measures assist in the evaluation of the Government's anti-drug strategy by measuring the number of users discharged from treatment agencies drug free. At the end of 2000, 5,611 (73.7%) clients were still in contact with services compared to 2,005 (26.3%) that were not (including double counting across agencies). A total of 492 users were discharged drug free in 2000 which equates to 24.5% of non-active clients (those who are not in contact with services at the end of the reporting year). In 1999, 38.0% of non-active clients were discharged drug free. However, a considerable proportion of individuals relapse in the coming months or years. Of the 1,284 individuals that were discharged drug free in 1997, 48% re-contacted services at a later date. This figure may not represent all individuals that relapse as some may not contact services a second time or will contact services outside the Merseyside and Cheshire area.

DEFINITIONS

An individual is only included in the analyses if their full attributor data (initials, date of birth and sex) are provided

| | |
|------------------------------|--|
| User | A person who visits an SDS at least once during the reporting period (2000). |
| Double Counting | When a person is counted at all the agencies they visit within Merseyside and Cheshire or within each health authority when analysis is expressed by health authority. |
| Single Counting | When a person is counted at only the last agency they visit within Merseyside and Cheshire or are counted at the last agency they visited within each health authority when analysis is expressed by health authority. |
| Supra District Agency | (SDA) An agency which accepts clients from a wide geographical area, typically residential units and inpatient facilities. |

Table 1.1 shows that a total of 8,173 individuals were in contact with SDS in 2000, compared to 7,772 in the previous year and 7,835 in 1998. Lifeline and Oakmere Unit ceased reporting in 2000 and the U-Turn Project now reports to the Arrest Referral Scheme. When single counting is considered, Chester CDT, Liverpool Bail Support, and Wirral Drugs Services have experienced the largest increases from the previous year in the number of clients seen. Conversely, Halton CDT and Liverpool DDU are services that have seen a fall in the number attending their services. In 2000, 889 (9,062-8,173) visits were made by individuals that had previously been in contact with a different agency in this reporting period. The final column of Table 1.1 shows the number of reports made by each agency to the Drug Misuse Database (DMD). Data were available on 3,120 individuals from the DMD compared to 9,062 reports made to the Prevalence and Outcomes Database. The largest differences between numbers reported to the DMD and numbers reported to the Prevalence and Outcomes Database are by those services offering more long-term treatment where clients may be in contact with services for many years.

Table 1.1 Number of Users in Contact with Specialist Drug Services in 2000 by Reporting Agency

| Agency | Single Counted* | Double Counted* | DMD Reports |
|-------------------------------|-----------------|-----------------|--------------|
| ARCH Initiatives, Oliver St | 289 (3.5%) | 370 (4.1%) | 186 (6.0%) |
| ARCH Initiatives, Residential | 37 (0.5%) | 56 (0.6%) | 1 (0.0%) |
| ARCH North Cheshire | 122 (1.5%) | 132 (1.5%) | 73 (2.3%) |
| Chester CDT | 541 (6.6%) | 551 (6.1%) | 47 (1.5%) |
| Dare to Care | 1 (0.0%) | 2 (0.0%) | 2 (0.1%) |
| Drug Free | 239 (2.9%) | 287 (3.2%) | / |
| Dual Action Response Team | 53 (0.6%) | 53 (0.6%) | 23 (0.7%) |
| Halton CDT | 163 (2.0%) | 186 (2.1%) | 125 (4.0%) |
| Independance Initiative | 127 (1.6%) | 216 (2.4%) | 61 (2.0%) |
| Integrated Care Team | 135 (1.7%) | 152 (1.7%) | 73 (2.3%) |
| The Kevin White Unit | 171 (2.1%) | 233 (2.6%) | 176 (5.6%) |
| Kirkby CDT | 190 (2.3%) | 204 (2.3%) | 10 (0.3%) |
| Liverpool Bail Support | 124 (1.5%) | 151 (1.7%) | 64 (2.1%) |
| Liverpool DDU | 807 (9.9%) | 873 (9.6%) | 160 (5.1%) |
| Liverpool MDC | 298 (3.6%) | 353 (3.9%) | 325 (10.4%) |
| Macclesfield CDT | 448 (5.5%) | 450 (5.0%) | 170 (5.4%) |
| Newton-le-Willows CDT | 90 (1.1%) | 106 (1.2%) | 71 (2.3%) |
| North Liverpool CDT | 311 (3.8%) | 344 (3.8%) | 1 (0.0%) |
| Phoenix House | 133 (1.6%) | 164 (1.8%) | 160 (5.1%) |
| SHADO | 82 (1.0%) | 92 (1.0%) | 98 (3.1%) |
| South Cheshire CDT | 287 (3.5%) | 294 (3.2%) | 150 (4.8%) |
| South Knowsley CDT | 240 (2.9%) | 255 (2.8%) | 134 (4.3%) |
| South Sefton CDT | 477 (5.8%) | 501 (5.5%) | 117 (3.8%) |
| South Sefton MDC | 22 (0.3%) | 25 (0.3%) | 24 (0.8%) |
| Southport DDU | 141 (1.7%) | 154 (1.7%) | 28 (0.9%) |
| Southport MDC | 125 (1.5%) | 148 (1.6%) | 48 (1.5%) |
| St Helens CDT | 392 (4.8%) | 425 (4.7%) | 163 (5.2%) |
| Turning Point | 17 (0.2%) | 20 (0.2%) | 14 (0.4%) |
| Warrington CDT | 353 (4.3%) | 366 (4.0%) | 160 (5.1%) |
| Wirral Drugs Service | 1,758 (21.5%) | 1,899 (21.0%) | 456 (14.6%) |
| Total (100%) | 8,173 | 9,062 | 3,120 |

CDT = Community Drugs Team MDC = Merseyside Drugs Council DDU = Drug Dependency Unit DMD = Drug Misuse Database

** The column headed 'Double Counted' gives the number of individuals who contacted each agency during the year whilst the column headed 'Single Counted' counts individuals only at the last agency they visited in the year*

Table 1.2 Number of Users in Contact with Specialist Drug Services in 2000 by Sex and Age

| Age Group | Sex | | Total |
|---------------------|--------------|---------------|---------------|
| | Female | Male | |
| Under 15 | 6 (0.2%) | 10 (0.2%) | 16 (0.2%) |
| 15 - 19 | 94 (3.7%) | 127 (2.3%) | 221 (2.7%) |
| 20 - 24 | 382 (15.0%) | 512 (9.2%) | 894 (11.0%) |
| 25 - 29 | 657 (25.8%) | 1,272 (22.8%) | 1,929 (23.7%) |
| 30 - 34 | 773 (30.3%) | 1,801 (32.2%) | 2,574 (31.6%) |
| 35 - 39 | 407 (16.0%) | 1,161 (20.8%) | 1,568 (19.3%) |
| 40 - 44 | 120 (4.7%) | 392 (7.0%) | 512 (6.3%) |
| 45 - 49 | 68 (2.7%) | 188 (3.4%) | 256 (3.1%) |
| 50 & Over | 42 (1.6%) | 122 (2.2%) | 164 (2.0%) |
| Total (100%) | 2,549 | 5,585 | 8,134 |

Data exclude all double counting i.e. each individual is only counted once, at the last agency they attended

Table 1.2 shows that overall, 5,585 and 2,549 male and female clients respectively were in contact with services in 2000 giving a female to male ratio of 1:2.2. This compares to female to males ratios of 1:6.6 at SES and 1:4.1 at Pharmacy Syringe Exchange. The proportion of female clients is identical to 1999, 31.3%. The largest proportion of both male and female clients fell into the 30 to 34 age category, 32.2% and 30.3% respectively but females tended to be younger on the whole. The Government's anti-drug strategy places strong emphasis on reducing the proportion of users aged less than 25 and Table 1.2 indicates a greater proportion of females are within this age group than males; 18.9% and 11.7% respectively. Conversely, a greater proportion of males are aged more than 35. Overall, the proportion of users aged less than 25 has decreased in recent years, being 17.0% in 1997 and 1998, 14.4% in 1999 and 13.9% in 2000.

Table 1.3 Number of Users in Contact with Specialist Drug Services in 2000 by Sex and Health Authority of Reporting Agency

| Health Authority | Sex | | Total (100%) |
|----------------------|----------------------|----------------------|--------------|
| | Female | Male | |
| Liverpool | 746 (35.4%) | 1,363 (64.6%) | 2,109 |
| North Cheshire | 167 (30.4%) | 383 (69.6%) | 550 |
| Sefton | 283 (35.4%) | 516 (64.6%) | 799 |
| South Cheshire | 390 (29.1%) | 950 (70.9%) | 1,340 |
| St Helens & Knowsley | 259 (27.1%) | 696 (72.9%) | 955 |
| Wirral | 637 (30.0%) | 1,484 (70.0%) | 2,121 |
| SDA* | 186 (28.6%) | 464 (71.4%) | 650 |
| Total | 2,668 (31.3%) | 5,856 (68.7%) | 8,524 |

*Double counting is excluded within health authorities i.e. an individual will be reported at the last agency they visited in each health authority. *SDA = Supra District Agency*

Table 1.3 shows the sex profile of SDS clients according to health authority of reporting agency. Overall figures are identical to last year with females comprising 31.3% of clients in both 1999 and 2000. Again similar to 1999, Sefton and Liverpool Health Authorities reported the highest proportion of females (both 35.4%). St Helens & Knowsley reported the smallest proportion (27.1%). Female to male ratios therefore varied from 1:1.8

in Liverpool and Sefton Health Authorities to 1:2.7 in St Helens & Knowsley. Supra District Agencies, which are typically residential units and inpatient facilities, have been reported separately as they take clients from a number of different health authorities, including those outside Merseyside and Cheshire. Whilst there are a smaller proportion of females than males reported here, this may not mean that female users have a greater reluctance to contact SDS. A recent report estimating the hidden population of problematic drug users (i.e. an estimation of those users not known to any drug related agency) indicated that there were actually a greater percentage of problematic female drug users in contact with treatment services than males and that the smaller number of females in contact with treatment represented a smaller percentage of problematic female drug users in general².

Table 1.4: Number of Users in Contact with Specialist Drug Services in 2000 by Sex and Reporting Agency

| Agency | Sex | |
|-------------------------------|----------------------|----------------------|
| | Female | Male |
| ARCH Initiatives | 82 (28.4%) | 207 (71.6%) |
| ARCH Initiatives, Residential | 9 (24.3%) | 28 (75.7%) |
| ARCH North Cheshire | 54 (44.3%) | 68 (55.7%) |
| Chester CDT | 148 (27.4%) | 393 (72.6%) |
| Dare to Care | / | 1 (100%) |
| Drug Free | 62 (25.9%) | 177 (74.1%) |
| Dual Action Response Team | 9 (17.0%) | 44 (83.0%) |
| Halton CDT | 40 (24.5%) | 123 (75.5%) |
| Independance Initiative | 32 (25.2%) | 95 (74.8%) |
| Integrated Care Team | 47 (34.8%) | 88 (65.2%) |
| The Kevin White Unit | 53 (31.0%) | 118 (69.0%) |
| Kirkby CDT | 65 (34.2%) | 125 (65.8%) |
| Liverpool Bail Support | 49 (39.5%) | 75 (60.5%) |
| Liverpool DDU | 299 (37.1%) | 508 (62.9%) |
| Liverpool MDC | 118 (39.6%) | 180 (60.4%) |
| Macclesfield CDT | 134 (29.9%) | 314 (70.1%) |
| Newton-le-Willows CDT | 35 (38.9%) | 55 (61.1%) |
| North Liverpool CDT | 110 (35.4%) | 201 (64.6%) |
| Phoenix House | 31 (23.3%) | 102 (76.7%) |
| SHADO | 29 (35.4%) | 53 (64.6%) |
| South Cheshire CDT | 94 (32.8%) | 193 (67.2%) |
| South Knowsley CDT | 51 (21.3%) | 189 (78.8%) |
| South Sefton CDT | 161 (33.8%) | 316 (66.2%) |
| South Sefton MDC | 3 (13.6%) | 19 (86.4%) |
| Southport DDU | 66 (46.8%) | 75 (53.2%) |
| Southport MDC | 42 (33.6%) | 83 (66.4%) |
| St Helens CDT | 90 (23.0%) | 302 (77.0%) |
| Turning Point | 4 (23.5%) | 13 (76.5%) |
| Warrington CDT | 109 (30.9%) | 244 (69.1%) |
| Wirral Drugs Service | 532 (30.3%) | 1,226 (69.7%) |
| Total (100%) | 2,558 (31.3%) | 5,615 (68.7%) |

Data exclude double counting i.e. individuals are counted at only the last agency they attended
 CDT = Community Drugs Team MDC = Merseyside Drugs Council DDU = Drug Dependency Unit

Table 1.4 reports the sex distribution of clients visiting each SDS. Overall, almost a third of clients were female which is similar to the previous two years (31.4% in 1998 and 31.2% in 1999). South Sefton MDC reported the smallest proportion of females (13.6%) and Southport DDU the largest (46.8%).

Table 1.5 Number of Users in Contact with Specialist Drug Services in 2000 by Health Authority of Reporting Agency and Health Authority of Residence

| Health Authority of Residence | Health Authority of Reporting Agency | | | | | | | Total |
|-------------------------------|--------------------------------------|----------------|------------|----------------|----------------------|--------------|------------|--------------|
| | Liverpool | North Cheshire | Sefton | South Cheshire | St Helens & Knowsley | Wirral | SDA* | |
| Liverpool | 1,779 | 1 | 16 | / | 42 | 6 | 163 | 2,007 |
| North Cheshire | 7 | 346 | / | 2 | 4 | 7 | 7 | 373 |
| Sefton | 46 | 2 | 741 | / | 2 | / | 97 | 888 |
| South Cheshire | 3 | 10 | / | 1,308 | / | 33 | 6 | 1,360 |
| St Helens & Knowsley | 51 | 7 | 1 | / | 829 | 2 | 31 | 921 |
| Wirral | 27 | / | / | 2 | / | 2,028 | 28 | 2,085 |
| North West (Other) | 6 | 3 | 3 | 1 | / | 2 | 80 | 95 |
| Eastern | / | / | / | / | 1 | / | 2 | 3 |
| London | / | / | / | 1 | / | / | 3 | 4 |
| Northern & Yorkshire | / | / | / | / | / | / | 18 | 18 |
| Trent | / | / | / | 2 | / | / | 12 | 14 |
| West Midlands | / | / | / | / | / | 1 | 4 | 5 |
| Wales | 2 | / | / | 2 | / | / | 2 | 6 |
| Scotland | / | / | / | / | / | / | 1 | 1 |
| No Fixed Abode | / | / | / | 2 | 2 | / | / | 4 |
| Total | 1,921 | 369 | 761 | 1,320 | 880 | 2,079 | 454 | 7,784 |

*Double counting is excluded within health authorities. e.g. an individual who visits two different agencies within the same health authority will only be shown at the last agency they visited within that health authority whereas an individual who visits two different agencies in two different health authorities will be represented in both health authorities. *SDA = Supra District Agency*

Table 1.5 shows the health authority of residence of individuals in contact with SDS by the health authority of the reporting agency. Most individuals attend agencies in the health authority in which they are resident with a small number visiting agencies in neighbouring health authorities and an even smaller proportion attending agencies some distance away. Supra District Agencies (SDA) include ARCH Initiatives residential unit, Phoenix House and Turning Point and are reported separately as they have contact with clients from a range of areas. Not including the health authorities of Merseyside and Cheshire, a total of 80 (17.6%) clients seen by SDA were resident in other North West postal districts and 42 (9.3%) were resident outside the North West. Only four individuals were recorded as having no fixed abode compared to 16 in 1999.

Table 1.6 Number of Users in Contact with Specialist Drug Services in 2000 by Outcome Type

| Agency | Outcome Type | |
|-------------------------------|----------------------|----------------------|
| | Active | Non-Active |
| ARCH Initiatives | 354 (95.7%) | 16 (4.3%) |
| ARCH Initiatives, Residential | / | 56 (100%) |
| ARCH North Cheshire | 55 (61.8%) | 34 (38.2%) |
| Chester CDT | 523 (95.3%) | 26 (4.7%) |
| Dare to Care | / | 2 (100%) |
| Drug Free | 40 (14.0%) | 246 (86.0%) |
| Dual Action Response Team | 47 (90.4%) | 5 (9.6%) |
| Halton CDT | 159 (85.5%) | 27 (14.5%) |
| Independance Initiative | 74 (46.8%) | 84 (53.2%) |
| Integrated Care Team | 125 (84.5%) | 23 (15.5%) |
| The Kevin White Unit | 11 (4.7%) | 222 (95.3%) |
| Kirkby CDT | 173 (85.6%) | 29 (14.4%) |
| Liverpool Bail Support | 10 (6.6%) | 141 (93.4%) |
| Liverpool DDU | 664 (79.9%) | 167 (20.1%) |
| Liverpool MDC | 197 (56.4%) | 152 (43.6%) |
| Macclesfield CDT | 388 (86.2%) | 62 (13.8%) |
| Newton-le-Willows CDT | 90 (84.9%) | 16 (15.1%) |
| North Liverpool CDT | 299 (86.9%) | 45 (13.1%) |
| Phoenix House | 95 (57.9%) | 69 (42.1%) |
| SHADO | 53 (58.2%) | 38 (41.8%) |
| South Cheshire CDT | 217 (73.8%) | 77 (26.2%) |
| South Knowsley CDT | 235 (92.2%) | 20 (7.8%) |
| South Sefton CDT | 390 (77.8%) | 111 (22.2%) |
| South Sefton MDC* | / | / |
| Southport DDU | 147 (65.5%) | 7 (34.5%) |
| Southport MDC | 97 (65.0%) | 51 (35.0%) |
| St Helens CDT | 397 (93.6%) | 27 (6.4%) |
| Turning Point | 13 (65.0%) | 7 (35.0%) |
| Warrington CDT | 279 (78.8%) | 75 (21.2%) |
| Wirral Drugs Service | 479 (73.8%) | 170 (26.2%) |
| Total (100%) | 5,611 (73.7%) | 2,005 (26.3%) |

Data include double counting i.e. individuals are counted at all agencies they attended

CDT = Community Drugs Team MDC = Merseyside Drugs Council

*DDU = Drug Dependency Unit *Data not available*

Table 1.6 shows the numbers of users for whom outcome type was recorded. Active outcomes are those where the client is still in contact with the agency at the end of the reporting period (31st March 2001) and may be in receipt of a methadone prescription, in receipt of another prescription or not receiving any prescription. Non-active clients may be: discharged drug free; referred to another agency; lost to prison; dead; lost to follow-up. Outcome was recorded for 84.0% of the 9,062 (double counted) individuals reported at SDS compared to 1999 when outcome was available for 98.7% of individuals. The percentage of active clients had risen steadily prior to this year from 59.0% in 1996 to 75.3% in 1999 but has fallen slightly in 2000 to 73.7%. There are, however considerable differences between agencies in the number of active clients depending on the aims of the treatment offered. ARCH Initiatives residential unit was closed at the end of the reporting period and so all clients are recorded as non-active as all were discharged.

