

# Merseyside DIP Demographics Report 08/09

December 2009

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## 1.0 Introduction

The link between drug use and acquisitive crime is well established through research and addressed within UK Government policy. Research has demonstrated high levels of drug use among prison populations (Singleton et al, 1999, Liriano and Ramsey, 2003) and arrestees (Holloway and Bennett, 2004, O'Shea et al, 2003) and also high levels of offending among drug treatment samples (Gossop et al, 1998). Acquisitive crime aside, drug misusers frequently come into contact with the Criminal Justice System as the use of illegal drugs makes them liable for arrest (Gossop, 2005).

The Drug Interventions Programme (DIP) was developed as part of the Updated Drugs Strategy to break the link between drugs and crime and minimise the harm caused to individuals and society as a whole. It was introduced in April 2003 and, according to the Home Office, between then and June 2004 there was a fall in England and Wales of 12.9% in acquisitive crime. In that same time 8,000 drug misusing offenders entered treatment through DIP (Home Office, 2004). Reports since this have suggested that DIP has continued to be successful with a 28% reduction in drug related crime since 2003 as well as large numbers of individuals receiving treatment for their drug use (Home Office, 2009). Research has suggested that treatment is effective with every £1 spent on treatment saving £9.50 in crime and health costs (Godfrey et al, 2004). There are various services available through DIP, including structured drug treatment, counselling, employment, housing and healthcare.

Whilst there has been an abundance of data produced about DIP, most of it has been performance management related. So far nationally there has been no data produced examining the characteristics of the clients coming into contact with DIP. There is however a wealth of information on this topic from other sources, some of which is outlined in the rest of this section.

### Age of Drug Users

The 2008/09 British Crime Survey (BCS) estimated that just over a third (36.8%) of 16 to 59 year olds had used one or more illicit drugs in their lifetime (Hoare, 2009). The survey also found that 10.1% of 16-59 year olds had used illicit drugs in the previous year, a decrease of 1.0% on the figure reported in 07/08 (Hoare & Flatley,

2008). This decline has been largely attributed to a continued fall in cannabis use. According to the 2008/09 BCS, last year Class A drug use amongst 16-59 year olds has remained relatively stable between 1996 and 2008/09 but there has been a recent underlying upward trend the level of which is now significant, as a result of an increase in last year powder cocaine use. The 2008/09 BCS estimated that just over four in ten (42.9%) 16 to 24 year olds had used one or more illicit drugs in their lifetime, with 22.6% of this age group having used one or more illicit drugs in the last year and 13.1% reporting using an illicit drug in the last month. The general trend for last year usage of Class A drugs amongst this age group had been in steady decline since 1996, however it rose from 6.9% in 2007/08 to 8.1% in 2008/09, largely due to increases in the use of both cocaine and ketamine. Furthermore, frequent use of any drug among all 16 to 24 year olds decreased from 11.6% in 2002/03 to just 7.6% in 2008/09. Cannabis remained the drug most likely to be used by this age group, with the 2008/09 BCS estimating that 18.7% of 16 to 24 year olds used cannabis in the last year, which represented around 84% of last year illicit drug users (Hoare, 2009).

The 2008/09 BCS also found that those aged from 16 to 19 and 20 to 24 reported the highest levels of drug use in the last year of any age group (22.2% and 22.9% respectively). When looking at Class A drug use, use in the month prior to surveying was highest in the 20 to 24 year old age group, with statistically significant increases seen between 2007/08 and 2008/09 amongst 16 to 24 year olds, 25 to 29 year olds and 30 to 34 year olds (Hoare, 2009).

According to National Drug Treatment Monitoring System (NDTMS) data the average age of individuals in contact with treatment services in the North West in 2008/09 was 35 and there was a 4.4% increase in individuals accessing treatment in comparison to 2007/08. There was a decrease in the number of individuals between 20 and 29 accessing treatment in 2008/09 however but in contrast to this there was a rise in the number of individuals aged 40 or older in contact with treatment services. The main drug of use for individuals accessing these services continued to be heroin (62.2%) followed by cannabis (12.8%) and cocaine (7.9%) (Hurst et al, in press).

### **Female drug users**

The 2008/09 British Crime Survey indicated that men reported higher levels of illicit drug use over their lifetime, in the previous year and past month compared to women (Hoare, 2009). Women are also less likely to be in contact with drug treatment services and continue to be highlighted as one of the groups for special focus in the National Treatment Agency's Models of Care framework, in particular drug using pregnant women (NTA, 2006). According to NDTMS data, just 27.9% of clients in contact with treatment services in the North West of England in 2007/08 were female (Hurst et al, in press). However, despite their lower numbers, female problematic drug users have some specific issues as highlighted by Becker & Duffy (2002):

- Pregnancy and child care
- Sex working – “Women engaging in sex-for-money or sex-for-drugs exchanges are likely to be at greater risks of both negative health and social consequences”
- Sexual health needs, including unwanted pregnancy and sexually transmitted infections
- Past experience of sexual and physical abuse
- Mental health needs.

A recent feasibility study has also identified the need for research into the impact of domestic abuse, including physical, sexual, emotional and psychological abuse, past and current, on women's engagement and retention in drug treatment. This should also include consideration of the specific difficulties of women from black ethnic and minority and different faith communities (Galvani & Humphreys, 2007). Recent research into drug use of women sex workers revealed that the majority (96.9%) of the study sample used Class A drugs, with over half (51.7%) injecting and over half stating that they had entered into prostitution to fund their addiction (Bloor et al, 2006). This study re-enforced the point that assisting women in both access to and retention in treatment can be addressed by tackling known barriers such as waiting times, transport difficulties and financial hardship.

In a recent study conducted in the USA, Van Olphen et al (2009) further highlighted the barriers that drug and alcohol using females may face when leaving prison and commented that they may be severely hampered in their quest for re-integration into the community due to the stigma of drug use. They postulated that punitive drug and social policies related to employment, housing, education, welfare and both

mental health and substance abuse treatment make it extremely difficult for women to succeed.

Becker & Duffy (2002) have also highlighted some more generic barriers women may face in accessing drug treatment services, including:

- Stigmatisation and child protection issues
- Poor social support networks
- Weakness in maternity services
- Negative attitudes of health professionals
- Ineffective interagency working.

Despite potential barriers to engagement and retention in drug treatment, Best & Abdulrahim (2005) showed that although women enter treatment at different points in their drug use, with different needs and different problems, there is no evidence to indicate that women are under-represented in treatment services in England. These findings are supported locally in the North West by Beynon et al (2001) and on a local level in Liverpool and Sefton (Beynon et al, 2004). However, Hay et al (2008) estimated that females only make up 19% of the problematic drug users in Liverpool and Baron et al (2009) commented in their most recent inter agency report that females in Liverpool make up 15.7% of those accessing syringe exchanges, indicating that an under representation may exist compared to general population trends.

### **Black and minority ethnic populations**

There is a recognised lack of knowledge regarding the nature and extent of drug use amongst the UK's black and minority ethnic groups (BME) (Fountain et al, 2003). What is known is that a large majority of BME groups are in the most deprived inner city areas (Social Exclusion Unit, 1998) and they also figure disproportionately in those that are:

- Unemployed
- Living in poverty
- In the Criminal Justice System (Fountain et al, 2007)
- Detained under the Mental Health Act 1983
- In ill health
- Excluded from school and in care
- Vulnerable to homelessness (Fountain et al, 2003).

These social and economic circumstances make them more at risk of developing problematic drug use (Patel & Wibberley, 2002).

According to the British Crime Survey 2007/08, 15.2% of people from a mixed ethnic background had taken Class A drugs in the past year, compared with 15.1% from White groups, 6.7% from Chinese or other groups, 3.6% from an Asian background and 2.9% of those from Black groups (Hoare & Flatley, 2008). According to the NDTMS the majority of clients (86%) in drug treatment in England in 2008/09 were White. Of the remainder, 3% were African or Caribbean, 2% were Pakistani or Bangladeshi, 2% were of mixed race, 1% were Indian and 1% reported their ethnic background as 'other' (NTA, 2009). This national pattern is replicated in the North West, where the vast majority of all individuals were recorded as White British (95.62%). There were however a high proportion of under 25 year olds amongst particular ethnicities in comparison to those who were White. Of those who stated their ethnicity as Bangladeshi, 31.7% were under 25 and similarly, 28.0% of those stating as being African were under 25 also (Hurst et al, in press).

Patterns of problematic drug use have been found to vary according to ethnic group. During 2008/09 in the North West, a higher proportion of White service users reported problematic use of heroin (66.4%) compared to BME service users (62.3%), whilst higher proportions of BME service users reported problematic crack (32.0%) and cannabis use (29.9%) than White service users (25.7% and 22.6% respectively) (Hurst et al, in press).

The National Treatment Agency (Fountain et al, 2003) has summarised some of the potential barriers to BME individuals entering treatment to be:

- A lack of acknowledgement of drug use by BME cultures
- The ethnicity of staff
- A lack of understanding of BME cultures
- Language barriers
- A lack of awareness of drug services and their functions
- Concerns about confidentiality

Edmonds et al (2005) highlighted the need for drug services to be sited sensitively. There may be stigma attached to drug use in BME communities, therefore there is a greater need for confidentiality and more thought given to the preservation of family reputation. This was highlighted in a report looking at the BME community in

Peterborough (Mills et al, 2007). This study found that BME communities are characterised by high levels of shame and denial in relation to drug use and tend to ostracise drug users. It also found that the majority of respondents were not in the criminal justice system, again highlighting the “hidden drug using population” aspect of this client group. In addition, drug users from BME backgrounds are currently highlighted as a group for special focus by the NTA in the Models of Care framework (NTA, 2006).

### **Drug use and homelessness**

Research in the USA has shown that alcoholism and other substance abuse is the most pervasive health problem for the homeless (Velasquez et al, 2000). Devine & Wright (1997) labelled the link between homelessness and substance use as a “socio-economic leveller”, in that research shows that there is a pathway from drug use to job loss, family dissolution, social isolation and for many, homelessness. There is also the possibility that homelessness may lead to substance abuse to cope with the fear, deprivation, loss of dignity and depression associated with their situation (Orwin et al, 2005). The evidence suggests that drug use is more prevalent among the homeless than those living in private households and that homeless people are more likely to inject drugs (Klee, 1991; Gill et al, 1996). Kemp et al (2006) in their study of 877 problem drug users entering treatment in Scotland recorded similar findings, with recent drug injection a major risk factor among the homeless people in this group. They also found that 36% of their drug using cohort were homeless at the time of interview, a prevalence rate that is at least seven times greater than the general population. A 2001 study of 389 homeless people in London found that over half attributed their becoming homeless to drugs or alcohol and that 96% reported using drugs or alcohol in the previous month, with heroin, alcohol and cannabis the three most preferred substances. Over a third of people in the total sample were dependent on heroin and a quarter were alcohol dependent. There were also high levels of injecting with 78% injecting amongst those who had used heroin in the previous month (Fountain & Howes, 2002). Similarly a recent study in Liverpool with homeless substance users found that over two-thirds (68%) had slept rough on the night prior to their interview with 94% of those participating reporting at least one health problem (Shaw et al, 2008).

Homeless people with substance misuse problems experience severe difficulties in accessing healthcare, education and employment assistance. They may be unaware

of, or excluded from, supported accommodation and experience difficulties finding social housing due to rent arrears, poor tenancy records and lack of knowledge about how to apply for housing (Centre for Social and Economic Exclusion, 2005, Home Office, 2006). Research recommends providing more flexible, multi-agency services with wider use of care-plans and confidentiality policies, in addition to collecting information on homeless service users' own views on available support (Centre for Social and Economic Exclusion, 2005).

Services for people who are homeless and those who have substance abuse difficulties have traditionally developed separately (Home Office, 2006). The introduction of Contact and Assessment Teams (CATs) and specialist outreach drug workers is trying to bridge the gap in services to reach those on the streets (Home Office, 2006).

### **Drug use and Deprivation**

It is commonly assumed that more problematic forms of drug use are linked to socio-economic deprivation (ACMD, 1998). Deprivation can involve poverty, inadequate housing, poor education and a lack of employment or social opportunities. There is no clear link between those that have ever tried drugs and deprivation but there does appear to be a link between problematic drug use and deprivation. Deprivation also appears to be linked to lower age of first use, progression to dependence, injecting drug use, risky use, health and social complications from use and criminal involvement. It is also suggested that drug users are less likely to get care and treatment if they live in a deprived area (Drugscope, 2005).

### **Report Aim**

This report aims to provide the Merseyside DIP teams with summary information regarding the characteristics of the clients that they had contact with between April 2006 and March 2009. It will present such data as:

- ❖ A year by year comparison between 06/07, 07/08 and 08/09 for each area
- ❖ An analysis of data between the five Merseyside D(A)ATs for 08/09.

It is hoped that this report will inform teams as to the overall profile of clients entering DIP and to identify trends among the drug using population on Merseyside. This will hopefully aid teams in applying resources and determining best practices.

## 2.0 Methodology

The following analysis has been performed on the basis of D(A)AT of contact, rather than D(A)AT of residence, for all clients seen by DIP staff in Merseyside between April 2006 and March 2009. Data has been taken from information collected by DIP staff on monitoring forms produced by the Home Office: Drug Interventions Records (DIR) and Activity Forms. One purpose of these forms is to monitor the continuity of care of clients and the stages involved such as contact, assessment, care plan, changes to care plan, transfers of care plan and case closure. Both forms collect basic demographic information about clients such as age, gender and ethnicity and this information has been examined in this report at point of assessment with the DIP team and at point of transfer into the team. More in-depth information about clients' drug use, treatment, offending and accommodation is only collected on the DIR at assessment stage.

It should be noted that although generally questions regarding equipment sharing relate to injecting equipment, the DIR does not specify this, therefore, 'sharing equipment' could potentially cover the sharing of non-injecting related paraphernalia.

The data presented in tables and figures represent the proportions of individuals who provided responses to the questions asked on the DIR or activity forms. Individuals who did not provide information for the demographic categories under analysis were therefore excluded and the number of exclusions in each instance has been noted directly beneath tables and figures. Only individuals indicating using drugs in the month prior to assessment were counted for drugs used, weekly spend on drugs, drug treatment, injecting and sharing equipment. Please note that in this report, "full assessments" refers to DIR's completed. Please note, as clients could give more than one response for offending, percentages will add up to more than 100%.

The following sections focus on each of the five D(A)ATs in Merseyside in turn. For each area, trends across a three year period were analysed to offer comparisons between 06/07, 07/08 and 08/09. These sections are followed by a comparison between the five areas for 08/09.



This document should not be read in isolation but in conjunction with other reports detailing through put and trends around this drug using population (Cuddy & Duffy, 2009b, Howarth & Duffy, 2009). This report is not only intended as an information resource for D(A)ATs but also as a prompt for further investigation. Many key points will require more in depth investigation to fully explain the trends highlighted.

## 3.0 Knowsley

### 3.1 Knowsley – Assessments

Knowsley DIP team assessed 140 clients in 06/07, this rose substantially to 398 clients in 07/08 with the introduction of Test on Arrest, and in 08/09 they assessed 402 clients in total.

#### Ethnicity

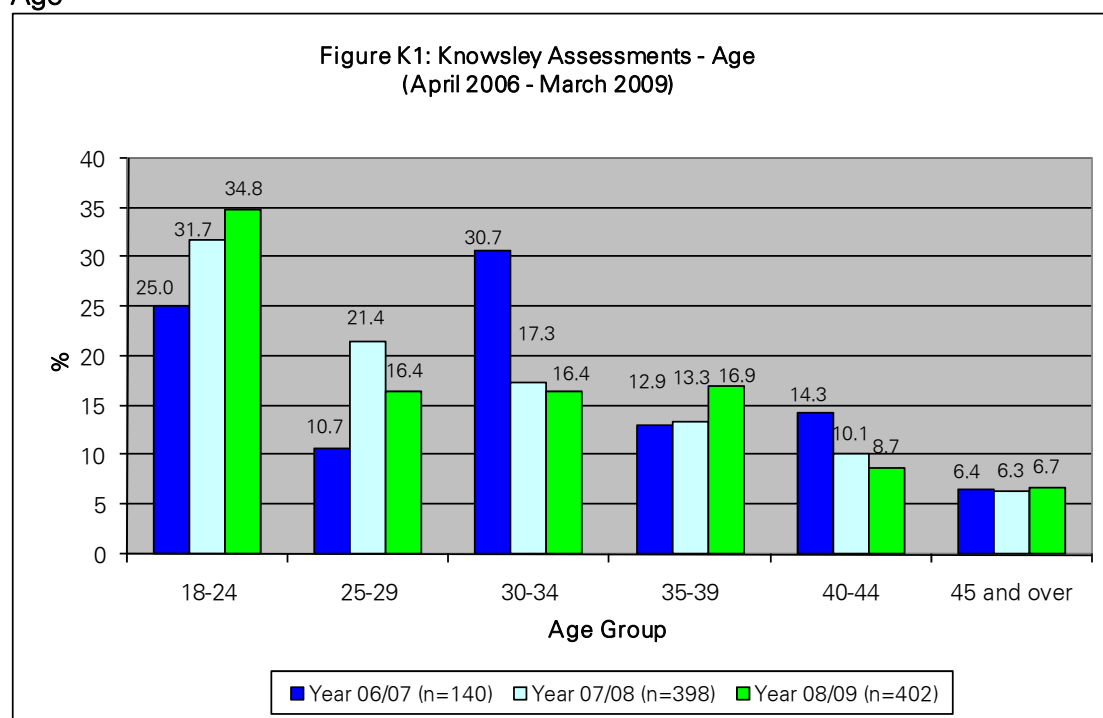
Table K1: Ethnic background of clients assessed in Knowsley (06/07, 07/08 & 08/09)

Year		Asian	Black	Mixed	White	Other
06/07 (n=137)	Number		2		135	
	%		1.5%		98.5%	
07/08 (n=397)	Number	1	3	2	391	
	%	0.3%	0.8%	0.5%	98.5%	
08/09 (n=402)	Number		2	4	395	1
	%		0.5%	1.0%	98.3%	0.2%

*NB: In 06/07, three clients did not provide information regarding their ethnicity and in 07/08 one client did not provide this information.*

The vast majority of clients assessed in all three time periods were white, 98.5% in both 06/07 and 07/08 and dropping only slightly to 98.3% in 08/09.

#### Age



Just over a third of all clients assessed in 06/07 were under the age of 30 (35.7%). Both 07/08 and 08/09 have seen a much younger profile being assessed with 53.1% aged between 18 and 29 in 07/08 and 51.2% in 08/09.

### **Gender**

The majority of clients assessed in all three years were male (87.1%, 87.4% and 86.8% respectively).

### 3.2 Knowsley – Transfers In

This section looks at the demographic characteristics of clients who were assessed and/or care planned in another area and subsequently referred back to Knowsley for DIP case management. In 06/07 there were a total of 135 clients transferred into Knowsley, this dropped in 07/08 with 73 clients being transferred in and saw a further drop in 08/09 with only 53 clients being transferred into the DIP team.

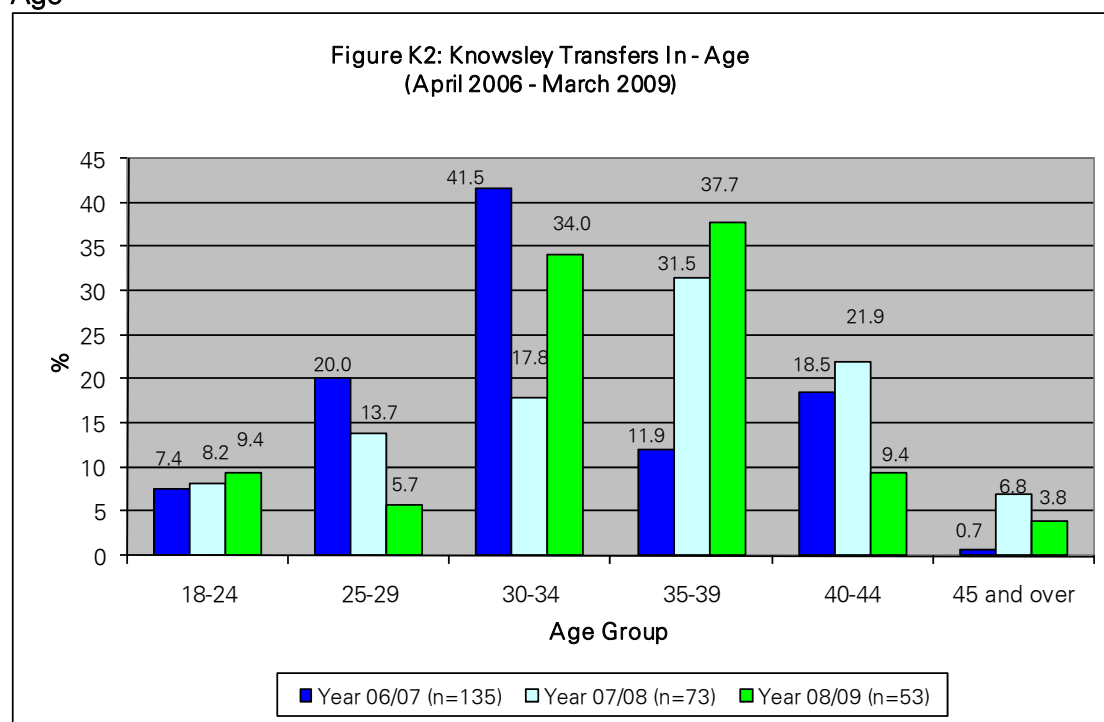
#### Ethnicity

Table K2: Ethnic background of clients transferred into Knowsley (06/07, 07/08 & 08/09)

Year		Mixed	White
06/07 (n=135)	Number	1	134
	%	0.7%	99.3%
07/08 (n=73)	Number		73
	%		100%
08/09 (n=53)	Number		53
	%		100%

The majority of clients transferred into Knowsley DIP team in all three years were white, 99.3% in 06/07 and 100% in both 07/08 and 08/09.

#### Age



The age profile of clients transferred into Knowsley in both 08/09 differed only slightly from the distribution in 06/07 and 07/08 with all time periods displaying a shift towards the older age groups. In 08/09 over seven in ten clients transferred in (71.7%) were aged between 30 and 39.

### **Gender**

The majority of clients across all three years were male, with the proportion of males transferred into Knowsley in 08/09 (77.4%) slightly higher than in 07/08 (75.3%) but lower than in 06/07 (86.7%).

### 3.3 Knowsley – Drug Use, Offending & Accommodation

#### Drug Use

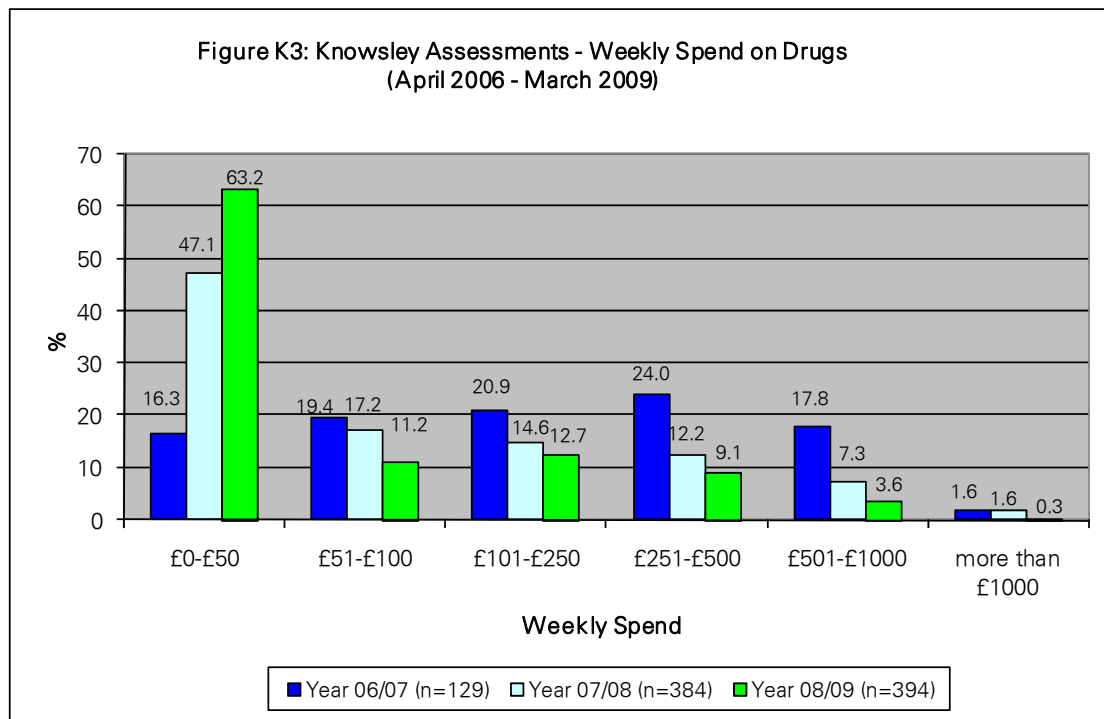
Table K3: Drug use of clients assessed by Knowsley DIP (06/07, 07/08 & 08/09)

Year		Amphet.	Benzo.	Cannabis	Cocaine	Crack	Ecstasy	Heroin	Meth.	Other
06/07 (n=136)	n	3	10	32	46	64	6	78	14	3
	%	2.2%	7.4%	23.5%	33.8%	47.1%	4.4%	57.4%	10.3%	2.2%
07/08 (n=386)	n	7	16	88	245	105	10	117	35	8
	%	1.8%	4.1%	22.8%	63.5%	27.2%	2.6%	30.3%	9.1%	2.1%
08/09 (n=396)	n	3	7	81	283	88	4	97	34	10
	%	0.8%	1.8%	20.5%	71.5%	22.2%	1.0%	24.5%	8.6%	2.5%

*NB: Figures will add up to greater than 100% as clients are allowed to indicate more than one drug of use.*

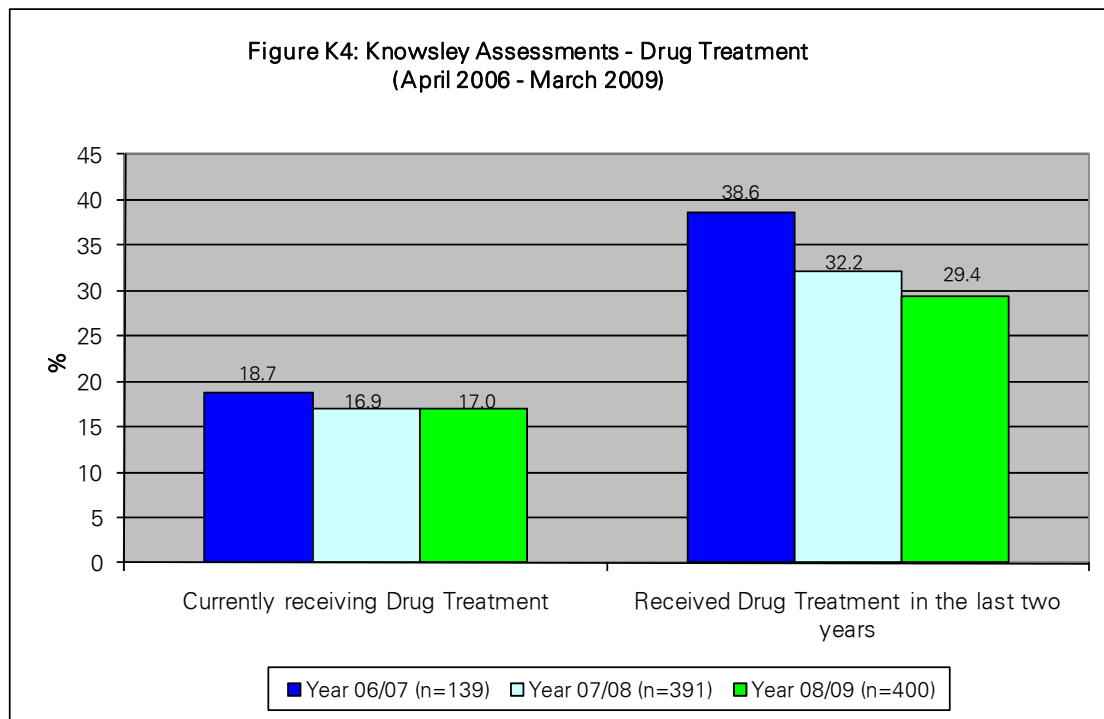
Almost six in ten clients assessed in 06/07 reported using heroin (57.4%). This proportion has dropped considerably since then however, with just over three in ten (30.3%) clients assessed in 07/08 reporting using heroin and a further decrease was seen in 08/09 where just under a quarter of clients assessed (24.5%) reported using heroin. A similar pattern emerged when looking at proportions of clients who reported using crack with less than a quarter of all clients assessed (22.2%) reporting its use in 08/09, slightly down on reported use in 07/08 (27.2%) and a substantial decrease on 06/07 (47.1%). In contrast to this, proportions of clients coming into contact with Knowsley DIP team who used cocaine has shown a marked increase over the three year period. Just over a third of clients assessed in 06/07 reported using cocaine (33.8%). This proportion rose considerably in 07/08 to 63.5% and again in 08/09 where over seven in ten clients (71.5%) reported its use.

