


 Project supported by the PHA


# Substance Misuse Awareness




 **Housekeeping**


- Breaks
- Microphones
- Internet connections
- Confidentiality
- Questions/comments



 **Housekeeping**


- Breaks
- Toilets and exits
- Fire drills
- Mobile phones
- Confidentiality



 **Course Objectives**

By the end of today, you will be able to:

- Understand the prevalence of drug use in Northern Ireland
- Identify what a drug is and how to categorise them
- Name some common drugs, their effects, and methods of use



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**Course Objectives**

By the end of today, you will be able to:

- Understand the effect of substance use on the individual and family
- Identify attitudes/values about substance use held by yourself and others
- Identify local drug/alcohol services




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**1 Introduction**

What is the prevalence of substance misuse in Northern Ireland?

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**QUIZ**



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**Alcohol in Northern Ireland**

<b>78%</b> of adults (18+) in NI drink alcohol	<b>83% vs 76%</b> Proportion of people in least deprived vs most deprived areas using alcohol	<b>29%</b> of young people (11-16) in NI have drunk alcohol at least once
<b>Adults with children</b> were more likely to report alcohol use than adults without children	<b>1/5</b> of adults thought they should cut down on their drinking	<b>£900 million</b> Cost to Northern Ireland due to the effects of alcohol misuse

Sources: Health Survey Northern Ireland 2023/24 (DOH, 2024); Preventing Harm, Empowering Recovery: A Strategic Framework to Tackle the Harm from Substance Use (2021-2031); All Ireland Drug Prevalence Survey 2014/15

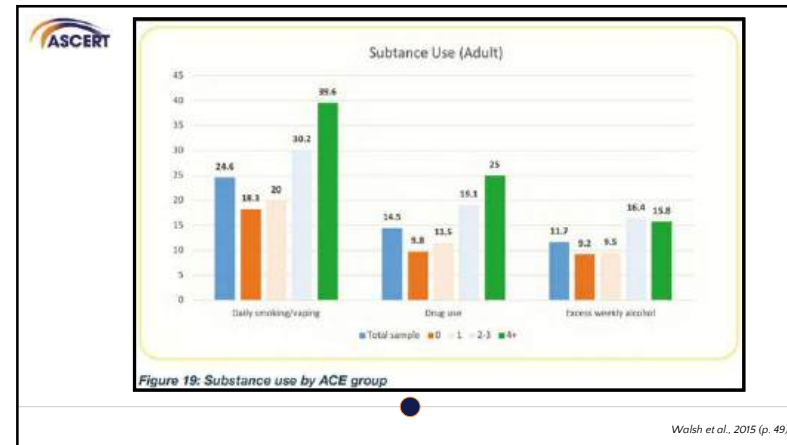
**Binge Drinking by Gender**

**Males:** Four-fifths of males (80%) were drinkers, with 26% of males reporting that they drink above sensible weekly limits. 7% of males reported that they thought they drank quite a lot or heavily. Almost a fifth of male drinkers (19%) drink on 3 or more days per week. Of those males who drink in the last week, on the day they drink the most, 37% had consumed up to five units and 20% had consumed over 14 units.\*

**Females:** Three-quarters of females (73%) were drinkers, with 9% of females reporting that they drink above sensible weekly limits. 3% of females reported that they thought they drank quite a lot or heavily. A tenth of female drinkers (10%) drink on 3 or more days per week. Of those females who drink in the last week, on the day they drink the most, 58% had consumed up to five units and 4% had consumed over 14 units.\*

\* Almost 80% of all drinkers (approximately 80% of males and 70% of females) reported that they had drunk at least one unit in the last week.