Table 1.7 Number of Users in Contact with Specialist Drug Services in 2000 by

| Agency | Active | | |
|-------------------------------|------------------------|--------------------|----------------------|
| | Methadone Prescription | Other 'Script' | No 'Script' |
| ARCH Initiatives | 88 (23.8%) | 33 (8.9%) | 233 (63.0%) |
| ARCH Initiatives, Residential | / | / | / |
| ARCH North Cheshire | / | / | 55 (61.8%) |
| Chester CDT | 415 (75.6%) | 24 (4.4%) | 84 (15.3%) |
| Dare to Care | / | / | / |
| Drug Free | 3 (1.0%) | / | 37 (12.9%) |
| Dual Action Response Team | / | / | 47 (90.4%) |
| Halton CDT | 140 (75.3%) | 19 (10.2%) | / |
| Independance Initiative | / | / | 74 (46.8%) |
| Integrated Care Team | 120 (81.1%) | 1 (0.7%) | 4 (2.7%) |
| The Kevin White Unit | 11 (4.7%) | / | / |
| Kirkby CDT | 173 (85.6%) | / | / |
| Liverpool Bail Support | 7 (4.6%) | / | 3 (2.0%) |
| Liverpool DDU | 664 (79.9%) | / | / |
| Liverpool MDC | 107 (30.7%) | 4 (1.1%) | 86 (24.6%) |
| Macclesfield CDT | 274 (60.9%) | 50 (11.1%) | 64 (14.2%) |
| Newton-le-Willows CDT | 88 (83.0%) | / | 2 (1.9%) |
| North Liverpool CDT | 299 (86.9%) | / | / |
| Phoenix House | 21 (12.8%) | 4 (2.4%) | 70 (42.7%) |
| SHADO | 17 (18.7%) | 1 (1.1%) | 35 (38.5%) |
| South Cheshire CDT | 214 (72.8%) | 3 (1.0%) | / |
| South Knowsley CDT | 212 (83.1%) | 1 (0.4%) | 22 (8.6%) |
| South Sefton CDT | 390 (77.8%) | / | / |
| Southport DDU | 142 (92.2%) | / | 5 (3.2%) |
| Southport MDC | 1 (0.7%) | 6 (4.1%) | 90 (60.8%) |
| St Helens CDT | 376 (88.7%) | / | 21 (5.0%) |
| Turning Point | 2 (10.0%) | 2 (10.0%) | 9 (45.0%) |
| Warrington CDT | 217 (61.3%) | 12 (3.4%) | 50 (14.1%) |
| Wirral Drugs Service | 386 (59.5%) | 11 (1.7%) | 82 (12.6%) |
| Total (100%) | 4,367 (57.3%) | 171 (2.2%) | 1,073 (14.1%) |

Data include double counting i.e. individuals are counted at all agencies they attended

CDT = Community Drugs Team MDC = Merseyside Drugs Council

Table 1.7 shows client outcome by reporting agency. Outcome measures are important to assess the aims of the Government's anti-drug strategy by measuring for example the success of detoxification programmes (numbers discharged drug free) or provision of prescribing services. A total of 4,367 (57.3%) individuals were in receipt of a methadone prescription which equates to 77.8% of all those still in contact with services at the end of the reporting period. Other than those that were 'lost to follow up', the highest proportion of non-active clients were discharged drug free (6.5%). This equates to 24.5% of non-active clients compared to 38.0% in 1999. ARCH Initiatives (residential) and The Kevin White Unit reported the highest percentage of non-active clients as drug free, 53.6% and 47.2% respectively. These agencies aim to provide detoxification/rehabilitation

Outcome and Reporting Agency

| Non-Active | | | | | | |
|-------------------|------------------------|--------------------------|------------------|--------------------|--------------------|--------------|
| Lost to Prison | Discharged / Drug Free | Referred to Other Agency | Known Dead | Lost to Followup | Non active (Other) | Total (100%) |
| / | 13 (3.5%) | 2 (0.5%) | / | / | 1 (0.3%) | 370 |
| / | 30 (53.6%) | 4 (7.1%) | / | / | 22 (39.3%) | 56 |
| 3 (3.4%) | 3 (3.4%) | 5 (5.6%) | / | 4 (4.5%) | 19 (21.3%) | 89 |
| 1 (0.2%) | 11 (2.0%) | 5 (0.9%) | / | 7 (1.3%) | 2 (0.4%) | 549 |
| / | / | / | / | / | 2 (100%) | 2 |
| 1 (0.3%) | 96 (33.6%) | 9 (3.1%) | / | 131 (45.8%) | 9 (3.1%) | 286 |
| / | 1 (1.9%) | / | / | / | 4 (7.7%) | 52 |
| 3 (1.6%) | 22 (11.8%) | 1 (0.5%) | / | / | 1 (0.5%) | 186 |
| 1 (0.6%) | 3 (1.9%) | 1 (0.6%) | / | 79 (50.0%) | / | 158 |
| 4 (2.7%) | 4 (2.7%) | 4 (2.7%) | / | 7 (4.7%) | 4 (2.7%) | 148 |
| / | 110 (47.2%) | 1 (0.4%) | / | / | 111 (47.6%) | 233 |
| / | 3 (1.5%) | 4 (2.0%) | 2 (1.0%) | 14 (6.9%) | 6 (3.0%) | 202 |
| 6 (4.0%) | / | / | / | 87 (57.6%) | 48 (31.8%) | 151 |
| 6 (0.7%) | 7 (0.8%) | 21 (2.5%) | / | 111 (13.4%) | 22 (2.6%) | 831 |
| 9 (2.6%) | 36 (10.3%) | 14 (4.0%) | 1 (0.3%) | 89 (25.5%) | 3 (0.9%) | 349 |
| / | 7 (1.6%) | 5 (1.1%) | / | 50 (11.1%) | / | 450 |
| 1 (0.9%) | 7 (6.6%) | 7 (6.6%) | / | / | 1 (0.9%) | 106 |
| / | 8 (2.3%) | 9 (2.6%) | / | 28 (8.1%) | / | 344 |
| 2 (1.2%) | 28 (17.1%) | 6 (3.7%) | / | 25 (15.2%) | 8 (4.9%) | 164 |
| 1 (1.1%) | 16 (17.6%) | 11 (12.1%) | / | 10 (11.0%) | / | 91 |
| 15 (5.1%) | 11 (3.7%) | / | 2 (0.7%) | 1 (0.3%) | 48 (16.3%) | 294 |
| 2 (0.8%) | 1 (0.4%) | 3 (1.2%) | / | 12 (4.7%) | 2 (0.8%) | 255 |
| 9 (1.8%) | 15 (3.0%) | 13 (2.6%) | / | 58 (11.6%) | 16 (3.2%) | 501 |
| / | 2 (1.3%) | 3 (1.9%) | / | 2 (1.3%) | / | 154 |
| 4 (2.7%) | 7 (4.7%) | 17 (11.5%) | 1 (0.7%) | 12 (8.1%) | 10 (6.8%) | 148 |
| 2 (0.5%) | 4 (0.9%) | 6 (1.4%) | / | 15 (3.5%) | / | 424 |
| 3 (15.0%) | / | / | / | 4 (20.0%) | / | 20 |
| 3 (0.8%) | 33 (9.3%) | 5 (1.4%) | 1 (0.3%) | 1 (0.3%) | 32 (9.0%) | 354 |
| 14 (2.2%) | 14 (2.2%) | 26 (4.0%) | / | 116 (17.9%) | / | 649 |
| 90 (1.2%) | 492 (6.5%) | 182 (2.4%) | 7 (0.1%) | 863 (11.3%) | 371 (4.9%) | 7,616 |

ARCH Initiative¹ = Non-residential ARCH Initiative² = Residential

DDU = Drug Dependency Unit

and are therefore likely to have much higher numbers discharged drug free than services aiming to stabilise clients through substitute prescribing over a longer period of time.

Plate 1. Population Rates per 1,000 Residents for Drug Users in Contact with Specialist Drug Services in 2000 by Postal Area of Residence

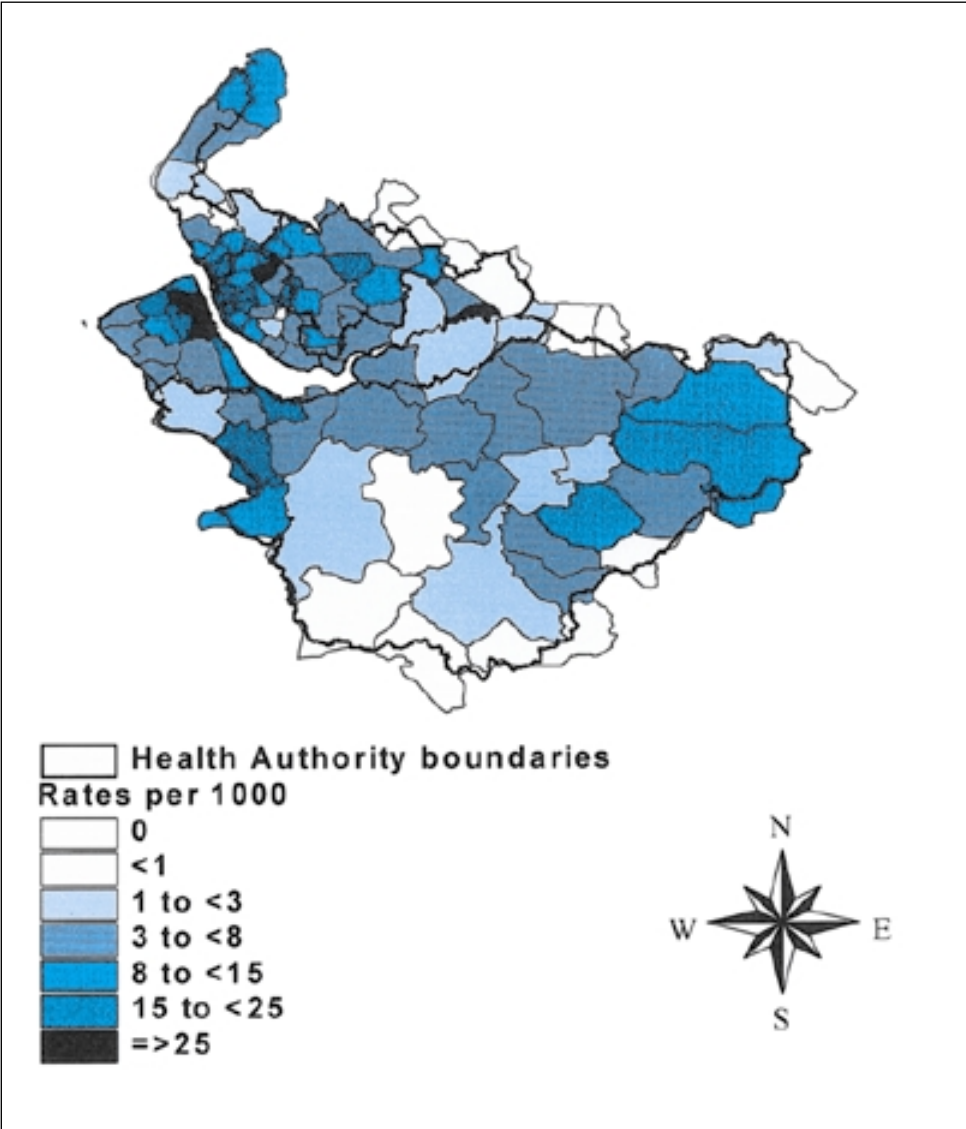


Plate 1 shows the area of residence of users who attended Specialist Drug Services in Merseyside and Cheshire in 2000. The rates shown are the number of male 15 to 44 year old users per 1,000 male 15 to 44 year old residents in each postal area. Where postal areas cross over into health authorities outside Merseyside and Cheshire rates are given as the number of users in contact with a SDA as a percentage of the population for the whole postal area and rates are therefore underestimated.

Plate 2. Population Rates per 1,000 Residents for Drug Users Reported by Pharmacy Based Syringe Exchange Schemes in 2000 by Postal Area of Residence

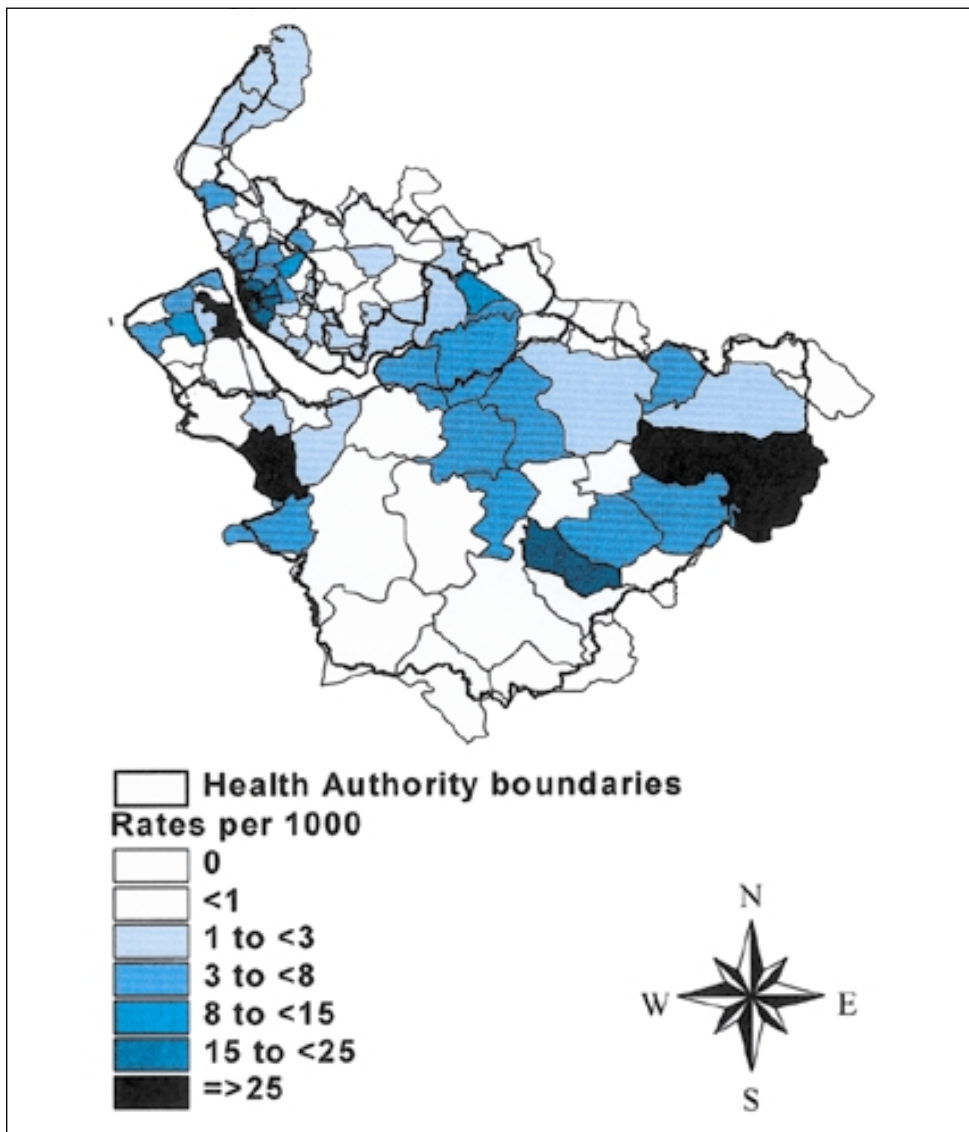


Plate 2 shows the area of residence of users who attended Pharmacy Based Syringe Exchange Schemes in Merseyside and Cheshire in 2000. The rates shown are the number of male 15 to 44 year old users per 1,000 male residents aged between 15 and 44 in each postal area. Where postal areas cross over into health authorities outside Merseyside and Cheshire rates are given as the number of users in contact with a Pharmacy as a percentage of the population for the whole postal area and rates are therefore underestimated.

Plate 3. Population Rates per 1,000 Residents for Drug Users Reported by Agency Based Syringe Exchange Schemes 2000 by Postal Area of Residence

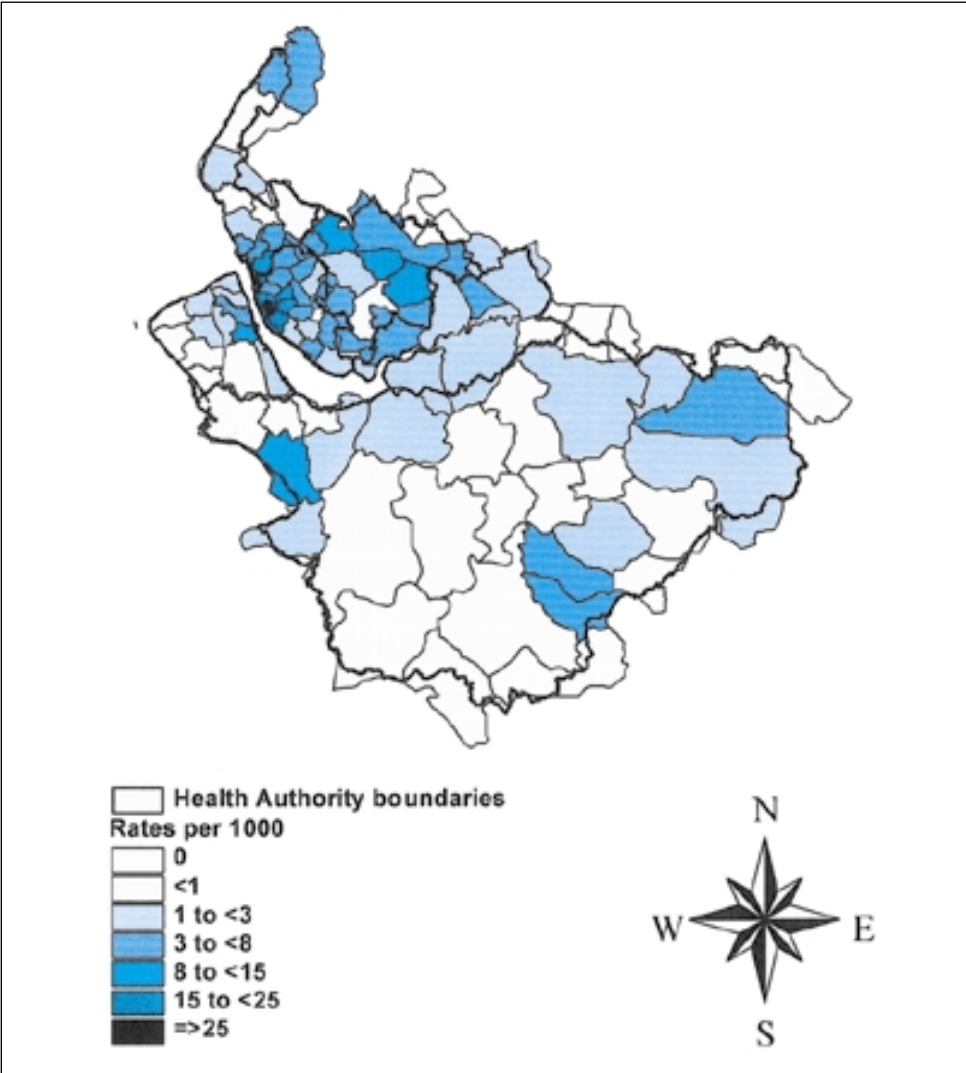


Plate 3 shows the area of residence of users who attended Agency Based Syringe Exchange Schemes in Merseyside and Cheshire in 2000. The rates shown are the number of male 15 to 44 year old users per 1,000 male residents aged between 15 and 44 in each postal area. Where postal areas cross over into health authorities outside Merseyside and Cheshire rates are given as the number of users in contact with a SES as a percentage of the population for the whole postal area and rates are therefore underestimated.

Plate 4. Population Rates per 1,000 Residents for Drug Users in Contact with Specialist Drug Services, Agency Based Syringe Exchange Schemes, Pharmacy Based Syringe Exchange Schemes and Outreach Services in 2000 by Health Authority

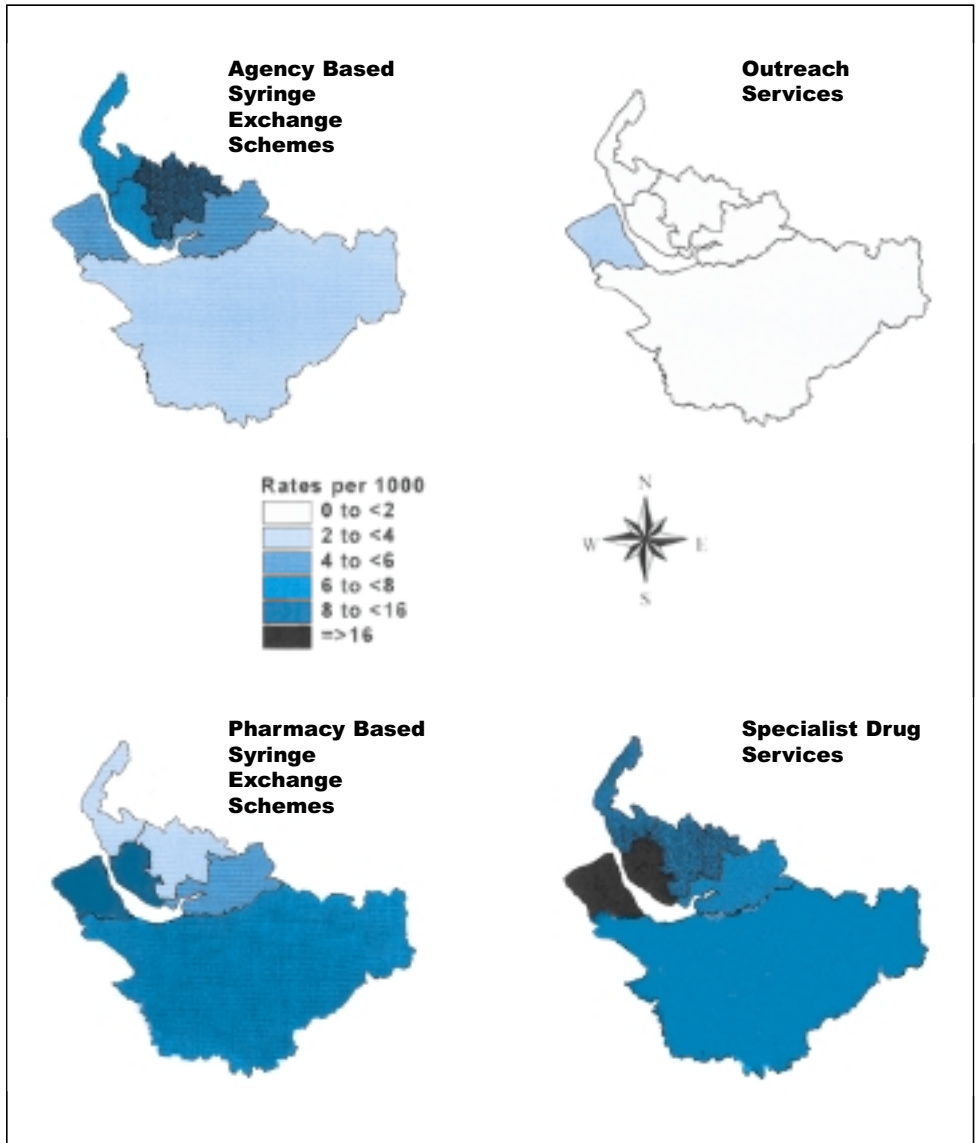
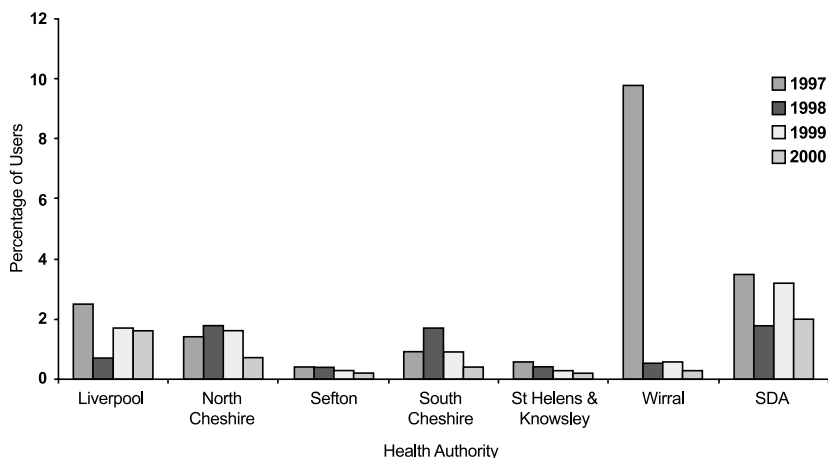


Plate 4 shows the population rates of individuals who were in contact with each of the agency types by health authority.