#### Weekly Spend on Drugs



A clear trend emerged in relation to weekly spend on illicit drugs in Knowsley by clients assessed through DIP over the three year period. Just 16.3% reported spending between £0 and £50 per week in 06/07, this rose to almost half of all clients in 07/08 (47.1%) and again in 08/09 where over six in ten clients (63.2%) reported spending this amount per week. By way of contrast, over four in ten clients in 06/07 (43.4%) spent in excess of £250 per week on illicit drugs, this fell to 21.1% in 07/08 and again to 13.0% in 08/09.

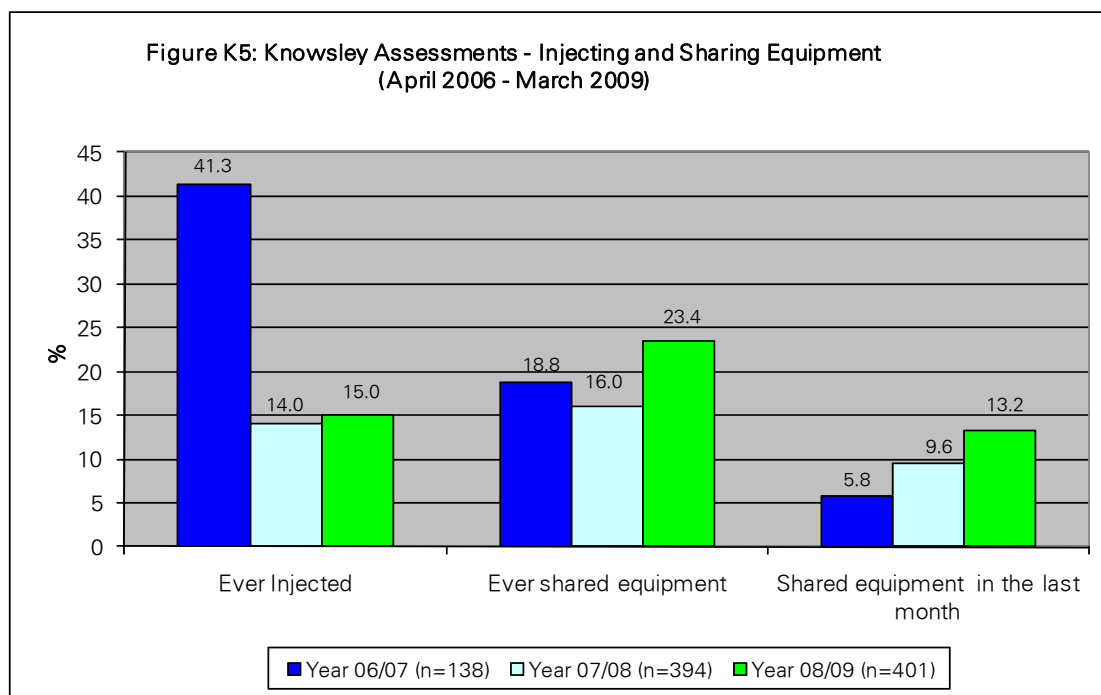
## Drug Treatment



Just under a fifth of clients in all three years analysed reported as being currently receiving treatment at the time of their assessment. There was however a slight decrease year on year in the proportions of clients entering DIP who had reported receiving drug treatment in the last two years over the same time period. In 06/07 almost four in ten (38.6%) clients assessed reported having received drug treatment in the two years prior to assessment, this proportion dropped in 07/08 to 32.2% and again in 08/09 where just under three in ten (29.4%) clients assessed reported having treatment previously for their drug use.

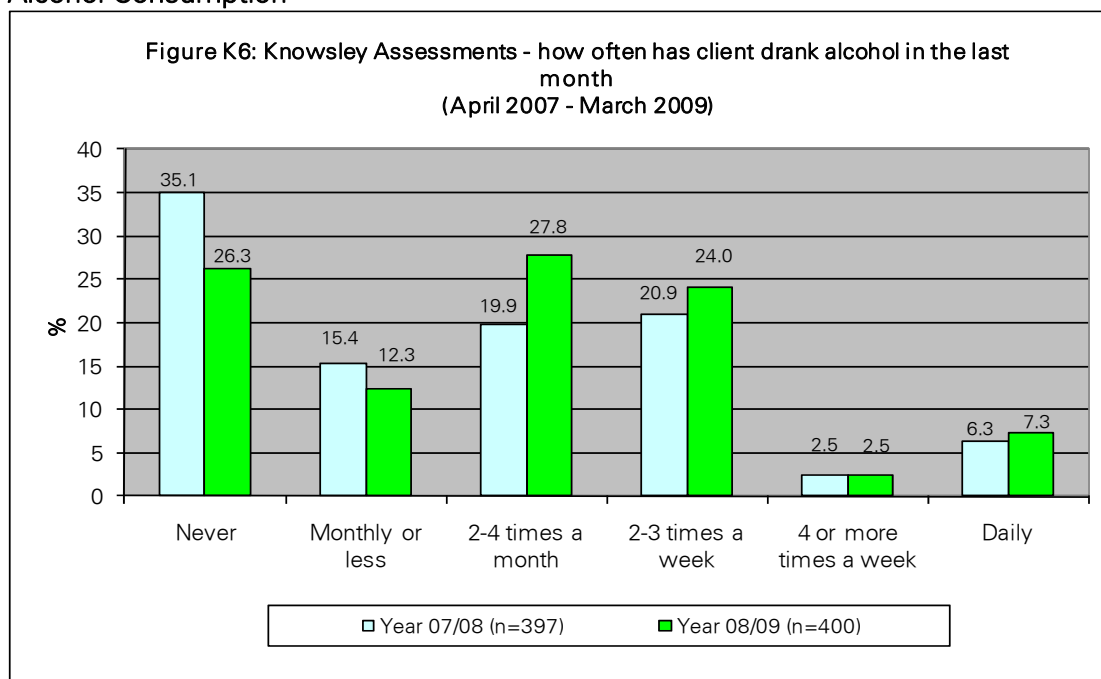
### Injecting and Sharing Equipment



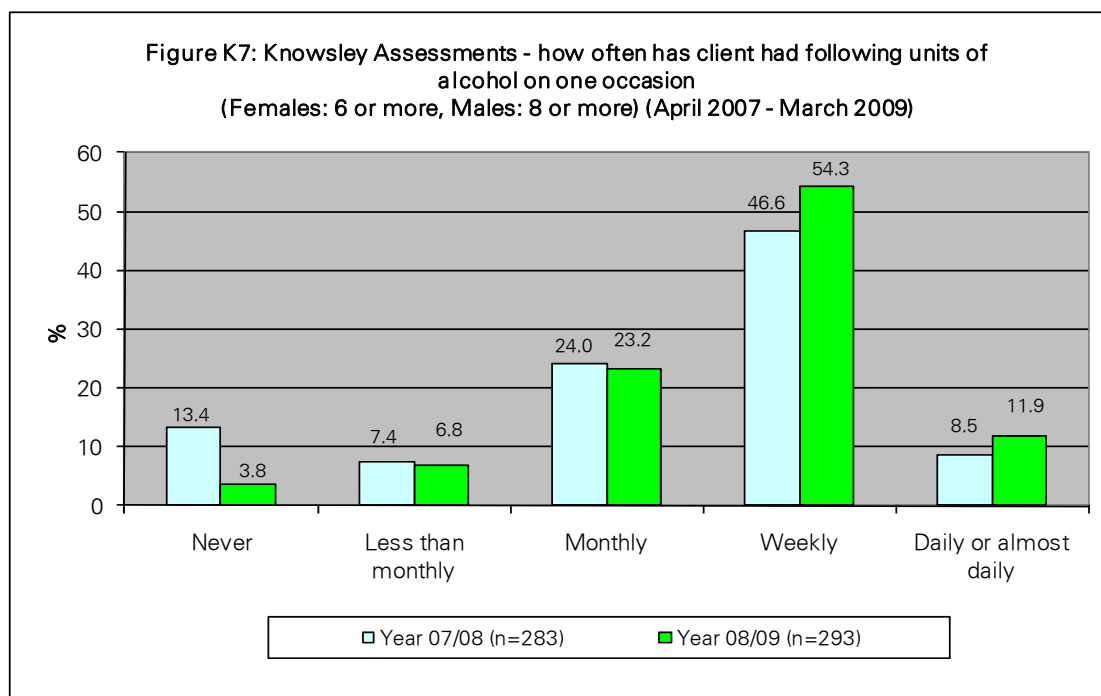


The proportions of clients who reported injecting in their lifetime dropped substantially from 41.3% in 06/07 to 14.0% in 07/08 but rose slightly in 08/09 where 15.0% of clients assessed reported as having ever injected. Over the three years, the proportions of clients who had ever shared equipment fluctuated slightly, with the highest proportion coming in 08/09 (23.4%). The proportions of clients who reported sharing in the month prior to their assessment have risen over the time period however, with over one in ten (13.2%) sharing equipment in 08/09, compared to 5.8% in 06/07.

### Alcohol Consumption



Just over a quarter of clients assessed in 08/09 reported as having not drunk alcohol at all in the last month (26.3%), a substantial drop on that of 07/08 (35.1%). In addition to this, 7.3% reported drinking alcohol on a daily basis in 08/09, a similar proportion to that of 07/08 (6.3%).



Of those clients assessed in 08/09 who stated they had consumed alcohol in the month prior to assessment, over half reported drinking in excess of recommended drinking levels on a weekly basis (54.3%), an increase on that of 07/08 (46.6%). Moreover almost nine in ten reported drinking over these levels on at least a monthly basis (89.4%) compared to eight in ten (79.1%) in 07/08.

## Offences Committed

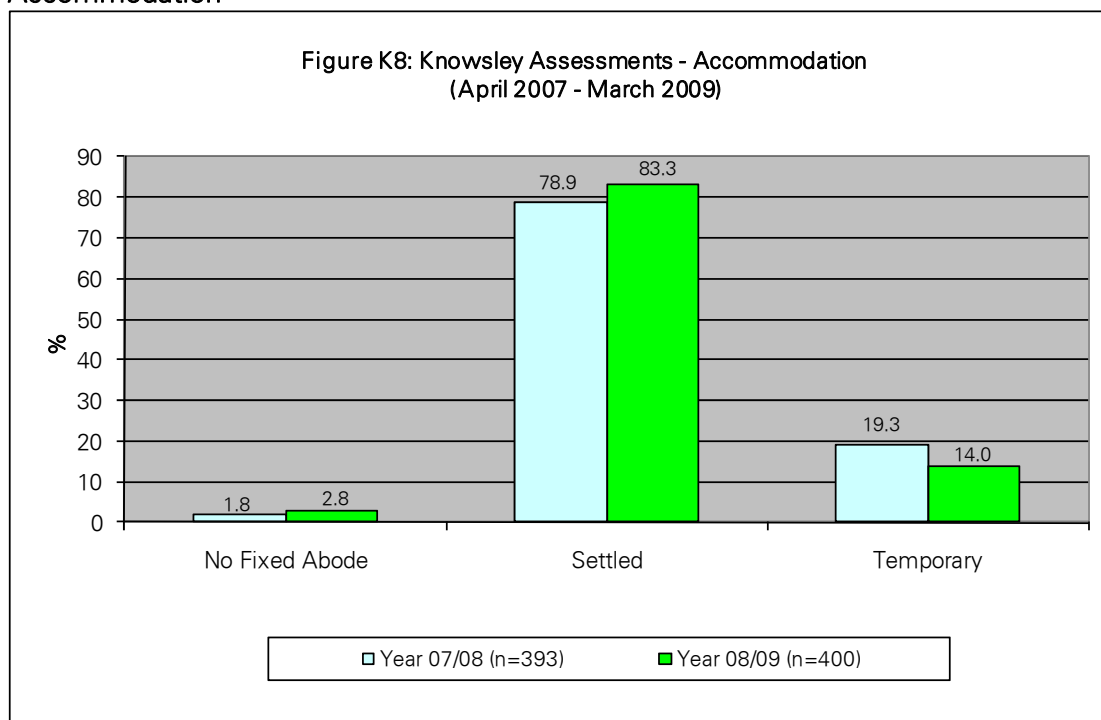
Table K4: Offending that led to contact with Knowsley DIP (06/07, 07/08 & 08/09)

Offence	Offending 06/07 (n=134)		Offending 07/08 (n=394)		Offending 08/09 (n=399)	
	Number	%	Number	%	Number	%
Breach	16	11.9	17	4.3	17	4.3
Burglary	13	9.7	34	8.6	30	7.5
Criminal Damage	4	3.0	12	3.0	4	1.0
Firearms/Weapons	2	1.5	5	1.3	3	0.8
Fraud	2	1.5	13	3.3	2	0.5
Going equipped			2	0.5	2	0.5
Handling	3	2.2	10	2.5	6	1.5
MDA Offences	21	15.7	131	33.2	151	37.8
Motoring Offence	6	4.5	10	2.5	6	1.5
Other	5	3.7	7	1.8	6	1.5
Public Order	9	6.7	8	2.0	9	2.3
Robbery	3	2.2	15	3.8	13	3.3
Shoplifting	51	38.1	83	21.1	80	20.1
Theft	2	1.5	21	5.3	24	6.0
Theft - Car	1	0.7	39	9.9	38	9.5
Warrant	5	3.7	15	3.8	4	1.0
Wounding/Assault	13	9.7	21	5.3	22	5.5

*NB. In 06/07 six clients did not provide information on offending, four did not provide it in 07/08 and three did not provide it in 08/09*

The most common offence committed by clients assessed by Knowsley DIP in both 06/07 was shoplifting (38.1%) but this proportion dropped substantially in 07/08 to 21.1% and again slightly in 08/09 where a fifth of clients (20.1%) coming into contact with DIP were arrested for shoplifting. The most common offence that clients were arrested for in both 07/08 and 08/09 were Misuse of Drugs Act (MDA) offences with almost a third (33.2%) coming into contact with the criminal justice system, and therefore DIP, as a result of this offence in 07/08 and this proportion rose to 37.8% in 08/09. It can be seen that proportions of clients arrested for MDA offences have consistently risen over the three years. In addition, there was a sizeable increase in the proportion of clients arrested for the offence of "Theft – Car" between 06/07 and 07/08 (9.2%) and 08/09 saw a similar proportion to 07/08 in terms of arrests for this offence.

## Accommodation



The majority of clients assessed by Knowsley DIP in both 07/08 and 08/09 reported being in settled accommodation (78.9% and 83.3% respectively). There was a 5.3% decrease over the two years in proportions of clients assessed who were in temporary accommodation.

### 3.4 Knowsley Summary

- ❖ There was a substantial increase in the number of clients assessed via a DIR in 07/08 compared to 06/07, a reflection of the introduction of Test on Arrest. This increase was not replicated in 08/09 however, with the numbers of clients assessed during this period only slightly increasing from 07/08.
- ❖ It should be noted that the profile of clients has changed little between 07/08 and 08/09.
- ❖ The vast majority of clients assessed in all three time periods were white males. Knowsley also saw a far younger profile of clients coming into contact with DIP through the full assessment process in both 07/08 and 08/09 compared to 06/07.
- ❖ There was a substantial drop in the number of clients transferred into Knowsley in 07/08 compared to 06/07. This trend continued in 08/09 where the numbers of clients transferred in fell again on the previous year. The majority of these clients in all three years were again white males but these clients were generally older than those who were assessed via a DIR.
- ❖ Cocaine was the most commonly used drug of clients assessed in both 07/08 and 08/09, surpassing heroin which had been the most common drug used in 06/07. The proportions of clients assessed who reported using cocaine has more than doubled over the three years.
- ❖ The weekly expenditure on drugs was lower in 08/09 compared to both 06/07 and 07/08.
- ❖ Proportions of clients assessed who had been in structured drug treatment in the two years prior to their assessment decreased consistently year on year over the time period.
- ❖ The proportion of clients who had injected in their lifetime who came into contact with DIP in both 07/08 and 08/09 was far less than in 06/07 but there was a steady increase over the three years in proportions of clients assessed who had shared equipment in the last month.
- ❖ Over a third of clients' assessed reported drinking alcohol on at least a weekly basis and over half reported drinking in excess of recommended levels on at least one occasion on a weekly basis in 08/09, a slight increase on proportions in 07/08 in both cases.
- ❖ There was a considerable increase in MDA offences in 07/08 from 06/07 and this continued in 08/09. By contrast, there was a considerable decrease in the proportions of shoplifting offences that led to subsequent contact with

the DIP team over the three year period, mostly seen between 06/07 and 07/08.

- ❖ The majority of clients assessed in both 07/08 and 08/09 were in settled accommodation.

## 4.0 Liverpool

### 4.1 Liverpool – Assessments

Liverpool DIP team assessed 2,461 clients in 06/07, this rose to 2,749 clients in 07/08 and again in 08/09 where they assessed 3,088 clients in total.

#### Ethnicity

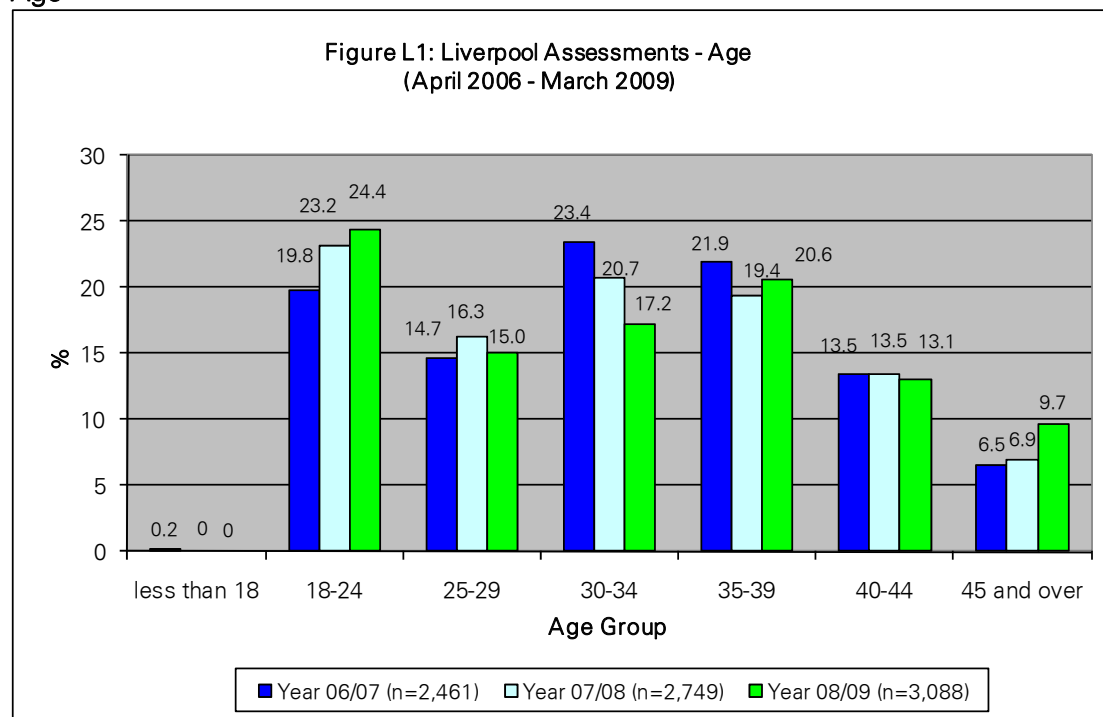
Table L1: Ethnic background of clients assessed in Liverpool (06/07, 07/08 & 08/09)

Year		Asian	Black	Mixed	White	Other
06/07 (n=2,450)	Number	7	85	42	2,315	1
	%	0.3%	3.5%	1.7%	94.5%	<0.1%
07/08 (n=2,736)	Number	8	94	70	2,556	8
	%	0.3%	3.4%	2.6%	93.4%	0.3%
08/09 (n=3,068)	Number	16	112	69	2,866	5
	%	0.5%	3.7%	2.2%	93.4%	0.2%

*NB: In 06/07 eleven clients did not provide information regarding ethnicity, in 07/08 thirteen clients did not provide this information and in 08/09 twenty clients did not provide ethnicity information.*

Over nine in ten of the clients assessed in all three time periods were white.

#### Age



Almost a quarter of clients assessed in 08/09 were under the age of 25 (24.4%), an increase on proportions in 06/07 (19.8%) and 07/08 (23.2%).

### **Gender**

Just over three-quarters of the clients assessed in 06/07 by Liverpool DIP were male (76.8%). This proportion rose slightly to 79.1% in 07/08 and again in 08/09 where eight in ten clients (80.1%) coming into contact with the criminal justice system through DIP were male.



## 4.2 Liverpool – Transfers In

This section looks at the demographic characteristics of clients who were assessed and/or care planned in another area and subsequently referred back to Liverpool for DIP case management. In 06/07 there were a total of 451 clients transferred into Liverpool, this dropped to 373 clients in 07/08 but rose again in 08/09 with 396 clients being transferred into the DIP team.

### Ethnicity

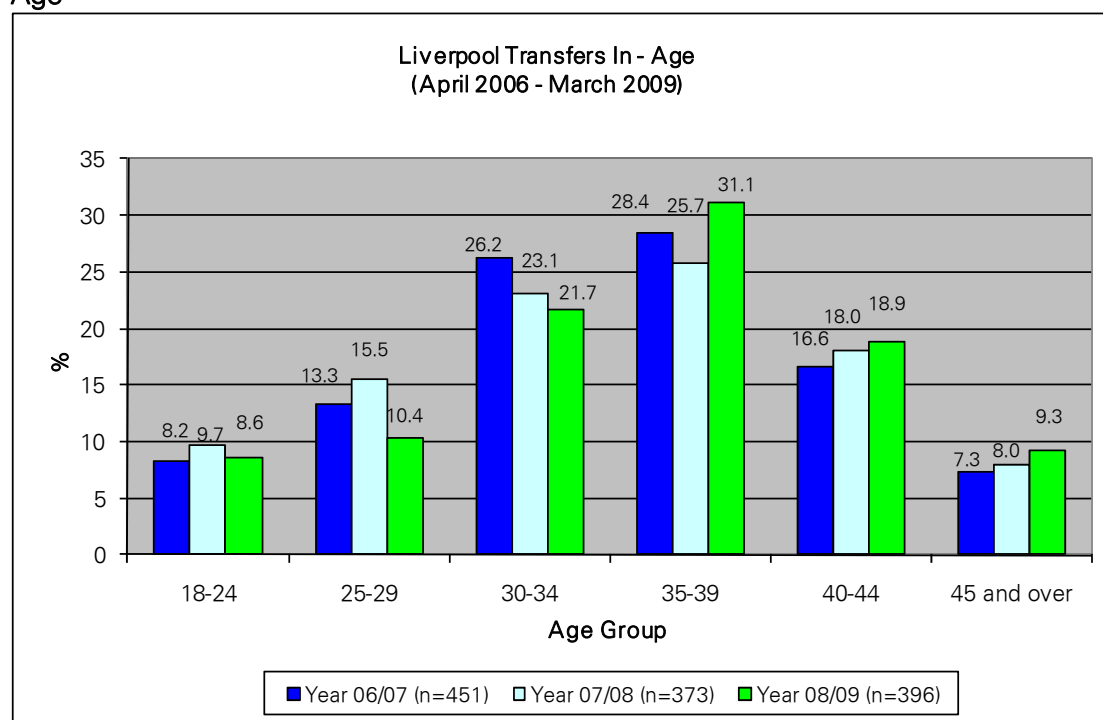
Table L2: Ethnic background of clients transferred into Liverpool (06/07, 07/08 & 08/09)

Year		Black	Mixed	White	Other
06/07 (n=451)	Number	9	1	441	
	%	2.0%	0.2%	97.8%	
07/08 (n=372)	Number	8	12	352	
	%	2.2%	3.2%	94.6%	
08/09 (n=394)	Number	15	8	370	1
	%	3.8%	2.0%	93.9%	0.3%

*NB: In 07/08 one client did not provide information regarding ethnicity and in 08/09 two clients did not provide ethnicity information.*

The majority of clients transferred into Liverpool DIP team in all three years were white.

### Age



The age profiles of clients transferred into Liverpool in all three time periods were broadly similar with clients aged between 30 and 39 making up the most common age groupings in each year. In 08/09, Liverpool saw an older profile of client in terms of age when compared to both 06/07 and 07/08. Six in ten clients (59.3%) transferred into Liverpool in 08/09 were aged 35 or over compared to 51.7% in 07/08 and 52.3% in 06/07.

### **Gender**

Just over seven in ten clients transferred into Liverpool in 06/07 were male (71.0%). This proportion rose slightly in 07/08 to 73.5% but fell again in 08/09 to 70.5%.