Source: Preventing Harm, Empowering Recovery: A Strategic Framework to Tackle the Harm from Substance Use (2021-2031)



**Lifetime Prevalence of Illicit Drug Use in NI**

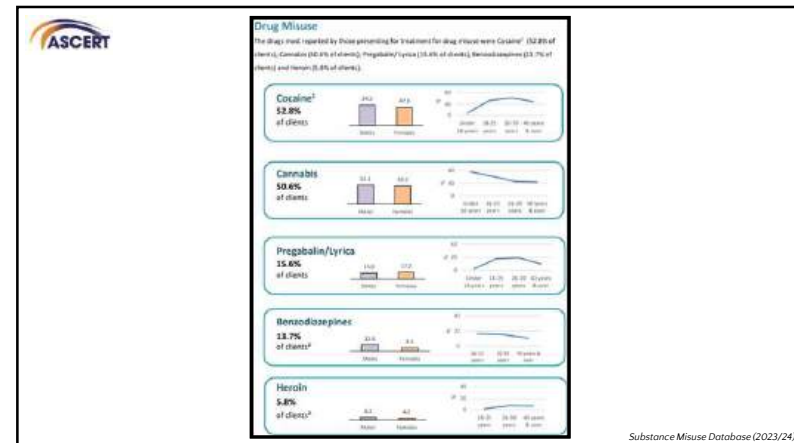
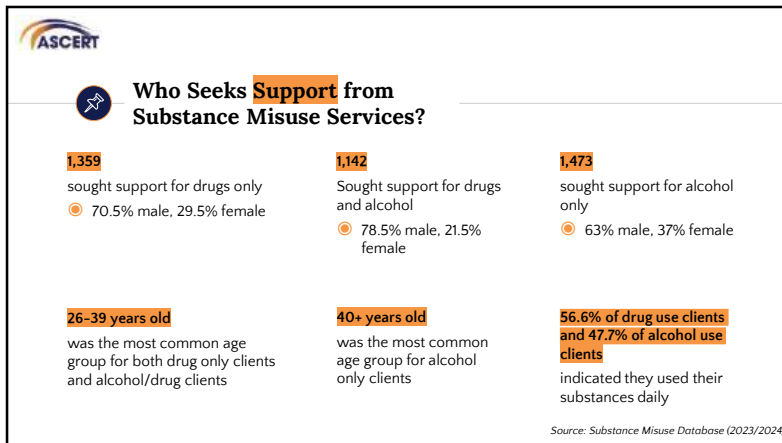
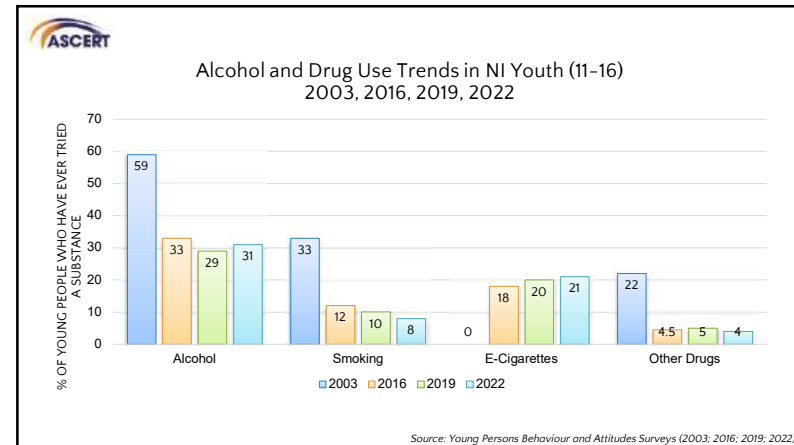
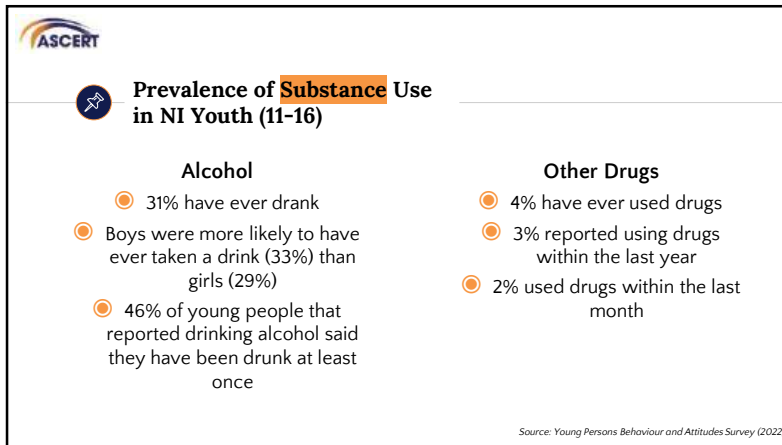
Cannabis: 24.6%	Crack: 0.3%	Heroin: 0.4%	NPS: 2.2%
Ecstasy: 9.6%			Mephedrone: 2.5%
Poppers: 7.4%			Solvents: 3.1%
Cocaine: 7.2%	Amphetamine: 6.1%	LSD: 5.7%	Magic mushrooms: 5.7%