Figure 1.1 All Users Discharged Drug Free by Health Authority of Reporting Agency in 1997, 1998, 1999 and 2000



SDA = Supra District Agencies

Figure 1.1 shows trends in the percentage of all users reported by SDS in 1997, 1998, 1999 and 2000 that were discharged drug free as a percentage of all users reported. As expected, SDA report the highest proportion of drug free users as they tend to be detoxification/rehabilitation units where clients would normally be expected to reach drug free status. In each health authority and SDA there has been a small decline since 1999 in the percentage discharged drug free. This decline has become a trend in most health authorities over the last three years.

Table 1.8 Numbers of Individuals who were Discharged Drug Free in 1997, 1998 and 1999 who Subsequently Re-Presented to Services

| Year Discharged Drug Free | Also seen in 1998 | Also seen in 1999 | Also seen in 2000 | Not seen again | Number Discharged Drug Free (100%) |
|---------------------------|-------------------|-------------------|-------------------|----------------|------------------------------------|
| 1997 | 402 (31%) | 419 (33%) | 456 (36%) | 662 (52%) | 1,284 |
| 1998 | / | 175 (35%) | 149 (30%) | 275 (56%) | 494 |
| 1999 | / | / | 256 (33%) | 512 (67%) | 768 |

Data exclude all double counting i.e. each individual is only counted once (at the last agency they attended).

Table 1.8 reports the number of individuals discharged drug free in 1997, 1998 and 1999 that re-presented to services in 1998, 1999 and 2000. Being discharged drug free from services does not guarantee that individuals remain drug free over the subsequent months or years and the numbers reported here do not represent all individuals that relapse as some individuals that re-commence drug taking will contact services outside Merseyside and Cheshire or they may not present at services at all. For example, of the 1,284 individuals discharged drug free in 1997, 402 (31%) were seen again by services in

1998, 419 (33%) were seen again by services in 1999 and 456 (36%) were seen again by services in 2000 (individuals may be counted as being in contact in more than one year). As time elapses more individuals re-contact services so, of the 1,284 individuals discharged drug free in 1997, 60% had not re-contacted services in 1999 but by 2000 a further 8% had re-contacted services with only 52% not been seen by services again so far. Additionally, of the 1,284 that were discharged drug free in 1997, 364 (28.3%) were in contact with services in all three subsequent years.

SECTION 4

AGENCY BASED SRYINGE EXCHANGE SCHEMES



AGENCY BASED SYRINGE EXCHANGE SCHEMES

Introduction

As in previous years, 16 Agency Based Syringe Exchange Schemes (SES) reported data to the Drug Monitoring Unit. Clients that attended Ellesmere Port CDT are shown as being in contact with Chester CDT, the 'parent' service. A full list of all agencies that reported to the Drug Monitoring Unit in 2000 is given in Appendix III. This section presents data about clients that use SES and all the visits that were made in 2000. Comparisons are also made with data from previous years. Each client is identified by use of an individualised attributor code, comprised of their initials, date of birth and sex. Using this method to identify individual users, double counting has been removed from the 2000 data, i.e. an individual is only counted once (the first time) in any reporting agency. When analyses are presented by health authority of reporting agency, an individual is only counted once in each health authority but may be reported at more than one health authority. Data regarding visits are also presented and this includes all visits made by all clients to a reporting agency across Merseyside and Cheshire in 2000 and may be presented by health authority as appropriate. Monitoring non-treatment organisations such as SES in conjunction with the specialist drug treatment providers facilitates a more complete understanding of the drug use problem as a whole. Monitoring a range of organisations enables the accurate evaluation of the Government's drug strategy including the assessment of numbers in treatment, numbers of young drug users, heroin and cocaine use, injecting behaviour and the extent of sharing of injecting equipment.

DEFINITIONS

An individual is only included in the analyses if their full attributor data (initials, date of birth and sex) are provided

| | |
|------------------------|---|
| User | A person who visits an SES. They may be a new user or a repeat user. |
| New User | A person visiting a specific SES service for the first time. |
| Repeat User | A person who visits an SES agency for the second or any subsequent time regardless of length of time between visits. |
| Visit | When a person presents to an SES for the first or any subsequent time. NB This is not the same as an episode reported to the Drug Misuse Database. |
| Visit Rate | The number of visits divided by the number of users to give an average number of visits made per user. |
| Drug | Any drug of misuse excluding tobacco and alcohol. The main drug of misuse is recorded on first contact with services. |
| Double Counting | When a person who visits more than one agency in Merseyside and Cheshire or within a health authority is counted at each agency or health authority. |
| Single Counting | When a person is counted at only the last agency they visit in Merseyside and Cheshire or are counted at the last agency within each health authority when analysis is expressed by health authority. |

Table 2.1 All Users, New Users and Visits Reported by Agency Based Syringe Reporting Agency

| Health Authority | 1996 | | | |
|----------------------|---------------|--------------|--------------|---------------|
| | All Users | New Users | Repeat Users | Visits |
| Liverpool | 1,100 (28.6%) | 494 (26.4%) | 606 (30.6%) | 5,614 (29.9%) |
| North Cheshire | 238 (6.2%) | 107 (5.7%) | 131 (6.6%) | 805 (4.3%) |
| Sefton | 625 (16.2%) | 277 (14.8%) | 348 (17.5%) | 2,859 (15.2%) |
| South Cheshire | 612 (15.9%) | 453 (24.2%) | 159 (8.0%) | 2,710 (14.4%) |
| St Helens & Knowsley | 645 (16.7%) | 326 (17.4%) | 319 (16.1%) | 3,667 (19.5%) |
| Wirral | 632 (16.4%) | 212 (11.3%) | 420 (21.2%) | 3,107 (16.6%) |
| Total (100%) | 3,852 | 1,869 | 1,983 | 18,762 |
| Health Authority | 1998 | | | |
| | All Users | New Users | Repeat Users | Visits |
| Liverpool | 1,035 (28.4%) | 428 (32.4%) | 607 (26.1%) | 4,691 (24.8%) |
| North Cheshire | 326 (8.9%) | 166 (12.6%) | 160 (6.9%) | 1,168 (6.2%) |
| Sefton | 449 (12.3%) | 159 (12.0%) | 290 (12.5%) | 2,134 (11.3%) |
| South Cheshire | 528 (14.5%) | 167 (12.6%) | 361 (15.5%) | 2,100 (11.1%) |
| St Helens & Knowsley | 766 (21.0%) | 238 (18.0%) | 528 (22.7%) | 5,687 (30.1%) |
| Wirral | 542 (14.9%) | 164 (12.4%) | 378 (16.3%) | 3,136 (16.6%) |
| Total (100%) | 3,646 | 1,322 | 2,324 | 18,916 |
| Health Authority | 2000 | | | |
| | All Users | New Users | Repeat Users | Visits |
| Liverpool | 945 (26.9%) | 380 (28.5%) | 565 (26.0%) | 3,771 (21.9%) |
| North Cheshire | 390 (11.1%) | 208 (15.6%) | 182 (8.4%) | 1,093 (6.4%) |
| Sefton | 482 (13.7%) | 200 (15.0%) | 282 (13.0%) | 2,194 (12.8%) |
| South Cheshire | 475 (13.5%) | 174 (13.0%) | 301 (13.8%) | 1,842 (10.7%) |
| St Helens & Knowsley | 784 (22.3%) | 297 (22.2%) | 487 (22.4%) | 5,785 (33.7%) |
| Wirral | 437 (12.3%) | 77 (5.7%) | 360 (16.4%) | 2,502 (14.6%) |
| Total (100%) | 3,513 | 1,336 | 2,177 | 17,187 |

Double counting is excluded within health authorities. e.g. an individual who visits two different agencies within the same health authority will only be shown at the first agency they visited whereas an individual who visits two different agencies in two different health authorities will be represented in both health authorities

During 2000, 3,456 individuals were reported by the 16 agency based SES in Merseyside and Cheshire. A total of 53 and 216 visits were made by individuals that had previously in this reporting period visited an agency in another health authority or more than one agency within the same health authority respectively. When individuals are counted only once in each health authority, 3,513 individuals were reported – one individual may be reported in more than one health authority (see Table 2.1). This figure represents 5% fewer individuals than in 1999. Thirty eight percent of users (1,336 individuals) were new to services in 2000, compared to over 40% in most previous years. However, the percentage of users who were new to services varied across health authorities from 18% in Wirral to 53% in North Cheshire. Wirral reported the lowest percentage of all health authorities of new users in 1999 (29%) but the percentage reported this year in Wirral is lower still. This may be partially due to the lack of attributor data provided for some clients attending Wirral HIV & AIDS Prevention which resulted in some new clients being eliminated

Exchange Schemes in 1996, 1997, 1998, 1999 and 2000 by Health Authority of

| 1997 | | | |
|---------------|--------------|--------------|---------------|
| All Users | New Users | Repeat Users | Visits |
| 965 (26.0%) | 318 (21.1%) | 647 (29.3%) | 3,975 (23.4%) |
| 259 (7.0%) | 108 (7.2%) | 151 (6.8%) | 812 (4.8%) |
| 486 (13.1%) | 336 (22.3%) | 150 (6.8%) | 2,142 (12.6%) |
| 594 (16.0%) | 217 (14.4%) | 377 (17.1%) | 2,293 (13.3%) |
| 730 (19.6%) | 297 (19.6%) | 433 (19.6%) | 4,678 (27.6%) |
| 684 (18.4%) | 232 (15.4%) | 452 (20.5%) | 3,078 (18.2%) |
| 3,718 | 1,508 | 2,210 | 16,978 |
| 1999 | | | |
| All Users | New Users | Repeat Users | Visits |
| 1,010 (27.4%) | 416 (27.7%) | 594 (27.1%) | 4,895 (26.0%) |
| 352 (9.5%) | 202 (13.5%) | 150 (6.9%) | 784 (4.2%) |
| 428 (11.6%) | 171 (11.4%) | 257 (11.7%) | 1,974 (10.5%) |
| 530 (14.4%) | 216 (14.4%) | 314 (14.3%) | 1,936 (10.3%) |
| 820 (22.2%) | 333 (22.2%) | 487 (22.2%) | 6,318 (33.5%) |
| 550 (14.9%) | 162 (10.8%) | 388 (17.7%) | 2,952 (15.7%) |
| 3,690 | 1,500 | 2,190 | 18,859 |

from the analyses (Table 2.2). A total of 17,187 visits were made to SES during the year giving a visit rate (the average number of visits per person) of 4.9 compared to 5.1 in 1999 and 5.2 in 1998, 4.6 in 1997 and 4.9 in 1996. The number of visits made by individuals varied from 1 to 115 during the course of the year, however agencies recorded 45% of individuals making just one visit. See also Figure 2.1 for trends in numbers of new users between 1996 and 1999.

Figure 2.1: New Users Reported by Agency Based Syringe Exchange Schemes in 1996, 1997, 1998, 1999 and 2000 by Health Authority of Reporting Agency

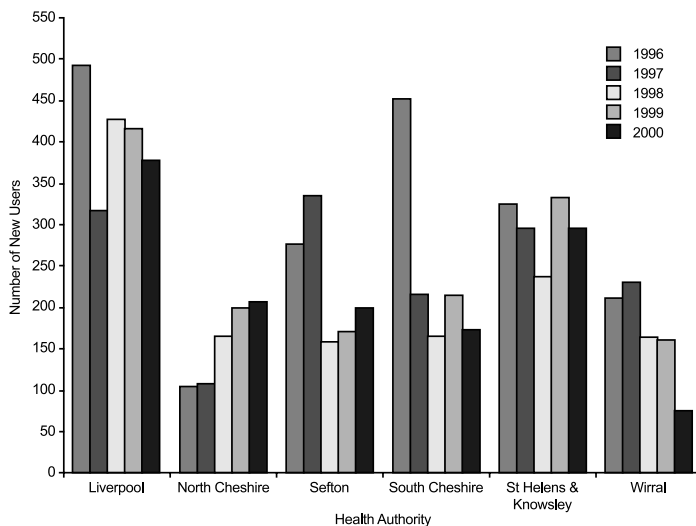


Figure 2.1 shows the numbers of new users in contact with SES agencies in each health authority since 1996 and indicates the extent to which new clients are being attracted into service contact; a key objective of the Government's anti-drug strategy. The numbers of new users attracted into services over the five reported years varies from health authority to health authority, with only North Cheshire agencies reporting more new users in 2000 than in any other year, while in Wirral, a considerable drop in the percentage of

Table 2.2 All Users, New Users and Visits Reported by Agency Based Syringe

| Agency | 1997 | | |
|------------------------------|--------------|--------------|---------------|
| | All Users | New Users | Visits |
| Chester CDT | 226 (6.1%) | 94 (6.3%) | 693 (4.1%) |
| Halton CDT | 110 (3.0%) | 51 (3.4%) | 297 (1.7%) |
| Kirkby CDT | 82 (2.2%) | 45 (3.0%) | 221 (1.3%) |
| Macclesfield CDT | 238 (6.4%) | 65 (4.3%) | 1,127 (6.6%) |
| Maryland Centre | 811 (21.8%) | 318 (21.1%) | 3,313 (19.5%) |
| Newton-le-Willows CDT | 53 (1.4%) | 29 (1.9%) | 207 (1.2%) |
| North Liverpool CDT | 154 (4.1%) | 85 (5.6%) | 662 (3.9%) |
| South Cheshire CDT | 130 (3.5%) | 58 (3.8%) | 473 (2.8%) |
| South Knowsley CDT | 140 (3.8%) | 72 (4.8%) | 927 (5.5%) |
| South Sefton CDT | 166 (4.5%) | 54 (3.6%) | 661 (3.9%) |
| South Sefton MDC | 193 (5.2%) | 108 (7.2%) | 918 (5.4%) |
| Southport MDC | 127 (3.4%) | 44 (2.9%) | 563 (3.3%) |
| St Helens CDT | 455 (12.2%) | 196 (13.0%) | 3,323 (19.6%) |
| Warrington CDT | 149 (4.0%) | 57 (3.8%) | 515 (3.0%) |
| Wirral HIV & AIDS Prevention | 684 (18.4%) | 232 (15.4%) | 3,078 (18.1%) |
| Total (100%) | 3,718 | 1,508 | 16,978 |

| Agency | 1999 | | |
|------------------------------|--------------|--------------|---------------|
| | All Users | New Users | Visits |
| Chester CDT | 164 (3.9%) | 61 (3.4%) | 422 (2.2%) |
| Halton CDT | 195 (4.7%) | 131 (7.4%) | 350 (1.9%) |
| Kirkby CDT | 132 (3.2%) | 82 (4.6%) | 400 (2.1%) |
| Macclesfield CDT | 304 (7.3%) | 126 (7.1%) | 1,131 (6.0%) |
| Maryland Centre | 969 (23.2%) | 408 (22.9%) | 4,550 (24.1%) |
| Newton-le-Willows CDT | 77 (1.8%) | 34 (1.9%) | 325 (1.7%) |
| North Liverpool CDT | 126 (3.0%) | 51 (2.9%) | 345 (1.8%) |
| South Cheshire CDT | 154 (3.7%) | 88 (4.9%) | 383 (2.0%) |
| South Knowsley CDT | 159 (3.8%) | 60 (3.4%) | 1,041 (5.5%) |
| South Sefton CDT | 173 (4.1%) | 58 (3.3%) | 742 (3.9%) |
| South Sefton MDC | 135 (3.2%) | 65 (3.7%) | 517 (2.7%) |
| Southport MDC | 176 (4.2%) | 65 (3.7%) | 715 (3.8%) |
| St Helens CDT | 569 (13.6%) | 228 (12.8%) | 4,552 (24.1%) |
| Warrington CDT | 251 (6.0%) | 134 (7.5%) | 434 (2.3%) |
| Wirral HIV & AIDS Prevention | 586 (14.1%) | 189 (10.6%) | 2,952 (15.7%) |
| Total (100%) | 4,170 | 1,780 | 18,859 |

Data include double counting i.e. individuals are counted at all agencies they attended

users who were new to services was recorded. It is unclear whether falling numbers of new SES clients represent a falling population of injecting drug users or an unwillingness by injecting drug users to access these services. However the use of SES by injecting drug users represents harm reduction behaviour, a specific aim of the Government's strategy to

increase participation in programmes with health benefits. Contacts with SES also increase access to information, advice and practical help for drug users and may lead to engagement with treatment services.

Table 2.2 shows the agency profile of reported users in 1997, 1998, 1999 and 2000 with each individual being reported in each agency they visited in 2000. The overall proportion of users that were new to services was 38.8% compared to last year when 42.7%

Exchange Schemes in 1997, 1998, 1999 and 2000 by Reporting Agency

| 1998 | | |
|--------------|--------------|---------------|
| All Users | New Users | Visits |
| 138 (3.9%) | 45 (3.4%) | 429 (2.3%) |
| 141 (4.0%) | 80 (6.1%) | 522 (2.8%) |
| 111 (3.1%) | 79 (6.0%) | 453 (2.4%) |
| 288 (8.1%) | 79 (6.0%) | 1,321 (7.0%) |
| 896 (25.1%) | 390 (29.5%) | 4,248 (22.5%) |
| 64 (1.8%) | 30 (2.3%) | 283 (1.5%) |
| 108 (3.0%) | 38 (2.9%) | 443 (2.3%) |
| 100 (2.8%) | 43 (3.3%) | 350 (1.9%) |
| 144 (4.0%) | 62 (4.7%) | 1,050 (5.6%) |
| 145 (4.1%) | 57 (4.3%) | 756 (4.0%) |
| 135 (3.8%) | 49 (3.7%) | 612 (3.2%) |
| 155 (4.3%) | 53 (4.0%) | 766 (4.0%) |
| 428 (12.0%) | 67 (5.1%) | 3,901 (20.6%) |
| 177 (5.0%) | 86 (6.5%) | 646 (3.4%) |
| 535 (15.0%) | 164 (12.4%) | 3,136 (16.6%) |
| 3,565 | 1,322 | 18,916 |
| 2000 | | |
| All Users | New Users | Visits |
| 206 (5.6%) | 102 (7.2%) | 519 (3.0%) |
| 186 (5.1%) | 82 (5.8%) | 514 (3.0%) |
| 141 (3.8%) | 80 (5.6%) | 349 (2.0%) |
| 157 (4.3%) | 10 (0.7%) | 775 (4.5%) |
| 841 (22.9%) | 348 (24.4%) | 3,403 (19.8%) |
| 79 (2.2%) | 41 (2.9%) | 256 (1.5%) |
| 127 (3.5%) | 50 (3.5%) | 368 (2.1%) |
| 157 (4.3%) | 81 (5.7%) | 548 (3.2%) |
| 139 (3.8%) | 57 (4.0%) | 746 (4.3%) |
| 137 (3.7%) | 48 (3.4%) | 599 (3.5%) |
| 179 (4.9%) | 90 (6.3%) | 778 (4.5%) |
| 190 (5.2%) | 74 (5.2%) | 817 (4.8%) |
| 461 (12.6%) | 139 (9.8%) | 4,434 (25.8%) |
| 235 (6.4%) | 145 (10.2%) | 579 (3.4%) |
| 437 (11.9%) | 77 (5.4%) | 2,502 (14.6%) |
| 3,672 | 1,424 | 17,187 |

of users were new. However, figures varied considerably between different agencies. New users accounted for 56.7% of all users Kirkby CDT compared to Macclesfield CDT where new users accounted for just 6.4% of all those seen. Visit rate (number of visits per user) also varied considerably across agencies (2.5 at Chester CDT, Kirkby CDT and Warrington CDT compared to 9.6 at St Helens CDT) with the overall visit rate being 4.7 visits per user. Attributor data was missing for a number of individuals seen at Wirral HIV

and AIDS Prevention and therefore these clients could not be entered into the analyses.