### 4.3 Liverpool – Drug Use, Offending & Accommodation

#### Drug Use

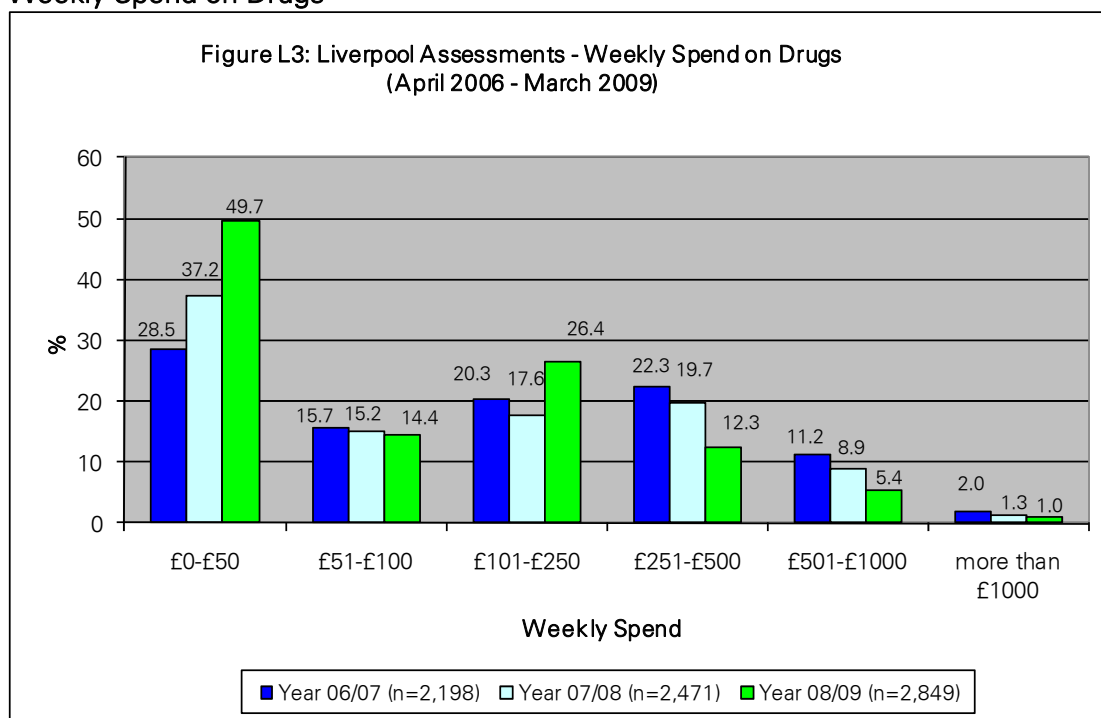
Table L3: Drug use of clients assessed by Liverpool DIP (06/07, 07/08 & 08/09)

Year		Amphet.	Benzo.	Cannabis	Cocaine	Crack	Ecstasy	Heroin	Meth.	Other
06/07 (n=2,305)	n	13	70	271	735	1,255	22	1,446	193	21
	%	0.6%	3.0%	11.8%	31.9%	54.4%	1.0%	62.7%	8.4%	0.9%
07/08 (n=2,557)	n	12	66	410	1,003	1,231	33	1,408	103	26
	%	0.5%	2.6%	16.0%	39.2%	48.1%	1.3%	55.1%	4.0%	1.0%
08/09 (n=2,915)	n	16	56	440	1,300	1,187	14	1,444	176	21
	%	0.5%	1.9%	15.1%	44.6%	40.7%	0.5%	49.5%	6.0%	0.7%

*NB: Figures will add up to greater than 100% as clients are allowed to indicate more than one drug of use.*

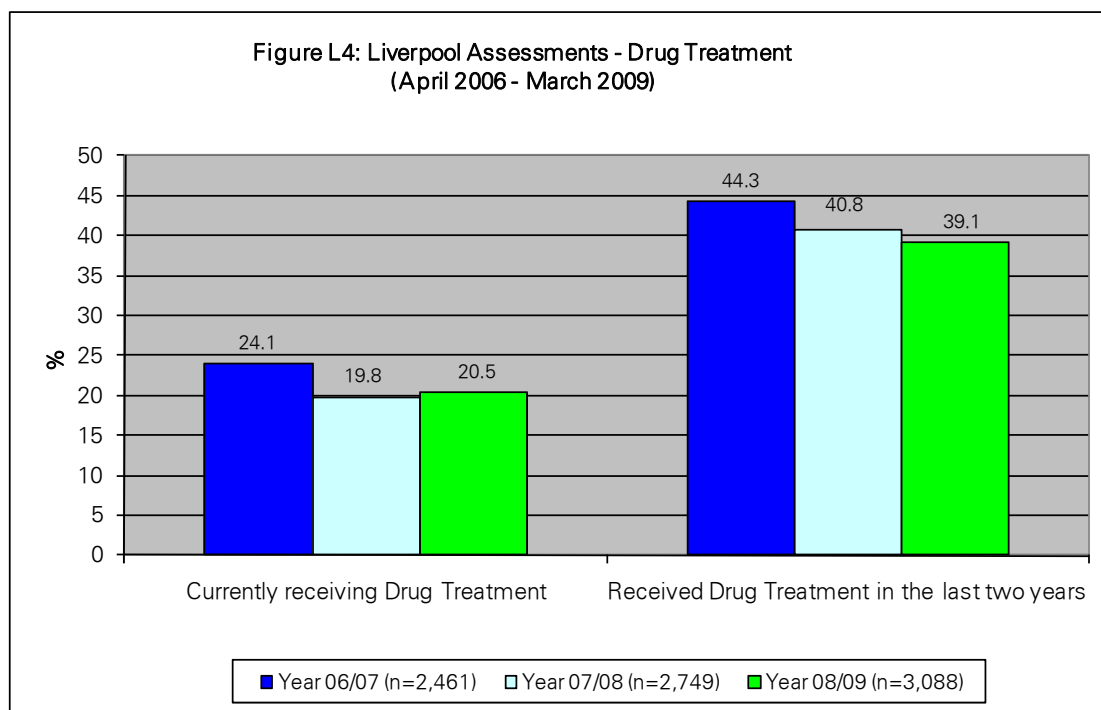
Over six in ten clients assessed in 06/07 reported using heroin (62.7%). This proportion has dropped considerably since then however, with 55.1% of clients assessed in 07/08 reporting using heroin and under half (49.5%) reporting its use in 08/09. Over half of all clients assessed reported using crack in 06/07 (54.4%) and the patterns of proportions of clients using it has mirrored that of heroin with a drop in 07/08 to 48.1% and again in 08/09 where just over four in ten clients assessed reported crack use (40.7%). The same drop was also seen between 06/07 and 07/08 when looking at proportions of clients assessed using illicit methadone but 08/09 saw a slight increase in proportions when 6.0% of clients coming into contact with Liverpool DIP team reported its use. In contrast to this, both numbers and proportions of clients coming into contact with Liverpool DIP team who reported using cocaine have risen consistently over the three year period. In 06/07 just under one in three clients assessed (31.9%) reported using cocaine and this figure rose to 39.2% in 07/08. There was a further rise seen in 08/09 where 44.6% of clients assessed reported using cocaine. In addition, the proportions of those using cannabis increased between 06/07 and 07/08 (4.2% increase) but there was a slight drop (0.9%) in 08/09 compared to 07/08. It should be noted however that numbers reporting using cannabis have increased year on year over the time period.

## Weekly Spend on Drugs



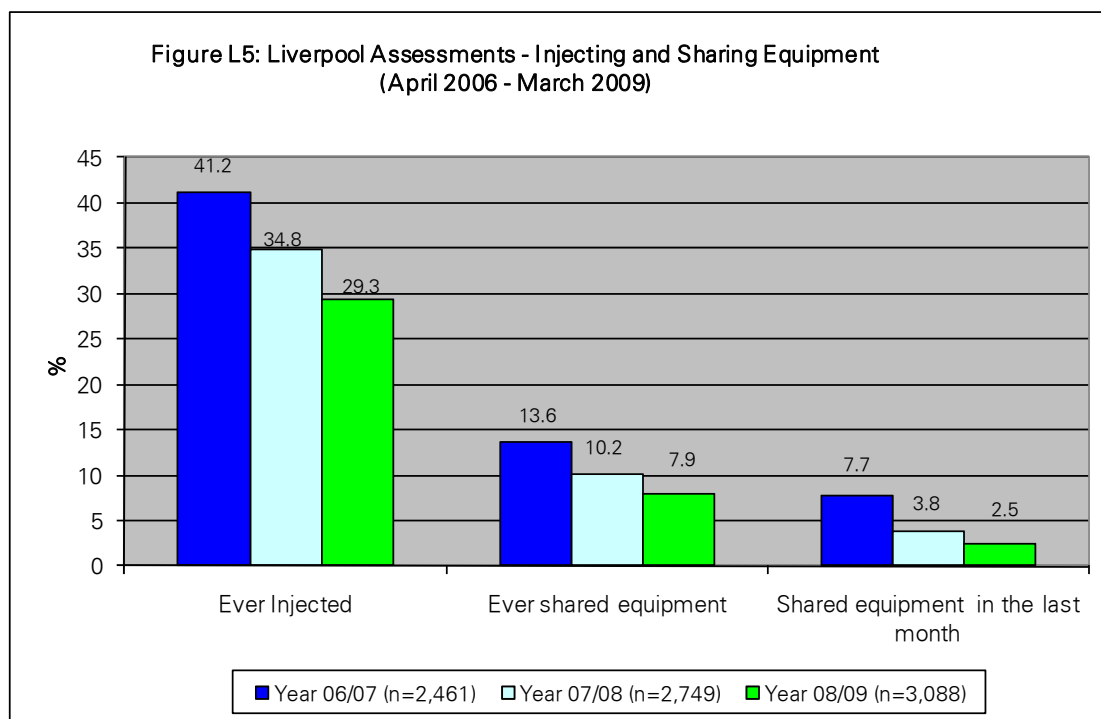
In 06/07, over a third of clients (35.5%) reported spending in excess of £250 per week on drugs. This proportion dropped to three in ten (29.9%) in 07/08 and again in 08/09 where less than one in five (18.7%) of those who used drugs reported weekly spending of over £250. Furthermore, there was a considerable increase in the proportions of clients reporting spending at the lower end of the scale over the three years. Over a quarter (28.5%) of clients spent between £0 and £50 per week in 06/07, this proportion rose to 37.2% in 07/08 and again in 08/09 where almost half (49.7%) reported their weekly spend on drugs as falling into this category.

## Drug Treatment



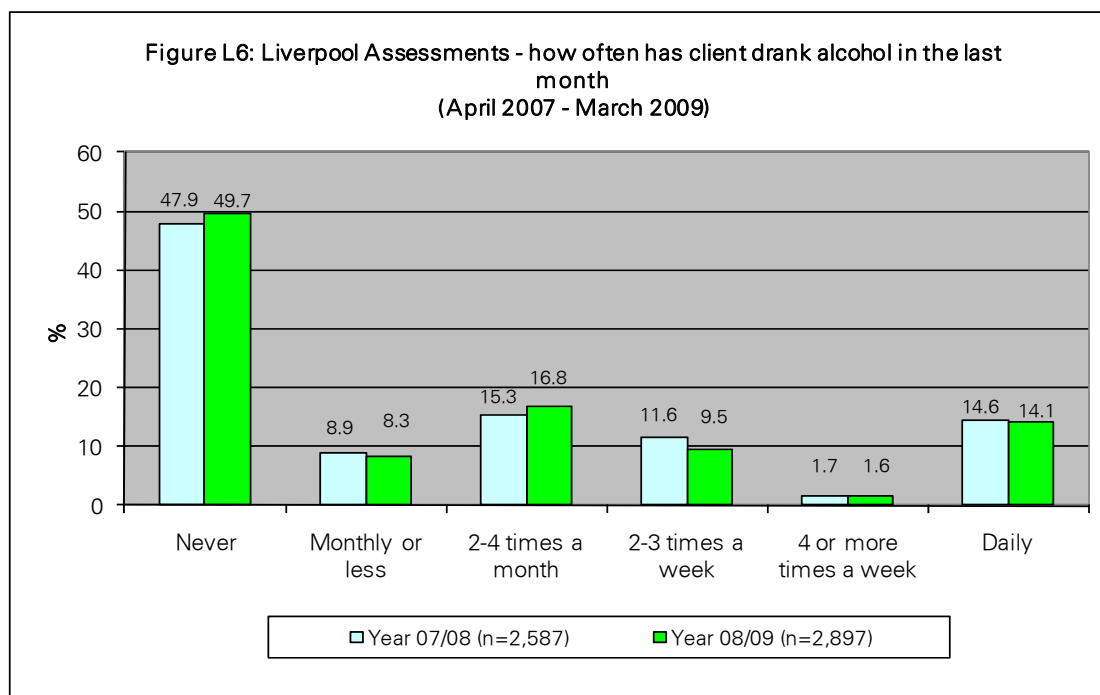
Just under a quarter of clients in 06/07 (24.1%) reported being in treatment at the time of their assessment. This proportion dropped in 07/08 to just under a fifth of clients (19.8%) but rose slightly again in 08/09 to 20.5%. There was a gradual decrease in the proportions of clients who reported receiving drug treatment in the last two years over the three year time period. In 06/07 44.3% of clients assessed reported having received drug treatment in the two years prior to assessment, this proportion dropped in 07/08 to 40.8% and again slightly in 08/09 where just under four in ten (39.1%) of those assessed reported having been in treatment previously.

### Injecting and Sharing Equipment

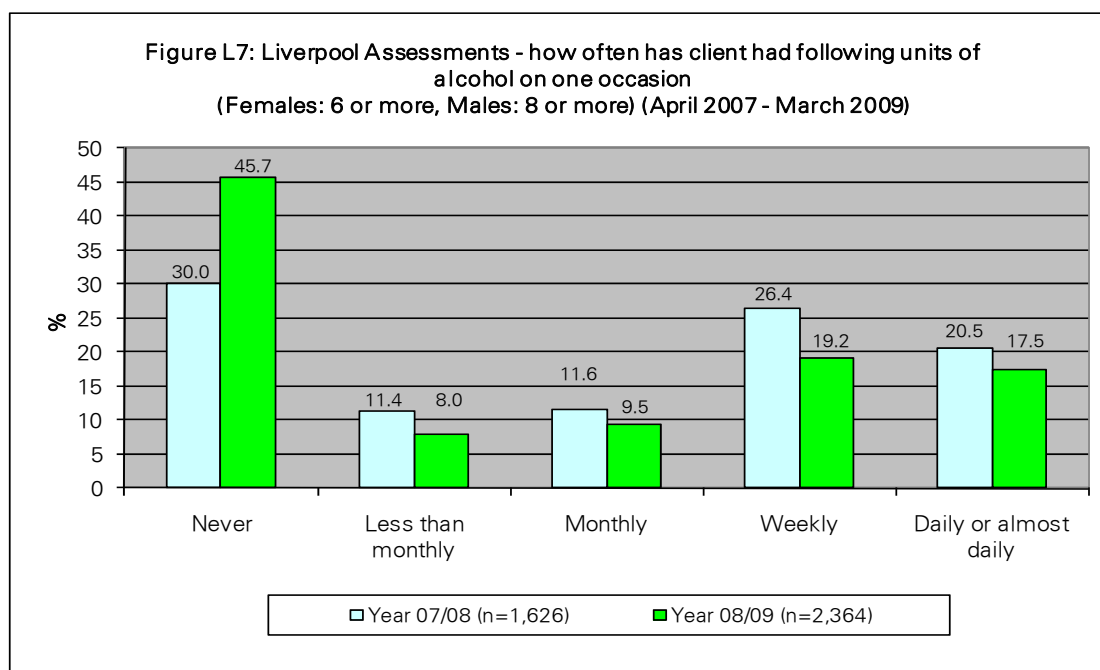


Over four in ten clients assessed in 06/07 (41.2%) reported having injected in their lifetime. This proportion dropped in 07/08 to 34.8% and 08/09 saw a further decrease where under three in ten coming into contact with DIP (29.3%) reported having injected in their lifetime. The proportions of clients who had ever shared equipment mirrored the trend of those who had ever injected in their lifetime injectors, with the highest proportion in 06/07 (13.6%) and a gradual decrease in both 07/08 (10.2%) and 08/09 (7.9%) of those who had ever shared. The proportions of clients who reported sharing in the month prior to their assessment have also followed the same trend, with the highest proportion coming in 06/07 (7.7%).

### Alcohol Consumption



Clients assessed in both 07/08 and 08/09 displayed a similar pattern around consumption of alcohol. Almost half (47.9% and 49.7% respectively) in both time periods reported not having drunk alcohol at all in the last month while similar proportions reported drinking alcohol on a daily basis in both years (14.6% in 07/08, 14.1% in 08/09).



Just over a third of clients assessed in 08/09 reported consuming in excess of recommended drinking levels on one occasion on at least a weekly basis (36.7%), a substantial decrease from 07/08 where almost half (46.9%) reported drinking above recommended levels.

## Offences Committed

Table L4: Offending that led to contact with Liverpool DIP (06/07, 07/08 & 08/09)

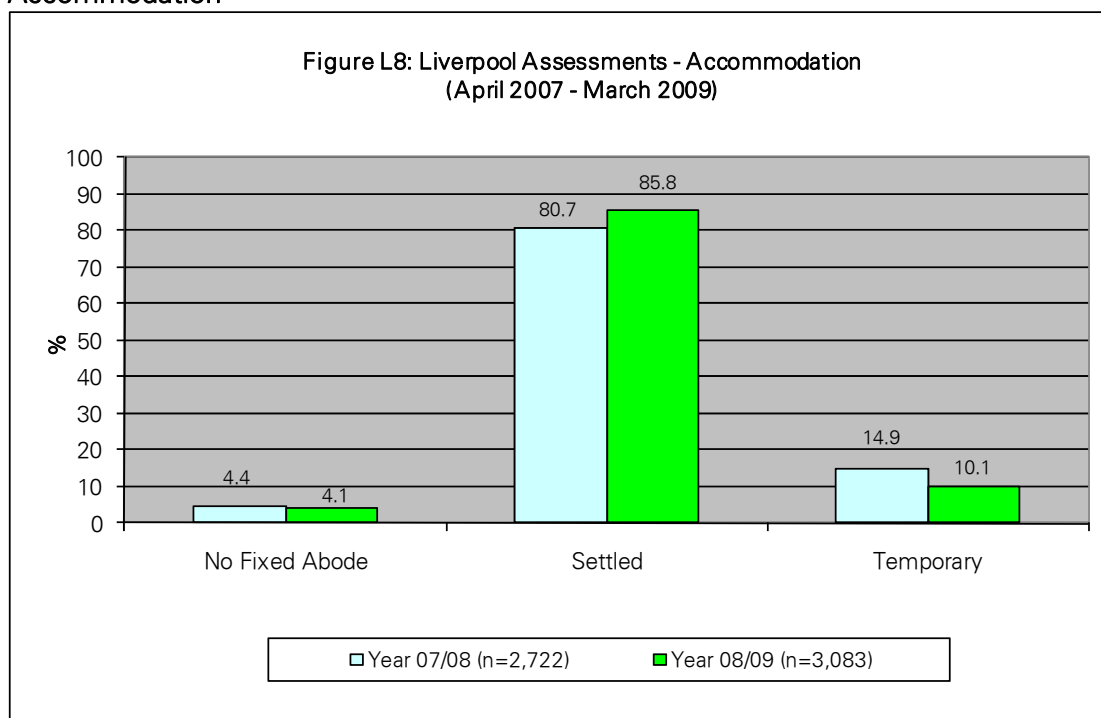
Offence	Offending 06/07 (n=2,437)		Offending 07/08 (n=2,736)		Offending 08/09 (n=3,078)	
	Number	%	Number	%	Number	%
Begging	115	4.7	69	2.5	125	4.1
Breach	126	5.2	141	5.2	135	4.4
Burglary	269	11.0	232	8.5	241	7.8
Criminal Damage	19	0.8	22	0.8	25	0.8
Firearms/Weapons	19	0.8	21	0.8	26	0.8
Fraud	32	1.3	45	1.6	57	1.9
Going equipped	32	1.3	23	0.8	20	0.6
Handling	49	2.0	51	1.9	53	1.7
MDA Offences	481	19.7	745	27.2	937	30.4
Motoring Offence	37	1.5	30	1.1	39	1.3
Other	46	1.9	32	1.2	41	1.3
Prostitution	16	0.7	9	0.3	22	0.7
Public Order	27	1.1	37	1.4	90	2.9
Robbery	118	4.8	119	4.3	117	3.8
Shoplifting	675	27.7	732	26.8	759	24.7
Theft	191	7.8	197	7.2	224	7.3
Theft - Car	225	9.2	230	8.4	186	6.0
Warrant	144	5.9	158	5.8	70	2.3
Wounding/Assault	49	2.0	56	2.0	132	4.3

*NB. In 06/07 24 clients did not provide information on offending, 13 did not provide it in 07/08 and 10 did not provide it in 08/09*

The most common offence committed by clients assessed by Liverpool DIP in 06/07 was shoplifting (27.7%) but proportions of offenders for this offence decreased slightly year by year. By contrast, proportions of clients committing MDA Offences increased over the three years and in both 07/08 (27.2%) and 08/09 (30.4%) the most common offences committed by clients entering DIP were MDA offences. In addition proportions of clients arrested for both burglary and "theft – car" offences saw slight decreases year on year over the time period.



## Accommodation



Over eight in ten clients (85.8%) assessed by Liverpool DIP in 08/09 reported as being in settled accommodation, an increase on the proportion in 07/08 (80.7%). In contrast there was a 4.8% decrease in the proportion of clients who reported being in temporary accommodation at the time of their assessment between 07/08 and 08/09.

#### 4.4 Liverpool Summary

- ❖ The number of clients assessed via a DIR increased year on year between 06/07 and 08/09.
- ❖ The vast majority of clients assessed in all three time periods were white and proportions of males assessed through DIP increased year on year. Liverpool saw a far younger profile of clients coming into contact with DIP through the full assessment process in 08/09 mirroring the trend of 07/08.
- ❖ The majority of clients transferred into Liverpool DIP were again white males with clients aged between 35 and 39 the largest age grouping.
- ❖ There was a proportional decrease in heroin users assessed in 08/09 compared to previous years but it remains the most commonly used drug by those assessed in Liverpool. There was also a proportional decreases seen in crack users assessed. In contrast to this, there were increases in the proportion of cocaine users assessed over the three year period.
- ❖ There was a considerable decrease in clients' weekly spend on drugs over the three years with almost half of all clients in 08/09 reporting as spending between £0 and £50 per week on drugs.
- ❖ There was a slight increase in the proportion of clients assessed who were currently receiving structured drug treatment in 08/09 compared to 07/08. In addition there was a decrease in the proportions who had received treatment in the two years prior to their assessment in 08/09 compared to previous years.
- ❖ There was a consistent drop in the proportions of clients assessed who had either ever injected, ever shared equipment or shared equipment in the month prior to assessment across the time period.
- ❖ Almost half of clients assessed had not consumed alcohol in the last month in 08/09, a similar proportion to that of 07/08. However, over a third of all clients assessed in 08/09 reported drinking in excess of recommended levels on at least a weekly basis in 08/09, a decrease on proportions in 07/08 .
- ❖ Shoplifting was the most common offence committed by clients in 06/07 but proportions of clients arrested for this offence decreased in 07/08 and again in 08/09. In contrast, proportions of clients arrested for MDA offences increased over the three years and it was the most common offence that clients coming into DIP were arrested for in both 07/08 and 08/09.
- ❖ The majority of clients assessed in both 07/08 and 08/09 were in settled accommodation.



## 5.0 Sefton

### 5.1 Sefton – Assessments

Sefton DIP team assessed 711 clients in 06/07, this rose to 790 clients in 07/08 and again slightly in 08/09 when they assessed 803 clients in total.

#### Ethnicity

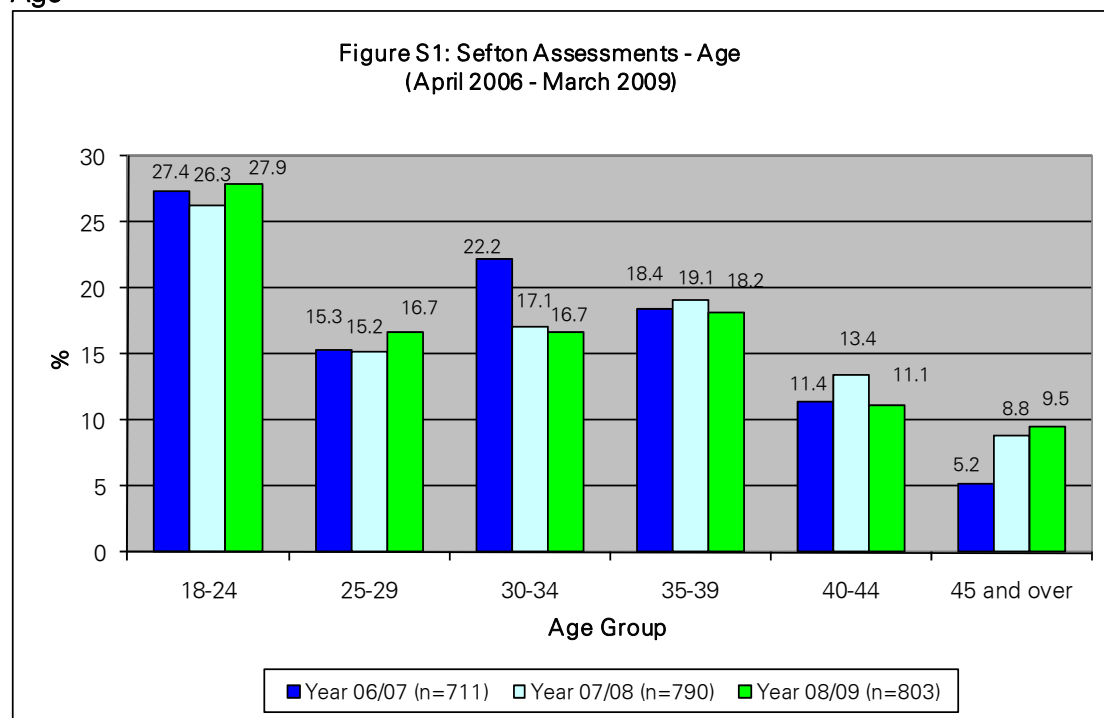
Table S1: Ethnic background of clients assessed in Sefton (06/07, 07/08 & 08/09)

Year		Black	Mixed	White	Other
06/07 (n=701)	Number	3	4	693	1
	%	0.4%	0.6%	98.9%	0.1%
07/08 (n=786)	Number	4	3	779	
	%	0.5%	0.4%	99.1%	
08/09 (n=799)	Number	5	3	791	
	%	0.6%	0.4%	99.0%	

*NB: In 06/07 ten clients did not provide information regarding ethnicity, in 07/08 four clients did not provide this information and in 08/09 four clients did not provide ethnicity information.*

The vast majority of clients assessed in all three time periods by Sefton DIP team were white.

