Trends in specialist alcohol and other drug treatment utilisation: Analysis of 10 years of Victorian treatment service data

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Background

Alcohol and drug-related harms are major public health issues, and treatment for substance use disorders is an important part of addressing these harms. An assessment of trends in alcohol and other drug (AOD) treatment utilisation can provide an understanding of changing needs within the community and assist in planning for the future.

This piece of work forms part of a larger project aimed at assessing demand for AOD treatment in Victoria. This poster presents findings from the Victorian AOD treatment database (ADIS) over 10 years until 2014.

Methods

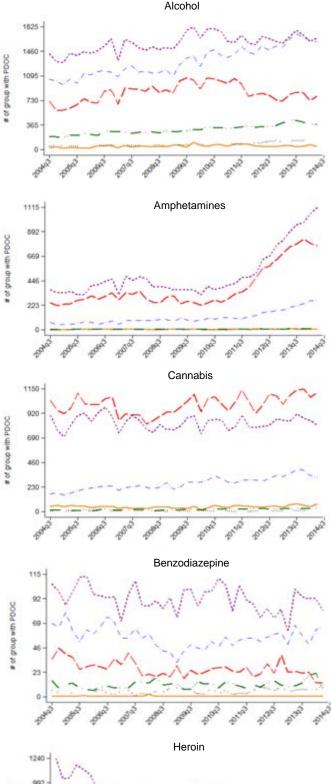
ADIS is a database of information from state government funded AOD treatment agencies. Information was included in the analyses based on the termination date of each episode of care (EOC). Only EOC for clients seeking treatment for their own drug use were included in these analyses, thereby excluding family members and significant others. Drug types were identified based on the primary drug of concern (i.e. the presenting drug for treatment). Results are presented as raw numbers and/or percentages.

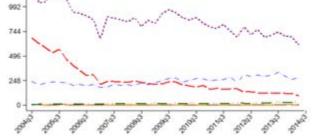
Results

Between July 2004-June 2014, there were 145,260 clients who completed at least one episode of AOD treatment and a total of 505,400 EOC completed (average of 3.5 EOC per client over the 10 year period). From a total of 45,933 EOC in 2004/05, there was a 32% increase to 60,735 EOC in 2013/14. Similarly, there has been a 31% increase in the number of clients treated, from 23,890 in 2004/05 to 31,211 in 2013/14. Over the 10 years, the percentage of clients receiving more than two EOC within a financial year increased from 21%-24%.

The gender distribution of clients seeking treatment has remained stable over the 10 years, with two thirds of clients being male (67%-70%). The proportion of clients 40-54 years has increased over time. The proportion of clients identified as Aboriginal and Torres Strait Islanders (ATSI) has also remained relatively stable, ranging from 8%-10% over the 10 years. The split between metropolitan Melbourne and regional clients has changed slightly over the 10 years, with the proportion of clients from regional areas ranging from 34%-38% of all clients.







Gender:

· Similar numbers of males and females seeking treatment for benzodiazepines, pharmaceutical opioids, other pharmaceuticals and other druas.

• For both males and female, there has been a steady decline in the number of clients seeking treatment for heroin, a rise for amphetamines (since 2011), and a steady rise in treatment seeking for alcohol (particularly for males), while benzodiazepines, cannabis, pharmaceutical opioids, and other pharmaceuticals remained relatively stable.

 Prior to mid 2011, males were more likely to seek treatment for alcohol. Since this time male and female proportions were similar.

· Females were more likely to seek treatment for benzodiazepines, pharmaceutical opioids and other pharmaceuticals.

Males were more likely to seek treatment for amphetamines.

Age:

Overall, the 25-39 years age group has consistently been the largest group seeking AOD treatment; however, there was some variation across drug types

The figures displayed shows:

• Alcohol clients consisted largely of 25-39 & 40-54 year olds. For most age groups, the number of clients has been rising steadily; however, there has been a decline in 15-24 year olds since the end of 2011.

• The number of clients seeking treatment for heroin has reduced, particularly among 15-39 year olds.

• The number of clients seeking treatment for amphetamines has substantially increased since the end of 2010, dominated by 25-39 year olds and 15-24 year olds.

• The 25-39 year olds were the largest group seeking treatment for benzodiazepines, pharmaceutical opioids and other pharmaceuticals, while the 15-24 year olds were the largest group seeking treatment for cannabis.

• The oldest age groups (55 years and over) were the most likely to seek treatment for alcohol.

 The 15-39 year olds were most likely to seek treatment for amphetamines, while those under 25 years were the most likely to seek treatment for cannabis.

Location:

Overall, there were more metropolitan Melbourne clients than regional clients, which reflect the general distribution of the population in Victoria. For most drugs of concern, there were more metropolitan Melbourne clients seeking treatment; however, there were higher numbers of regional clients seeking treatment for pharmaceutical opioids (since 2011) and other pharmaceuticals.

• Until 2014, regional clients were more likely to seek treatment for alcohol, compared with clients residing in metropolitan Melbourne.

· Regional clients were more likely to seek treatment for cannabis, pharmaceutical opioids and other pharmaceuticals, while metropolitan Melbourne clients were more likely to seek treatment for amphetamines and heroin

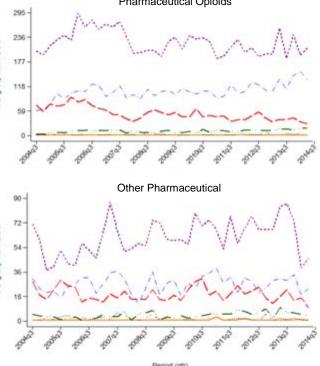
· Metropolitan Melbourne and regional clients had similar likelihood of seeking treatment for benzodiazepines.

Primary drug of concern (PDOC)

Alcohol remained the primary reason for seeking treatment across the 10 years, ranging from 42%-51% of clients seeking treatment during a given financial year.

- Numbers of clients seeking treatment for alcohol steadily increased.
- · Number of completed EOC for alcohol increased across the decade.
- The 2nd most common primary drug of concern was cannabis, which remained relatively stable over the decade.
- Number of clients seeking treatment for amphetamines has risen markedly since 2011, as have number of EOC.
- · Heroin as a drug of concern has steadily declined over the decade, now accounting for 9% of clients per quarter (down from 24%).

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Conclusion

Shifts in AOD service use over time and within social groups have the potential to place significant pressure on services. Alcohol remains the primary drug of concern within the community, despite increases in helpseeking for other drugs such as amphetamines. Alcohol remains the most common reason to seek AOD treatment, accounting for close to half of all clients.

There has been a very clear and rapid change in treatment seeking for amphetamines, particularly amongst 20-34 year olds. This suggests a strong need for continued investment into treatment for this cohort.

Acknowledgments

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