Table 2.3 All Users and New Users Reported by Agency Based Syringe Exchange Schemes in 2000 by Sex and Health Authority of Reporting Agency

| Health Authority | All Users | | New Users | |
|----------------------|--------------------|----------------------|--------------------|----------------------|
| | Female | Male | Female | Male |
| Liverpool | 133 (14.1%) | 812 (85.9%) | 37 (9.7%) | 343 (90.3%) |
| North Cheshire | 32 (8.2%) | 358 (91.8%) | 17 (8.2%) | 191 (91.8%) |
| Sefton | 78 (16.2%) | 404 (83.8%) | 30 (15.0%) | 170 (85.0%) |
| South Cheshire | 85 (17.9%) | 390 (82.1%) | 41 (23.6%) | 133 (76.4%) |
| St Helens & Knowsley | 64 (8.2%) | 720 (91.8%) | 22 (7.4%) | 275 (92.6%) |
| Wirral | 69 (15.9%) | 364 (84.1%) | 10 (13.2%) | 67 (86.8%) |
| Total | 461 (13.1%) | 3,048 (86.6%) | 157 (11.8%) | 1,179 (88.2%) |

Double counting is excluded within health authorities. e.g. an individual who visits two different agencies within the same health authority will only be shown at the first health authority they visited whereas an individual who visits two different agencies in two different health authorities will be represented in both health authorities

Table 2.3 shows the sex profile of all and new users by health authority of reporting agency with some individuals visiting agencies in more than one health authority. Overall 3,048 males were in contact with SES during 2000, representing 86.6% of clients and giving a female to male ratio of 1:6.6. This compares with a female to male ratio of 1:6.0 in both 1998 (3,077 males or 85.9% of all users) and 1999 (3,122 males or 85.7% of all users). This indicates that the proportion of females in contact with SES has decreased this year compared with the previous two years with the percentage of females visiting SES being 14.1% in 1998, 14.3% in 1999 and 13.1% in 2000. The number of new users of both sexes attending SES was less in 2000 than the previous year and the percentage of new users that were male had increased slightly from 87.0% in 1999 to 88.2% in 2000.

The proportion of female clients reported by Pharmacy and SES in Merseyside and Cheshire were 19.6% and 13.1% respectively. The small percentage of female users attending SES could be attributed to a number of reasons. Firstly there may be less female drug users and a smaller number that are involved with injecting behaviour. Secondly the high proportion of steroid users visiting SES (Table 2.6a) will predominantly be male³ and therefore skew the data. Additionally, females may be more reluctant to attend SES due to the perceived stigma associated with being a female injecting drug user and potentially ask male partners to collect equipment. As in the previous two years, North Cheshire and St Helens & Knowsley saw particularly low proportions of females, less than 10% of users.

Table 2.4 All Users, New Users and Visits Reported by Agency Based Syringe Exchange Schemes in 2000 by Sex and Age

| Age Group | All Users | | New Users | | Visits | |
|---------------------|-------------|--------------|------------|-------------|--------------|---------------|
| | Female | Male | Female | Male | Female | Male |
| 15 - 19 | 21 (4.6%) | 83 (2.8%) | 1 (1.6%) | 7 (1.8%) | 179 (7.8%) | 185 (1.2%) |
| 20 - 24 | 68 (15.0%) | 480 (16.0%) | 17 (27.4%) | 81 (20.4%) | 277 (12.0%) | 1,499 (10.1%) |
| 25 - 29 | 124 (27.4%) | 871 (29.0%) | 18 (29.0%) | 131 (32.9%) | 419 (18.2%) | 4,130 (27.7%) |
| 30 - 34 | 121 (26.8%) | 829 (27.6%) | 17 (27.4%) | 110 (27.6%) | 604 (26.2%) | 4,253 (28.6%) |
| 35 - 39 | 76 (16.8%) | 449 (14.9%) | 7 (11.3%) | 46 (11.6%) | 519 (22.5%) | 2,784 (18.7%) |
| 40 - 44 | 21 (4.6%) | 173 (5.8%) | 1 (1.6%) | 12 (3.0%) | 120 (5.2%) | 1,084 (7.3%) |
| 45 - 49 | 15 (3.3%) | 84 (2.8%) | 1 (1.6%) | 5 (1.3%) | 116 (5.0%) | 613 (4.1%) |
| 50 & Over | 6 (1.3%) | 35 (1.2%) | / | 6 (1.5%) | 68 (3.0%) | 337 (2.3%) |
| Total (100%) | 452 | 3,004 | 62 | 398 | 2,302 | 14,885 |

Data exclude all double counting i.e. each individual is only counted once, at the first agency they attended.

Table 2.4 shows the number and proportion of individuals by age and sex. The most common age range for all and new users overall was 25 to 29. However, when females were considered in isolation, the age of clients had a wider variation than the age of males. Almost as many new female clients were in the age categories of 20 to 24 and 30 to 34 as were aged between 25 and 29. Similarly, when all female clients were considered there was almost as many aged 30 to 34 as 25 to 29. As with SDS there was a higher proportion of females aged less than 25 than males for both all users and new users (all users; female; 19.6%, male; 18.8% and new users; female; 29.0%, male; 22.2%). When the number of visits is considered, both male and female users aged 30 to 34 made the most visits.

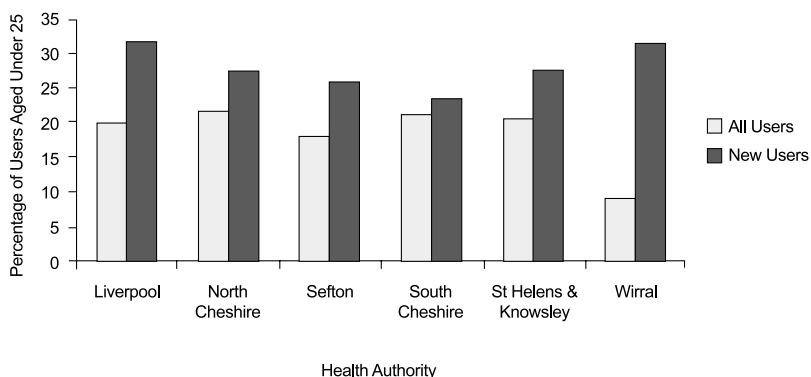
Table 2.5 shows the age and health authority breakdown of SES clients in 2000. When all health authorities are considered together, the greatest proportion of new users fall in the 25 to 29 age category (29.7%). The number of new users falling into this age category ranged from 21.1% in Wirral to 35.4% in St Helens & Knowsley. When considered separately, North Cheshire, Sefton and the Wirral had a greater percentage of new users aged between 30 to 34. In Wirral, a greater percentage of new users has been aged between 30 to 34 in 1999 and 2000 compared to 1998 when the greatest percentage of new users were aged between 25 to 29. The age of new users in North Cheshire has fluctuated over the last three years, with the highest percentage falling into the 25 to 29, 20 to 24 and 30 to 34 age categories in 1998, 1999 and 2000 respectively. When all users were considered, again the highest percentage fell into the 25 to 29 age category. Again Wirral users were older with a considerably higher percentage of all users falling into the 30 to 34 age group. South Cheshire and St Helens & Knowsley users were younger. When the age of users in contact with SDS, SES and Pharmacy exchange are considered, users at SDS are older with a higher proportion of users falling into the 30 to 34 age group (31.7%). It may be that young users do not see their drug taking as problematic or are unwilling to access services until they are a little older.

Table 2.5 All Users and New Users Reported by Agency Based Syringe Exchange

| Age Group | Liverpool | | North Cheshire | | Sefton | |
|---------------------|-------------|-------------|----------------|------------|-------------|------------|
| | All Users | New Users | All Users | New Users | All Users | New Users |
| 15 - 19 | 40 (4.2%) | 33 (8.7%) | 8 (2.1%) | 7 (3.4%) | 10 (2.1%) | 8 (4.0%) |
| 20 - 24 | 149 (15.8%) | 88 (23.2%) | 77 (19.7%) | 50 (24.0%) | 77 (16.0%) | 44 (22.0%) |
| 25 - 29 | 262 (27.7%) | 115 (30.3%) | 112 (28.7%) | 51 (24.5%) | 129 (26.8%) | 51 (25.5%) |
| 30 - 34 | 272 (28.8%) | 87 (22.9%) | 114 (29.2%) | 61 (29.3%) | 134 (27.8%) | 55 (27.5%) |
| 35 - 39 | 133 (14.1%) | 31 (8.2%) | 49 (12.6%) | 26 (12.5%) | 79 (16.4%) | 25 (12.5%) |
| 40 - 44 | 48 (5.1%) | 16 (4.2%) | 20 (5.1%) | 10 (4.8%) | 24 (5.0%) | 9 (4.5%) |
| 45 - 49 | 30 (3.2%) | 8 (2.1%) | 8 (2.1%) | 2 (1.0%) | 19 (3.9%) | 6 (3.0%) |
| 50 & Over | 11 (1.2%) | 2 (0.5%) | 2 (0.5%) | 1 (0.5%) | 10 (2.1%) | 2 (1.0%) |
| Total (100%) | 945 | 380 | 390 | 208 | 482 | 200 |

Double counting is excluded within health authorities. e.g. an individual who visits two different individual who visits different agencies in different health authorities will be represented in both

Figure 2.2 Proportion of All Users and New Users Aged Under 25 Reported by Agency Based Syringe Exchange Schemes in 2000 by Health Authority of Reporting Agency



Double counting is excluded within health authorities. e.g. an individual who visits two different agencies within the same health authority will only be shown at the first agency they visited whereas an individual who visits agencies in two health authorities will be represented in both health authorities.

A strong focus of the Government’s anti-drug strategy is to target users under the age of 25 and increase their access to appropriate services. Younger users tend to be more reluctant to contact treatment services and Table 1.2 shows that only 13.9% of users in contact with SDS were aged less than 25. Figure 2.2 however shows a large proportion of new users are aged less than 25 and a considerable proportion of these may not be in contact with treatment agencies. Such users may not see their drug taking as problematic at this stage. When all users are considered a smaller proportion are aged less than 25. Individuals aged over 25 are more likely to be at a stage where they have contacted treatment agencies and some may therefore have terminated contact with SES.

Schemes in 2000 by Health Authority of Reporting Agency and Age

| South Cheshire | | St Helens & Knowsley | | Wirral | | Total | |
|----------------|------------|----------------------|-------------|-------------|------------|---------------|--------------|
| All Users | New Users | All Users | New Users | All Users | New Users | All Users | New Users |
| 14 (2.9%) | 10 (5.7%) | 23 (2.9%) | 16 (5.4%) | 10 (2.3%) | 10 (13.2%) | 105 (3.0%) | 84 (6.3%) |
| 86 (18.1%) | 31 (17.8%) | 139 (17.7%) | 66 (22.2%) | 30 (6.9%) | 14 (18.4%) | 558 (15.9%) | 293 (21.9%) |
| 154 (32.4%) | 59 (33.9%) | 265 (33.8%) | 105 (35.4%) | 90 (20.8%) | 16 (21.1%) | 1,012 (28.8%) | 397 (29.7%) |
| 104 (21.9%) | 36 (20.7%) | 183 (23.3%) | 60 (20.2%) | 156 (36.0%) | 21 (27.6%) | 963 (27.4%) | 320 (24.0%) |
| 77 (16.2%) | 30 (17.2%) | 103 (13.1%) | 32 (10.8%) | 89 (20.6%) | 12 (15.8%) | 530 (15.1%) | 156 (11.7%) |
| 30 (6.3%) | 7 (4.0%) | 48 (6.1%) | 15 (5.1%) | 30 (6.9%) | 1 (1.3%) | 200 (5.7%) | 58 (4.3%) |
| 5 (1.1%) | 1 (0.6%) | 18 (2.3%) | 3 (1.0%) | 20 (4.6%) | 1 (1.3%) | 100 (2.8%) | 21 (1.6%) |
| 5 (1.1%) | / | 5 (0.6%) | / | 8 (1.8%) | 1 (1.3%) | 41 (1.2%) | 6 (0.4%) |
| 475 | 174 | 784 | 297 | 433 | 76 | 3,509 | 1,335 |

agencies within the same health authority will only be shown at the first agency they visited whereas health authorities

Table 2.6a All Users, New Users and Visits Reported by Agency Based Syringe Exchange Schemes in 2000 by Main Drug

| Main Drug | All Users | New Users | Visits |
|----------------------|---------------|--------------|---------------|
| Amphetamine | 117 (4.0%) | 13 (1.2%) | 946 (6.8%) |
| Anabolic Steroids | 947 (32.6%) | 487 (43.9%) | 2,104 (15.2%) |
| Cocaine | 63 (2.2%) | 23 (2.1%) | 280 (2.0%) |
| Crack | 3 (0.1%) | 1 (0.1%) | 53 (0.4%) |
| Heroin | 1,409 (48.5%) | 509 (45.9%) | 7,613 (55.0%) |
| Methadone | 229 (7.9%) | 38 (3.4%) | 1,692 (12.2%) |
| Other / No Main Drug | 136 (4.7%) | 38 (3.4%) | 1,156 (8.4%) |
| Total (100%) | 2,904 | 1,109 | 13,844 |

Data exclude all double counting i.e. each individual is only counted once, at the first agency they attended. NB: The main drug used was recorded only on the first occasion that the user presented to services

Table 2.6a shows reported drug of use by all users, new users and visits. This data was recorded for 84.0% of all users, 84.7% of new users and for 80.5% of visits. As in previous years, heroin is the most commonly reported drug of use accounting for 48.5%, 45.9% and 55.0% of all users, new users and visits respectively. The percentage of new users reporting heroin use has continued to decrease from 54.7% in 1997 to 45.9% in 2000. Between 1996 and 1999 anabolic steroid use by new users increased considerably from 26.9% to 37.4%. A further rise has been seen this year with 43.9% of new users reporting the use of this drug. Methadone use among new users has fallen between 1996 (10.6%) and 1999 (2.9%) with a slight rise in 2000 (3.4%). When all users are considered, again use of heroin has decreased from 51.2% in 1997 to 48.5% in 2000. The percentage of all users reporting use of anabolic steroids has conversely increased in the last four years from 22.3% in 1996 to 32.6% in 2000 with a rise of 4.3% between 1999 and 2000. Methadone cited as the main drug of use has fallen consistently since 1996 from 12.8% in 1996 to 7.9% in 2000.

Figure 2.3 New Users Reported by Agency Based Syringe Exchange Schemes in 1996, 1997, 1998, 1999 and 2000 by Main Drug

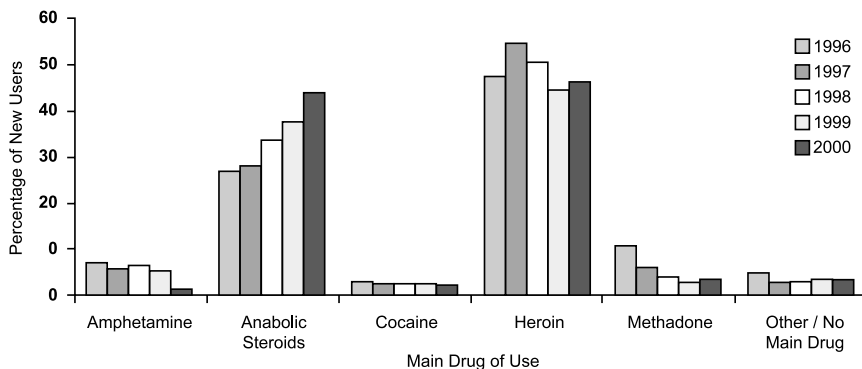


Figure 2.3 shows the proportions of new users reported by Agency Based Syringe Exchange Schemes between 1996 and 2000 by their main drug of use (cocaine and crack have been analysed together). The proportion of users reporting anabolic steroids as their main drug of use has risen consistently over the years with a further increase this year (37.4% in 1999, 43.9% in 2000). There has been a small but steady decline in the proportion reporting use of methadone as the main drug of use until this year when the proportion increased slightly to 3.4%. Heroin has fluctuated slightly over the years of reporting but has remained relatively steady at approximately 50%. Amphetamine use had remained steady between 1996 and 1999 but has fallen to just 1.2% in 2000 compared to 5.1% in the previous year.

Table 2.6b: Visit Rates for All Users in 2000 by Main Drug

| Drug | 1996 | 1997 | 1998 | 1999 | 2000 |
|--------------------|------------|------------|------------|------|------------|
| All Drugs | 4.8 | 4.5 | 5.0 | 4.3 | 4.8 |
| Amphetamine | 4.6 | 6.2 | 7.2 | 7.3 | 8.1 |
| Anabolic Steroids | 2.0 | 2.3 | 2.5 | 2.3 | 2.2 |
| Cocaine | 4.2 | 3.6 | 4.2 | 4.7 | 4.4 |
| Crack* | | | | 5.3 | 17.7 |
| Heroin | 5.5 | 4.8 | 5.5 | 5.3 | 5.4 |
| Methadone | 6.1 | 5.6 | 6.3 | 6.2 | 7.4 |
| Other/No Main Drug | 6.2 | 7.9 | 9.0 | 10.2 | 8.5 |

*Crack and cocaine were not analysed independently until 1999

Table 2.6b shows the visit rates per reported drug over the last 5 years. The overall visit rate (the average number of visits per individual) was 4.8 visits per individual (4.3 in 1999) but amongst users of different drugs it varied considerably. The highest visit rate was by crack users followed by ‘other’/no main drug and amphetamine. Only three individuals were reported as users of crack and the very high visit rate in 2000 for this drug may therefore not be representative of crack users in general. The visit rate of amphetamine has risen consistently over the 5 years of reporting from 4.6 in 1996 to 8.1 in 2000. Users of

anabolic steroids had the lowest visit rate in 2000 and this drug has accounted for the least number of visits consistently over the 5 years. The lower rate amongst anabolic steroid users may be the result of different drug regimes used i.e. they do not necessarily inject every day and may have 'off' cycles or rest periods when they abstain from anabolic steroid use¹⁰.

Tables 2.7a and b show the breakdown of drug use by health authority of reporting agency. Similar to last year, North Cheshire and South Cheshire reported the lowest and highest proportion of all heroin users, 31.3% and 58.9% respectively. Over half of all users in Liverpool (55.3%) and Wirral (52.4%) were also heroin users. Conversely, North Cheshire had by far the highest proportion of anabolic steroid users with 58.7% of all users in this health authority using this drug. Anabolic steroid use accounted for the lowest proportion of all users in South Cheshire (15.7%). South Cheshire and Liverpool reported the highest and lowest proportion of methadone users, 17.0% and 1.8% respectively. When new users only were considered a similar geographical pattern emerged with North Cheshire and South Cheshire accounting again for the lowest and highest proportion of heroin users, 28.6% and 62.6% respectively. Heroin use accounted for just less than half of new users in the remaining three health authorities. The reverse is true when new users of anabolic steroids were considered with this drug accounting for 65.5% in North Cheshire and just 19.1% in South Cheshire. Methadone use of new users was highest in Wirral (17.6%) with no new users of methadone reported in Liverpool. Existing amphetamine use was highest in St Helens & Knowsley although Wirral had the highest proportion of new users (4.1%). The highest proportion of cocaine use for all users was in Wirral (4.7%) and this health authority also saw the highest proportion of new users reporting the use of this drug (6.8%). Cocaine and crack use constituted a small proportion of drug use across all health authorities.