#### Age



All three years displayed a similar pattern in terms of the ages of clients assessed with only slight differences emerging from year to year. Just over a quarter of all assessments in each of the three years were carried out with clients under the age of 25. There was a slight decrease over the three years in the proportion of assessments carried out with clients between 30 and 34 years of age but a slight increase over the three years in the proportion of assessments with clients aged 45 and older.

### **Gender**

Almost eight in ten clients assessed in 06/07 by Sefton DIP were male (78.8%). This proportion fell slightly in 07/08 to 76.8% but rose again in 08/09 where just under eight in ten clients (79.2%) coming into contact with DIP were male.

## 5.2 Sefton – Transfers In

This section looks at the demographic characteristics of clients who were assessed and/or care planned in another area and subsequently referred back to Sefton for DIP case management. In 06/07 there were a total of 169 clients transferred into Sefton, this dropped to 142 clients in 07/08 but rose again slightly in 08/09 with 151 clients being transferred into the DIP team.

### Ethnicity

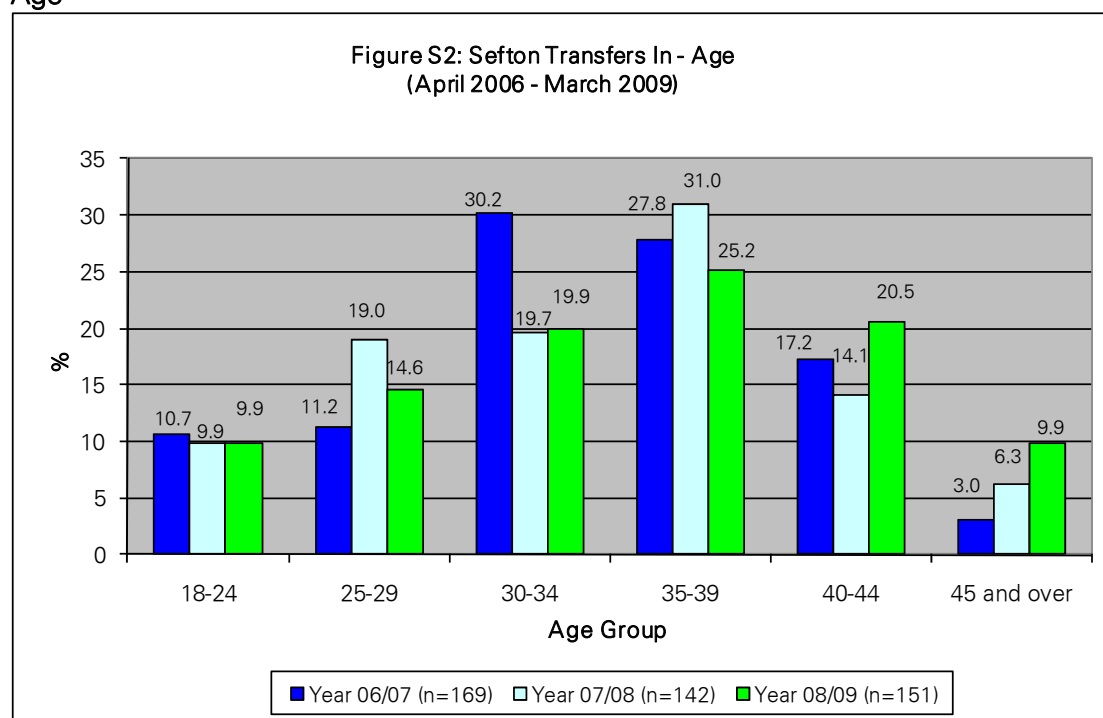
Table S2: Ethnic background of clients transferred into Sefton (06/07, 07/08 & 08/09)

Year		Black	Mixed	White
06/07 (n=166)	Number	1	1	164
	%	0.6%	0.6%	98.8%
07/08 (n=142)	Number	1	1	140
	%	0.7%	0.7%	98.6%
08/09 (n=150)	Number			150
	%			100%

*NB: In 06/07 three clients did not provide information regarding ethnicity and in 08/09 one client did not provide ethnicity information.*

The vast majority of clients transferred into Sefton DIP team in all three years were white.

### Age



Just over three in ten clients (30.4%) transferred into Sefton in 08/09 were aged 40 and over, an increase on both 06/07 and 07/08's proportions (20.2% and 20.4% respectively). There was a gradual decrease over the three year period in proportions of clients aged between 30 and 39. In 06/07 almost six in ten clients (58.0%) were between 30 and 39, this proportion dropped to just over half (50.7%) in 07/08 and again to 45.1% in 08/09.

### **Gender**

Just over seven in ten clients transferred into Sefton in 06/07 were male (71.6%). This proportion dropped in 07/08 to 66.2% but rose again in 08/09 with over three-quarters of clients (76.2%) transferred into Sefton being male.

### 5.3 Sefton – Drug Use, Offending & Accommodation

#### Drug Use

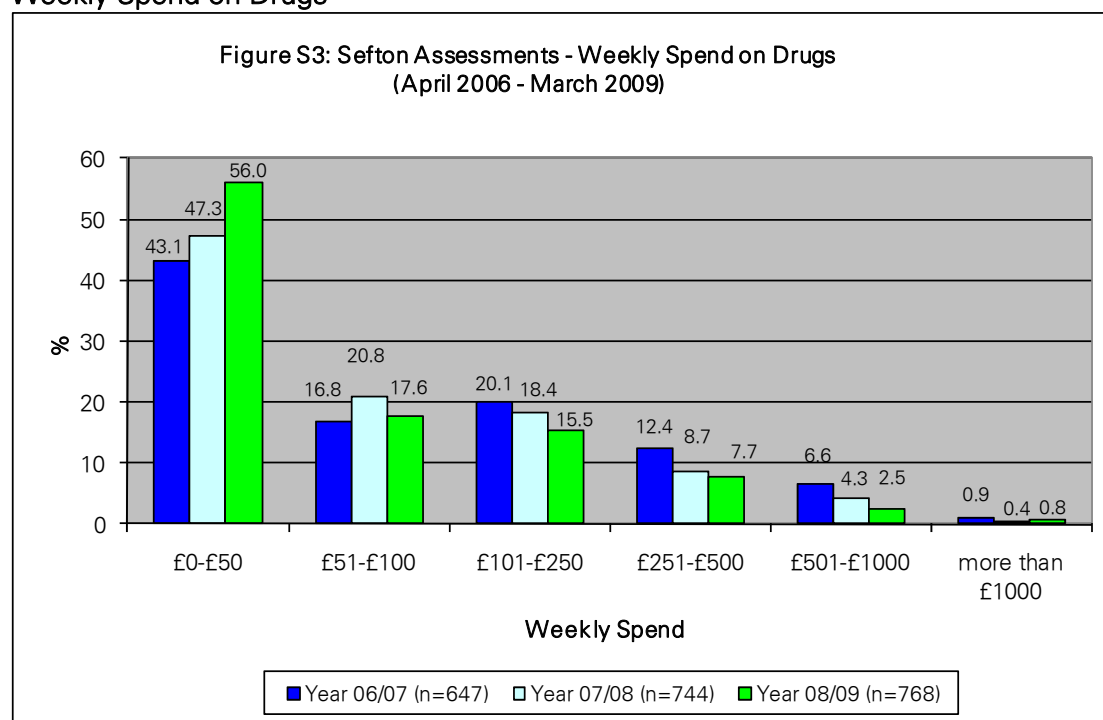
Table S3: Drug use of clients assessed by Sefton DIP (06/07, 07/08 & 08/09)

Year		Amphet.	Benzo.	Cannabis	Cocaine	Crack	Ecstasy	Heroin	Meth.	Other
06/07 (n=656)	n	1	12	131	275	282	7	358	46	1
	%	0.2%	1.8%	20.0%	41.9%	43.0%	1.1%	54.6%	7.0%	0.2%
07/08 (n=753)	n	6	28	109	356	289	8	387	44	10
	%	0.8%	3.7%	14.5%	47.3%	38.4%	1.1%	51.4%	5.8%	1.3%
08/09 (n=772)	n	12	35	129	392	291	8	350	48	10
	%	1.6%	4.5%	16.7%	50.8%	37.7%	1.0%	45.3%	6.2%	1.3%

*NB: Figures will add up to greater than 100% as clients are allowed to indicate more than one drug of use.*

Over half of all clients assessed in 06/07 reported using heroin (54.6%). This proportion has dropped since then, with just over half of those assessed in 07/08 using heroin (51.3%) and falling to 45.3% in 08/09. The same trend can be seen when looking at clients reporting use of crack. In 06/07, over four in ten clients assessed (43.0%) used crack, this proportion dropped to 38.4% in 07/08 and again in 08/09 when 37.7% reported using crack. In contrast to this, proportions of clients using cocaine have risen over the three years and it surpassed heroin as the most commonly used drug amongst those coming into contact with DIP in 08/09. Just over four in ten clients (41.9%) reported using cocaine in 06/07, this proportion grew to 47.3% in 07/08 and again in 08/09 where over half (50.8%) of all clients assessed stated that they used cocaine.

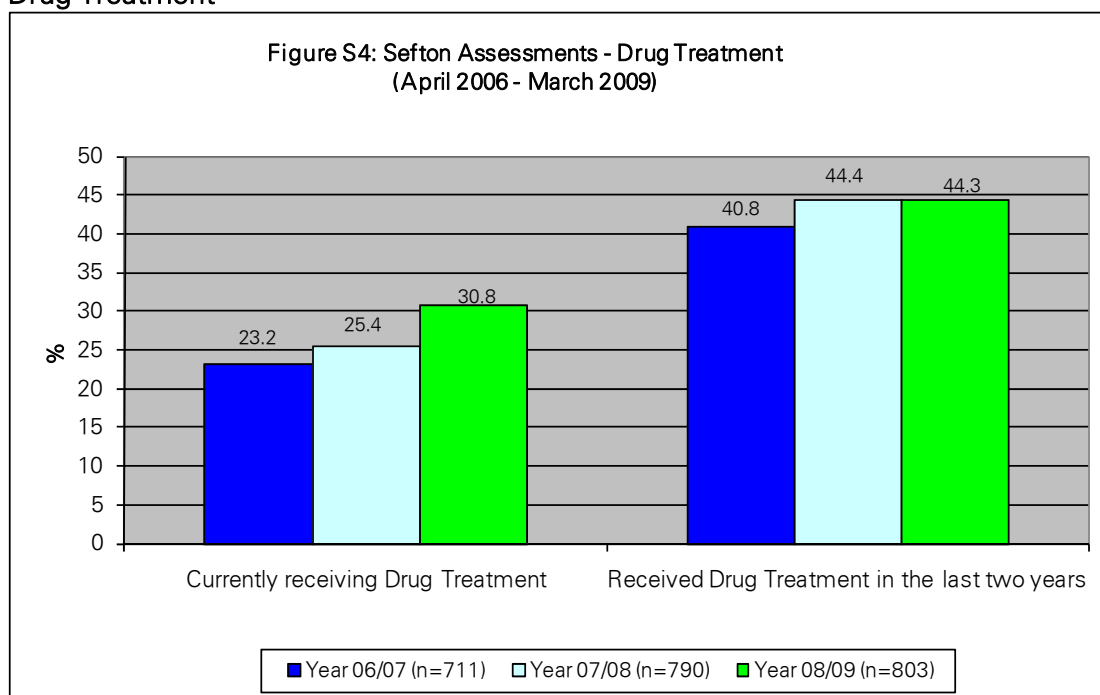
#### Weekly Spend on Drugs





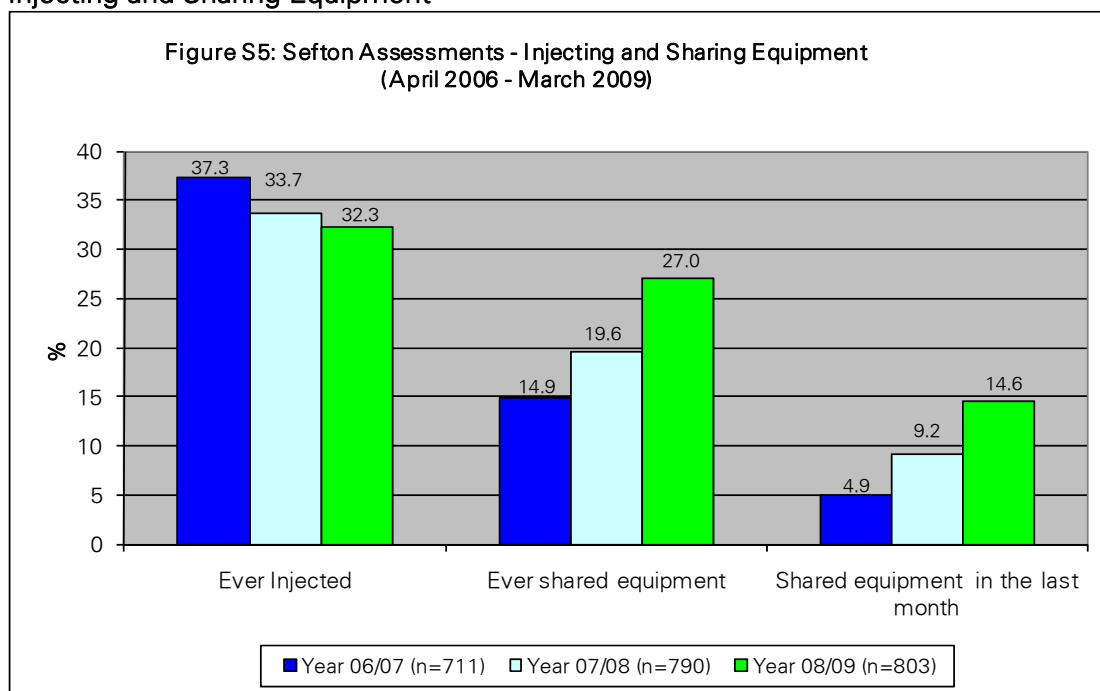
In 06/07, just over four in ten clients (43.1%) assessed by Sefton DIP reported spending between £0 and £50 per week on drugs. This proportion increased in 07/08 to 47.3% and again in 08/09 where over half of assessed clients (56.0%) reported spending levels at this low end of the scale. In addition to this, only just over one in ten of those assessed in 08/09 (11.0%) reported spending in excess of £250 per week on drugs, slightly down on proportions in 07/08 (13.4%) and a substantial decrease on proportions spending at this high end of the scale in 06/07 (19.9%).

### Drug Treatment



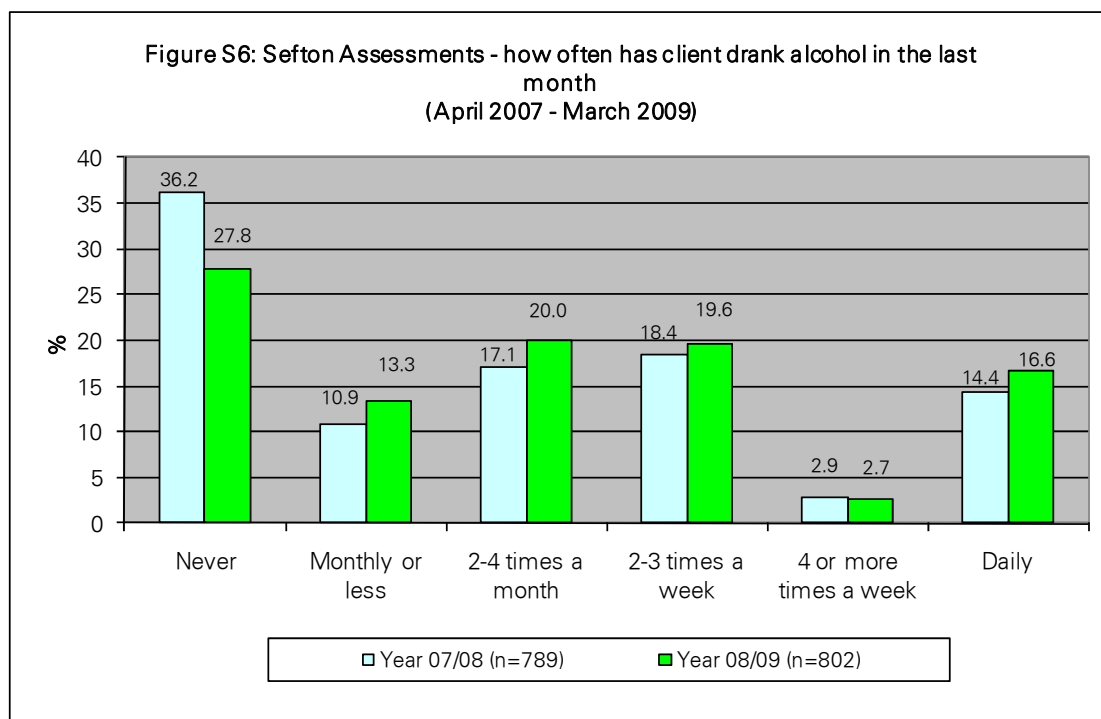
Just under a quarter of clients (23.2%) assessed in 06/07 reported being in treatment at the time of their assessment, this proportion rose slightly in 07/08 to 25.4% and again in 08/09 when over three in ten clients (30.8%) reported as being currently in treatment at the time they came into contact with DIP. The proportions of clients assessed who had reported receiving drug treatment in the last two years remained largely consistent across the time period with over four in ten clients assessed falling into this category in each of the three years examined.

## Injecting and Sharing Equipment

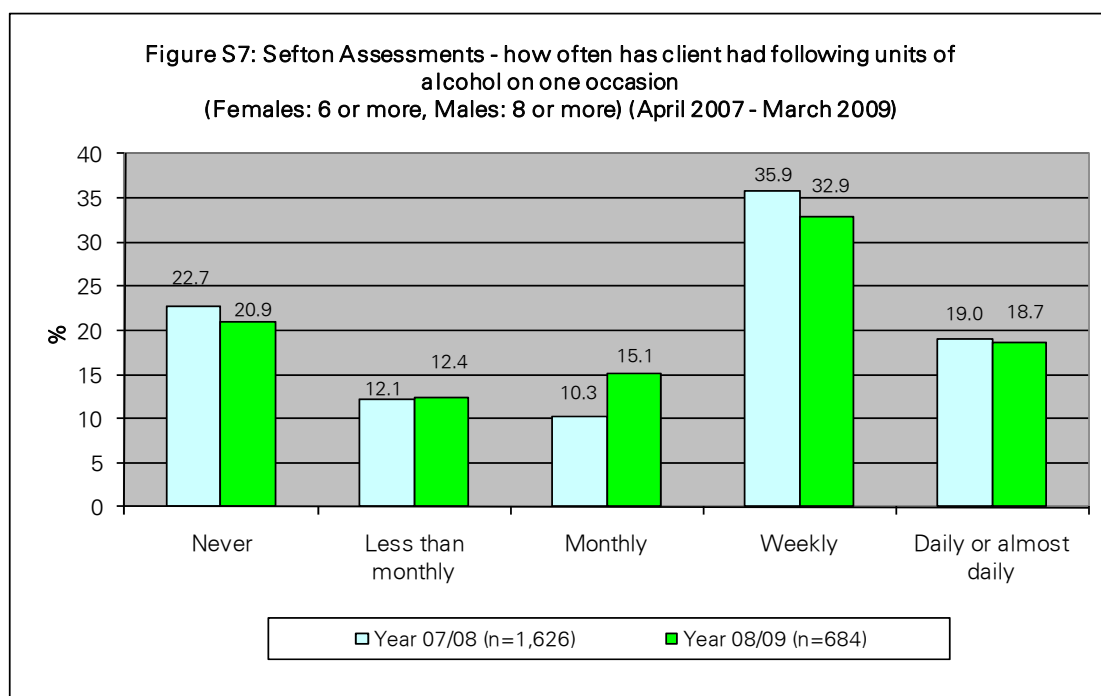


The proportion of clients who reported injecting in their lifetime decreased steadily over the three year period with just under a third of clients assessed in 08/09 (32.3%) reporting having ever injected. By contrast, the proportions of clients who had ever shared equipment rose consistently over the period, with over a quarter of clients in 08/09 reporting having ever shared equipment (27.0%) compared to just 14.9% in 06/07. The same trend was noted when looking at clients who shared equipment in the month prior to assessment. In 06/07, 4.9% of clients had shared equipment in the last month, this proportion rose in 07/08 to 9.2% and again in 08/09 to 14.6%.

## Alcohol Consumption



Just over a quarter of clients assessed in 08/09 (27.8%) reported as not having consumed alcohol in the previous month, a drop from 07/08 where 36.2% of those assessed had not consumed alcohol.



Over half of clients assessed reported drinking in excess of daily recommended levels on a single occasion on at least a weekly basis in both years (54.9% and 51.6% respectively).

### Offences Committed

Table S4: Offending that led to contact with Sefton DIP (06/07, 07/08 & 08/09)

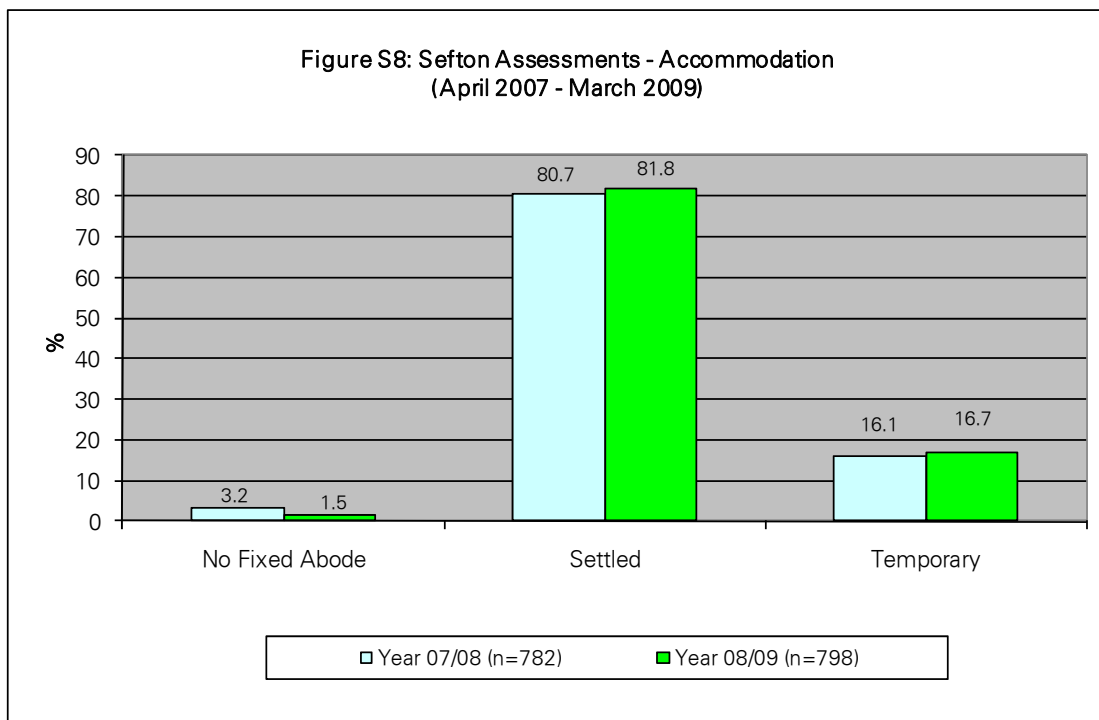
Offence	Offending 06/07	Offending 07/08	Offending 08/09
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	(n=660)		(n=781)		(n=791)	
	Number	%	Number	%	Number	%
Begging	1	0.2	7	0.9	14	1.8
Breach	17	2.6	31	4.0	10	1.3
Burglary	88	13.3	75	9.6	85	10.7
Criminal Damage	6	0.9	3	0.4	9	1.1
Firearms/Weapons	8	1.2	2	0.3	7	0.9
Fraud	10	1.5	17	2.2	11	1.4
Going equipped	3	0.5	4	0.5	4	0.5
Handling	13	2.0	17	2.2	19	2.4
MDA Offences	134	20.3	209	26.8	219	27.7
Motoring Offence	9	1.4	9	1.2	11	1.4
Other	16	2.4	8	1.0	12	1.5
Prostitution	3	0.5				
Public Order	6	0.9	6	0.8	19	2.4
Robbery	23	3.5	13	1.7	12	1.5
Shoplifting	230	34.8	285	36.5	260	32.9
Theft	46	7.0	60	7.7	66	8.3
Theft - Car	53	8.0	54	6.9	50	6.3
Warrant	7	1.1	7	0.9	1	0.1
Wounding/Assault	41	6.2	15	1.9	38	4.8

*NB. In 06/07 51 clients did not provide information on offending, nine did not provide it in 07/08 and 12 did not provide it in 08/09*

The most common offence committed by clients assessed by Sefton DIP in all three time periods was shoplifting and 08/09 saw just under a third of clients (32.9%) coming into contact with the DIP team as a result of this offence. The proportions of clients arrested for MDA offences increased year on year and 08/09 saw over a quarter of clients (27.7%) being assessed by DIP workers following this offence. In addition to this, the proportions entering DIP on wounding or assault offences increased by 2.9% between 07/08 and 08/09 and a similar increase was seen in arrests for public order offences. In contrast to this, proportions of clients committing robbery or "theft – car" offences decreased consistently over the three year period.

## Accommodation



Over eight in ten clients (81.8%) assessed by Sefton DIP in 08/09 reported being in settled accommodation, with just 1.5% reporting as being of no fixed abode, similar proportions to that of 07/08 in both instances.

## 5.4 Sefton Summary

- ❖ There was a slight increase in the number of clients assessed via a DIR in 08/09 compared to 07/08 after a more substantial rise had been seen between 06/07 and 07/08.
- ❖ The majority of clients assessed in all three time periods were white males. Sefton saw only slight differences emerge across the three years when looking at the age of clients presenting to DIP.
- ❖ The majority of clients transferred into Sefton DIP were white but there was a slightly lower proportion of males in this group in all three years compared to those assessed via a DIR. There was also a slight shift to an older client profile over the three years.
- ❖ Heroin was the most commonly reported used drug in Sefton of all clients assessed in both 06/07 and 07/08. Proportions of clients using either crack or heroin decreased consistently over the time period. In contrast, proportions of clients using cocaine rose considerably over the three years and 08/09 saw it surpass heroin as the most commonly used drug in Sefton amongst clients coming into contact with DIP.
- ❖ There was a considerable decrease in clients' weekly spend on drugs over the three years with over half of all clients in 08/09 reporting as spending between £0 and £50 per week on drugs.
- ❖ The proportions of clients who reported being in treatment at the time of their assessment rose steadily over the three years between 06/07 and 08/09. While there was a slight rise in 07/08 of proportions of clients assessed who had been in treatment in the last two years compared to 06/07, this proportion remained similar in 08/09.
- ❖ There was a consistent drop in the proportion of clients assessed who had ever injected across the time period. However, there was a proportional increase in clients assessed over the three year period who had either shared in their lifetime or who reported sharing in the last month.
- ❖ Almost four in ten clients' assessed in both 07/08 and 08/09 reported consuming alcohol on at least a weekly basis. Furthermore, over half reported drinking in excess of daily recommended levels on one occasion on at least a weekly basis in both years also.
- ❖ Shoplifting was the most common offence in all three time periods. There was also an increase in proportions of clients arrested for MDA offences over the three years.