Source: All Ireland Drug Prevalence Survey 2014/15

**Prevalence of Substance Use in NI Youth (11-16)**

- Smoking (tobacco)
  - 8% have ever smoked; 1% are regular smokers (at least once/week)
  - Boys are more likely to report smoking than girls
- Vaping/e-cigarette usage
  - 21% have ever used EC/vape
  - 6% use EC/vape at least once a week
  - Proportion of young people vaping at least once a week is almost 3x higher in most deprived areas vs. least deprived

Source: Young Persons Behaviour and Attitudes Survey (2022)



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## 2 Identifying and Understanding Drugs


What is a drug and what are the main categories of drugs?

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A **drug** is a chemical which causes a **change** (or **multiple changes**) in the way the human body functions, either physically, mentally, or emotionally.

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### Types of Drugs



- Two ways to categorise drugs – both focused on effects
  - 4 main categories: depressants, stimulants, hallucinogens, and opiates/opioids
  - The Drugs Wheel
    - More categories/substance effects

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### Depressants

<p><b>Definition</b></p> <p>Any agent that suppresses, inhibits, or decreases some aspect of the Central Nervous System</p>	<p><b>Possible Effects</b></p> <ul style="list-style-type: none"> <li>Decreased heart rate and blood pressure</li> <li>Blurred vision</li> <li>Feeling relaxed</li> <li>Loss of inhibition/ impaired judgement</li> <li>Slurred speech/ loss of coordination</li> <li>Drowsiness and memory loss</li> </ul>	<p><b>Examples of Substances</b></p> <ul style="list-style-type: none"> <li>Alcohol</li> <li>Cannabis</li> <li>Solvents</li> <li>Tranquilisers</li> </ul>
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**Stimulants**

**Definition**  
Any agent that activates, enhances, or increases neural activity in the Central Nervous System

**Possible Effects**

- Abnormally rapid heart rate (tachycardia)
- Elevated blood pressure
- Sweating and chills
- Nausea/vomiting
- Abnormal behaviour including agitation, grandiosity, and impulsivity

**Examples of Substances**

- Cocaine
- Amphetamines
- Caffeine
- Nicotine

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**Hallucinogens**

**Definition**  
A chemical agent that induces alterations in perception, thinking, and feeling

**Possible Effects**

- Dilated pupils
- Elevated BP
- Tachycardia
- Tremors
- Overly responsive reflexes (hyperreflexia)
- Psychedelic phase (euphoria or mixed moods, visual illusions, altered perceptions)

**Examples of Substances**

- LSD
- DMT
- Mescaline
- Magic mushrooms

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**Opioids/Opiates**

**Definition**  
Agents that interact with the Central Nervous System to relieve pain and produce a sense of wellbeing

**Possible Effects**

- Pain relief
- Feelings of wellbeing
- Respiratory depression
- Impaired concentration
- Drowsiness
- Impaired judgement

**Examples of Substances**

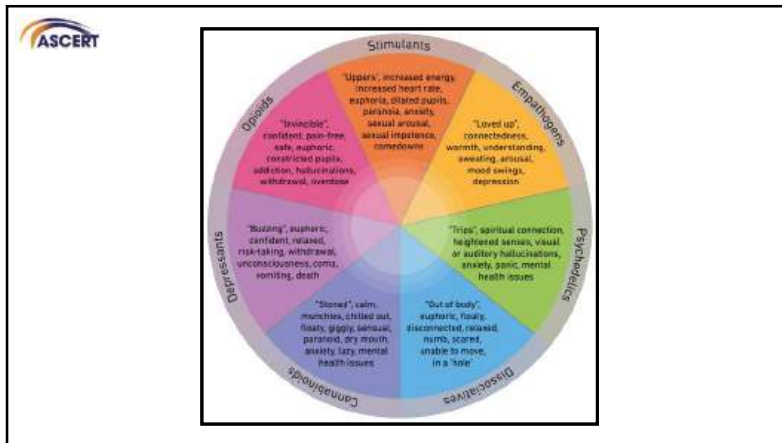
- Opium
- Heroin
- Codeine
- Methadone
- Fentanyl
- Dihydrocodeine
- Buprenorphine