Table 2.7a All Users Reported by Agency Based Syringe Exchange Schemes in 2000

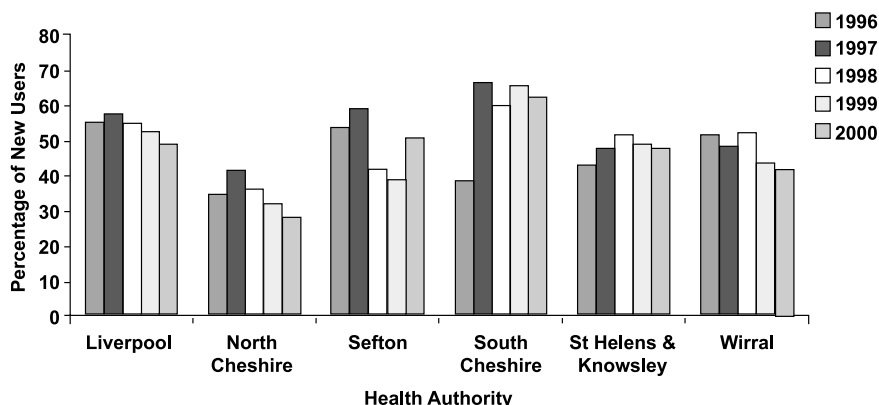
| Health Authority | Amphetamine | Anabolic Steroids | Cocaine | Crack |
|----------------------|-------------------|--------------------|------------------|-----------------|
| Liverpool | 10 (1.2%) | 303 (36.5%) | 18 (2.2%) | / |
| North Cheshire | 6 (1.9%) | 182 (58.7%) | 2 (0.6%) | / |
| Sefton | 14 (2.9%) | 148 (31.2%) | 19 (4.0%) | 1 (0.2%) |
| South Cheshire | 14 (3.8%) | 58 (15.7%) | 3 (0.8%) | / |
| St Helens & Knowsley | 59 (8.7%) | 194 (28.6%) | 6 (0.9%) | 2 (0.3%) |
| Wirral | 17 (5.4%) | 67 (21.1%) | 15 (4.7%) | 1 (0.3%) |
| Total | 120 (4.0%) | 952 (31.9%) | 63 (2.1%) | 4 (0.1%) |

Table 2.7b New Users Reported by Agency Based Syringe Exchange Schemes in

| Health Authority | Amphetamine | Anabolic Steroids | Cocaine | Crack |
|----------------------|------------------|--------------------|------------------|-----------------|
| Liverpool | / | 168 (46.3%) | 5 (1.4%) | / |
| North Cheshire | 1 (0.6%) | 110 (65.5%) | 1 (0.6%) | / |
| Sefton | 2 (1.0%) | 78 (38.6%) | 7 (3.5%) | 1 (0.5%) |
| South Cheshire | 3 (2.6%) | 22 (19.1%) | 1 (0.9%) | / |
| St Helens & Knowsley | 4 (1.8%) | 92 (40.4%) | 2 (0.9%) | 1 (0.4%) |
| Wirral | 3 (4.1%) | 22 (29.7%) | 5 (6.8%) | / |
| Total | 13 (1.1%) | 492 (42.8%) | 21 (1.8%) | 2 (0.2%) |

Double counting is excluded within health authorities. e.g. an individual who visits two different agencies in two different health authorities will be represented user presented to services

Figure 2.4 a) New Heroin Users Reported by Agency Based Syringe Exchange Schemes in 1996, 1997, 1998, 1999 and 2000



by Drug and Health Authority of Reporting Agency

| Heroin | Methadone | Other / No Main Drug | Total (100%) |
|----------------------|--------------------|----------------------|--------------|
| 459 (55.3%) | 15 (1.8%) | 25 (3.0%) | 830 |
| 97 (31.3%) | 20 (6.5%) | 3 (1.0%) | 310 |
| 228 (48.0%) | 38 (8.0%) | 27 (5.7%) | 475 |
| 218 (58.9%) | 63 (17.0%) | 14 (3.8%) | 370 |
| 294 (43.4%) | 54 (8.0%) | 69 (10.2%) | 678 |
| 166 (52.4%) | 44 (13.9%) | 7 (2.2%) | 317 |
| 1,462 (49.1%) | 234 (7.9%) | 145 (4.9%) | 2,980 |

2000 by Drug and Health Authority of Reporting Agency

| Heroin | Methadone | Other / No Main Drug | Total (100%) |
|--------------------|-------------------|----------------------|--------------|
| 178 (49.0%) | / | 12 (3.3%) | 363 |
| 48 (28.6%) | 6 (3.6%) | 2 (1.2%) | 168 |
| 103 (51.0%) | 1 (0.5%) | 10 (5.0%) | 202 |
| 72 (62.6%) | 8 (7.0%) | 9 (7.8%) | 115 |
| 110 (48.2%) | 11 (4.8%) | 8 (3.5%) | 228 |
| 31 (41.9%) | 13 (17.6%) | / | 74 |
| 542 (47.1%) | 39 (3.4%) | 41 (3.6%) | 1,150 |

agencies within the same health authority will only be shown at the first agency they visited whereas in both health authorities. NB: The main drug used was recorded only on the first occasion that the

Figure 2.4 b) New Methadone Users Reported by Agency Based Syringe Exchange Schemes in 1996, 1997, 1998, 1999 and 2000

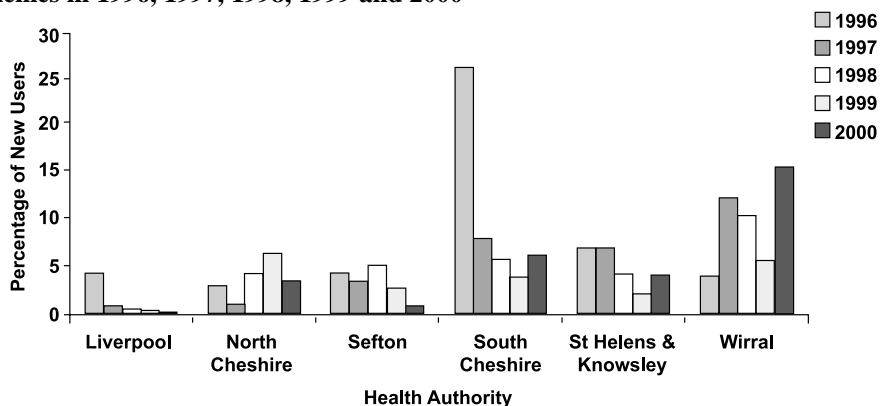


Figure 2.4 c) New Anabolic Steroid Users Reported by Agency Based Syringe Exchange Schemes in 1996, 1997, 1998,1999 and 2000

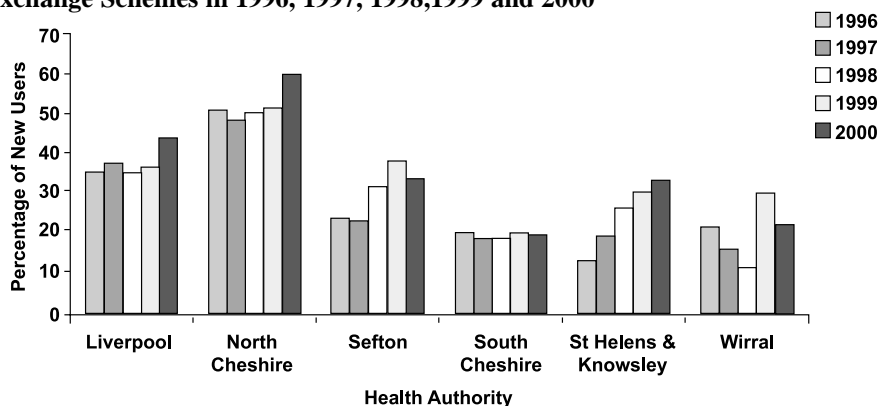


Table 2.8 All Users Reported by Agency Based Syringe Exchange Schemes in 2000

| Age Group | Amphetamine | Anabolic Steroids | Cocaine | Crack |
|---------------------|-------------|-------------------|------------|-----------|
| 15 - 19 | 2 (1.7%) | 59 (6.2%) | 1 (1.6%) | / |
| 20 - 24 | 12 (10.3%) | 262 (27.7%) | 4 (6.3%) | 1 (33.3%) |
| 25 - 29 | 36 (30.8%) | 281 (29.7%) | 15 (23.8%) | 1 (33.3%) |
| 30 - 34 | 42 (35.9%) | 204 (21.5%) | 22 (34.9%) | 1 (33.3%) |
| 35 - 39 | 10 (8.5%) | 82 (8.7%) | 11 (17.5%) | / |
| 40 - 44 | 8 (6.8%) | 37 (3.9%) | 5 (7.9%) | / |
| 45 - 49 | 4 (3.4%) | 14 (1.5%) | 5 (7.9%) | / |
| 50 and Over | 3 (2.6%) | 8 (0.8%) | / | / |
| Total (100%) | 117 | 947 | 63 | 3 |

Data exclude all double counting i.e. each individual is only counted once, at the first agency they attended

Figures 2.4a, b and c show changes in the proportion of new users reporting the use of heroin, methadone and anabolic steroids. Heroin use has generally fallen over the last three years, but in 2000 heroin use increased in Sefton Health Authority (39.4% in 1999 to 51.0% in 2000). The percentage of new users reporting methadone has declined to zero in Liverpool and has also declined in North Cheshire and Sefton. All other health authorities saw an increase in the proportion of new users using this drug. Wirral experienced a considerable increase in methadone use among new users from 6.8% in 1999 to 17.6% in 2000.

Consistently over the years of reporting, North Cheshire has seen the highest levels of anabolic steroid use and this health authority has experienced a further rise in the use of this drug this year (56.7% in 1999 to 65.5% in 2000). There has also been an increase in the percentage of new users reporting use of anabolic steroids in Liverpool and St Helens & Knowsley. In all other health authorities use of this drug has declined in 2000 although overall use of this drug across the whole of Merseyside and Cheshire has increased (Figure 2.3).

Table 2.8 shows that most drug use is concentrated in the 25 to 34 age range; accounting for over half (56.7%) of all users, 61.7% of heroin users, 66.7% of amphetamine users, 51.2% anabolic steroid users, 58.7% of cocaine users and 47.1% of those who indicated ‘other/no main drug’. This age group also accounted for 48.9% of methadone use although methadone users tended to be older with 24.9% aged between 35-39. Of most concern is the high percentage (33.9%) of anabolic steroid users aged less than 25, 6.2% of which were aged less than 19. Anabolic steroid use accounted for the highest percentage of users in this youngest age group. Use of anabolic steroids declined with age with only 6.2% of those using this drug aged over 40. Crack use was small across all age groups and no crack user was aged below 20. Cocaine use amongst those aged less than 25 accounted for 7.9% of all users.

by Drug and Age

| Heroin | Methadone | Other / No Main Drug | Total |
|--------------|------------|----------------------|--------------|
| 21 (1.5%) | / | 1 (0.7%) | 84 (2.9%) |
| 152 (10.8%) | 10 (4.4%) | 10 (7.4%) | 451 (15.5%) |
| 423 (30.0%) | 50 (21.8%) | 31 (22.8%) | 837 (28.8%) |
| 447 (31.7%) | 62 (27.1%) | 33 (24.3%) | 811 (27.9%) |
| 244 (17.3%) | 57 (24.9%) | 37 (27.2%) | 441 (15.2%) |
| 80 (5.7%) | 24 (10.5%) | 11 (8.1%) | 165 (5.7%) |
| 25 (1.8%) | 17 (7.4%) | 12 (8.8%) | 77 (2.7%) |
| 17 (1.2%) | 9 (3.9%) | 1 (0.7%) | 38 (1.3%) |
| 1,409 | 229 | 136 | 2,904 |

Table 2.9 All Users Reported by Agency Based Syringe Exchange Schemes in 1996, 1997, 1998, 1999 and 2000 by Length of Time in Contact with Services

| Time in Contact | 1996 | 1997 | 1998 | 1999 | 2000 |
|---------------------|---------------|---------------|---------------|---------------|---------------|
| New User | 2,313 (61.0%) | 1,792 (48.7%) | 1,751 (50.5%) | 1,870 (51.1%) | 1,802 (49.2%) |
| 1 to 2 Years | 380 (10.0%) | 653 (17.8%) | 482 (13.9%) | 398 (10.9%) | 412 (11.2%) |
| 2 to 3 Years | 256 (6.8%) | 332 (9.0%) | 391 (11.3%) | 326 (8.9%) | 316 (8.6%) |
| 3 to 4 Years | 207 (5.5%) | 179 (4.9%) | 169 (4.9%) | 266 (7.3%) | 248 (6.8%) |
| 4 to 5 Years | 489 (12.9%) | 176 (4.8%) | 137 (4.0%) | 159 (4.3%) | 217 (5.9%) |
| 5 to 6 Years | }* | 225 (6.1%) | 143 (4.1%) | 126 (3.4%) | 138 (3.8%) |
| 6 to 7 Years | } 147 (3.9%) | 313 (8.5%) | 303 (8.7%) | 142 (3.9%) | 119 (3.2%) |
| 7 to 8 Years | } | 5 (0.1%) | 92 (2.7%) | 290 (7.9%) | 82 (2.2%) |
| 8 to 9 Years | } | 1 (0.0%) | | 81 (2.2%) | 172 (4.7%) |
| 9 to 10 Years | | | | | 153 (4.2%) |
| 10 to 20 Years | | | | | 6 (0.2%) |
| Total (100%) | 3,792 | 3,676 | 3,468 | 3,658 | 3,665 |

Data for 1996 and 1997 are for all users including double counting of users who presented at more than one agency. Data for 1998 and 1999 exclude double counting across health authorities.

** Owing to low numbers in 1996, contacts over five years were analysed together*

Table 2.10 All Users Reported by Agency Based Syringe Exchange Schemes in 2000

| Time in Contact | Amphetamine | Anabolic Steroids | Cocaine | Crack |
|---------------------|-------------|-------------------|------------|-----------|
| New User | 14 (11.8%) | 577 (62.2%) | 23 (41.8%) | 4 (80.0%) |
| 1 to 2 Years | 20 (16.8%) | 125 (13.5%) | 7 (12.7%) | / |
| 2 to 3 Years | 22 (18.5%) | 81 (8.7%) | 5 (9.1%) | 1 (20.0%) |
| 3 to 4 Years | 10 (8.4%) | 53 (5.7%) | 5 (9.1%) | / |
| 4 to 5 Years | 5 (4.2%) | 42 (4.5%) | 2 (3.6%) | / |
| 5 to 6 Years | 6 (5.0%) | 21 (2.3%) | 5 (9.1%) | / |
| 6 to 7 Years | 6 (5.0%) | 12 (1.3%) | 3 (5.5%) | / |
| 7 to 8 Years | 5 (4.2%) | 9 (1.0%) | 3 (5.5%) | / |
| 8 to 9 Years | 22 (18.5%) | 5 (0.5%) | 2 (3.6%) | / |
| 9 to 10 Years | 8 (6.7%) | 3 (0.3%) | / | / |
| 10 Years + | 1 (0.8%) | / | / | / |
| Total (100%) | 119 | 928 | 55 | 5 |

Data exclude all double counting i.e. each individual is only counted once, at the first agency they being reflected in later reports

Table 2.9 profiles the length of time individuals had been in contact with services at their last visit. As in 1999, approximately half (49.2%) of the users had been in contact with services for one year or less. There is then a considerable drop in the proportion that have been in contact for between one and two years, with 11.3% of users falling into this contact time category. Why these individuals cease to contact SES is not known but possibilities include the use of Pharmacies to obtain injecting equipment or have been remanded in custody, they have ceased injecting or may have become drug free. Whilst there are therefore a high proportion that are in contact with SES for less than one year, additionally, more users are staying in contact with SES for longer periods of time. In 1997, there were

just 6 (0.1%) users that had been in contact with SES for more than seven years. In 1998 and 1999, this figure had risen to 92 (2.7%) users and 371 (10.1%) respectively reported as being in contact for over seven years. In 2000, 413 (11.3%) individuals had been in contact for more than seven years with six clients being in contact for over 10 years.

Table 2.10 shows the main drug of use by the length of contact with SES. New users (in contact for less than one year) accounted for 62.2% of all anabolic steroid users but few users of this drug were in contact long term, with 24.3% being in contact for more than two years. It is likely that the time anabolic steroid users are in contact with SES will increase as the rise in the use of this drug continues. This compares with users of methadone where just 15.7% have been in contact for less than one full year and 77.8% have been in contact for more than two years with 27.8% being in contact for between 8 years and over.

Table 2.11 shows that, as in previous years, the most commonly reported method of hearing about services was from family and friends (75.5% of all users and 74.3% of new users). This method was followed by ‘Other’ (7.9%) and Outreach (7.2%) amongst all users and by ‘Other’ (7.7%) and Outreach (6.9%) amongst new users.

by Drug and Length of Time in Contact with Services

| Heroin | Methadone | Other / No Main Drug | Total |
|--------------|------------|----------------------|---------------|
| 655 (46.7%) | 34 (15.7%) | 50 (34.0%) | 1,357 (47.2%) |
| 165 (11.8%) | 14 (6.5%) | 15 (10.2%) | 364 (12.0%) |
| 141 (10.0%) | 20 (9.3%) | 4 (2.7%) | 274 (9.5%) |
| 130 (9.3%) | 15 (6.9%) | 11 (7.5%) | 224 (7.8%) |
| 95 (6.8%) | 39 (18.1%) | 6 (4.1%) | 189 (6.6%) |
| 67 (4.8%) | 13 (6.0%) | 8 (5.4%) | 120 (4.2%) |
| 49 (3.5%) | 10 (4.6%) | 13 (8.8%) | 93 (3.2%) |
| 23 (1.6%) | 11 (5.1%) | 11 (7.5%) | 62 (2.2%) |
| 49 (3.5%) | 26 (12.0%) | 12 (8.2%) | 116 (4.0%) |
| 29 (2.1%) | 31 (14.4%) | 15 (10.2%) | 86 (3.0%) |
| / | 3 (1.4%) | 2 (1.4%) | 6 (0.2%) |
| 1,403 | 216 | 147 | 2,873 |

attended. Drug is only collected on first contact with services and may change over time without

Table 2.11 All Users and New Users Reported by Agency Based Syringe Exchange Schemes in 2000 by Sex and How Clients Heard About Services

| How Heard | All Users | | New Users | | Total | |
|---------------------|-------------|---------------|------------|-------------|---------------|-------------|
| | Female | Male | Female | Male | All Users | New Users |
| Chemist | 2 (0.6%) | 18 (0.8%) | 1 (2.0%) | 1 (0.3%) | 20 (0.8%) | 2 (0.6%) |
| Clinic | 19 (5.7%) | 90 (4.1%) | 1 (2.0%) | 14 (4.5%) | 109 (4.3%) | 15 (4.1%) |
| Friend / Family | 228 (68.5%) | 1,693 (76.6%) | 40 (80.0%) | 229 (73.4%) | 1,921 (75.5%) | 269 (74.3%) |
| GP | / | 16 (0.7%) | / | / | 16 (0.6%) | / |
| Healthwise | 1 (0.3%) | 1 (0.0%) | / | 1 (0.3%) | 2 (0.1%) | 1 (0.3%) |
| Leaflet | 4 (1.2%) | 34 (1.5%) | / | 8 (2.6%) | 38 (1.5%) | 8 (2.2%) |
| Outreach | 48 (14.4%) | 135 (6.1%) | 4 (8.0%) | 21 (6.7%) | 183 (7.2%) | 25 (6.9%) |
| Police | / | / | / | / | / | / |
| Poster | 1 (0.3%) | 19 (0.9%) | / | 3 (1.0%) | 20 (0.8%) | 3 (0.8%) |
| Press | 3 (0.9%) | 8 (0.4%) | / | 2 (0.6%) | 11 (0.4%) | 2 (0.6%) |
| Prison | 5 (1.5%) | 14 (0.6%) | 2 (4.0%) | 7 (2.2%) | 19 (0.7%) | 9 (2.5%) |
| TV / Radio | 2 (0.6%) | 2 (0.1%) | / | / | 4 (0.2%) | / |
| Other | 20 (6.0%) | 180 (8.1%) | 2 (4.0%) | 26 (8.3%) | 200 (7.9%) | 28 (7.7%) |
| Total (100%) | 333 | 2,210 | 50 | 312 | 2,543 | 362 |

Data exclude all double counting i.e. each individual is only counted once, at the first agency they attended

Table 2.12 All Users, New Users and Visits Reported by Agency Based Syringe Exchange Schemes in 2000 by Whether Clients Were Receiving Treatment for Their Drug Use

| In Treatment? | All Users | New Users | Visits |
|---------------------|---------------|-------------|---------------|
| Yes | 685 (27.2%) | 59 (16.6%) | 4,062 (32.4%) |
| No | 1,829 (72.8%) | 296 (83.3%) | 8,484 (67.6%) |
| Total (100%) | 2,514 | 355 | 12,546 |

Data exclude all double counting i.e. each individual is only counted once, at the first agency they attended

In 1999 there had been a further decline from 1998 in the proportion of SES clients that were also receiving treatment. Amongst new users the proportion had dropped from nearly a third (30.0%) in contact with treatment in 1996 to less than a fifth (15.0%) in 1999. Table 2.12 shows that in 2000 the proportion receiving treatment has increased slightly for both all users (26.8% in 1999 to 27.2% in 2000) and new users (15.0% in 1999 to 16.6% in 2000). Despite this increase in 2000 in the numbers in contact with treatment, SES remains the sole provider of drug related services for 1,829 individuals.

Table 2.13 All Visits Reported by Syringe Exchange Schemes in 2000 by Sharing Status and Drug

| Drug | Have you shared injecting equipment in the last four weeks? | | |
|----------------------|---|----------------------|--------------|
| | Yes | No | Total (100%) |
| Amphetamine | 3 (2.0%) | 150 (98.0%) | 153 |
| Anabolic Steroids | 3 (0.4%) | 751 (99.6%) | 754 |
| Cocaine | / | 84 (100%) | 84 |
| Crack | / | 12 (100%) | 12 |
| Heroin | 70 (2.4%) | 2,821 (97.6%) | 2,891 |
| Methadone | 1 (0.4%) | 267 (99.6%) | 268 |
| Other / No Main Drug | 15 (4.9%) | 290 (95.1%) | 305 |
| Total | 92 (2.1%) | 4,375 (97.9%) | 4,467 |

Data exclude all double counting i.e. each individual is only counted once, at the first agency they attended

Clients were asked if they had shared any injecting equipment in the four weeks prior to visiting SES, or since their last visit if this had been less than four weeks before. This information is given in Table 2.13. Overall, 2.1% of users said they had shared injecting equipment a reduction from 1999 when 4.0% indicated sharing behaviour. There was some variation across the drugs with heroin and ‘other/no main drug’ having the highest proportion that indicated sharing behaviour, 2.4% and 4.9% respectively. Again, the proportion of users who indicated they shared equipment for these drugs had decreased from 1999, when 5.7% of heroin users and 6.6% of ‘other/no main drug’ indicated sharing behaviour. In addition, 4.0% of cocaine users indicated that they shared in 1999 compared to no one for this drug in 2000. These data are in line with Government’s targets that aim to reduce injecting and sharing practices. However, this information was only available for 26.0% of all visits. The stigma attached to injecting and sharing remains and it is likely that a considerable number of users do not wish to disclose this information or indicate they are not sharing when the contrary is true.

**PHARMACY BASED
SYRINGE EXCHANGE
SCHEMES**



PHARMACY BASED SYRINGE EXCHANGE SCHEMES

Introduction

In 2000, a total of 56 Pharmacies reported syringe exchange data to the Drug Monitoring Unit compared to 59 in 1999. Pharmacy data constitutes the smallest set of variables collected as part of drug misuse monitoring as interactions occur in Pharmacies, shops that are regularly used by the non-drug using population where extended data collection may not be practical. The data items collected are the users initials, date of birth, their sex, area of residence (on first visit) and details of the syringes and/or needles exchanged. No information regarding drug of use is collected.