- ❖ The majority of clients assessed in both 07/08 and 08/09 were in settled accommodation.

## 6.0 St Helens

### 6.1 St Helens – Assessments

St Helens DIP team assessed 226 clients in 06/07, this rose substantially to 521 clients in 07/08 with the introduction of Test on Arrest and again in 08/09 when they assessed 624 clients in total.

#### Ethnicity

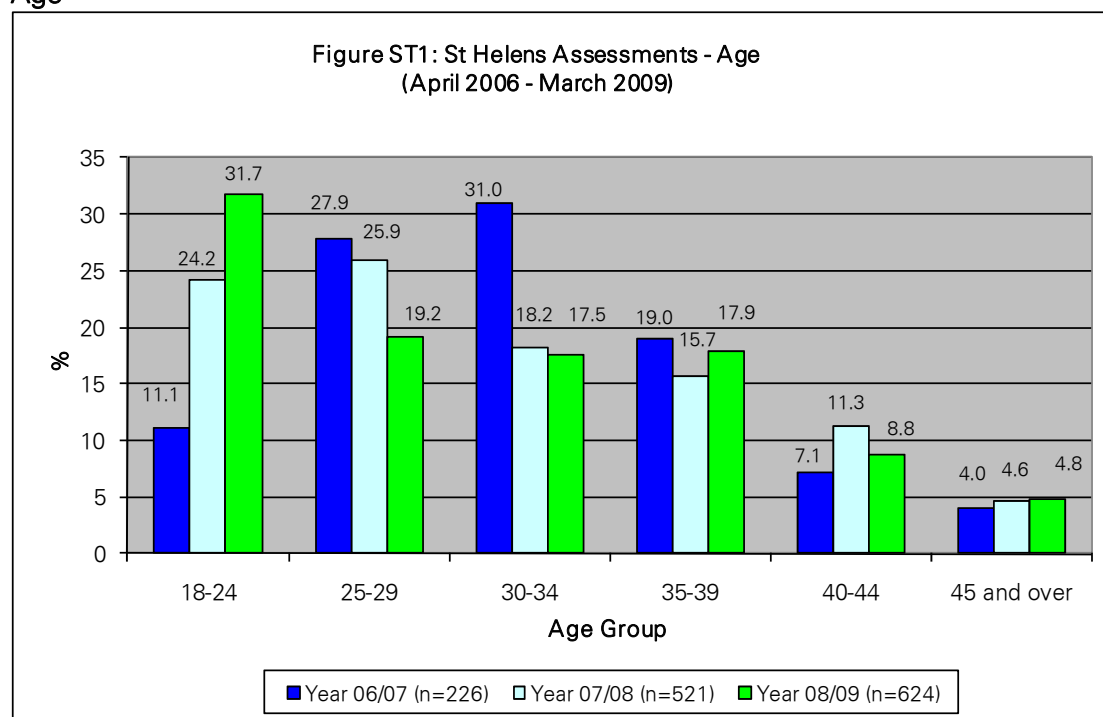
Table ST1: Ethnic background of clients assessed in St Helens (06/07, 07/08 & 08/09)

Year		Black	Mixed	White
06/07 (n=224)	Number			224
	%			100%
07/08 (n=519)	Number	2	1	516
	%	0.4%	0.2%	99.4%
08/09 (n=623)	Number	2	1	620
	%	0.3%	0.2%	99.5%

*NB: In both 06/07 and 07/08 two clients did not provide information regarding ethnicity and in 08/09 one client did not provide ethnicity information.*

The vast majority of clients assessed in all three time periods by St Helens DIP team were white.

#### Age





Just over one in ten clients assessed by St Helens in 06/07 were aged between 18 and 24 (11.1%). The proportion of clients falling into this age group rose to almost a quarter of clients in 07/08 (24.2%) and again in 08/09 where over three in ten clients (31.7%) assessed were under 25. By contrast, the proportion of clients assessed aged between 25 and 34 has dropped considerably over the three year period. Almost six in ten clients assessed in 06/07 (58.9%) were aged between 25 and 34, this proportion dropped to 44.1% in 07/08 and again in 08/09 to 36.7%.

### **Gender**

Over eight in ten clients assessed in 06/07 by St Helens DIP were male (82.7%). This proportion rose in 07/08 to 85.4% but fell slightly in 08/09 where 85.1% of clients coming into contact with the criminal justice system through DIP were male.

## 6.2 St Helens – Transfers In

This section looks at the demographic characteristics of clients who were assessed and/or care planned in another area and subsequently referred back to St Helens for DIP case management. In 06/07 there were a total of 163 clients transferred into St Helens, this dropped to 148 clients in 07/08 and there was a substantial drop seen in 08/09 with 96 clients in total being transferred into the DIP team.

### Ethnicity

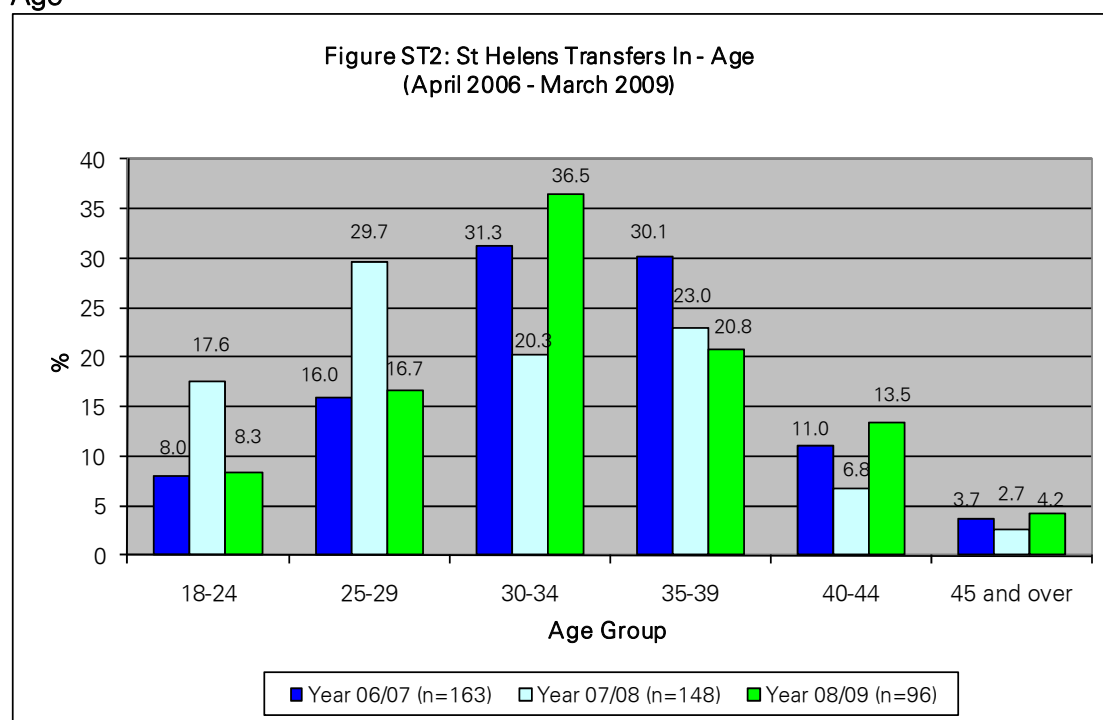
Table ST2: Ethnic background of clients transferred into St Helens (06/07, 07/08 & 08/09)

Year		Other	White
06/07 (n=162)	Number		162
	%		100%
07/08 (n=148)	Number		148
	%		100%
08/09 (n=95)	Number	1	94
	%	1.1%	98.9%

*NB: In both 06/07 and 08/09 one client did not provide information regarding ethnicity.*

The vast majority of clients transferred into St Helens DIP team in all three years were white.

### Age



Just under a quarter of clients transferred in to St Helens DIP in 06/07 were aged between 18 and 29 (24.0%). There was a substantial shift in 07/08 towards a younger profile of client when almost half of clients transferred in were aged between 18 and 29 (47.3%). However, this was not replicated in 08/09 where only a quarter of clients transferred in (25.0%) were aged between 18 and 29 and almost six in ten (57.3%) were aged between 30 and 39.

### **Gender**

Of those clients transferred into St Helens in 06/07, just under nine in ten (89.6%) were male. This proportion fell substantially in 07/08 to just over three-quarters of clients being male (77.0%) and remained at this level in 08/09 (77.1%).

### 6.3 St Helens – Drug Use, Offending & Accommodation

#### Drug Use

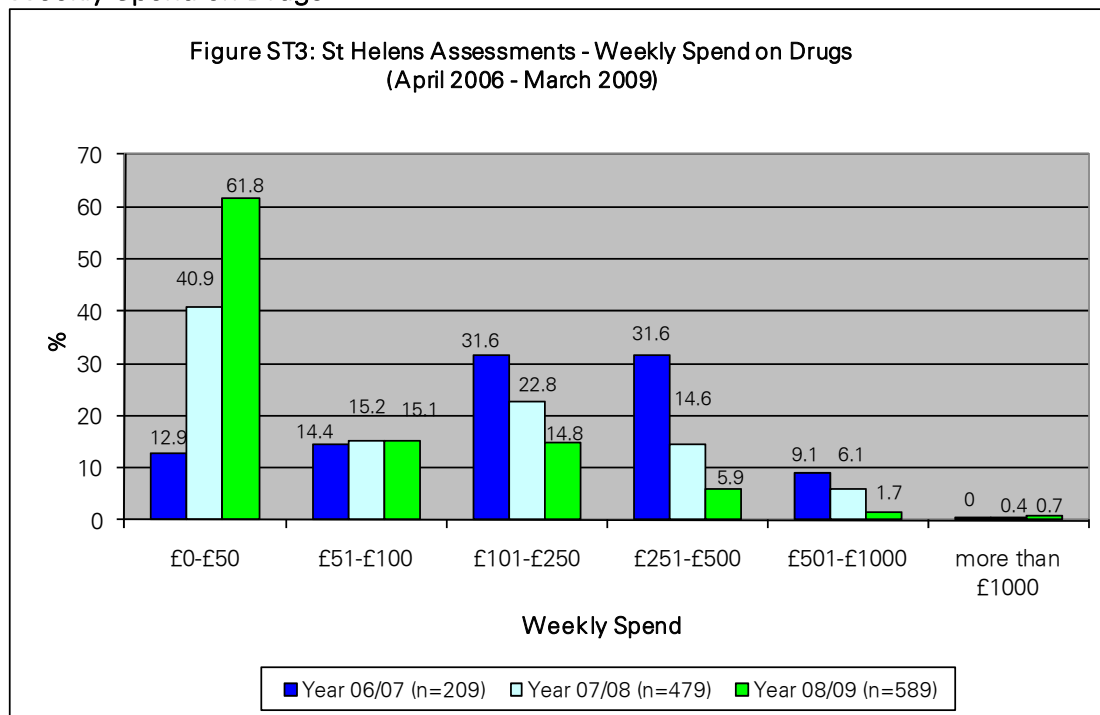
Table ST3: Drug use of clients assessed by St Helens DIP (06/07, 07/08 & 08/09)

Year		Amphet.	Benzo.	Cannabis	Cocaine	Crack	Ecstasy	Heroin	Meth.	Other
06/07 (n=212)	n	12	24	15	40	85	2	186	35	6
	%	5.7%	11.3%	7.1%	18.9%	40.1%	0.9%	87.7%	16.5%	2.8%
07/08 (n=488)	n	18	48	81	215	193	9	300	49	9
	%	3.7%	9.8%	16.6%	44.1%	39.5%	1.8%	61.5%	10.0%	1.8%
08/09 (n=591)	n	13	23	147	361	134	7	240	31	18
	%	2.2%	3.9%	24.9%	61.1%	22.7%	1.2%	40.6%	5.2%	3.0%

*NB: Figures will add up to greater than 100% as clients are allowed to indicate more than one drug of use.*

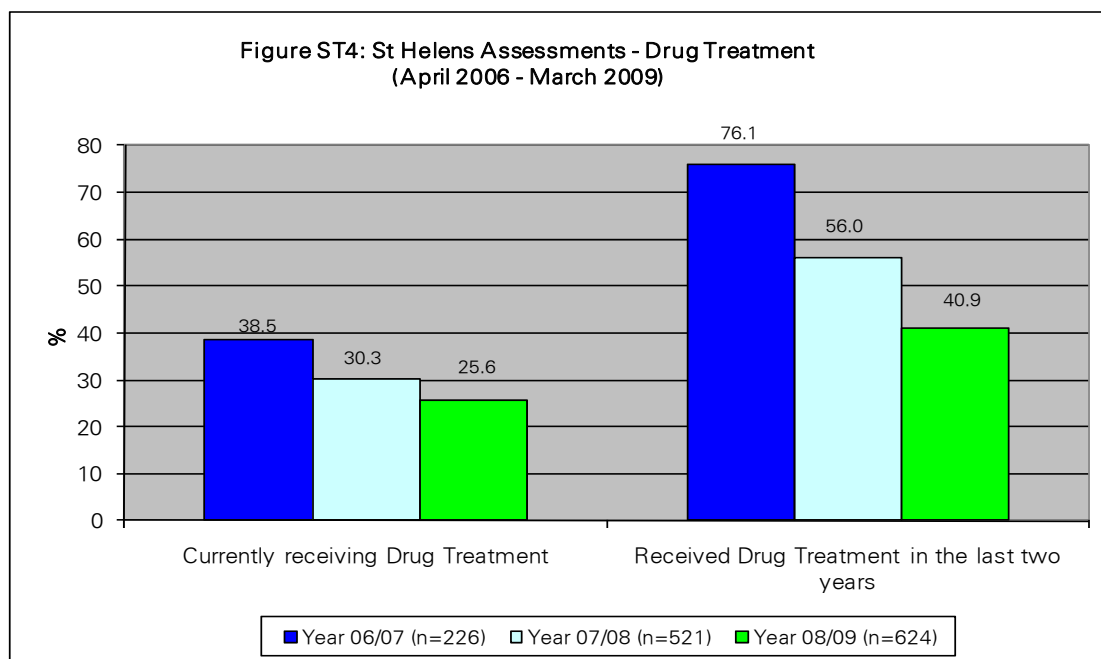
Heroin was the drug most commonly used in St Helens in both 06/07 and 07/08 but proportions of clients entering DIP who reported using heroin decreased consistently over the three years. Almost nine in ten clients assessed in 06/07 (87.7%) reported using heroin. This proportion dropped substantially to 61.5% in 07/08 and again in 08/09 where just over four in ten of those assessed (40.6%) reported its use. Proportions of clients using crack and methadone also dropped substantially over the three year period. Over four in ten clients assessed in 06/07 (40.1%) reported using crack but this had dropped to just over one in five (22.7%) of those assessed in 08/09. Similarly 16.5% of clients assessed reported using methadone in 06/07 but this dropped to just 5.2% in 08/09. In contrast to this, proportions using cocaine increased substantially over the three year period and it was the most commonly used drug among DIP clients in 08/09. Just under one in five (18.9%) reported its use in 06/07, this more than doubled in 07/08 to 44.1% and increased again in 08/09 with over six in ten (61.1%) reporting its use. In addition to this, proportions using cannabis also increased in a similar manner to cocaine. Just 7.1% reported its use in 06/07, this increased over threefold to 24.9% in 08/09.

## Weekly Spend on Drugs



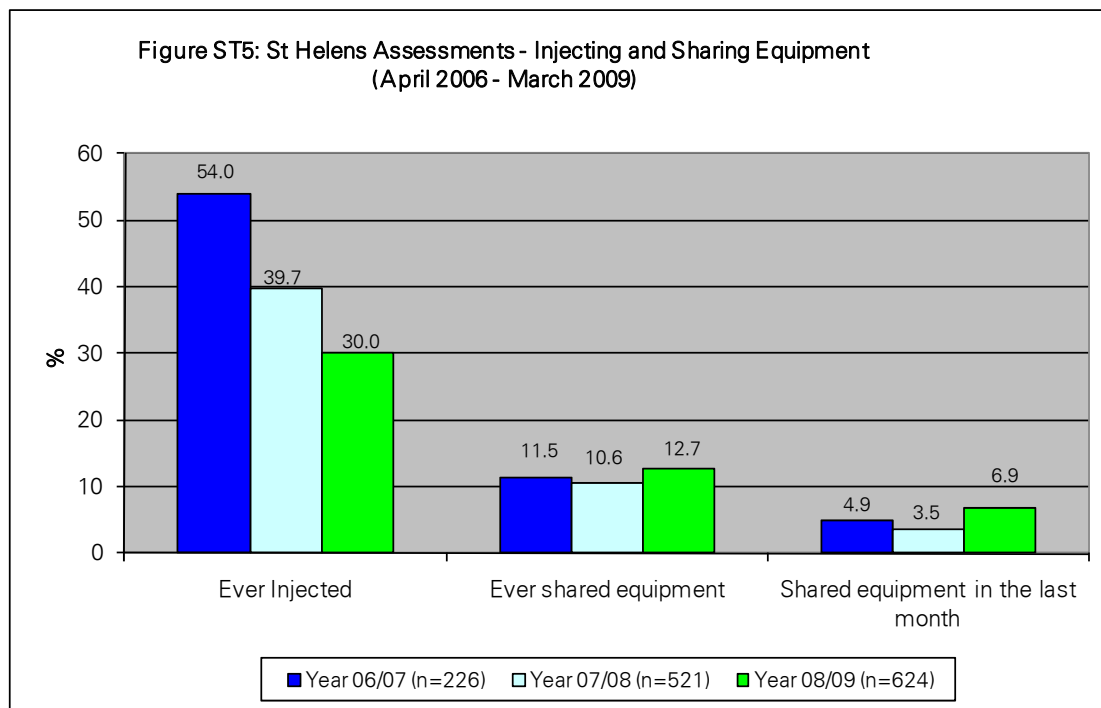
In 06/07, just over one in ten clients (12.9%) assessed by St Helens DIP reported spending between £0 and £50 per week on drugs. This proportion increased in 07/08 when four in ten clients (40.9%) reported spending at this level and again in 08/09 when over six in ten clients (61.8%) reported spending at this low end of this scale. In contrast to this, spending at the high end of the scale reduced substantially over the three years. In 06/07 four in ten clients (40.7%) spent in excess of £250 per week on drugs. This proportion dropped to 21.1% in 07/08 and again in 08/09 where under one in ten (8.3%) reported spending this amount on a weekly basis.

## Drug Treatment



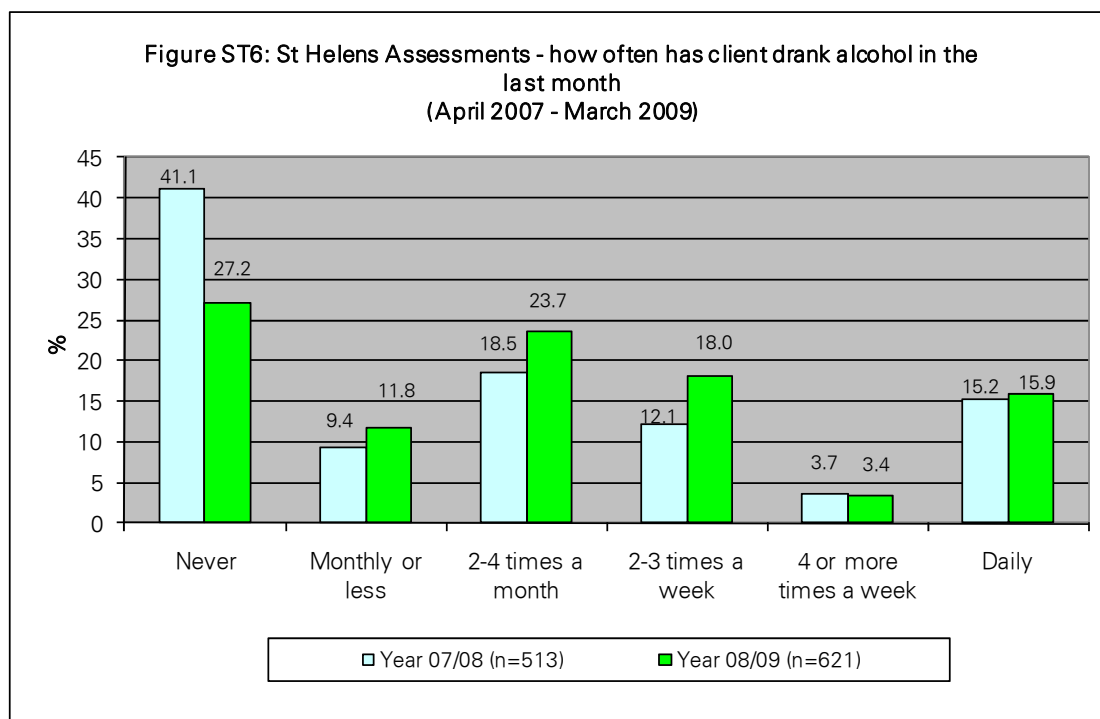
When looking at clients coming into contact with St Helens DIP who were either receiving drug treatment at the time of their assessment or who had received drug treatment in the last two years for their drug misuse, a trend of decreasing proportions year on year emerged. In 06/07, almost four in ten (38.5%) clients assessed were currently in treatment at the time of their assessment. This proportion decreased in 07/08 to 30.3% and again in 08/09 when just over a quarter (25.6%) of DIP clients in St Helens were currently in treatment at assessment stage. Over three-quarters of clients assessed in 06/07 (76.1%) reported receiving treatment in the last two years. This proportion dropped to 56.0% in 07/08 and again in 08/09 when four in ten clients (40.9%) assessed by the DIP team reported having had treatment for their drug misuse in the last two years.

### Injecting and Sharing Equipment

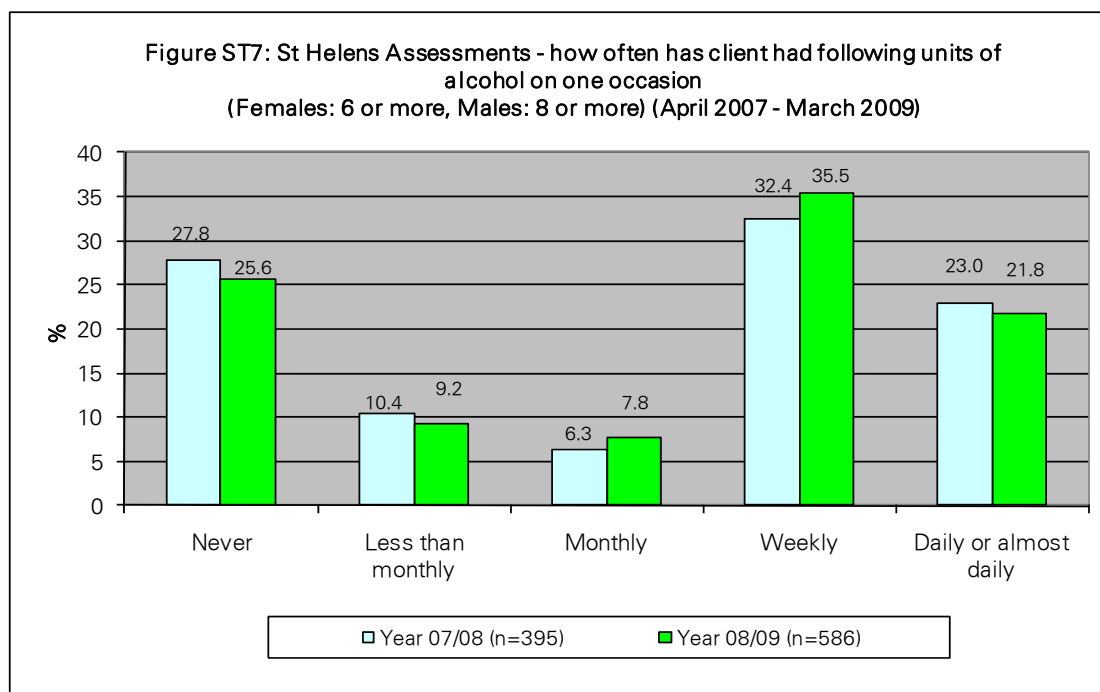


Over half of clients assessed by St Helens DIP team in 06/07 (54.0%) reported having injected in their lifetime. This proportion dropped substantially in 07/08 to 39.7% and again in 08/09 where just three in ten assessed (30.0%) had injected in their lifetime. The proportions of clients who had either ever shared equipment or shared equipment in the month prior to assessment fell between 06/07 and 07/08 but rose slightly between 07/08 and 08/09 in both categories to be at their highest level in any of the three years.

### Alcohol Consumption



Of those clients assessed by St Helens DIP in 08/09, just over a quarter (27.2%) reported never having consumed alcohol, a substantial decrease from 07/08 where over four in ten clients reported never having consumed alcohol (41.1%). In contrast, 15.9% of those assessed reported drinking alcohol on a daily basis in 08/09, a similar proportion to that of 07/08 (15.2%).



Over half of clients assessed in both 07/08 and 08/09 reported drinking in excess of daily recommended levels at least once a week (55.4% and 57.3% respectively).



## Offences Committed

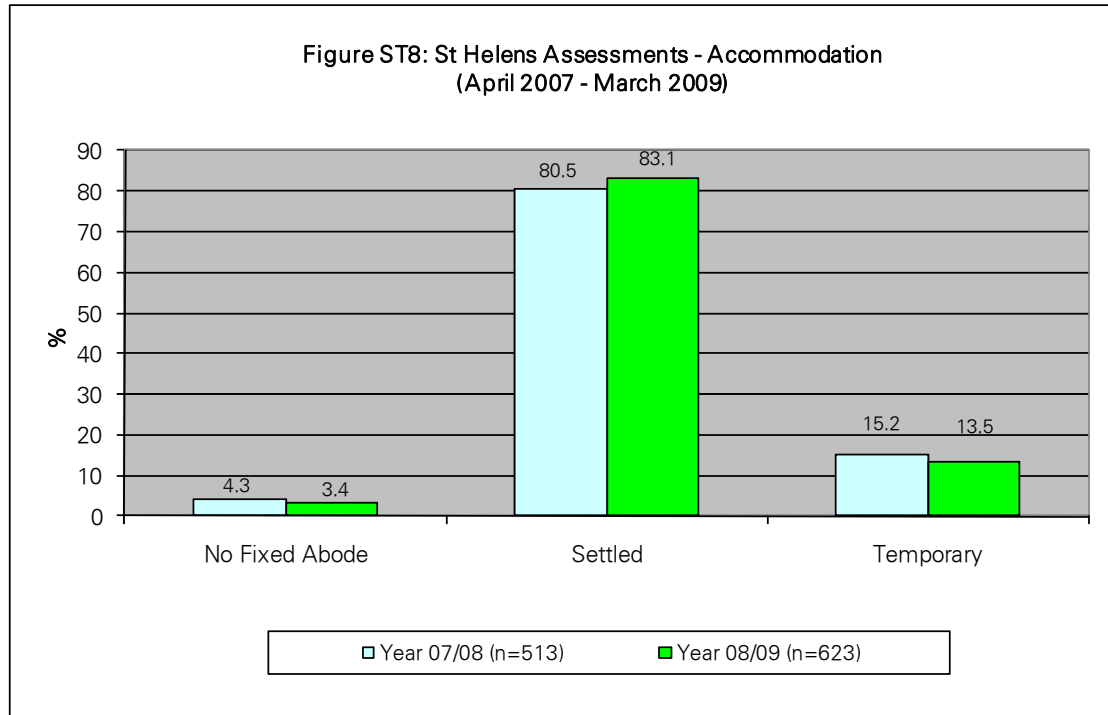
Table ST4: Offending that led to contact with St Helens DIP (06/07, 07/08 & 08/09)

Offence	Offending 06/07 (n=217)		Offending 07/08 (n=513)		Offending 08/09 (n=620)	
	Number	%	Number	%	Number	%
Begging			1	0.2	3	0.5
Breach	19	8.8	42	8.2	23	3.7
Burglary	28	12.9	51	9.9	49	7.9
Criminal Damage	1	0.5	7	1.4	11	1.8
Firearms/Weapons	4	1.8	2	0.4	5	0.8
Fraud	1	0.5	9	1.8	7	1.1
Going equipped			6	1.2	8	1.3
Handling	1	0.5	10	1.9	9	1.5
MDA Offences	23	10.6	160	31.2	206	33.2
Motoring Offence	6	2.8	9	1.8	13	2.1
Other	5	2.3	9	1.8	17	2.7
Public Order	4	1.8	6	1.2	22	3.5
Robbery	9	4.1	14	2.7	10	1.6
Shoplifting	92	42.4	163	31.8	163	26.3
Theft	16	7.4	56	10.9	49	7.9
Theft - Car	5	2.3	20	3.9	37	6.0
Warrant	32	14.7	9	1.8	6	1.0
Wounding/Assault	13	6.0	16	3.1	43	6.9

*NB. In 06/07 nine clients did not provide information on offending, eight did not provide it in 07/08 and four did not provide it in 08/09*

The most common offence committed by clients assessed by St Helens DIP in both 06/07 and 07/08 was shoplifting but 08/09 saw just over a quarter of clients (26.3%) coming into contact with the DIP team as a result of this offence compared to over four in ten (42.4%) in 06/07. The proportions of clients arrested for MDA offences increased substantially over the three year period and it was the most common offence committed by DIP clients in 08/09 with a third of clients (33.2%) being assessed by DIP workers following this offence. In addition, proportions of clients arrested for breaches, burglaries, robberies and warrants decreased consistently over the three year period. By contrast, arrests for "Theft – Car" increased year on year and there was a 3.8% increase between 07/08 and 08/09 in proportions of clients arrested for woundings or assaults.

## Accommodation



Over eight in ten clients (83.1%) assessed by St Helens DIP in 08/09 reported being in settled accommodation, a slight increase on that of 07/08 (80.5%). Furthermore, this was a slight decrease in clients reporting being of no fixed abode in 08/09 (3.4%) compared to 07/08 (4.3%).

## 6.4 St Helens Summary

- ❖ The number of clients assessed in St Helens via a DIR increased year on year between 06/07 and 08/09.
- ❖ The vast majority of clients assessed in all three time periods were white males. The profile of clients coming into contact with DIP through the full assessment process in 08/09 was younger than in the previous two years.
- ❖ The numbers of clients transferred into St Helens dropped substantially in 08/09 compared to the previous two years. The majority of these clients were white and male. The age profile across the three years was generally older than that of those who received full assessments; this was particularly evident in 08/09.
- ❖ Proportions of clients who reported using heroin fell substantially over the three year period and in 08/09 cocaine overtook heroin as the most commonly used drug amongst clients assessed by St Helens. There were substantial increases in proportions of clients reporting using either cannabis or cocaine while there was a substantial decrease in proportions of clients using either crack or illicit methadone across the overall time period.
- ❖ The weekly expenditure on drugs was lower in 08/09 compared to both 06/07 and 07/08.
- ❖ Proportions of clients assessed who were either currently receiving structured treatment or had been in structured drug treatment over the past two years decreased consistently between 06/07 and 08/09.
- ❖ The proportion of clients who had ever injected decreased over the three year period. By contrast, proportions of clients assessed who had either shared equipment in their lifetime or in the last month increased in 08/09 compared to 07/08.
- ❖ Almost four in ten clients assessed in 08/09 reported drinking alcohol on at least a weekly basis and over half reported drinking in excess of daily recommended levels on at least a weekly basis, a slight increase in both instances on proportions in 07/08.
- ❖ Shoplifting was the most common offence which led to subsequent contact with the DIP team in both 06/07 and 07/08 in St Helens though proportions of clients arrested for this offence and then assessed dropped considerably over the time period. In contrast, there was a considerable increase in MDA offences in 08/09 from previous years and it surpassed shoplifting as the most common offence amongst DIP clients in this year.

- ❖ The majority of clients assessed in both 07/08 and 08/09 were in settled accommodation.

## 7.0 Wirral

### 7.1 Wirral – Assessments

Wirral DIP team assessed 621 clients in 06/07; this rose to 867 clients in 07/08 and rose substantially again in 08/09 when they assessed 1,127 clients in total.

#### Ethnicity

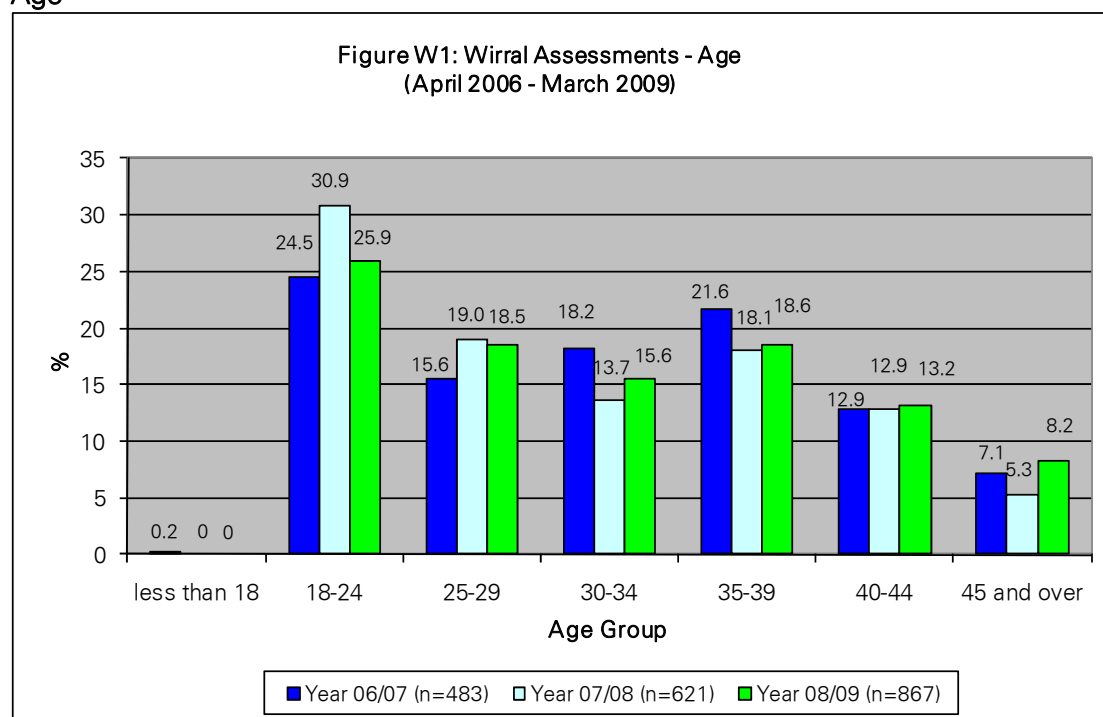
Table W1: Ethnic background of clients assessed in Wirral (06/07, 07/08 & 08/09)

Year		Asian	Black	Mixed	White	Other
06/07 (n=620)	Number		4	3	613	
	%		0.6%	0.5%	98.9%	
07/08 (n=867)	Number	1	4	10	852	
	%	0.1%	0.5%	1.2%	98.3%	
08/09 (n=1,123)	Number		5	11	1,106	1
	%		0.4%	1.0%	98.5%	0.1%

*NB: In 06/07 one client did not provide information regarding ethnicity and in 08/09 four clients did not provide this information.*

The vast majority of clients assessed in all three time periods by Wirral DIP team were white.

#### Age



All three time periods display a trend of relatively young clients coming into contact with DIP on the Wirral. In 06/07, four in ten clients (40.3%) were under the age of 30. This proportion increased to 49.9% in 07/08 and though it fell slightly in 08/09, over four in ten clients (44.4%) assessed in this year were under the age of 30.

### **Gender**

Over eight in ten clients assessed by Wirral DIP in all three years were male with proportions very similar in each year (83.6%, 85.1% and 85.4% respectively).

## 7.2 Wirral – Transfers In

This section looks at the demographic characteristics of clients who were assessed and/or care planned in another area and subsequently referred back to Wirral for DIP case management. In 06/07 there were a total of 75 clients transferred into Wirral, this rose to 128 clients in 07/08 and again in 08/09 with 148 clients being transferred into the DIP team.

### Ethnicity

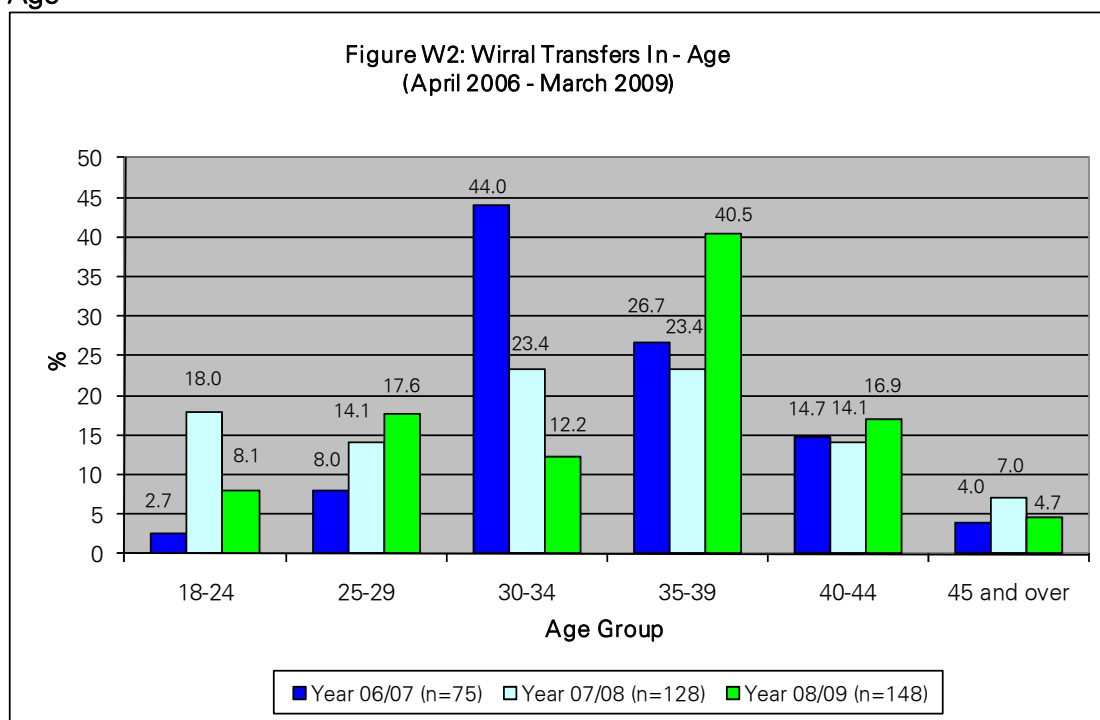
Table W2: Ethnic background of clients transferred into Wirral (06/07, 07/08 & 08/09)

Year		Black	White
06/07 (n=74)	Number		74
	%		100%
07/08 (n=115)	Number	2	113
	%	1.7%	98.3%
08/09 (n=146)	Number		146
	%		100%

*NB: In 06/07 one client did not provide information regarding ethnicity, in 07/08 thirteen clients did not provide ethnicity information and in 08/09 two clients did not provide this information.*

The vast majority of clients transferred into Wirral DIP team in all three years were white.

## Age



Clients transferring in to Wirral in 08/09 displayed a much older profile than those in 07/08 but no clear pattern emerges when looking across the three years together. Seven in ten clients (70.7%) in 06/07 were aged between 30 and 39, this proportion dropped substantially in 07/08 to under half (46.8%) but rose again in 08/09 to 52.7%. With regard to clients under 25, just 2.7% of those transferred in 06/07 fell into this age group, this rose to 18.0% in 07/08 but fell again in 08/09 where under one in ten (8.1%) were in this grouping.

## Gender

Eight in ten clients assessed in 06/07 by Wirral DIP were male (80.0%). This proportion remained similar in both 07/08 and 08/09 (both 79.7%).



## 7.3 Wirral – Drug Use, Offending & Accommodation

### Drug Use

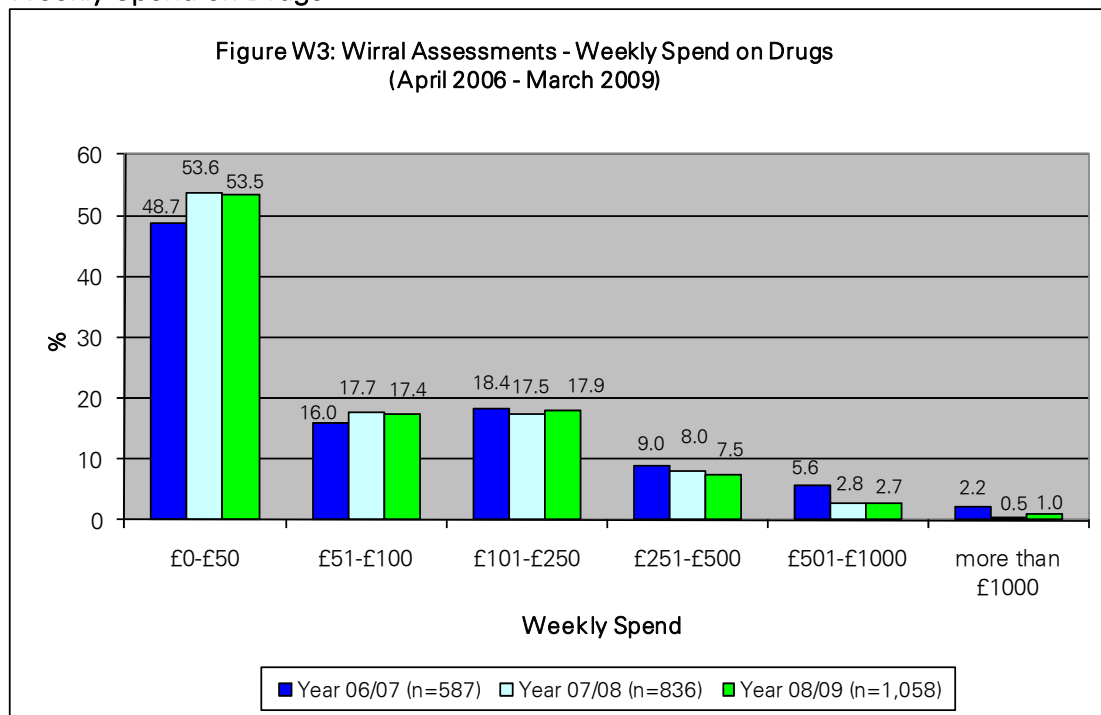
Table W3: Drug use of clients assessed by Wirral DIP (06/07, 07/08 & 08/09)

Year		Amphet.	Benzo.	Cannabis	Cocaine	Crack	Ecstasy	Heroin	Meth.	Other
06/07 (n=594)	n	18	29	198	271	230	30	310	104	9
	%	3.0%	4.9%	33.3%	45.6%	38.7%	5.1%	52.2%	17.5%	1.5%
07/08 (n=836)	n	31	42	272	481	298	35	343	60	18
	%	3.7%	5.0%	32.5%	57.5%	35.6%	4.2%	41.0%	7.2%	2.2%
08/09 (n=1,059)	n	21	38	360	556	325	27	441	61	15
	%	2.0%	3.6%	34.0%	52.5%	30.7%	2.5%	41.6%	5.8%	1.4%

*NB: Figures will add up to greater than 100% as clients are allowed to indicate more than one drug of use.*

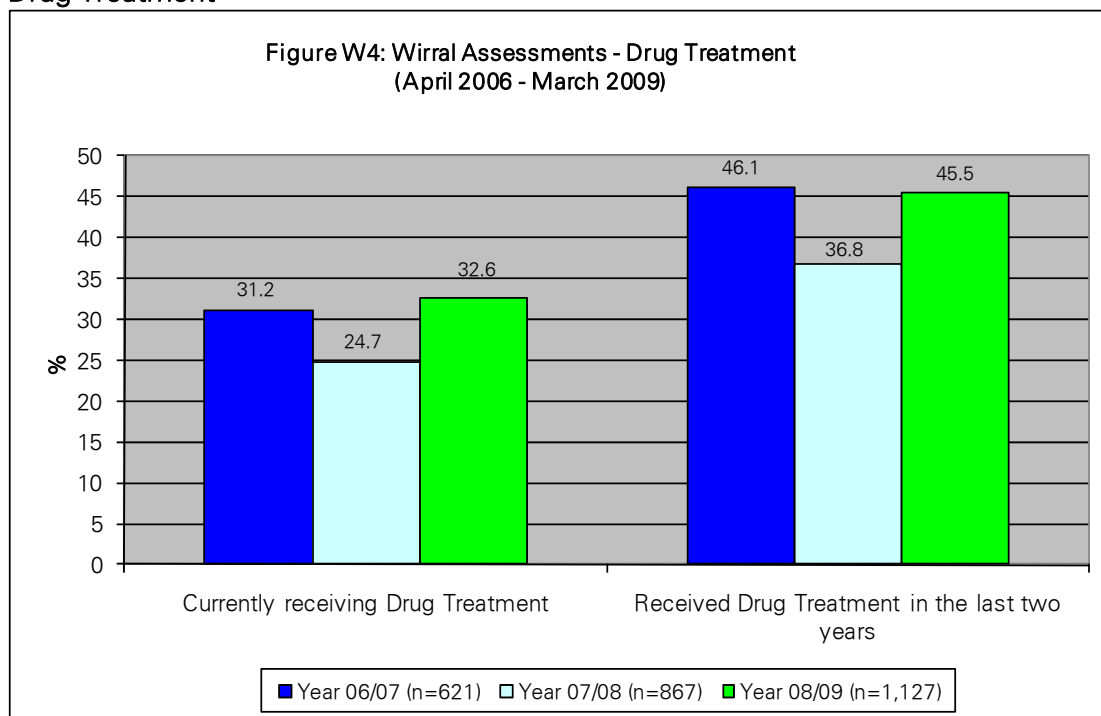
Heroin was the most commonly used drug by clients assessed in Wirral in 06/07 but was surpassed by cocaine in both 07/08 and 08/09. Proportions of clients coming into contact with DIP using heroin dropped between 06/07 and 07/08 but rose slightly in 08/09 where just over four in ten clients (41.6%) assessed by Wirral DIP reported using heroin. The proportions of clients using crack decreased steadily over the three year period, from 38.7% in 06/07 down to 30.7% in 08/09. This downward trend was also seen amongst clients using methadone where proportions of clients reporting its use decreased consistently over the three years. Almost one in five (17.5%) reported its use in 06/07, this proportion falling to just 7.2% in 07/08 and again to 5.8% in 08/09. As mentioned, cocaine was the most common drug used by clients entering DIP in both 07/08 and 08/09. However, while proportions of clients using the drug rose from 06/07 to 07/08, it should be noted that there was a 5.0% decrease in proportions of clients reporting its use between 07/08 and 08/09, when just over half of clients (52.5%) used cocaine.

## Weekly Spend on Drugs



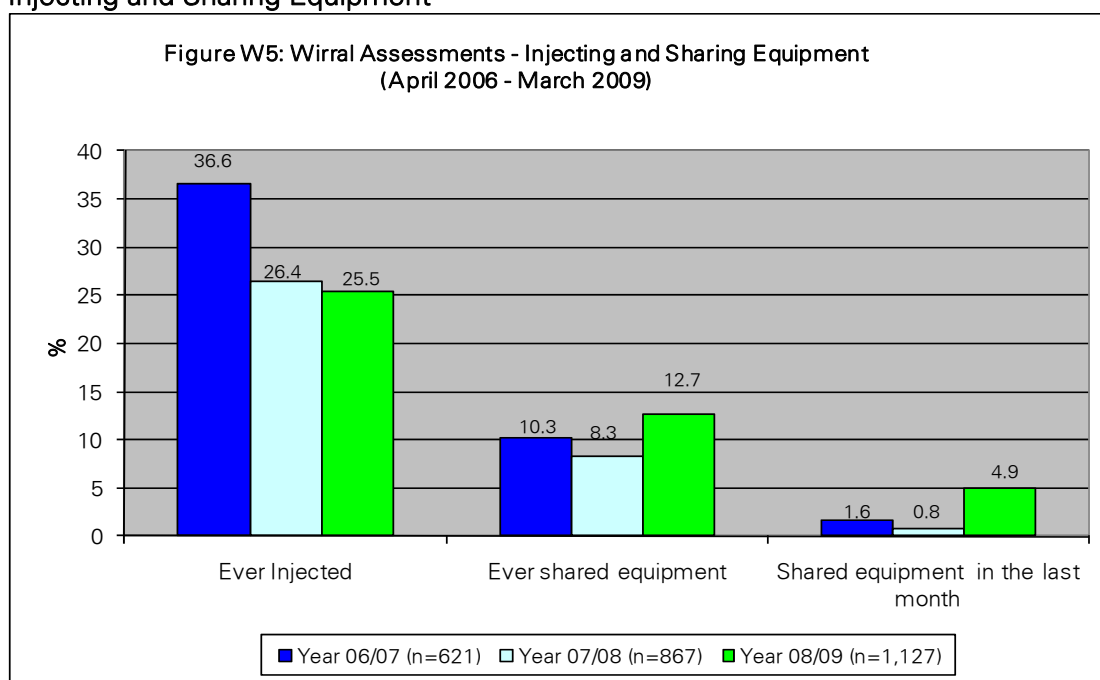
The levels of weekly spend on the Wirral over the three year period were mainly at the lower end of the scale. In 06/07 just under two-thirds of clients (64.7%) reported spending less than £100 per week on drugs, this proportion increased to 71.3% in 07/08 and remained steady in 08/09 (70.9%). Furthermore, as was the case in 07/08, 08/09 saw over half of clients reporting spending less than £50 a week on drugs (53.5%).

## Drug Treatment



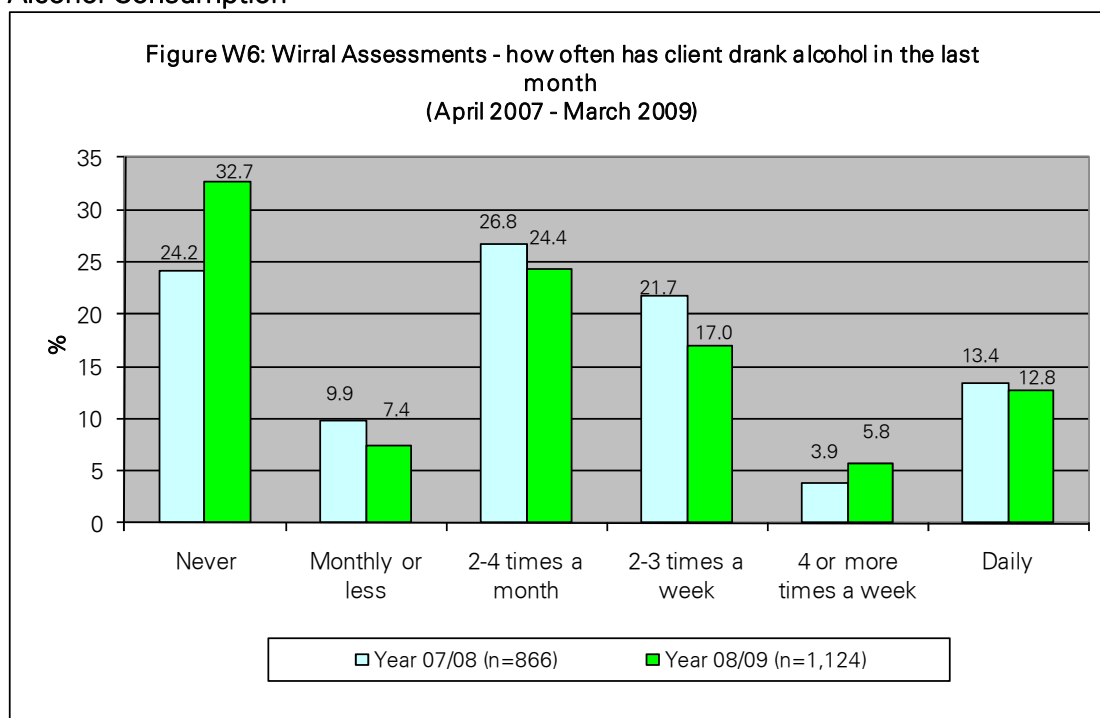
Over three in ten clients assessed in 06/07 (31.2%) reporting being in structured drug treatment at the time of their assessment. This proportion dropped to just under a quarter in 07/08 (24.7%) but rose again in 08/09 with just under a third of those assessed (32.6%) being in receipt of structured treatment when coming into contact with the criminal justice system. A similar pattern emerged when looking at proportions of clients who had received treatment in the two years prior to their assessment. Just under half of clients assessed in 06/07 (46.1%) had received drug treatment in the previous two years, this proportion fell to 36.8% in 07/08 but rose again in 08/09 to 45.5%.