Monitoring all drug related services, not just those offering treatment provides a better understanding of the needs of clients for future service provision and comprehension of local situations. Monitoring both Pharmacy and SES also assists in the evaluation of the Government's anti-drug strategy objectives. In conjunction with data from other services in Merseyside and Cheshire it allows the quantification of numbers in contact with services and the number of users that inject. As date of birth is collected, the Government's aim of reducing the proportion of users aged less than 25 can also be monitored.

DEFINITIONS

| | |
|------------------------|--|
| User | A person who visits a Pharmacy for the purposes of needle and/or syringe exchange - this may be a new user or a repeat user. |
| New User | A user visiting a Pharmacy for the first time. |
| Repeat User | A user visiting a Pharmacy for the second or any subsequent time regardless of length of time between visits. |
| Visit | When a person visits a Pharmacy for the purposes of needle/syringe exchange for the first or any subsequent time NB this is not the same as an episode reported to the Drug Misuse Database. |
| Visit Rate | The number of visits divided by the number of users to give an average number of visits made per user. |
| Double Counting | When a person who visits more than one Pharmacy syringe exchange in Merseyside and Cheshire or within a health authority is counted as a user at each Pharmacy or health authority that they visit. |
| Single Counting | When a person is counted at only the first Pharmacy they visited in Merseyside or Cheshire or are counted at the first Pharmacy within each health authority when analysis is expressed by health authority. |

Table 3.1 All Users, New Users and Visits Reported by Pharmacy Based Syringe Exchange Schemes in 1996, 1997, 1998, 1999 and 2000 by Health Authority of Reporting Agency

| Health Authority | 1996 | | | 1997 | | |
|----------------------|---------------|--------------|---------------|---------------|--------------|---------------|
| | All Users | New Users | Visits | All Users | New Users | Visits |
| Liverpool | 5,297 | 909 | 17,395 | 10,449 | 2,669 | 30,031 |
| North Cheshire | 342 | 316 | 2,213 | 452 | 317 | 1,203 |
| Sefton | 2,790 | 123 | 9,669 | 2,856 | 149 | 10,286 |
| South Cheshire | 832 | 825 | 5,356 | 1,168 | 704 | 3,389 |
| St Helens & Knowsley | 1,949 | 326 | 6,519 | 2,153 | 413 | 5,517 |
| Wirral | 566 | 346 | 2,662 | 735 | 467 | 2,046 |
| Total | 11,776 | 2,845 | 43,814 | 17,813 | 4,719 | 52,472 |

| All Users | 1998 | | All Users | 1999 | | All Users | 2000 | |
|---------------|--------------|---------------|--------------|--------------|---------------|--------------|--------------|---------------|
| | New Users | Visits | | New Users | Visits | | New Users | Visits |
| 11,421 | 1,541 | 31,426 | 1,581 | 1,538 | 23,706 | 1,459 | 384 | 31,200 |
| 580 | 410 | 2,011 | 573 | 364 | 4,683 | 495 | 302 | 3,790 |
| 425 | 234 | 2,450 | 500 | 214 | 7,604 | 445 | 46 | 7,570 |
| 1,234 | 794 | 4,007 | 1,485 | 838 | 11,134 | 1,325 | 627 | 14,254 |
| 506 | 282 | 1,518 | 632 | 423 | 4,646 | 376 | 145 | 3,222 |
| 721 | 511 | 2,314 | 765 | 503 | 6,015 | 901 | 594 | 7,459 |
| 14,887 | 3,772 | 43,726 | 5,536 | 3,880 | 57,788 | 5,001 | 2,098 | 67,495 |

Double counting is excluded within health authorities. e.g. an individual who visits two different agencies within the same health authority will only be shown at the first agency they visited whereas an individual who visits two different agencies in two different health authorities will be represented in both health authorities

In 2000, a total of 4,762 individuals were reported by Pharmacies in Merseyside and Cheshire and Table 3.1 shows changes over the years of reporting when double counting within health authorities is excluded. Altogether 239 (5,001-4,762) users had been seen at more than one health authority in 2000. Of the 4,762 users, 2,029 (42.6%) were new users. The proportion of all users that were new users fell this year with new users accounting for more than two thirds of all users in both 1998 (64.0%) and 1999 (67.2%) and only 42.0% in 2000. The reduction in the proportion of new users is probably due to changes in the way users were recorded in Liverpool Health Authority that began collecting attributable data in 1999. As 1999 represented the first year of collecting attributable data, almost all users would be classed as new, giving 1,538 new users for 1999. In 2000 client details could be compared with the previous year and the number of new users had decreased to 384. Liverpool had one less Pharmacy reporting in 2000 compared to 1999, as did Wirral whereas South Cheshire had three fewer. The total number of users has decreased from 1999 (5,001 in 2000 compared to 5,526 in 1999) but the number of visits have increased by almost 10,000. Visit rate (number of visits per client) has therefore increased from 10.4 in 1999 to 13.5 in 2000.

Table 3.2 All Users and New Users Reported by Pharmacy Based Syringe Exchange Schemes in 2000 by Sex and Age

| Age Group | All Users | | New Users | |
|--------------|---------------|-------------|--------------|-------------|
| | Male | Female | Male | Female |
| Under 15 | 2 (0.1%) | 1 (0.1%) | / | 1 (0.3%) |
| 15 - 19 | 115 (3.7%) | 49 (6.5%) | 63 (4.4%) | 15 (4.8%) |
| 20 - 24 | 538 (17.2%) | 161 (21.2%) | 254 (17.6%) | 70 (22.3%) |
| 25 - 29 | 1,003 (32.1%) | 238 (31.4%) | 470 (32.5%) | 102 (32.5%) |
| 30 - 34 | 839 (26.8%) | 184 (24.3%) | 349 (24.1%) | 72 (22.9%) |
| 35 - 39 | 407 (13.0%) | 88 (11.6%) | 208 (14.4%) | 39 (12.4%) |
| 40 - 44 | 139 (4.4%) | 23 (3.0%) | 64 (4.4%) | 11 (3.5%) |
| 45 - 49 | 56 (1.8%) | 5 (0.7%) | 24 (1.7%) | / |
| 50 and Over | 28 (0.9%) | 9 (1.2%) | 14 (1.0%) | 4 (1.3%) |
| Total | 3,127 | 758 | 1,446 | 314 |

Data exclude all double counting i.e. each individual is only counted once, at the first agency they attended

Table 3.2 shows the sex and age profile of all users and new users attending Pharmacies in 2000 and reports only those users for which both age and sex were known. Altogether, 3,469 and 861 males and females respectively were reported, with this information being available for 90.9% of all users. Males accounted for 80.1% of users with the female to male ratio being 1:4.0. This compares with a female to male ratio at SES of 1:6.6. The proportion of male users has increased at both Pharmacy and agency based SES from 1999, attenuating the decline in the proportion of males that had occurred between 1996 and 1999. Age was available for 81.6% of all users in 2000. The most common age of both female and male users and new users was 25 to 29. This is similar to 1999 when again the highest proportion of users fell into the 25 to 29 age category. A key target of the Government's anti-drug strategy is to reduce the number of individuals aged less than 25 reported to be using drugs. There has been a slight increase in the proportion of new male users aged less than 25 (22.0% in 2000 compared to 20.8% in 1999) but the proportion overall of males aged less than 25 and all and new female users aged less than 25 has decreased in 2000 compared to the previous year. In 2000 there was a greater proportion of females aged under 25 than males, 27.8% and 21.0% respectively. A similar picture is true for new users with 27.4% of females aged less than 25 compared to 22.0% of males. Female users accessing Pharmacies therefore tended to be younger than males.

Table 3.3 All Users and New Users Reported by Pharmacy Based Syringe Exchange Schemes in 1999 and 2000 by Sex and Health Authority of Reporting Agency

| Health Authority | 1999 | | | |
|----------------------|----------------------|----------------------|----------------------|--------------------|
| | All Users | | New Users | |
| | Male | Female | Male | Female |
| Liverpool | 1,141 (78.3%) | 317 (21.7%) | 1,107 (78.2%) | 308 (21.8%) |
| North Cheshire | 470 (82.9%) | 97 (17.1%) | 293 (81.2%) | 68 (18.8%) |
| Sefton | 305 (75.3%) | 100 (24.7%) | 147 (74.6%) | 50 (25.4%) |
| South Cheshire | 1,016 (77.5%) | 295 (22.5%) | 597 (77.3%) | 175 (22.7%) |
| St Helens & Knowsley | 413 (85.3%) | 71 (14.7%) | 285 (86.4%) | 45 (13.6%) |
| Wirral | 617 (82.9%) | 127 (17.1%) | 396 (81.1%) | 92 (18.9%) |
| Total | 3,962 (79.7%) | 1,007 (20.3%) | 2,825 (79.3%) | 738 (20.7%) |

| Health Authority | 2000 | | | |
|----------------------|----------------------|--------------------|----------------------|--------------------|
| | All Users | | New Users | |
| | Male | Female | Male | Female |
| Liverpool | 1,052 (78.0%) | 297 (22.0%) | 281 (78.1%) | 79 (21.9%) |
| North Cheshire | 405 (84.4%) | 75 (15.6%) | 246 (84.8%) | 44 (15.2%) |
| Sefton | 266 (76.4%) | 82 (23.6%) | 31 (86.1%) | 5 (13.9%) |
| South Cheshire | 971 (81.3%) | 223 (18.7%) | 481 (83.4%) | 96 (16.6%) |
| St Helens & Knowsley | 255 (88.5%) | 33 (11.5%) | 98 (93.3%) | 7 (6.7%) |
| Wirral | 684 (79.4%) | 177 (20.6%) | 442 (78.8%) | 119 (21.2%) |
| Total | 3,633 (80.4%) | 887 (19.6%) | 1,579 (81.9%) | 350 (18.1%) |

Double counting is excluded within health authorities. e.g. an individual who visits two different agencies within the same health authority will only be shown at the first agency they visited whereas an individual who visits two different agencies in two different health authorities will be represented in both health authorities

Table 3.3 shows the sex profile of all users and new users by health authority of reporting Pharmacy. The proportion of female users varies across health authorities and ranges from 11.5% in St Helens & Knowsley to 23.6% in Sefton. When new users are considered, again St Helens & Knowsley has a considerably lower proportion of female users than other health authorities. Only 6.7% of new users were female, a reduction of 6.9% from 1999. Table 2.7b shows that 40.4% of new users attending SES in St Helens & Knowsley cite anabolic steroids as their primary drug of use and most anabolic steroid users tend to be male³. A large number of male anabolic steroid users attending Pharmacies in St Helens & Knowsley may reduce the relative percentage of female users within this health authority. Sefton has reported the highest proportion of female users since 1998, prior to which sex data for all health authorities were unavailable. However the percentage of new users in contact with Pharmacies in Sefton is only 13.9%.

Table 3.4 All Users and New Users Reported by Pharmacy Based Syringe Exchange Schemes in 2000 by Health Authority of Reporting Agency and Age

| Age Group | Liverpool | | North Cheshire | |
|--------------|--------------|------------|----------------|-------------|
| | All Users | New Users | All Users | New Users |
| Under 15 | 2 (0.2%) | / | / | / |
| 15 - 19 | 30 (2.6%) | 13 (4.3%) | 16 (3.4%) | 9 (3.1%) |
| 20 - 24 | 152 (13.1%) | 44 (14.5%) | 82 (17.4%) | 52 (17.6%) |
| 25 - 29 | 380 (32.9%) | 99 (32.6%) | 166 (35.2%) | 112 (38.0%) |
| 30 - 34 | 369 (31.9%) | 86 (28.3%) | 109 (23.1%) | 64 (21.7%) |
| 35 - 39 | 151 (13.1%) | 44 (14.5%) | 55 (11.7%) | 40 (13.6%) |
| 40 - 44 | 46 (4.0%) | 12 (3.9%) | 27 (5.7%) | 12 (4.1%) |
| 45 - 49 | 18 (1.6%) | 3 (1.0%) | 9 (1.9%) | 3 (1.0%) |
| 50 & Over | 8 (0.7%) | 3 (1.0%) | 7 (1.5%) | 3 (1.0%) |
| Total | 1,156 | 304 | 471 | 295 |

| Age Group | Sefton | | South Cheshire | | St Helens & Knowsley | |
|--------------|------------|-----------|----------------|-------------|----------------------|------------|
| | All Users | New Users | All Users | New Users | All Users | New Users |
| Under 15 | / | / | / | / | / | / |
| 15-19 | 5 (2.2%) | 2 (12.5%) | 107 (8.2%) | 51 (8.2%) | 12 (5.8%) | 5 (5.2%) |
| 20-24 | 32 (13.9%) | 4 (25.0%) | 349 (26.9%) | 161 (25.8%) | 46 (22.3%) | 21 (21.9%) |
| 25-29 | 85 (36.8%) | 6 (37.5%) | 382 (29.5%) | 191 (30.7%) | 66 (32.0%) | 30 (31.3%) |
| 30-34 | 70 (30.3%) | 2 (12.5%) | 265 (20.4%) | 125 (20.1%) | 48 (23.3%) | 24 (25.0%) |
| 35-39 | 25 (10.8%) | 2 (12.5%) | 133 (10.3%) | 63 (10.1%) | 25 (12.1%) | 13 (13.5%) |
| 40-44 | 7 (3.0%) | / | 45 (3.5%) | 22 (3.5%) | 5 (2.4%) | 2 (2.1%) |
| 45-49 | 3 (1.3%) | / | 10 (0.8%) | 7 (1.1%) | 2 (1.0%) | 1 (1.0%) |
| 50 & Over | 4 (1.7%) | / | 6 (0.5%) | 3 (0.5%) | 2 (1.0%) | / |
| Total | 231 | 16 | 1,297 | 623 | 206 | 96 |

| Age Group | Wirral | | Total | |
|--------------|-------------|-------------|---------------|--------------|
| | All Users | New Users | All Users | New Users |
| Under 15 | 1 (0.1%) | 1 (0.2%) | 3 (0.1%) | 1 (0.1%) |
| 15 - 19 | 9 (1.1%) | 3 (0.5%) | 179 (4.3%) | 83 (4.4%) |
| 20 - 24 | 99 (11.7%) | 68 (11.8%) | 760 (18.1%) | 350 (18.3%) |
| 25 - 29 | 263 (31.0%) | 186 (32.4%) | 1,342 (31.9%) | 624 (32.7%) |
| 30 - 34 | 242 (28.5%) | 156 (27.2%) | 1,103 (26.2%) | 457 (24.0%) |
| 35 - 39 | 165 (19.4%) | 110 (19.2%) | 554 (13.2%) | 272 (14.3%) |
| 40 - 44 | 38 (4.5%) | 29 (5.1%) | 168 (4.0%) | 77 (4.0%) |
| 45 - 49 | 21 (2.5%) | 12 (2.1%) | 63 (1.5%) | 26 (1.4%) |
| 50 & Over | 11 (1.3%) | 9 (1.6%) | 38 (0.9%) | 18 (0.9%) |
| Total | 849 | 574 | 4,210 | 1,908 |

Double counting is excluded within health authorities. e.g. an individual who visits two different agencies within the same health authority will only be shown at the first agency they visited whereas an individual who visits two different agencies in two different health authorities will be represented in both health authorities

Table 3.4 shows the ages of all and new users by health authority. Date of birth was recorded for 88.4% and 90.9% of all users and new users respectively. This was an increase from 1999 when the information was available for 84.2% of all users and 87.5% of new users. The greatest proportion of all users and new users were aged between 25 and 29. A considerable number of users were also aged between 30 and 34. Over half of all users and new users were aged between 25 and 34, with 58.1% of all users and 56.7% of new users

Table 3.5 All Users, New Users and Visits Reported by Pharmacy Based Syringe

| | All Users | New Users | Visits |
|--|--------------|--------------|--------|
| Health Authority | | | |
| Liverpool Health Authority | | | |
| Aigburth | 50 | 12 | 971 |
| City | 2,405 | 773 | 21,889 |
| Dingle | 40 | 25 | 515 |
| Fazakerley | 124 | 11 | 2,552 |
| Garston | 15 | 3 | 127 |
| Norris Green | 139 | 77 | 479 |
| Old Swan | 130 | 77 | 627 |
| Speke | 16 | / | 647 |
| Toxteth [1] | 98 | 44 | 504 |
| Tuebrook | 406 | 161 | 2,874 |
| West Derby [2] | 8 | / | 15 |
| North Cheshire Health Authority | | | |
| Fearnhead | 105 | 83 | 454 |
| Runcorn New Town | 111 | 60 | 925 |
| Runcorn Old Town | 67 | 35 | 463 |
| Warrington [1] | 55 | 25 | 367 |
| Warrington [2] | 43 | 20 | 343 |
| Warrington [3] | 156 | 114 | 803 |
| Widnes | 64 | 35 | 301 |
| Sefton Health Authority | | | |
| Ainsdale | 9 | / | 105 |
| Birkdale | 27 | 8 | 213 |
| Bootle | 104 | 1 | 2,440 |
| Churchtown | 13 | 4 | 207 |
| Netherton | 46 | 12 | 114 |
| Seaforth | 157 | 40 | 617 |
| Southport | 342 | 57 | 3,874 |

Data include double counting i.e. individuals are counted at all agencies they attended

falling into this age category. South Cheshire had the highest proportion of all users aged less than 25 (35.1%) whilst Wirral had just 12.9% in this age group. Similar results were observed when new users were considered, with users aged less than 25 accounting for 34.0% of users in South Cheshire compared to 12.5% in Wirral. Sefton had 37.5% of new users aged less than 25 but there were only 16 new users in total and the small numbers will affect the data.

Exchange Schemes in 2000 by Reporting Pharmacy

| | All Users | New Users | Visits |
|--|--------------|--------------|--------|
| Health Authority | | | |
| South Cheshire Health Authority | | | |
| Blacon | 78 | 44 | 895 |
| Chester [1] | 284 | 97 | 3,467 |
| Congleton [1] | 50 | 32 | 507 |
| Crewe [1] | 229 | 133 | 2,201 |
| Knutsford | 26 | 10 | 235 |
| Macclesfield [1] | 57 | 15 | 257 |
| Macclesfield [2] | 336 | 138 | 2,605 |
| Macclesfield [3] | 85 | 46 | 629 |
| Middlewich | 25 | 15 | 144 |
| Northwich [1] | 31 | 12 | 330 |
| Sandbach | 43 | 16 | 404 |
| Wilmslow | 69 | 39 | 582 |
| Winsford | 86 | 40 | 775 |
| St Helens & Knowsley Health Authority | | | |
| Halewood | 23 | 9 | 301 |
| Haydock | 63 | 27 | 650 |
| Kirkby | 18 | 9 | 31 |
| Newton-le-Willows | 39 | 14 | 163 |
| St Helens | 202 | 74 | 1,483 |
| West Vale | 97 | 37 | 594 |
| Wirral Health Authority | | | |
| Birkenhead [1] | 366 | 279 | 2,618 |
| Birkenhead [2] | 188 | 124 | 977 |
| Eastham | 30 | 20 | 366 |
| Great Sutton | 51 | 25 | 345 |
| Leasowe | 4 | 2 | 68 |
| Moreton | 47 | 17 | 299 |
| Rock Ferry | 177 | 128 | 962 |
| Wallasey [1] | 54 | 28 | 457 |
| Wallasey [2] | 5 | 1 | 13 |
| West Kirkby [2] | 38 | 24 | 625 |
| Whitby | 11 | 4 | 31 |
| Woodchurch | 93 | 63 | 698 |

Table 3.5 shows the number of users, new users and visits reported by each of the Pharmacies offering syringe exchange services in Merseyside and Cheshire in 2000. Pharmacy locations, rather than their names are given for confidentiality reasons and where a number appears in brackets after a Pharmacy location there is more than one pharmacy offering syringe exchange services in that area. In the case of, for example, Chester [1] or West Derby [2] the numbers have been retained for comparisons with previous years even though in 2000 there is only one Pharmacy reporting data in each area.

Table 3.6 All Users Reported by Pharmacy Based Syringe Exchange Schemes in 2000 by Health Authority of Reporting Agency and Health Authority of Residence

| Health Authority of Residence | Health Authority of Reporting Agency | | | | | | Total |
|-------------------------------|--------------------------------------|----------------|------------|----------------|----------------------|------------|--------------|
| | Liverpool | North Cheshire | Sefton | South Cheshire | St Helens & Knowsley | Wirral | |
| Liverpool | 1,122 | 4 | 3 | / | 1 | 1 | 1,131 |
| North Cheshire | 4 | 417 | / | / | 3 | / | 424 |
| Sefton | 47 | / | 139 | / | 1 | / | 187 |
| South Cheshire | 1 | 2 | / | 1,213 | 1 | 57 | 1,274 |
| St Helens & Knowsley | 18 | 2 | 1 | / | 95 | / | 116 |
| Wirral | 14 | / | / | / | / | 712 | 726 |
| North West (other) | / | / | 1 | 6 | / | / | 7 |
| West Midlands | / | / | / | 1 | / | / | 1 |
| Wales | 1 | / | / | 6 | / | / | 7 |
| No fixed abode | 1 | / | / | / | / | 1 | 2 |
| Total | 1,208 | 425 | 144 | 1,226 | 101 | 771 | 3,875 |

Double counting is excluded within health authorities. e.g. an individual who visits two different agencies within the same health authority will only be shown at the first agency they visited whereas an individual who visits two different agencies in two different health authorities will be represented in both health authorities.