### Injecting and Sharing Equipment

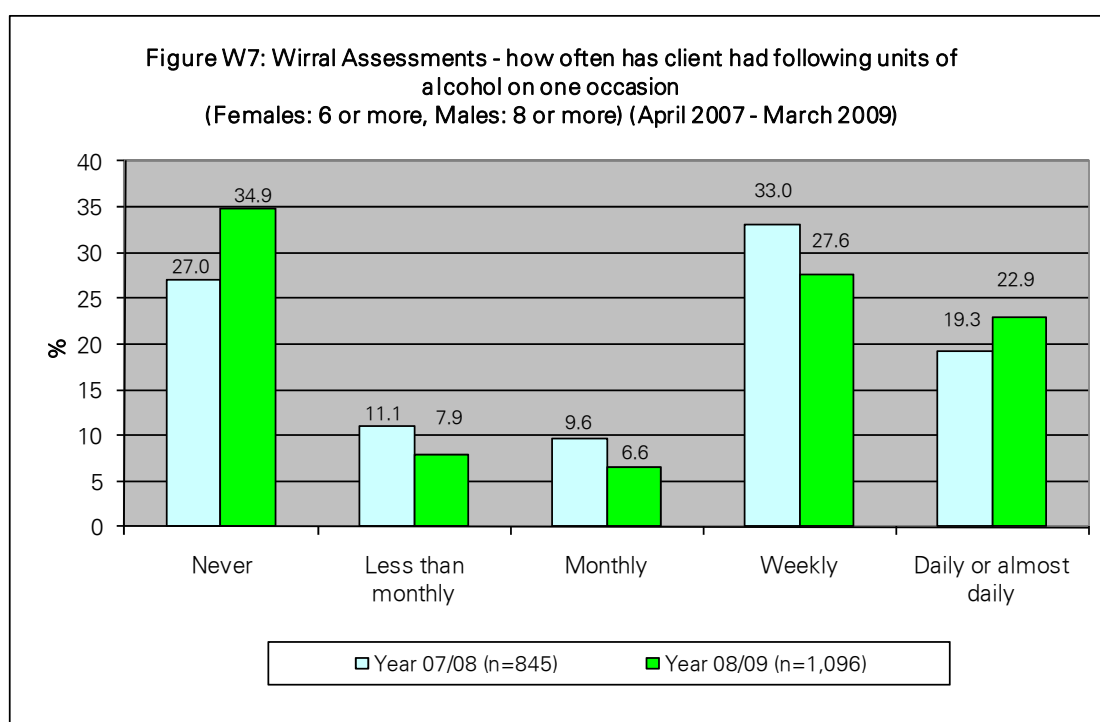


Just under four in ten clients assessed by Wirral DIP team in 06/07 (36.6%) reported having injected in their lifetime. This proportion dropped substantially in 07/08 to 26.4% but remained similar in 08/09 when just over a quarter of clients (25.5%) reported as having ever injected. The proportions of both clients who had shared in their lifetime and who reported sharing in the month prior to their assessment followed a similar pattern over the three year period. There was a decrease in the proportions of clients making up both groups between 06/07 and 07/08 but 08/09 saw an increase in proportions of both clients who had ever shared equipment and who had shared in the last month.

## Alcohol Consumption



Of those clients assessed by Wirral DIP in 08/09, almost a third (32.7%) reported as having never consumed alcohol, an increase from 07/08 where just under a quarter (24.2%) had never drunk alcohol prior to their assessment. In addition, proportions of clients who reported drinking alcohol on a daily basis fell slightly between 07/08 (13.4%) and 08/09 (12.8%).



Over half of clients assessed reported drinking in excess of daily recommended levels at least once a week (50.5%) in 08/09, a similar proportion to 07/08 (52.3%).

### Offences Committed

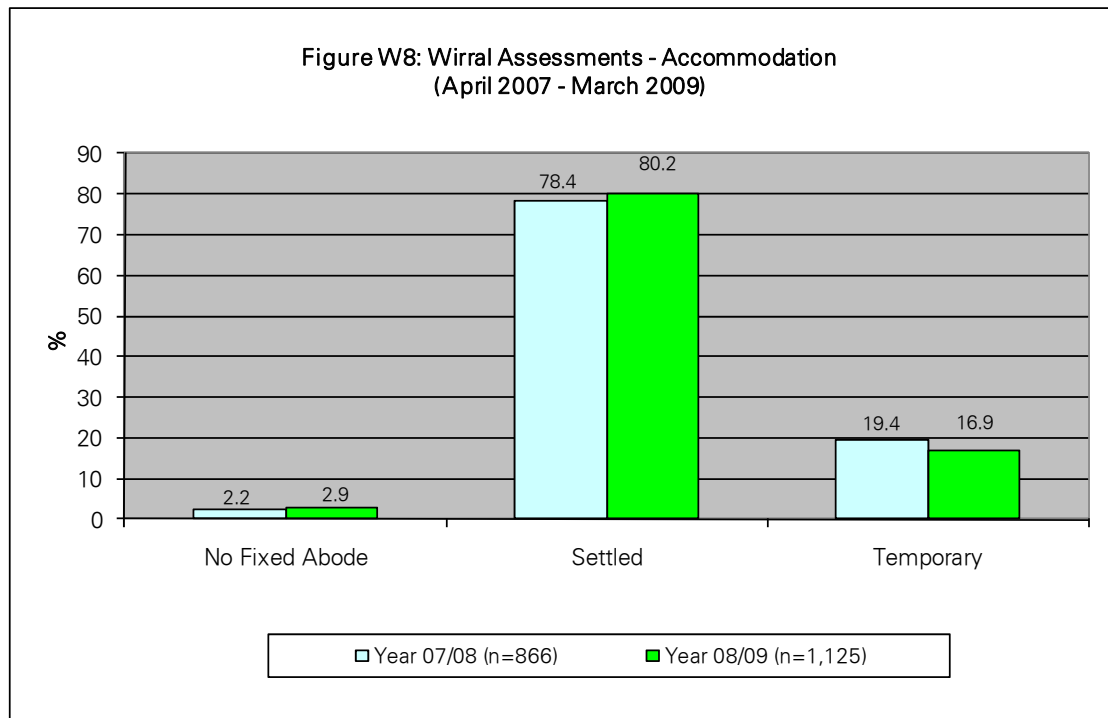
Table W4: Offending that led to contact with Wirral DIP (06/07, 07/08 & 08/09)

Offence	Offending 06/07 (n=621)		Offending 07/08 (n=862)		Offending 08/09 (n=1,121)	
	Number	%	Number	%	Number	%
Begging	1	0.2	2	0.2	3	0.3
Breach	12	1.9	10	1.2	34	3.0
Burglary	98	15.8	80	9.3	87	7.8
Criminal Damage	4	0.6	10	1.2	25	2.2
Firearms/Weapons	2	0.3	2	0.2	10	0.9
Fraud	10	1.6	10	1.2	20	1.8
Going equipped	6	1.0	4	0.5	12	1.1
Handling	6	1.0	12	1.4	15	1.3
MDA Offences	169	27.2	388	45.0	388	34.6
Motoring Offence	6	1.0	16	1.9	18	1.6
Other	3	0.5	9	1.0	23	2.1
Public Order	2	0.3	22	2.6	63	5.6
Robbery	23	3.7	16	1.9	23	2.1
Shoplifting	165	26.6	165	19.1	199	17.8
Theft	80	12.9	86	10.0	119	10.6
Theft - Car	72	11.6	71	8.2	64	5.7
Warrant	6	1.0	1	0.1	2	0.2
Wounding/Assault	11	1.8	37	4.3	130	11.6

*NB. In 07/08 five clients did not provide information on offending and six did not provide it in 08/09.*

The most common offences committed by clients assessed by Wirral DIP in all three years were MDA offences. Proportions of clients arrested for this offence rose substantially between 06/07 and 07/08 (17.8% increase), but dropped by 10.4% in 08/09 where just over a third of clients assessed (34.6%) were arrested for MDA offences. In addition there were proportional increases seen over the three year period for those arrested for wounding / assault (9.8%) and for public order offences (5.3%). By contrast, proportions of clients arrested for shoplifting offences decreased year on year, from over a quarter in 06/07 (26.6%) to just 17.8% in 08/09. Furthermore, arrests for both burglary and "Theft – Car" showed decreases in proportions over the three year period (8.0% and 5.9% respectively).

## Accommodation



Just over eight in ten clients (80.2%) assessed by Wirral DIP in 08/09 reported being in settled accommodation, a slight increase on proportions in 07/08 (78.4%).

## 7.4 Wirral Summary

- ❖ There was a considerable increase each year in the number of clients assessed by Wirral DIP via a DIR.
- ❖ The majority of clients assessed in all three time periods were white males. In addition, Wirral displayed a relatively young profile of clients coming into contact with DIP through the full assessment process across the three years.
- ❖ The majority of clients transferred into Wirral DIP were again white males and a shift back towards an older profile of client was evident in this group in 08/09 compared to 07/08.
- ❖ Heroin was the most commonly used drug used in Wirral in 06/07 but proportions of clients reporting its use dropped between 06/07 and 07/08 and only rose slightly again in 08/09. In contrast proportions of clients using cocaine increased steadily between 06/07 and 07/08 and though they fell slightly in 08/09, it was the most commonly used drug on the Wirral in both 07/08 and again in 08/09.
- ❖ The highest proportions of clients assessed in all three years reported spending between £0 and £50 on drugs per week.
- ❖ The proportions of clients who reported being either currently in treatment at the time of their assessment or having received treatment in the previous two years decreased between 06/07 and 07/08 but rose again in 08/09.
- ❖ There was a steady drop in the proportion of clients assessed who had injected in their lifetime across the time period. The proportions of clients who had ever shared or who had shared equipment in the last month dropped between 06/07 and 07/08 but rose again in 08/09 to be at their highest level over the three years.
- ❖ Over a third of clients assessed reported consuming alcohol on at least a weekly basis and over half reported drinking in excess of daily recommended levels at least once a week in both 07/08 and 08/09.
- ❖ The most common offences committed by clients assessed in all three years were MDA offences. By contrast, proportions of clients who were arrested for shoplifting decreased consistently over the time period.
- ❖ The majority of clients assessed in both 07/08 and 08/09 were in settled accommodation.

## 8.0 Merseyside D(A)AT Comparison

### 8.1 Merseyside – Assessments

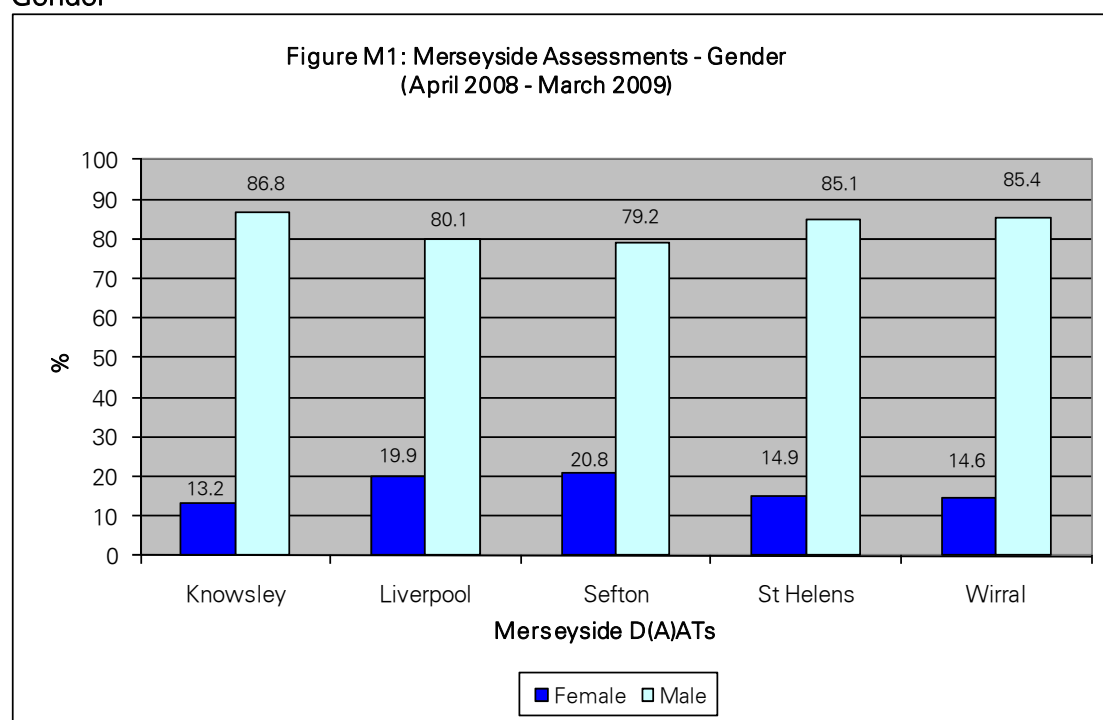
#### Age

Table M1: Age of clients assessed (08/09) – Merseyside Comparison

	18-24	25-29	30-34	35-39	40-44	45 and over
Knowsley (n=402)	34.8%	16.4%	16.4%	16.9%	8.7%	6.7%
Liverpool (n=3,088)	24.4%	15.0%	17.2%	20.6%	13.1%	9.7%
Sefton (n=803)	27.9%	16.7%	16.7%	18.2%	11.1%	9.5%
St Helens (n=624)	31.7%	19.2%	17.5%	17.9%	8.8%	4.8%
Wirral (n=1,127)	25.9%	18.5%	15.6%	18.6%	13.2%	8.2%
<b>Merseyside (n=6,044)</b>	<b>26.6%</b>	<b>16.4%</b>	<b>16.8%</b>	<b>19.4%</b>	<b>12.1%</b>	<b>8.7%</b>

Over a quarter of clients assessed across Merseyside (26.6%) were under the age of 25. Liverpool DIP assessed the highest proportion of clients over the age of 30 (60.6%) while over half of clients assessed by both Knowsley (51.2%) and St Helens (50.9%) were under the age of 30, the highest proportions of any of the D(A)ATs.

#### Gender



Knowsley DIP assessed a marginally higher proportion of male clients than any of the other Merseyside teams (86.8%). Conversely, Sefton assessed the highest proportion of females, just over a fifth of all their clients (20.8%).



## 8.2 Merseyside – Transfers In

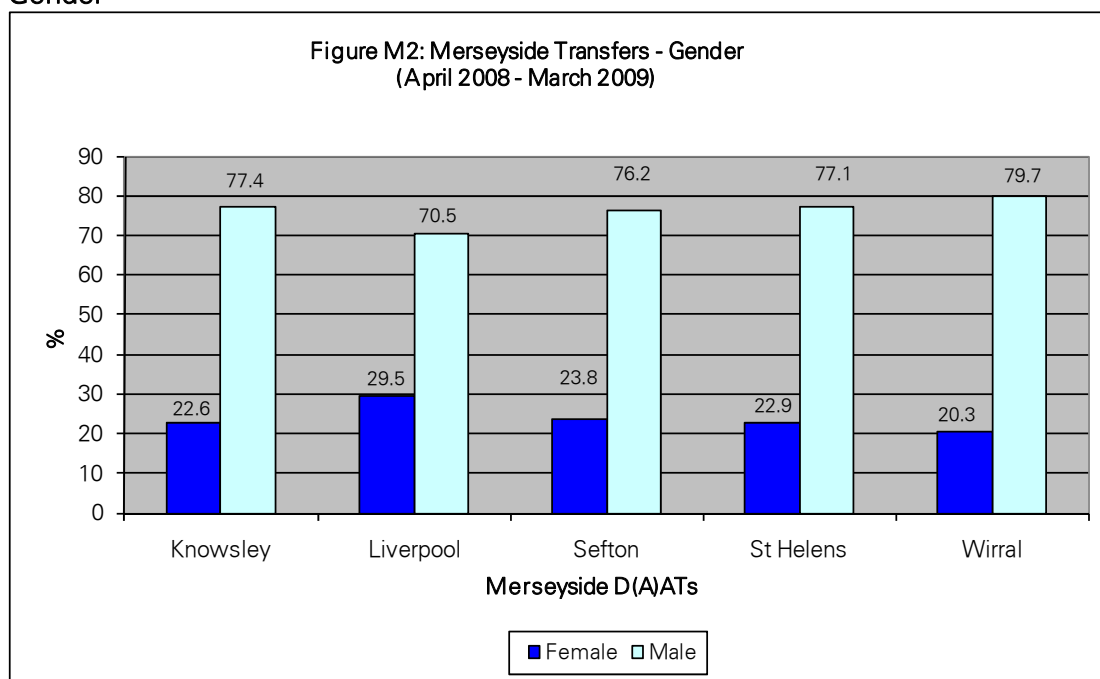
### Age

Table M2: Age of clients transferred in (08/09) – Merseyside Comparison

	18-24	25-29	30-34	35-39	40-44	45 and over
Knowsley (n=53)	9.4%	5.7%	34.0%	37.7%	9.4%	3.8%
Liverpool (n=396)	8.6%	10.4%	21.7%	31.1%	18.9%	9.3%
Sefton (n=151)	9.9%	14.6%	19.9%	25.2%	20.5%	9.9%
St Helens (n=96)	8.3%	16.7%	36.5%	20.8%	13.5%	4.2%
Wirral (n=148)	8.1%	17.6%	12.2%	40.5%	16.9%	4.7%
<b>Merseyside (n=844)</b>	<b>8.8%</b>	<b>12.8%</b>	<b>22.2%</b>	<b>30.9%</b>	<b>17.7%</b>	<b>7.7%</b>

Over three in ten clients (30.9%) who transferred into the Merseyside DIP teams in 08/09 were between the ages of 35 and 39. Wirral DIP transferred in the highest proportion of clients under 30 years of age (25.7%), while both Sefton's and St Helens' proportions were similar (24.5% and 25.0% respectively). Over three in ten clients transferred in by Sefton were over 40 years of age (30.4%), the highest proportion across the D(A)ATs. By contrast, Knowsley transferred in the lowest proportions of clients aged over 40 compared to the other D(A)ATs (13.2%).

### Gender



Wirral had the highest proportion of males amongst clients transferred in (79.7%) compared to the other Merseyside teams. Almost three in ten clients transferring in to Liverpool were female (29.5%), the highest proportion across Merseyside in 08/09.

### 8.3 Merseyside – Drug Use, Offending & Accommodation

#### Drug Use

Table M3: Drug use (08/09) – Merseyside Comparison

Year	Amphet	Benzo.	Cannabis	Cocaine	Crack	Ecstasy	Heroin	Meth.	Other
Knowsley (n=396)	0.8%	1.8%	20.5%	71.5%	22.2%	1.0%	24.5%	8.6%	2.5%
Liverpool (n=2,915)	0.5%	1.9%	15.1%	44.6%	40.7%	0.5%	49.5%	6.0%	0.7%
Sefton (n=772)	1.6%	4.5%	16.7%	50.8%	37.7%	1.0%	45.3%	6.2%	1.3%
St Helens (n=591)	2.2%	3.9%	24.9%	61.1%	22.7%	1.2%	40.6%	5.2%	3.0%
Wirral (n=1,059)	2.0%	3.6%	34.0%	52.5%	30.7%	2.5%	41.6%	5.8%	1.4%
<b>Merseyside (n=5,733)</b>	<b>1.1%</b>	<b>2.8%</b>	<b>20.2%</b>	<b>50.4%</b>	<b>35.3%</b>	<b>1.0%</b>	<b>44.9%</b>	<b>6.1%</b>	<b>1.3%</b>

*NB: Figures will add up to greater than 100% as clients are allowed to indicate more than one drug of use.*

The most commonly used drug among DIP clients across Merseyside at the time of assessment in 08/09 was cocaine, with half of all clients assessed reporting its use (50.4%). Knowsley had the highest proportion of cocaine users (71.5%) while Wirral had the highest proportion of cannabis users by a substantial margin (34.0%). Heroin was the second most commonly used drug (44.9%) across Merseyside and proportions of clients assessed in Liverpool reported higher use of heroin (49.5%) than any other drug. Knowsley had the lowest proportion of heroin users among those assessed (24.5%). The highest proportions of crack use were among clients assessed by Liverpool (40.7%) while proportions of crack use were lowest among those assessed by Knowsley (22.2%).

#### Weekly Spend on Drugs

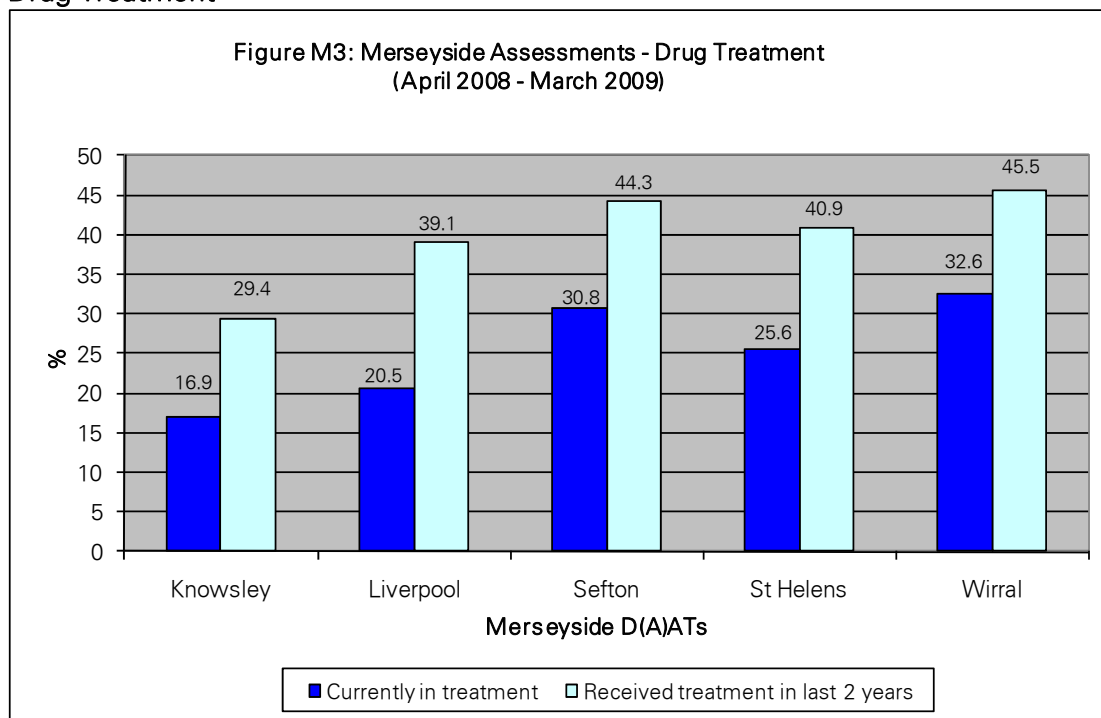
Table M4: Weekly spend on drugs (08/09) – Merseyside Comparison

	£0-£50	£51-£100	£101-£250	£251-£500	£501-£1,000	more than £1,000
Knowsley (n=394)	63.2%	11.2%	12.7%	9.1%	3.6%	0.3%
Liverpool (n=2,849)	49.7%	14.4%	17.2%	12.3%	5.4%	1.0%
Sefton (n=768)	56.0%	17.6%	15.5%	7.7%	2.5%	0.8%
St Helens (n=589)	61.8%	15.1%	14.8%	5.9%	1.7%	0.7%
Wirral (n=1,058)	53.5%	17.4%	17.9%	7.5%	2.7%	1.0%
<b>Merseyside (n=5,658)</b>	<b>53.5%</b>	<b>15.3%</b>	<b>16.5%</b>	<b>9.9%</b>	<b>4.0%</b>	<b>0.9%</b>

All areas reported high proportions of clients spending less than £50 per week, in particular Knowsley and St Helens where over six in ten clients assessed (63.2%

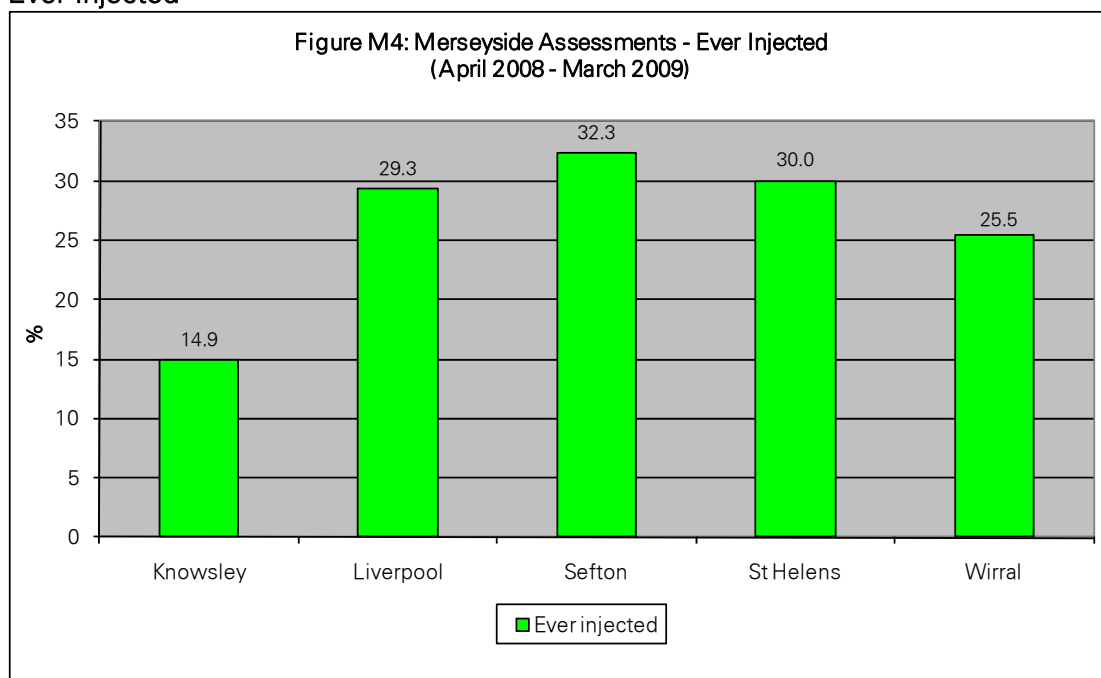
and 61.8% respectively) reported spending at this level. Liverpool reported the highest proportions of clients spending between £101 and £500 per week (29.5%) while they also had the highest proportion of clients spending in excess of £500 per week compared to the other Merseyside D(A)ATs (6.4%).

### Drug Treatment



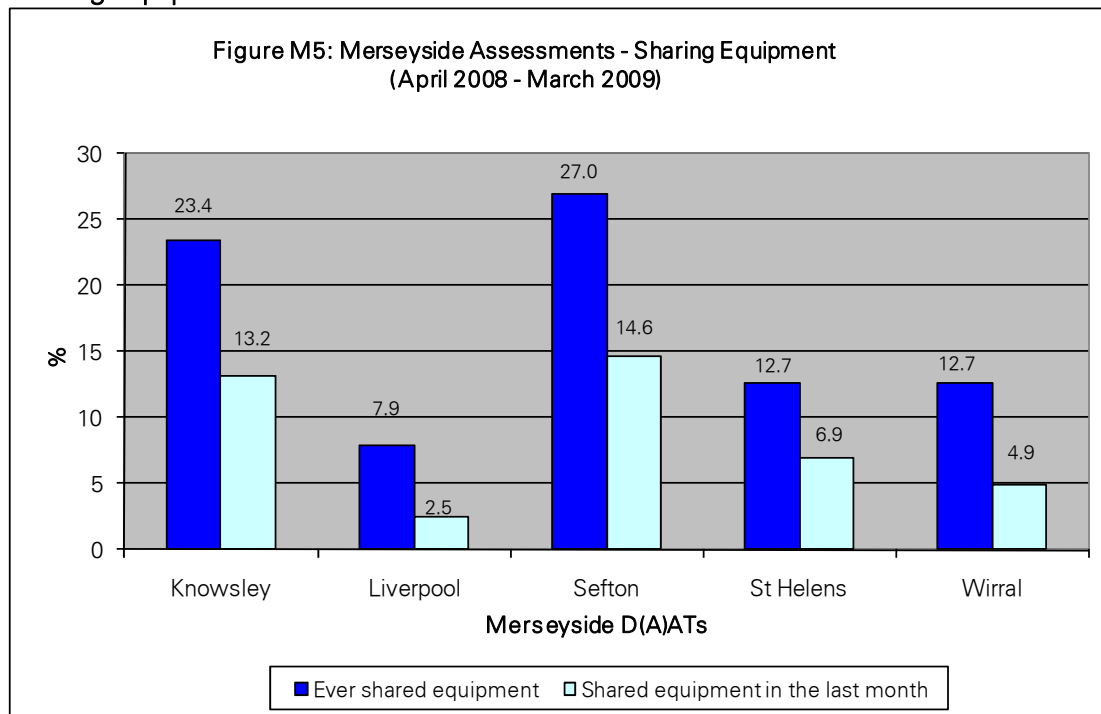
In 08/09, Wirral assessed the highest proportion of clients who were in treatment at the time of their assessment (32.6%) compared to the other Merseyside D(A)ATs. Knowsley had the lowest proportion in this regard with only 16.9% of those assessed reporting they were in structured treatment. Furthermore, 45.5% of those assessed in Wirral had received structured treatment in the past two years, again the highest proportion, while Knowsley also had the lowest proportion of clients assessed who had been in treatment in the two years prior to assessment (29.4%) compared to the other Merseyside D(A)ATs.