Table 3.6 shows the number of users reported by Pharmacy Based Syringe Exchanges by health authority of residence and the health authority of the reporting agency. The majority of users attended Pharmacies in the health authority in which they were resident. A small proportion attended Pharmacies in neighbouring health authorities and a few were resident in areas outside the North West of England. Two individuals were reported to have no fixed abode. Agencies in Liverpool and Wirral Health Authorities saw the highest proportion of clients that were resident in other health authorities, 7.1% and 7.7% respectively.

SECTION 6

OUTREACH SERVICES



OUTREACH SERVICES

Introduction

The Merseyside and Cheshire area is unique in collecting data from Outreach services (Outreach) and these data can assist in the local monitoring of the objectives of the Government's drugs strategy. These include tracking trends in contacts with vulnerable groups (KPI 1.5), the proportion of drug misusers in contact with services (KPI 3.1) and the proportions of drug users who are injecting (KPI 3.2).

As with the previous year, 9 agencies reported Outreach data, compared to 12 in 1998. Data were not available for Chester CDT Outreach service for the period between January and March 2001 and the results presented here therefore constitute nine months of data for this agency. Attributor codes (initials, date of birth and sex) are not collected for Outreach clients due to the nature of the service. Individuals reported by Outreach services can therefore not be included in the analyses of multi-agency contacts presented in Section Five. Possible clients of Outreach services include injecting drug users, non-injecting drug users, injecting prostitutes, non-injecting prostitutes, sexual partners of clients, sexually active people (who do not fall into the other categories) and other (usually 'not known'). Data are collected on Outreach clients at their first contact with an Outreach worker. The following data are collected; sex, client type, main drug, whether they are in receipt of a prescription for a drug problem, whether the user is also attending SES and how the worker and the client met. Additionally, on every contact, geographical area and setting of contact, referrals to other agencies made by the Outreach worker, the client's recent drug contact, the duration of the meeting and details of any syringe issues or returns or any condom issue is also recorded (recording of this data is patchy and is not commented on in this report).

DEFINITIONS

| | |
|---------------------|--|
| User | A person who contacts, or is contacted by, an Outreach worker. |
| New User | A person in contact with the reporting Outreach services for the first time. |
| Contact | When a user is in contact with an Outreach worker, for the first or any subsequent time. NB This is not the same as episode reported to the Drug Misuse Database |
| Contact Rate | The number of contacts divided by the number of users to give an average number of contacts made by each user. |

Table 4.1 All Users, New Users and Contacts Reported by Outreach Services in 1997, 1998, 1999 and 2000 by Health Authority of Reporting Agency

| Health Authority | 1997 | | | 1998 | | |
|----------------------|---------------|---------------|---------------|--------------|--------------|---------------|
| | All Users | New Users | Contacts | All Users | New Users | Contacts |
| Liverpool | 688 (16.8%) | 587 (16.7%) | 3,160 (15.5%) | 509 (17.1%) | 287 (20.2%) | 2,305 (18.6%) |
| North Cheshire | 494 (12.1%) | 343 (9.8%) | 2,199 (10.8%) | 105 (3.5%) | 33 (2.3%) | 185 (1.5%) |
| Sefton | 501 (12.2%) | 370 (10.5%) | 3,984 (19.5%) | 537 (18.0%) | 194 (13.6%) | 3,723 (30.1%) |
| South Cheshire | 949 (23.2%) | 818 (23.3%) | 3,073 (15.0%) | 939 (31.5%) | 572 (40.2%) | 2,863 (23.1%) |
| St Helens & Knowsley | 274 (6.7%) | 209 (6.0%) | 1,008 (4.9%) | 181 (6.1%) | 67 (4.7%) | 632 (5.1%) |
| Wirral | 1,192 (29.1%) | 1,181 (33.7%) | 7,013 (34.3%) | 1,407* | 532* | 5,275* |
| Total (100%) | 4,098 | 3,508 | 20,437 | 3,678 | 1,685 | 14,983 |

| Health Authority | 1999 | | | 2000 | | |
|----------------------|---------------|---------------|---------------|---------------|--------------|---------------|
| | All Users | New Users | Contacts | All Users | New Users | Contacts |
| Liverpool | 286 (8.6%) | 1,404 (7.2%) | 106 (9.2%) | 410 (14.0%) | 285 (21.6%) | 1,399 (9.5%) |
| North Cheshire | / | / | / | / | / | / |
| Sefton | 389 (11.7%) | 111 (7.6%) | 2,914 (19.0%) | 460 (15.7%) | 155 (11.8%) | 3,286 (22.3%) |
| South Cheshire | 954 (28.8%) | 537 (36.5%) | 2,568 (16.8%) | 432 (14.7%) | 119 (9.0%) | 1,861 (12.6%) |
| St Helens & Knowsley | 428 (12.9%) | 339 (23.1%) | 2,006 (13.1%) | 396 (13.5%) | 237 (18.0%) | 1,702 (11.5%) |
| Wirral | 1,259 (38.0%) | 377 (25.6%) | 6,431 (42.0%) | 1,235 (42.1%) | 523 (39.7%) | 6,489 (44.0%) |
| Total (100%) | 3,316 | 1,470 | 15,323 | 2,933 | 1,319 | 14,737 |

* Data for Wirral in 1998 are estimated, based on six months figures from Response. Data are for all users and visits, including multiple counts of individuals who presented at more than one agency

Table 4.1 indicates the number and proportion of Outreach service users, new users and contacts reported by Outreach services in each health authority. The same nine Outreach services reported in this year as in 1999 and, like last year, there was no Outreach service in North Cheshire. Altogether, 14,737 contacts with Outreach services were made by 2,933 clients. These figures are lower than those of 1999 when 3,316 users made 15,323 contacts with Outreach services. Of the 2,933 service users that contacted Outreach in this year, 1,319 (45.0%) were new contacts. The number of new clients as a percentage of all clients is almost identical to last year when 44.3% were new to services. Wirral accounts for the largest percentage of contacts, all users and new users with 44.0% of all Outreach contacts occurring in this health authority. The main difference from last year is the decrease in users in contact with Outreach services in South Cheshire (all users; 954 in 1999, 432 in 2000 and new users; 537 in 1999 and 119 in 2000). The reader is reminded that only nine months of data were provided by Chester CDT Outreach service. Table 4.2, also indicates a large decrease in the number reported by South Cheshire CDT where 600 users were reported in 1999 compared to just 78 in 2000. This is due to not having an Outreach worker in post for a considerable period of the year. In Liverpool Health Authority, 69.5% of all users were new users compared to South Cheshire where new users made up only 27.5% of all users. The overall contact rate (number of contacts per user) has remained steady over the last few years; 5.0 in 1997, 4.1 in 1998, 4.6 in 1999 and rising again in this year to 5.0.

Table 4.2 All Users, New Users and Contacts Reported by Outreach Services in 2000 by Reporting Agency

| Agency | All Users | New Users | Contacts |
|---------------------|---------------|--------------|---------------|
| Chester CDT | 354 (12.1%) | 53 (4.0%) | 1,556 (10.6%) |
| Kirkby CDT | 61 (2.1%) | 37 (2.8%) | 323 (2.2%) |
| The Maryland Centre | 410 (14.0%) | 285 (21.6%) | 1,399 (9.5%) |
| Response (Wirral) | 1,235 (42.1%) | 523 (39.7%) | 6,489 (44.0%) |
| South Cheshire CDT | 78 (2.7%) | 66 (5.0%) | 305 (2.1%) |
| South Knowsley CDT | 224 (7.6%) | 127 (9.6%) | 1,197 (8.1%) |
| South Sefton MDC | 143 (4.9%) | 77 (5.8%) | 618 (4.2%) |
| Southport MDC | 317 (10.8%) | 78 (5.9%) | 2,668 (18.1%) |
| St Helens CDT | 111 (3.8%) | 73 (5.5%) | 182 (1.2%) |
| Total (100%) | 2,933 | 1,319 | 14,737 |

Data are for all users and visits, including multiple counts of individuals who presented at more than one agency

Table 4.2 shows the agency profile for all users, new users and contacts in 2000. As in last year, Response in Wirral was the Outreach service that had the most users and contacts, 1,235 and 6,489 respectively. It also saw 523 new clients, almost twice as many as any other service. The large decrease reported by South Cheshire CDT has been discussed previously. Conversely, 143 individuals contacted South Sefton MDC Outreach compared to 95 in 1999, an increase of more than 50% which can be attributed to an additional Outreach worker and improved working practices. An increase in the number of users was also reported by The Maryland Centre. Despite the large reduction in the number of users seen at South Cheshire CDT, this service reported the largest number of new users when expressed as a percentage of all users. A very small number of existing clients of South Cheshire CDT therefore remained in contact with Outreach services in this year. The overall contact rate (number of contacts per user) was 5.0, slightly higher than last year (4.6) and ranged from 1.6 at St Helens CDT to 8.4 at Southport MDC.

Table 4.3 All Users Reported by Outreach Services in 2000 by Sex and Health Authority of Reporting Agency

| Health Authority | All Users | | | New Users | | |
|----------------------|----------------------|----------------------|--------------|--------------------|--------------------|--------------|
| | Female | Male | Total (100%) | Female | Male | Total (100%) |
| Liverpool | 285 (88.2%) | 38 (11.8%) | 323 | 224 (87.2%) | 33 (12.8%) | 257 |
| Sefton | 86 (29.8%) | 203 (70.2%) | 289 | 45 (33.1%) | 91 (66.9%) | 136 |
| South Cheshire | 193 (52.3%) | 176 (47.7%) | 369 | 77 (70.6%) | 32 (29.4%) | 109 |
| St Helens & Knowsley | 112 (31.6%) | 242 (68.4%) | 354 | 66 (30.3%) | 152 (69.7%) | 218 |
| Wirral | 727 (61.9%) | 447 (38.1%) | 1,174 | 244 (48.6%) | 258 (51.4%) | 502 |
| Total (100%) | 1,403 (55.9%) | 1,106 (44.1%) | 2,509 | 656 (53.7%) | 566 (46.3%) | 1,222 |

Data are for all users and visits, including multiple counts of individuals who presented at more than one agency

Data regarding the sex of users seen by Outreach in each health authority are given in Table 4.3. Sex was recorded for 85.5% of users. This percentage was similar to 1999 (85.9%) and greater than the previous two years (1997; 81.6%, 1998; 76.8%). Sex was

recorded for 92.6% of new users, a slight decrease from 1999 when sex was recorded in 94.6% of clients. Outreach services saw the greatest proportion of female users of all services reporting to the Drug Monitoring Unit. The percentage of all and new users that were female decreased this year at 55.9% and 53.7% respectively compared to 1999 figures for females of 65.6% of all users and 65.0% of new users. However it is still an increase from 1996 when 41.8% of all users were female. The percentage of new female users has also risen since 1998 when the percentage of new female users was 46.0%. Wirral Outreach services have seen a considerable increase in the number of male contacts since last year with the percentage of male users rising from 15.6% to 38.1% and the percentage of new male users rising from 3.2% to 51.4%. The overall male to female ratios were 1:1.3 and 1:1.2 for all users and new users respectively. Liverpool Outreach services specifically target female users, particularly prostitutes and had the largest male to female ratio at 1:7.5 of all users and 1:6.8 of new users. This compares to Sefton and St Helens & Knowsley where a greater percentage of clients are males.

Table 4.4 shows the reported main drug for all users and new users, broken down by health authority. Main drug is recorded only on first contact with a client and therefore may change over time without being reflected in later reports. The figures for new users better reflect the current patterns of drugs being used by those accessing Outreach services. Recording of main drug by Outreach services has improved greatly since last year with data being available for 68.5% of all users and 73.9% of new users. Heroin remains the main drug of use for all users (51.7%) and new users (45.6%). The percentage of users reporting heroin as their main drug varied considerably across health authorities. Liverpool had the highest percentage of heroin use with 75.4% and 72.1% of all users and new users respectively indicating heroin as their primary drug. The percentage of users reporting a drug other than heroin as their main drug was comparatively low in Liverpool. In South Cheshire, heroin was the main drug of use for 41.2% of all users and only 27.5% of new users. The number of users citing crack as their main drug has increased from 27 in 1999 to 57 in 2000 and 18 in 1999 to 40 in 2000 for all users and new users respectively. The largest increase has been in Liverpool. In Liverpool in 1999, 0.9% of all users and 1.6% of new users cited crack as their main drug. These figures compare with this year where crack was cited as the main drug by 7.6% users and 8.7% new users. Crack use in South Cheshire remains relatively high this year and of most concern is that 27.5% of all new users in this health authority reporting crack as their main drug. Amphetamine use in Sefton remains higher than in other health authorities. The percentage of users reporting anabolic steroid use remains low across all health authorities.

Table 4.4 All Users and New Users Reported by Outreach Services in 2000 by Drug

| Health Authority | | Amphetamine | Anabolic Steroids | Cocaine | Crack | Ecstasy | Heroin |
|------------------|------------------|--------------------|-------------------|-------------------|-------------------|------------------|----------------------|
| Liverpool | All Users | 1 (0.4%) | 1 (0.4%) | 7 (2.7%) | 20 (7.6%) | / | 199 (75.4%) |
| | New Users | 1 (0.5%) | 1 (0.5%) | 7 (3.2%) | 19 (8.7%) | / | 158 (72.1%) |
| Sefton | All Users | 54 (20.1%) | 1 (0.4%) | 20 (7.4%) | 1 (0.4%) | 2 (0.7%) | 134 (49.8%) |
| | New Users | 25 (19.8%) | 1 (0.8%) | 13 (10.3%) | 1 (0.8%) | / | 44 (34.9%) |
| South | All Users | 46 (17.9%) | 8 (3.1%) | 5 (1.9%) | 23 (8.9%) | 10 (3.9%) | 106 (41.2%) |
| Cheshire | New Users | 4 (10.0%) | 3 (7.5%) | 3 (7.5%) | 11 (27.5%) | 1 (2.5%) | 11 (27.5%) |
| St Helens | All Users | 30 (9.5%) | 4 (1.3%) | 18 (5.7%) | 5 (1.6%) | / | 160 (50.5%) |
| & Knowsley | New Users | 22 (11.1%) | 4 (2.0%) | 16 (8.0%) | 2 (1.0%) | / | 100 (50.3%) |
| Wirral | All Users | 41 (4.5%) | / | 19 (2.1%) | 8 (0.9%) | 37 (4.0%) | 439 (48.7%) |
| | New Users | 27 (6.8%) | / | 7 (1.8%) | 7 (1.8%) | 5 (1.3%) | 134 (33.8%) |
| Total | All Users | 172 (8.6%) | 14 (0.7%) | 69 (3.4%) | 57 (2.8%) | 49 (2.4%) | 1,038 (51.7%) |
| | New Users | 79 (8.1%) | 9 (0.9%) | 46 (4.7%) | 40 (4.1%) | 6 (0.6%) | 447 (45.6%) |

Data are for all users and visits, including multiple counts of individuals who presented at more

Table 4.5 All Users and New Users Reported by Outreach Services in 2000 by Health Authority of Reporting Agency and Client Type

| | | Health Authority | | | | | |
|-------------------------------|------------------|------------------|-------------|----------------|----------------------|--------------|--------------|
| Client Type | | Liverpool | Sefton | South Cheshire | St Helens & Knowsley | Wirral | Total |
| Injecting Drug User | All Users | 24 (7.8%) | 150 (52.3%) | 152 (43.3%) | 154 (43.9%) | 279 (27.1%) | 759 (32.6%) |
| | New Users | 23 (9.5%) | 68 (50.0%) | 20 (19.0%) | 84 (39.1%) | 70 (14.6%) | 265 (22.5%) |
| Injecting Prostitute | All Users | 81 (26.4%) | / | 1 (0.3%) | 2 (0.6%) | 57 (5.5%) | 141 (6.1%) |
| | New Users | 59 (24.3%) | / | / | / | 10 (2.1%) | 69 (5.9%) |
| Non-Injecting Drug User | All Users | 39 (12.7%) | 132 (46.0%) | 94 (26.8%) | 173 (49.3%) | 475 (46.1%) | 913 (39.3%) |
| | New Users | 34 (14.0%) | 66 (48.5%) | 16 (15.2%) | 120 (55.8%) | 248 (51.9%) | 484 (41.1%) |
| Other Sexually Active Person | All Users | 7 (2.3%) | 1 (0.3%) | 19 (5.4%) | / | 12 (1.2%) | 39 (1.7%) |
| | New Users | 5 (2.1%) | / | 4 (3.8%) | / | 12 (2.5%) | 21 (1.8%) |
| Non-Injecting Prostitute | All Users | 148 (48.2%) | 2 (0.7%) | 78 (22.2%) | 5 (1.4%) | 83 (8.1%) | 316 (13.6%) |
| | New Users | 117 (48.1%) | / | 65 (61.9%) | / | 43 (9.0%) | 225 (19.1%) |
| Other | All Users | 8 (2.6%) | 2 (0.7%) | 7 (2.0%) | 17 (4.8%) | 124 (12.0%) | 158 (6.8%) |
| | New Users | 5 (2.1%) | 2 (1.5%) | / | 11 (5.1%) | 95 (19.9%) | 113 (9.6%) |
| Total (100% within HA) | All Users | 307 | 287 | 351 | 351 | 1,030 | 2,326 |
| | New Users | 243 | 136 | 105 | 215 | 478 | 1,177 |

Data are for all users and visits, including multiple counts of individuals who presented at more than one agency

Table 4.5 shows client type broken down by health authority as recorded on the individuals' first contact with services. As with main drug of use, client type may change over time e.g. from injecting drug user to non-injecting drug user, and so details of new users may more accurately reflect the types of client seen by Outreach workers. Client type was recorded for 79.3% of all users and 89.2% of new users, an increase from last years figures of 68.0% and 86.3% respectively. The main client type across all health authorities was non-injecting drug user (39.3% of all users, 41.1% of new users) followed by injecting drug user (32.6% of all users, 22.5% of new users). However differences across the health authorities exist. Liverpool Outreach includes work specifically targeted at contacting prostitutes. When injecting and non-injecting prostitutes were considered in combination, they constitute 74.6% of all users and 72.4% of new users when client type

and Health Authority of Reporting Agency

| Methodone | Sedatives | Solvents | Various Drugs | Other | Total (100%) |
|--------------------|------------------|-----------------|--------------------|-------------------|-----------------|
| 12 (4.5%) | / | / | 24 (9.1%) | | 264 |
| 10 (4.6%) | / | / | 23 (10.5%) | / | 219 |
| 7 (2.6%) | 1 (0.4%) | 1 (0.4%) | 48 (17.8%) | | 269 |
| 1 (0.8%) | / | 1 (0.8%) | 40 (31.7%) | / | 126 |
| 6 (2.3%) | / | / | 53 (20.6%) | | 257 |
| 1 (2.5%) | / | / | 6 (15.0%) | / | 40 |
| 11 (3.5%) | 1 (0.3%) | 2 (0.6%) | 80 (25.2%) | 6 (1.9%) | 317 |
| 8 (4.0%) | 1 (0.5%) | 1 (0.5%) | 42 (21.1%) | 3 (1.5%) | 199 |
| 85 (9.4%) | 13 (1.4%) | 1 (0.1%) | 204 (22.6%) | 55 (6.1%) | 902 |
| 41 (10.3%) | 4 (1.0%) | / | 129 (32.5%) | 43 (10.8%) | 397 |
| 121 (6.0%) | 15 (0.7%) | 4 (0.2%) | 409 (20.4%) | 61 (3.0%) | 2,009 |
| 61 (6.2%) | 5 (0.5%) | 2 (0.2%) | 240 (24.5%) | 46 (4.7%) | 981 |

than one agency

was recorded. In all other health authorities contacts with prostitutes are considerably less. Contacts with 'other sexually active people' (which includes gay and bisexuals) have decreased from 12.0% in 1999 to 1.7% in 2000 (all users) and from 19.6% in 1999 to 1.8% in 2000 (new users).

Table 4.6 All Users and New Users Reported by Outreach Services in 2000 by Health Authority of Reporting Agency and How They Met the Outreach Worker

| Client Type | | Health Authority | | | | | Total |
|-----------------------------------|------------------|------------------|-------------|-------------------|-------------------------|-------------|--------------|
| | | Liverpool | Sefton | South Cheshire | St Helens & Knowsley | Wirral | |
| Approached directly by client | All Users | 36 (11.1%) | 89 (31.2%) | 15 (4.1%) | 98 (28.9%) | 65 (16.9%) | 303 (17.9%) |
| | New Users | 35 (13.8%) | 30 (22.2%) | 2 (1.9%) | 71 (35.9%) | 58 (20.2%) | 196 (20.0%) |
| Introduced by agency worker | All Users | 7 (2.2%) | 31 (10.9%) | 14 (3.9%) | 92 (27.1%) | 11 (2.9%) | 155 (9.1%) |
| | New Users | 7 (2.8%) | 13 (9.6%) | 5 (4.8%) | 62 (31.3%) | 10 (3.5%) | 97 (9.9%) |
| Introduced by another client | All Users | 5 (1.5%) | 107 (37.5%) | 244 (67.2%) | 94 (27.7%) | 204 (53.0%) | 654 (38.6%) |
| | New Users | 5 (2.0%) | 63 (46.7%) | 35 (32.3%) | 39 (19.7%) | 155 (54.0%) | 297 (30.4%) |
| Introduced by drug dealer | All Users | / | 3 (1.1%) | 8 (2.2%) | / | 9 (2.3%) | 20 (1.2%) |
| | New Users | / | 3 (2.2%) | 1 (1.0%) | / | 9 (3.1%) | 13 (1.3%) |
| Made direct approach to client | All Users | 270 (83.6%) | 52 (18.2%) | 73 (20.1%) | 48 (14.2%) | 96 (24.9%) | 539 (31.8%) |
| | New Users | 206 (81.4%) | 26 (19.3%) | 62 (59.0%) | 26 (13.1%) | 55 (19.2%) | 375 (38.3%) |
| Old client * | All Users | 5 (1.5%) | 3 (1.1%) | 9 (2.5%) | 7 (2.1%) | / | 24 (1.4%) |
| Total | All Users | 323 | 285 | 363 | 339 | 385 | 1,695 |
| (100% within HA) | New Users | 253 | 135 | 105 | 198 | 287 | 978 |

Data are for all users and visits, including multiple counts of individuals who were contacted by more than one agency

*Old clients are those who were first in contact with Outreach services before this monitoring system was implemented and method of meeting is not known. New clients cannot be of this type

Table 4.6 shows how the initial contact was made between the client and the Outreach worker, broken down by health authority of reporting agency. The most commonly reported method of client and Outreach worker meeting was by the Outreach worker being introduced by another client (38.6%). The second most common method was

the Outreach worker making a direct approach to the client (31.8%). However there were considerable differences across health authorities with Outreach workers in Liverpool making a direct approach to clients in 83.6% of all cases. This reflects the nature of the work of Liverpool Outreach that is targeted mainly at prostitutes.

Table 4.7 In Receipt of a Prescription? All Users, New Users and Contacts Reported by Outreach Services in 2000 by Health Authority of Reporting Agency

| Health Authority | Receiving Prescription? | | | | | |
|----------------------|-------------------------|--------------------|--------------------|--------------------|----------------------|----------------------|
| | All Users | | New Users | | Contacts | |
| | No | Yes | No | Yes | No | Yes |
| Liverpool | 290 (90.6%) | 30 (9.4%) | 232 (90.6%) | 24 (9.4%) | 921 (89.5%) | 108 (10.5%) |
| Sefton | 231 (80.5%) | 56 (19.5%) | 116 (85.3%) | 20 (14.7%) | 1,218 (76.7%) | 371 (23.3%) |
| South Cheshire | 291 (80.2%) | 72 (19.8%) | 103 (94.5%) | 6 (5.5%) | 1,013 (66.7%) | 505 (33.3%) |
| St Helens & Knowsley | 240 (68.8%) | 109 (31.2%) | 169 (79.3%) | 44 (20.7%) | 821 (53.1%) | 725 (46.9%) |
| Wirral | 576 (55.8%) | 457 (44.2%) | 320 (71.7%) | 126 (28.3%) | 2,695 (44.7%) | 3,331 (55.3%) |
| Total | 1,628 (69.2%) | 724 (30.8%) | 940 (81.0%) | 220 (19.0%) | 6,668 (57.0%) | 5,040 (43.0%) |

Data are for all users and visits, including multiple counts of individuals who presented at more than one agency

Individuals were asked on their first contact with an Outreach worker whether they were receiving a prescription as a treatment for drug dependency. This may change over time without being reflected in later reports and so details from new users may give the most reliable data. The proportion of all users receiving a prescription has decreased slightly over the last three years from 30.5% in 1997 and 1998 to 27.3% in 1999 but has risen in 2000 to 30.8%. The proportion of new users receiving a prescription is lower and has remained relatively stable, increasing slightly from 17.3% in 1998 to 19.0% this year. Like last year, the proportion of users receiving a prescription in Wirral remains higher than other health authorities (all users; 44.2%). The proportion of new users that are receiving a prescription in Wirral has remained relatively stable since last year, whereas the proportion of new users receiving a prescription in Sefton and St Helens & Knowsley has decreased (Sefton; 23.4% in 1999, 14.7% in 2000, St Helens & Knowsley; 33.4% in 1999, 20.7% in 2000). Those receiving prescriptions made more contacts on average than those not receiving a prescription, 7.0 and 4.1 respectively.

Table 4.8 Attending SES? All Users, New Users and Contacts Reported by Outreach Services in 2000 by Health Authority of Reporting Agency

| Health Authority | Attending SES? | | | | | |
|----------------------|----------------------|--------------------|--------------------|--------------------|----------------------|----------------------|
| | All Users | | New Users | | Contacts | |
| | No | Yes | No | Yes | No | Yes |
| Liverpool | 281 (88.6%) | 36 (11.4%) | 226 (89.0%) | 28 (11.0%) | 839 (82.3%) | 180 (17.7%) |
| Sefton | 203 (70.7%) | 84 (29.3%) | 95 (69.9%) | 41 (30.1%) | 1,130 (71.1%) | 459 (28.9%) |
| South Cheshire | 339 (93.6%) | 23 (6.4%) | 104 (95.4%) | 5 (4.6%) | 1,407 (92.9%) | 107 (7.1%) |
| St Helens & Knowsley | 266 (78.5%) | 73 (21.5%) | 170 (84.2%) | 32 (15.8%) | 957 (63.4%) | 552 (36.6%) |
| Wirral | 710 (79.3%) | 185 (20.7%) | 301 (88.3%) | 40 (11.7%) | 4,123 (75.0%) | 1,377 (25.0%) |
| Total | 1,799 (81.8%) | 401 (18.2%) | 896 (86.0%) | 146 (14.0%) | 8,456 (76.0%) | 2,675 (24.0%) |

Data are for all users and visits, including multiple counts of individuals who presented at more than one agency

Table 4.8 shows whether, at the time of first contact with an Outreach worker, an individual was also attending an SES, by health authority of reporting agency. This question is asked at the first time of contact so any changes since this initial contact will not be reflected in these data. These data were available for 75.0% of all users and 79.0% of new users. Considering all users and new users respectively, 18.2% and 14.0% were not in contact with SES. These proportions have increased slightly from 1999 (all users; 15.2%, new users; 10.9%). Sefton Health Authority had the highest proportion of new users also in contact with SES, 30.1%. The contact rate of those who attended SES in addition to having contact with the Outreach worker was greater than those who were in contact with Outreach but were not accessing SES, 6.7 and 4.7 respectively.

Table 4.9 All Users Reported by Outreach Services in 2000 by Setting of Meeting Between Outreach Worker and Client by Health Authority of Reporting Agency

| | Health Authority | | | | | Total |
|---------------------------------------|------------------|---------------|----------------|----------------------|---------------|---------------|
| | Liverpool | Sefton | South Cheshire | St Helens & Knowsley | Wirral | |
| Advice / Info. Centre | 1 (0.1%) | 9 (0.3%) | / | / | 62 (1.0%) | 72 (0.5%) |
| Car | / | 3 (0.1%) | 174 (9.4%) | 7 (0.5%) | / | 184 (1.3%) |
| Criminal Justice Service ¹ | / | 49 (1.5%) | 1 (0.1%) | 33 (2.1%) | 57 (0.9%) | 140 (1.0%) |
| Drug Service | 4 (0.3%) | 6 (0.2%) | / | 299 (19.2%) | 122 (1.9%) | 431 (3.0%) |
| Education ² | / | / | / | 10 (0.6%) | / | 10 (0.1%) |
| GP / Health Centre | / | 29 (0.9%) | 9 (0.5%) | 12 (0.8%) | / | 50 (0.3%) |
| Gym | / | / | 10 (0.5%) | 1 (0.1%) | / | 11 (0.1%) |
| Hospital | 1 (0.1%) | 6 (0.2%) | 9 (0.5%) | 11 (0.7%) | 41 (0.6%) | 68 (0.5%) |
| Home | 1 (0.1%) | 1,199 (37.7%) | 966 (52.0%) | 780 (50.2%) | 4,107 (65.1%) | 7,053 (49.3%) |
| Hostel ³ | / | 244 (7.7%) | 14 (0.8%) | 16 (1.0%) | / | 274 (1.9%) |
| Massage Parlour | 4 (0.3%) | 2 (0.1%) | 309 (16.6%) | 1 (0.1%) | 15 (0.2%) | 331 (2.3%) |
| Public Place ⁴ | 106 (7.6%) | 180 (5.7%) | 3 (0.2%) | 14 (0.9%) | 23 (0.4%) | 326 (2.3%) |
| Syringe Exchange | 95 (6.8%) | 4 (0.1%) | / | 2 (0.1%) | / | 101 (0.7%) |
| Shooting Gallery ⁵ | / | 705 (22.2%) | / | 15 (1.0%) | / | 720 (5.0%) |
| Street | 1,185 (84.8%) | 704 (22.1%) | 344 (18.5%) | 339 (21.8%) | 1,813 (28.7%) | 4,385 (30.7%) |
| Other | / | 40 (1.3%) | 19 (1.0%) | 15 (1.0%) | 70 (1.1%) | 144 (1.0%) |
| Total (100%) | 1,397 | 3,180 | 1,858 | 1,555 | 6,310 | 14,300 |

Data are for all users and visits, including multiple counts of individuals who presented at more than one agency. ¹Police, probation, prison, court etc ²School, college, university etc ³Including YMCA, shelter, guest house, hotel ⁴Church, youth club, café, bus, railway station, community centre etc ⁵A communal injecting arena

Table 4.9 reports the setting of the contact between the user and the Outreach worker. This information was recorded for almost all clients both this year (97.0%) and last (98.5%). There is considerable variation between health authorities in respect to where the contact was made but overall, the home (49.3%) and the street (30.7%) were the settings for the highest proportion of contacts. In Liverpool, 84.8% of contacts were made on the streets and this reflects the nature of Outreach work in this health authority, being predominantly targeted at prostitutes. In all remaining health authorities the main site for contact was at home. Considering Sefton Health Authority, a considerable number of contacts were made at “shooting galleries” whereas a large proportion of Outreach contacts in St Helens & Knowsley were made at drug services.

Table 4.9 shows that few contacts are made at gyms and Table 4.4 shows that few Outreach clients cited anabolic steroids as their main drug of use. However, in 2000, 32.6% of all users and 44.9% of new users at SES reported anabolic steroids as their main drug (Table 2.6a). This represented a rise in the reporting of anabolic steroid use since 1999 when 28.3% and 37.4% of all users and new users respectively reported use of this drug. Gyms may be a good setting to make contact with anabolic steroid users.

SECTION 7

MULTI-AGENCY-TYPE VISITORS



MULTI-AGENCY-TYPE VISITORS

Introduction

This section of the report outlines the number of individuals who visited more than one type of agency in Merseyside or Cheshire during 2000. This analysis depends on the provision of attributor data (initials, date of birth and sex), and three service types (Pharmacy and Agency Based SES and Specialist Drug Services) collect this. Attributor data for Pharmacy was incomplete for some users meaning they could not be included in Multi-Agency analyses. As a result the number of users said to be accessing Pharmacy here is lower than the number stated in the Pharmacy chapter.

Figure 5.1 All Users in Contact with Specialist Drug Services, Pharmacies and Syringe Exchange Schemes in 2000



*SDS = Specialist Drugs Service SES = Agency Based Syringe Exchange Scheme
Pharmacy = Pharmacy Based Syringe Exchange Scheme*

Of the 8,173 individuals that were reported by SDS in 2000, 1,204 (14.7%) had also attended Pharmacies and 1,088 (13.3%) had attended SES. Therefore a total of 23.0% of those in contact with SDS are also in contact with some form of syringe exchange. A total of 414 (5.0%) individuals that had been reported by SDS had attended both Pharmacies and SES. This indicates that a number of individuals that are in contact with SDS and receiving treatment are probably continuing to inject and the 23.0% may not represent *all* those for whom this situation is true. A key objective of the Government's anti-drug strategy is to reduce the number of users that inject. The proportion of those in contact with services that also attend either Pharmacy or SES has changed little since 1999.

Only 606 individuals were seen at both Pharmacy and SES and represents only 8.1% of all those that attended a syringe exchange services. This suggests that Pharmacy and Agency SES attract a different population of drug users and offer a complementary service.

SECTION 8

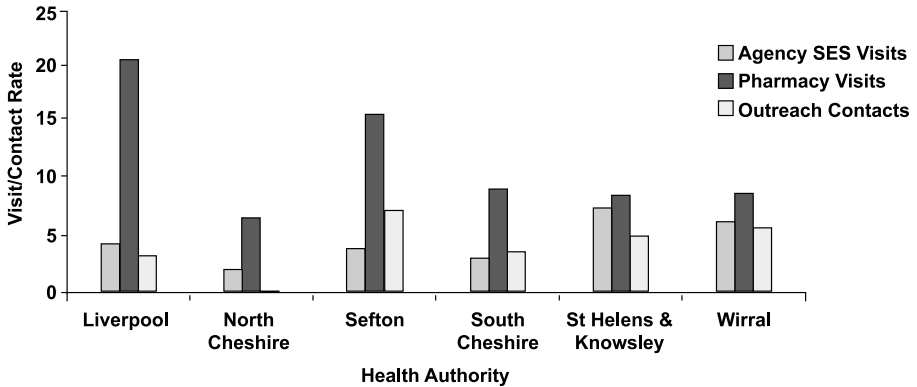
Appendix 1



APPENDIX I

Comparison of Visit and Contact Rates by Agency Type

Appendix I shows the comparison between the visit/contact rates (average number of visits or contacts per user per year) at the different services (agency and pharmacy based Syringe Exchange Schemes and Outreach services) across the Merseyside and Cheshire Health Authorities. In each health authority, Pharmacy reports the highest visit rates with rates being as high as 21.4 and 17.0 in Liverpool and Sefton respectively. The visit rate for SES varied from 2.8 to 7.4 and for Outreach varied from 3.4 to 7.1. As in 1999 there was no Outreach work undertaken in North Cheshire in 2000.



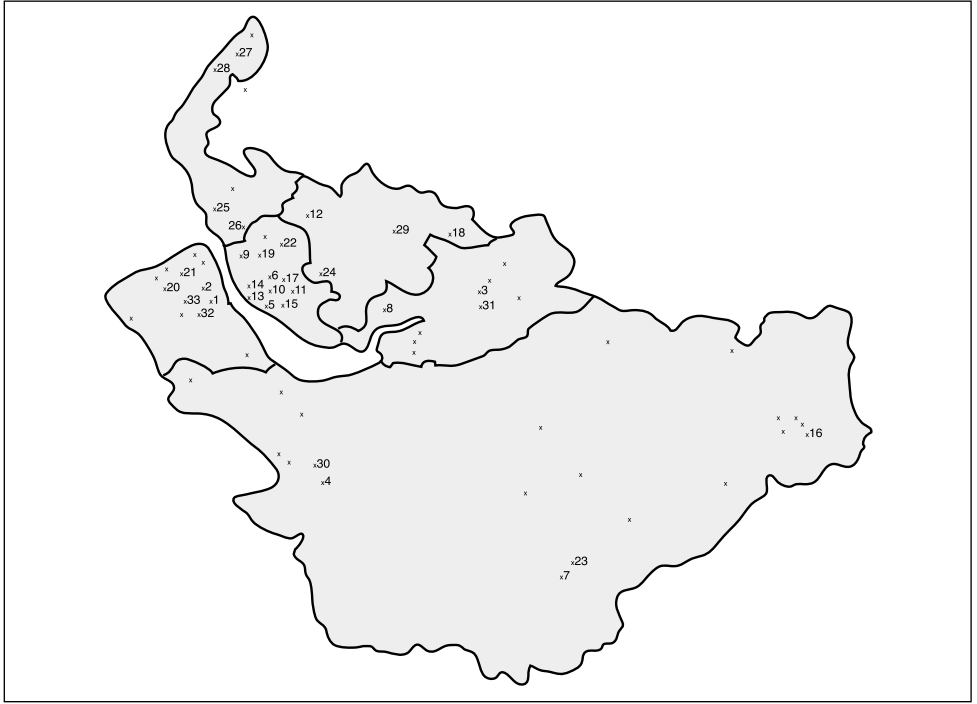
SECTION 9

Appendix II



APPENDIX II

Map of Agencies Reporting to the Drug Monitoring Unit



- | | |
|---|------------------------------------|
| 1. ARCH Initiatives, residential | 18. Newton-le-Willows CDT |
| 2. ARCH Initiatives | 19. North Liverpool CDT |
| 3. ARCH Initiatives, North Cheshire | 20. Phoenix House |
| 4. Chester CDT | 21. Response |
| 5. Dare to Care | 22. SHADO |
| 6. Drug Free | 23. South Cheshire CDT |
| 7. Dual Action Response Team | 24. South Knowsley CDT |
| 8. Halton CDT | 25. South Sefton CDT |
| 9. Independence Initiative | 26. South Sefton MDC |
| 10. The Integrated Care Team | 27. Southport DDU |
| 11. The Kevin White Unit | 28. Southport MDC |
| 12. Kirkby CDT | 29. St Helens CDT |
| 13. Liverpool Bail Support Scheme | 30. Turning Point |
| 14. Liverpool DDU | 31. Warrington CDT |
| 15. Liverpool MDC | 32. Wirral Drugs Service |
| 16. Macclesfield CDT | 33. Wirral HIV and AIDS Prevention |
| 17. Maryland (now known as The Gateway) | |

x Pharmacy Based Syringe Exchange Schemes

SECTION 10

Appendix III



APPENDIX III

Locations of Agencies Reporting to the Drug Monitoring Unit

KEY: The three letter code indicates the types of services offered during 2000, as follows:

SES : Agency Based Syringe Exchange Services

SDS : Specialist Drug Services

YOU: Services for young people

OUT : Outreach Services

RES : Residential detox. or rehabilitation

ARCH Initiatives

Birchwood
23 - 25 Balls Road
Birkenhead
Wirral
L41 6HH
SDS; RES

ARCH Initiatives

1st Floor, Argyle Health
Centre
Oliver Street East
Birkenhead
Wirral
L41 6HH
SDS

ARCH Initiatives (North Cheshire)

45 Wilson Patten Street
Warrington
WA1 1PG
SDS

Chester CDT

Mill House
Russell Street
Chester
CH3 5AL
SDS; SES; OUT

Dare to Care

112 Mill Street
Dingle
Liverpool
L8 5UB
SDS

Drug Free

64 - 66 Islington
Liverpool
L3 8LG
SDS

Dual Action Response Team (DART)

Substance Misuse Service
Mid Cheshire Hospitals
Breedon House
Edleston Road
Crewe
CW2 7EA
SDS; YOU

Ellesmere Port CDT

6 Shrewsbury Road
Ellesmere Port
Wirral
**SES (included in Chester
CDT figures); OUT (included
in Chester CDT figures)**

Halton CDT

74 Victoria Road
Widnes
WA8 7RA
SDS; SES

Independence Initiative

64 - 68 Balliol Road
Bootle
Liverpool
L20 7SD
SDS

The Integrated Care Team

3 - 5 Rodney Street
Liverpool
L1 9ED
SDS

The Kevin White Unit

Sefton General Hospital
Smithdown Road
Liverpool
L15 2HE
SDS; RES

Kirkby CDT

The Clark Centre
Cherryfield Drive
Kirkby
Merseyside
L32 8SE
SDS; SES; OUT

Liverpool Bail Support Scheme

Liverpool MDC
27 Hope Street
Liverpool
L1 9BQ
SDS

Liverpool DDU

Hope House
26 Rodney Street
Liverpool
L1 2TQ
SDS

Liverpool MDC

27 Hope Street
 Liverpool
 L1 9BQ
SDS

Macclesfield CDT

Bridge House
 15 Brook Street
 Macclesfield
 Cheshire
 SK11 6AA
SDS; SES

**Maryland (now known as
The Gateway)**

8 Maryland Street
 Liverpool
 L1 9DE
SES

Newton-le-Willows CDT

29 Queen Street
 Newton-le-Willows
 WA12 9AS
SDS; SES

North Liverpool CDT

The Outpost
 Queens Drive Family Centre
 Moore Lane
 Walton
 Liverpool
 L4 6SO
SDS; SES

Phoenix House

Upton Road
 Bidston
 Wirral
 L34 7QF
SDS; RES

Response

The Callister Centre
 19 Argyll Street
 Birkenhead
 CH41 1AD
OUT

SHADO

Family Support Centre
 120 Stonebridge Lane
 Croxteth
 Liverpool
 L11 9AZ
SDS

South Cheshire CDT

67 - 69 Eddleston Road
 Crewe
 Cheshire
 CW2 7HP
SDS; SES; OUT

South Knowsley CDT

Skelton House
 Lathom Road
 Huyton village
 L36 9FH
SDS; SES; OUT

South Sefton CDT

18 Great George's Road
 Waterloo
 Liverpool
 L22 1RB
SDS; SES

South Sefton MDC

482 Stanley Road
 Bootle
 Merseyside
 L20 5AF
SES; OUT

Southport DDU

46 Houghton Street
 Southport
 Merseyside
 PR9 0PQ
SDS

Southport MDC

46 Houghton Street
 Southport
 Merseyside
 PR9 0PQ
SDS; SES; OUT

St Helens CDT

46 - 48 Cloughton Street
 St Helens
 Merseyside
 WA10 1SN
SDS; SES; OUT

Turning Point

27 Hoole Road
 Chester
 CH2 3NH
SDS; RES

Warrington CDT

9 Wilson Patten Street
 Warrington
 WA1 1PG
SDS; SES

Wirral Drugs Service

St Catherine's Hospital
 Church Road
 Tranmere
 Wirral
 L42 0LQ
SDS

**Wirral HIV & AIDS
Prevention**

The Lodge
 St Catherine's Hospital
 Church Road
 Tranmere
 Wirral
 L42 0LQ
SES

SECTION 11

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