## Ever Injected



Sefton assessed the highest proportion of clients who had injected in their lifetime (32.3%) while St Helens (30.0%) and Liverpool (29.3%) also assessed similar proportions of clients who had ever injected. In contrast, Knowsley assessed the lowest proportion of clients who had injected in their lifetime (14.9%).

## Sharing Equipment



Sefton assessed the highest proportion of clients who had ever shared equipment (27.0%) or shared in the last month (14.6%) compared to the other Merseyside D(A)ATs. Liverpool assessed both the lowest proportion of clients who had shared

equipment in their lifetime (7.9%) and also those who had shared in the last month (2.5%).

### Alcohol Consumption

Table M5 – Alcohol consumed in last month (08/09) – Merseyside Comparison

	Never	Monthly or less	2-4 times a month	2-3 times a week	4 or more times a week	Daily
Knowsley (n=400)	26.3%	12.3%	27.8%	24.0%	2.5%	7.3%
Liverpool (n=2,897)	49.7%	8.3%	16.8%	9.5%	1.6%	14.1%
Sefton (n=802)	27.8%	13.3%	20.0%	19.6%	2.7%	16.6%
St Helens (n=621)	27.2%	11.8%	23.7%	18.0%	3.4%	15.9%
Wirral (n=1,124)	32.7%	7.4%	24.4%	17.0%	5.8%	12.8%
<b>Merseyside (n=5,844)</b>	<b>39.4%</b>	<b>9.4%</b>	<b>20.2%</b>	<b>14.2%</b>	<b>2.8%</b>	<b>13.9%</b>

Just under four in ten clients assessed on Merseyside in 08/09 reported as never having consuming alcohol prior to their assessment (39.4%). Furthermore, almost half of those assessed by Liverpool (49.7%) had not drunk alcohol prior to their assessment, the highest proportion across the Merseyside D(A)ATs. Proportions of clients who reported being daily alcohol drinkers were similar across all the areas with the exception of Knowsley, where only 7.3% reported consuming alcohol on a daily basis, the lowest proportion across the areas.

Table M6 – Levels of consuming alcohol over recommended daily levels (08/09) – Merseyside Comparison

	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
Knowsley (n=293)	3.8%	6.8%	23.2%	54.3%	11.9%
Liverpool (n=2,364)	45.7%	8.0%	9.5%	19.2%	17.5%
Sefton (n=684)	20.9%	12.4%	15.1%	32.9%	18.7%
St Helens (n=586)	25.6%	9.2%	7.8%	35.5%	21.8%
Wirral (n=1,096)	34.9%	7.9%	6.6%	27.6%	22.9%
<b>Merseyside (n=5,023)</b>	<b>35.2%</b>	<b>8.7%</b>	<b>10.2%</b>	<b>26.9%</b>	<b>19.0%</b>

Just under half of all clients assessed who responded reported drinking in excess of the daily recommended levels at least once a week (45.9%). Knowsley had the highest proportions of clients who reported drinking over recommended levels on

both a monthly (23.2%) and weekly basis (54.3%). Wirral (22.9%) and St Helens (21.8%) had the highest proportions of clients who drank in excess of recommended levels on a daily basis while Liverpool had the highest proportions of clients who reported never having drunk in excess of recommended levels (45.7%).

### Offences Committed

Table M7: Offending that led to contact with DIP (08/09) – Merseyside Comparison

Offence	Knowsley (n=399)	Liverpool (n=3,078)	Sefton (n=791)	St Helens (n=620)	Wirral (n=1,121)	Merseyside (n=6,009)
Begging		4.1%	1.8%	0.5%	0.3%	<b>2.4%</b>
Breach	4.3%	4.4%	1.3%	3.7%	3.0%	<b>3.6%</b>
Burglary	7.5%	7.8%	10.7%	7.9%	7.8%	<b>8.2%</b>
Criminal Damage	1.0%	0.8%	1.1%	1.8%	2.2%	<b>1.2%</b>
Firearms/Weapons	0.8%	0.8%	0.9%	0.8%	0.9%	<b>0.8%</b>
Fraud	0.5%	1.9%	1.4%	1.1%	1.8%	<b>1.6%</b>
Going equipped	0.5%	0.6%	0.5%	1.3%	1.1%	<b>0.6%</b>
Handling	1.5%	1.7%	2.4%	1.5%	1.3%	<b>1.7%</b>
MDA Offences	37.8%	30.4%	27.7%	33.2%	34.6%	<b>31.0%</b>
Motoring Offence	1.5%	1.3%	1.4%	2.1%	1.6%	<b>1.4%</b>
Other	1.5%	1.3%	1.5%	2.7%	2.1%	<b>1.6%</b>
Prostitution		0.7%				<b>0.4%</b>
Public Order	2.3%	2.9%	2.4%	3.5%	5.6%	<b>3.4%</b>
Robbery	3.3%	3.8%	1.5%	1.6%	2.1%	<b>2.9%</b>
Shoplifting	20.1%	24.7%	32.9%	26.3%	17.8%	<b>24.3%</b>
Theft	6.0%	7.3%	8.3%	7.9%	10.6%	<b>8.0%</b>
Theft - Car	9.5%	6.0%	6.3%	6.0%	5.7%	<b>6.2%</b>
Warrant	1.0%	2.3%	0.1%	1.0%	0.2%	<b>1.4%</b>
Wounding/Assault	5.5%	4.3%	4.8%	6.9%	11.6%	<b>6.1%</b>

The most common offence that led to contact with DIP across Merseyside in 08/09 was offending under the Misuse of Drugs Act (MDA offences) with over three in ten of all offences (31.0%) falling into this category. The second most common offence was that of shoplifting (24.3%). Knowsley assessed the highest proportion of MDA offenders (37.8%) and those arrested for theft – car (9.5%) but had the lowest proportion of those arrested for public order offences (2.3%) and theft (6.0%). Sefton assessed the highest proportion of clients arrested for shoplifting (32.9%) burglary (10.7%) and handling stolen goods (2.4%) across Merseyside but had the lowest proportions arrested for breaches (1.3%) of all the areas. The proportions of clients arrested for public order offences (5.6%), theft (10.6%) and wounding/assault (11.6%) were higher in Wirral than any other of the D(A)AT areas while they had the lowest proportions of clients arrested for shoplifting (17.8%). Liverpool assessed the highest proportion across the D(A)ATs of clients arrested for begging (4.1%) and for arrests after a warrant had been issued (2.3%) while St Helens assessed the highest proportion of clients across Merseyside arrested for motoring offences (2.1%).

## Accommodation

Table M8: Accommodation of clients assessed (08/09) – Merseyside Comparison

	No Fixed Abode	Settled	Temporary
Knowsley (n=400)	2.8%	83.3%	14.0%
Liverpool (n=3,083)	4.1%	85.8%	10.1%
Sefton (n=798)	1.5%	81.8%	16.7%
St Helens (n=623)	3.4%	83.1%	13.5%
Wirral (n=1,125)	2.9%	80.2%	16.9%
<b>Merseyside (n=6,029)</b>	<b>3.4%</b>	<b>83.8%</b>	<b>12.9%</b>

Over eight in ten clients assessed across Merseyside in 08/09 were in settled accommodation (83.8%). This proportion was broadly similar across all five D(A)ATs with Liverpool having the highest (85.8%) and Wirral having marginally the lowest proportion of clients reporting as living in settled accommodation (80.2%). Liverpool assessed the highest proportion of clients in 08/09 across the areas who reported having no fixed abode (4.1%).

## 9.0 Conclusions and Recommendations

The aim of this report was to inform the DIP, D(A)AT and commissioning teams of the nature of clients coming into contact with DIP on Merseyside. The findings of this report highlight both the overall profile and the demographic trend across Merseyside of these clients.

### Variation in client profile according to DIP stage

- ❖ Clients who were transferred into the Merseyside teams tended to be older than those who were assessed in the first instance by the DIP teams.
- ❖ The majority of clients both assessed and transferred in were male. Liverpool and Sefton had the highest proportions of female clients coming into contact with DIP compared to the other areas.
- ❖ The majority of clients both assessed and transferred in were white. However, while not directly comparable because DIP only deals with clients over 18, it should be noted that proportions of BME clients coming into contact with DIP on Merseyside (3.9%) are higher than the proportion of the overall BME population on Merseyside (2.9%) according to the most recent census (ONS, 2002).

**Recommendation:** Teams continue to engage well with BME clients and it is critical that this continues to be the case as overall knowledge around the prevalence of drug use among these potentially hard to reach groups is minimal.

### Demographic trends between 06/07, 07/08 and 08/09

#### *Assessments*

- ❖ There was a substantial increase seen year on year in the numbers of assessments completed in Liverpool, St Helens and Wirral. Both Knowsley and Sefton saw a sizeable increase in the number of assessments completed in 07/08 compared to 06/07 but this level of increase was not replicated in 08/09 with only a small increase in the number of completed DIP assessments in both areas.

#### *Age*

- ❖ With regard to DIP assessments, all areas in 08/09 displayed a continuation of the trend towards a younger profile of client which occurred also in 07/08.



As was the case in 07/08 however, this shift again was not evident amongst clients transferred in to the teams. In addition to this, the vast majority of clients assessed in all areas were male in each of the three years.

### *Transfers In*

- ❖ Both Knowsley and St Helens saw a steady decrease over the three year period in numbers transferred in to DIP from other areas/prisons. Wirral were the only area to see a steady increase year on year in clients transferring in to DIP from another area/prison and this backs up findings from the recently produced report looking at transfers between D(A)ATs across Merseyside (Cuddy & Duffy, 2009a) which highlighted Wirral's success at engaging with this client group and recording the process correctly. After a decrease between 06/07 and 07/08 both Liverpool and Sefton saw a slight increase in 08/09 in numbers transferring in. This is likely in part to the ongoing discussions between the teams and staff at the Centre for Public Health in identifying this area as one which needed close scrutiny around working procedures and recording of data.

**Recommendation:** All areas should liaise with Wirral to assess the systems that they have in place around transferring clients to DIP and use this to inform their own processes. It is still possible that teams are under recording transfers in from both prison and other community teams and it is critical that all transfers are recorded to give an accurate reflection of DIP activity.

### *Drug Use*

- ❖ All areas saw a substantial increase in proportions of clients reporting use of cocaine over the three year period with the exception of Wirral where proportions dropped between 07/08 and 08/09. Part of this increase can be attributed to the introduction of Test on Arrest, but it is likely to be indicative of a rise in use of the drug in the general population also (Hoare, 2009). It is also the case that all areas have increased their use of inspector's authority and targeted both violent and public order offences and this has further contributed to the increase in cocaine using clients presenting to DIP.
- ❖ There was a substantial decrease in proportions of clients reporting use of heroin and crack over the three years in all areas with the slight exception of Wirral where proportions of heroin use rose slightly in 08/09 compared to 07/08. It should be noted also that actual numbers of clients using heroin and

being assessed by the DIP teams rose in 08/09 compared to 07/08 in both Liverpool and Wirral.

**Recommendation:** It is encouraging to see that specific procedures are already in place in a number of DIP teams to respond to this client group and teams should now be in a position to examine the effectiveness of these interventions. Evidence has shown that chances to engage with this group may be rare as rates of re-presentation are low (Cuddy & Duffy, 2009b) so the point of first contact with these individuals is vitally important. It is critical that teams focus on delivering information around cocaine and its effect on peoples' health to educate these clients as to the dangers cocaine use brings with it. In addition, while proportions of the more problematic drug using clients have dropped in general across all areas, it should be noted that actual numbers have not dropped. Therefore, it is critically important that teams do not lose focus on these clients as they will have very specific and often demanding needs and any service delivery changes should not be to their detriment. Services will need to be appropriately resourced as there is a clear split emerging in client groups who will have varying needs based on their patterns of drug use.

### *Weekly Spend*

- ❖ All areas displayed the same broad pattern in relation to weekly spend on drugs over the three year period. The substantial shift to lower levels of spending documented in the last demographics report (Cuddy & Duffy, 2009c) has been evidenced again in all areas in 08/09 with the slight exception of Wirral where spending in the lower bracket has remained mostly steady over the three year period. It is the case however that proportions of clients spending between £0 and £50 per week on drugs are high on the Wirral also. This appears to indicate that there is potentially a large group of clients who are not using crime to fund their drug use, and who consequently may see this use as not being problematic. This is further evidenced by the decrease in proportions of clients arrested for shoplifting across all areas over the time period. This acquisitive crime is more associated with problematic drug use, as documented in the recent report comparing powder cocaine users to problematic drug users (Howarth & Duffy, 2009).

**Recommendation:** It may be the case that reducing drug use may not have a substantial impact on offending among this client group. Teams should look

closely where possible at the factors that are leading to clients offending and work towards helping them deal with any issues they may have.

### *Drug Treatment*

- ❖ There was a great deal of variation across Merseyside when looking at proportions of clients who were receiving structured drug treatment at the time they entered DIP. Over the three year period, Knowsley and St Helens both saw a steady decline in proportions of clients coming into contact with DIP who were currently in treatment, likely linked to the increasing proportions of young cocaine using clients entering DIP in both areas. In contrast to this, Sefton saw a rise year on year in proportions of clients entering DIP who were active in treatment. Liverpool and Wirral both saw a decline in proportions of clients assessed who were currently in treatment between 06/07 and 07/08 but this proportion rose between 07/08 and 08/09 in both areas.

**Recommendation:** The rise in proportions of clients presenting to DIP who are currently in treatment may suggest that the treatment system has not been effective in reducing the offending behaviour of these clients. Teams should seek to assess the effectiveness of the current services being accessed by these clients and look to ensure that they can offer the best possible treatment for the client in dealing with their criminal issues as well as their drug use and other factors.

- ❖ With regard to clients who had received structured drug treatment in the two years prior to assessment, Knowsley, Liverpool and St Helens all reported a steady decline in proportions over the three year period. Sefton, on the other hand, reported an increase in the proportions of clients assessed year on year that had previously been in treatment. Wirral saw a increase in the proportions of clients entering DIP between 07/08 and 08/09 who had previously been in treatment after a decrease between 06/07 and 07/08. The recent Drug Treatment Outcomes Research Study (DTORS) found that treatment retention levels were significantly lower among clients without previous treatment experience (Jones et al, 2009) and it is important that teams are aware of the fact that there are sizeable proportions of treatment naïve clients or clients who have been out of service for some time entering DIP.

**Recommendation:** It is important that teams ensure that the option of treatment appeals to these clients and educate them as to what treatment involves and the benefits of their engagement with services including how it has changed since they were last in treatment.

#### *Lifetime Injecting*

- ❖ Proportions of clients reporting ever having injected in their lifetime decreased year on year in all areas with the exception of Knowsley where there was actually a slight increase in proportions of clients assessed who had ever injected between 07/08 and 08/09. It should be further noted that Knowsley had the lowest proportion across Merseyside of clients coming into contact with DIP in 08/09 who had ever injected. The Test on Arrest scheme has seen a far greater proportion of clients coming into contact with DIP who are less likely to be injectors and therefore at less risk of being exposed to the various harms that injecting brings with it such as blood borne viruses but it should be noted that actual numbers of clients being assessed who have ever injected have not decreased in general in all areas.

#### *Sharing Equipment*

- ❖ The proportions of clients who reported either ever sharing or currently sharing drug using equipment decreased each year in Liverpool. By way of contrast, proportions of clients coming into contact with DIP services in Sefton, St Helens and Wirral reported higher levels of both current and lifetime sharing in 08/09 than in 07/08. Furthermore, Knowsley reported a year on year increase in clients who reported as sharing equipment at the time of their assessment, a point which requires further investigation.
- ❖ The recently published report looking at the characteristics of powder cocaine users (Howarth & Duffy, 2009) found that this group were more likely to share equipment than more problematic drug users and given the reported high levels of cocaine use in all areas in 08/09, it is important that teams are aware of this issue around sharing equipment. The sharing of bank notes and other snorting equipment among cocaine users can potentially lead to Hepatitis C being contracted and with the ever increasing numbers of cocaine using clients presenting to DIP, it is an extremely important that clients are aware of these issues.

**Recommendation:** It is important that there is consistency in recording data around sharing equipment and all teams should be aware that this question refers to any drug using paraphernalia and not just “traditional” drug using equipment. Teams need to ensure that they convey the dangers that sharing bank notes and using other snorting equipment can have to the cocaine using clients, particularly around Hepatitis C.

#### *Alcohol Consumption*

- ❖ A large proportion of clients assessed in all areas with the exception of Liverpool reported exceeding recommended daily drinking levels at least once a week in all three years.

**Recommendation:** Given the high rates of cocaine use prevalent in all areas and how previous work has shown the dangers surrounding the concomitant use of alcohol and cocaine (Cuddy & Duffy, 2008), it is important that teams, in particular Knowsley, educate clients around the dangers associated with this behaviour to address this issue.

#### *Offences Committed*

- ❖ Proportions of clients arrested for shoplifting decreased year on year in all areas with the exception of Sefton, where there was a slight increase in the proportion of clients arrested for this offence in 07/08 from 06/07. However, it is important to point out that numbers of clients arrested for shoplifting have not dropped year on year. All areas also saw a decrease in the proportions of clients arrested for burglary over the three year period. By contrast proportions of MDA offences increased year on year in all areas, with the exception of Wirral, where there was a slight decrease between 07/08 and 08/09 but it should be noted that it was still the most common offence that clients were arrested for on the Wirral in 08/09. All areas with the exception of Knowsley also saw increases over the three year period in clients arrested for wounding or assault, an offence typically associated with the night time economy.

**Recommendation:** The consistent increase in the proportions of clients arrested for MDA offences in all areas is mostly due to the emergence in DIP of a different client group. It is however important that teams are aware that actual numbers of clients from the problematic drug using group have not diminished and it is critical that resources are split accordingly between both groups.

### *Accommodation*

- ❖ The majority of clients in all areas in all time periods reported living in settled accommodation with very low rates in all areas of clients reporting being of no fixed abode. Accommodation problems have been identified as a major stressor by both treatment seekers and providers for substance misusers (Barnard et al, 2009) and teams need to be aware of this.

**Recommendation:** Teams still need to focus on the quality of a person's accommodation and not just whether they have a place to stay long term so as to maximise their chances of remaining drug free.

### **Merseyside Comparison 08/09**

#### *Age*

- ❖ Clients assessed across Merseyside in 08/09 were generally young, with those under 25 being the most common age group.
- ❖ Clients assessed in Knowsley and St Helens were younger than the other areas. In 08/09 these were the two areas in Merseyside with the highest rates of cocaine use amongst clients entering DIP and this may be linked to the younger population of clients presenting in these areas.
- ❖ Liverpool assessed a higher proportion of older clients than the other areas. Proportions of clients coming into contact with DIP reporting using heroin in Liverpool were higher than in any of the other areas and this can be linked to the older drug using population evident in 08/09.

**Recommendation:** All areas have seen a far younger client profile entering DIP than workers would have previously dealt with. It is important that all teams recognise this new client group emerging in DIP and can provide information around the dangers of their drug misuse in a timely manner. A large proportion of these clients may never have come into contact with services prior to this so it is critical that options around treatment are clearly explained to them and every effort made to engage them in treatment if workers feel it will benefit the client.

#### *Gender*

- ❖ Knowsley assessed the lowest proportion of female clients across the areas, while Wirral transferred in the lowest proportion of female clients compared to the other areas. Conversely, Sefton assessed the highest proportion of

female clients across Merseyside in 08/09 while Liverpool transferred in the highest proportion of females over the same time period.

**Recommendation:** With the exception of Sefton, areas should examine their procedures particularly around engaging with female clients who are coming out of prison and ensure that they are doing their utmost to engage with them post release. Teams should seek to establish whether there are any barriers that exist in engaging with female clients also and advise them accordingly particularly around childcare issues.

### *Drug Use*

- ❖ Cocaine was the most commonly used drug among DIP clients across Merseyside in 08/09 followed by heroin and then crack.
- ❖ Cocaine was the most commonly used drug by DIP clients in 08/09 in all areas with the exception of Liverpool. Knowsley assessed the highest proportion of both cocaine users and methadone users while Liverpool assessed the highest proportion of both heroin users and crack users.
- ❖ There are still large numbers of heroin and crack users coming into contact with DIP in all areas.

**Recommendation:** Existing services should be monitored to ensure that this group of clients continue to be catered for alongside the new initiatives that have been put in place and that delivery continues to be effective.

- ❖ Proportions of clients reporting using cannabis in Wirral in 08/09 were far higher than in any other area. This may be a recording issue but it may also be the case that use of cannabis is an issue for clients coming into contact with DIP in Wirral and the team need to be aware of this.

**Recommendation:** Wirral should consider incorporating responses to cannabis use in their treatment plans so as to educate clients on the dangers of its use.

### *Weekly Spend on Drugs*

- ❖ Over half of DIP clients across Merseyside spent between £0 and £50 per week on drugs in 08/09. The largest proportions of clients spending this amount per week were seen in Knowsley and St Helens indicative at least in part of the high proportions of cocaine using clients coming into contact with services in these areas.

- ❖ Liverpool had the highest proportion of clients reporting spending in excess of £250 per week on drugs indicating a potentially more problematic type of drug user as rates of heroin and crack use were highest among DIP clients in Liverpool compared to the other areas. It is likely that there is a link to acquisitive crime among this client group as they seek to fund their drug use.

#### *Drug Treatment*

- ❖ Wirral assessed the highest proportion of clients in 08/09 who were in structured drug treatment at the time of their assessment and also the highest proportion of clients who had received treatment in the past two years.
- ❖ Knowsley assessed the lowest proportions of clients who were either in treatment at the time of their assessment or had received treatment in the two years prior to assessment compared to the other areas. This may be indicative of the increasing levels of cocaine using clients coming into contact with DIP in this area, who may not view their drug use as problematic and therefore have not attempted to contact treatment services before.

#### *Lifetime Injecting*

- ❖ Sefton assessed the highest proportion of clients across all areas in 08/09 who reported having injected in their lifetime. Knowsley assessed the lowest proportion of clients who had ever injected, possibly indicative of their younger, less problematic drug using client group.

#### *Sharing Equipment*

- ❖ Sefton assessed a higher proportion of clients who had shared equipment in their lifetime among clients assessed compared to the other Merseyside areas. By contrast, Liverpool had the lowest proportion of clients assessed who reported sharing equipment in their lifetime (7.9%) or in the last month (2.5%) compared to the other areas.

**Recommendation:** Sefton should consider that there may be a heightened risk amongst their client group of blood borne viruses being prevalent due to higher injecting and sharing rates and work to provide their clients with the necessary information to inform them of these risks. In addition, all areas



should ensure that screening for blood borne viruses takes place for all clients.

### *Alcohol Consumption*

- ❖ A substantial minority in all areas reported drinking alcohol at problematic levels in 08/09. These levels of problematic drinking may suggest a chaotic lifestyle among these clients and one which may be a barrier to them accessing treatment. Research has also shown that coupled with drug use it can lead to an increased risk of overdose (Coffin et al, 2003; Darke & Zador, 1996; Gossop et al, 1996; Steentoft et al, 1996).

**Recommendation:** Teams need to ensure that they have suitable treatment delivery in place to be able to deal with clients' problematic drinking patterns, or that there are accessible referral routes available to the client.

- ❖ Just under half of clients assessed across Merseyside reported drinking in excess of recommended levels on at least a weekly basis. In 08/09 the patterns of binge drinking were most noticeable in Knowsley and St Helens, the areas on Merseyside where proportions of clients using cocaine were highest. Recent research looking into the difference between problematic drug using and powder cocaine using clients has noted this "binge drinking" culture among the cocaine group (Howarth & Duffy, 2009).

**Recommendation:** All areas should ensure that interventions are in place to effectively deal with clients that have issues around their alcohol use and drinking related behaviour and make clients aware of the potential problems of combined alcohol and cocaine use.

### *Offences Committed*

- ❖ The most common offence that led to contact with DIP teams across Merseyside in 08/09 was offending under the Misuse of Drugs Act. Knowsley recorded the highest proportion of these offences compared to the other areas. A large proportion of Knowsley's clients in 08/09 were cocaine using young males, spending at the lower end of the scale and unlikely to have been in treatment previously, it is likely that in most cases clients arrested for these offences will not be high volume acquisitive offenders.
- ❖ Proportions of clients arrested for violent offences have increased in all areas in 08/09 compared to 07/08. This offence points to a link to the night time economy and given the increasing numbers of cocaine using clients coming

into contact with DIP and the reported levels of “binge drinking”, further investigation may be needed to explore a possible link between these factors. The increase in violent offences was most evident on the Wirral where over one in ten clients were arrested for wounding or assault.

- ❖ It should further be noted that although proportions of violent offences have increased in all areas, anecdotal evidence suggests these proportions may be still artificially low. Clients who are arrested for both a violent and an MDA offence may only have the MDA offence recorded as it is a trigger offence.

**Recommendation:** All areas should be aware that there may be a sizeable proportion of violent offenders coming through DIP and this tendency towards violence could again act as a barrier to treatment. Teams should ensure that workers have the necessary skills to address this issue in a positive manner.

The shift towards a younger, less problematic drug using client base in all areas since the introduction of Test on Arrest, seen so clearly in 07/08, has by in large continued in 08/09. There continues to be a higher proportion of young males entering DIP in all areas than had been the case in previous years. These clients are predominantly cocaine users and evidence suggests that they are not using crime to fund their drug use. The link between cocaine and alcohol continues to be evident also with high levels of binge drinking in all areas being reported. It is also clear that with re-presentation rates among cocaine using clients being low, teams need to endeavour to engage with these clients in the first instance as it may be the only opportunity to address their health related behaviour. It is at this point that advice and support can be given around their drug taking, even if the client does not necessarily view their drug use as problematic. It should be further noted that numbers of problematic drug users coming into contact with the scheme in all areas are still high and indeed have risen in some areas between 07/08 and 08/09. Teams should not lose sight of this and should strive to split resources effectively in order to deal with both distinct groups when they come into contact with DIP.

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