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**The Drugs Wheel**

**Created by Mark Adley in response to increase in NPS**

**Adds three new categories: cannabinoids, empathogens, and dissociatives**



**What are the most commonly used drugs in Northern Ireland?**

In small groups, do some research on the drug assigned to you and then share the information with the wider group.

Talktofrank.com  
Drugwise.org.uk  
Gsync.uk/class

**3 Individuals and Substance Use: Introduction**

Why do people use substances, and what do we mean when we say someone is dependent?

**Why do people use substances?**

Think of some reasons why people might use drugs or alcohol.

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Relieving tension/anxiety/form of escapism

Boredom

Dependency

Availability

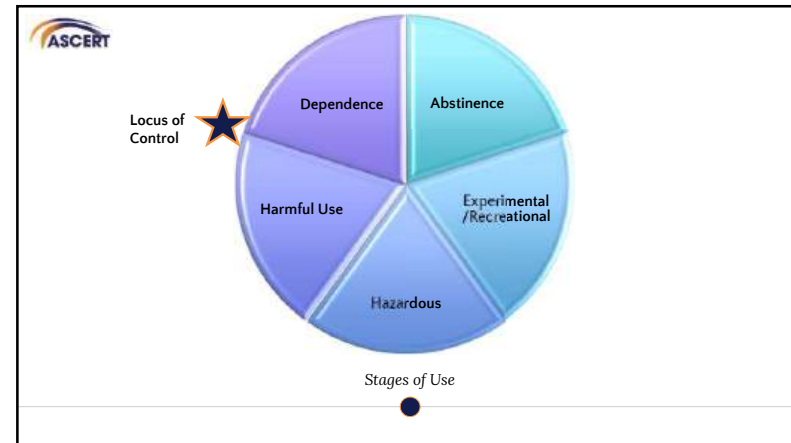


Rituals

Rebellion

Self-medication

Social norms and/or peer pressure



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**4** Individuals and Substance Use: The Impact

How does substance use impact the individual?

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**Engel & Romano's Biopsychosocial Model**

- Substance use rarely impacts on just one area of an individual's life
- One way to think about this relationship: Biopsychosocial Model
  - All domains are interconnected, interdependent, and determine health-related outcomes

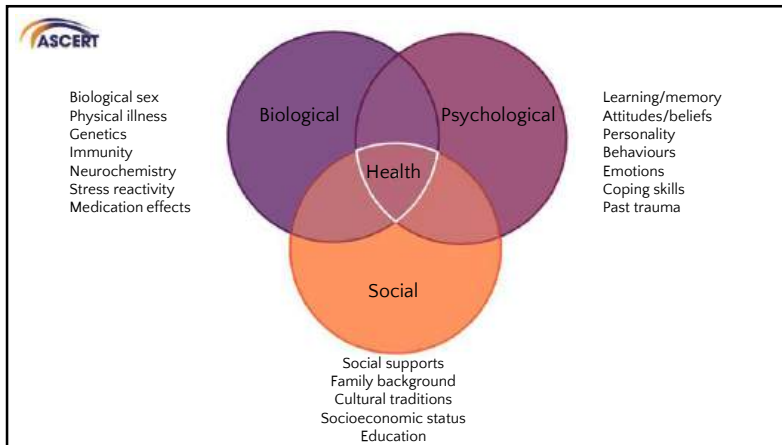


Biological

Psychological

Health

Social



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**Biopsychosocial Model and Alcohol**

In groups, think about the factors involved with alcohol use, using the Biopsychosocial Model.

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**Substance Misuse: Impacts on Family and Children**

How does substance use impact the family and the child?


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**Impact on Families**

- Not all substance misusers' families experience difficulties, but many do (including extreme stress)
- Family involvement in treatment can improve outcomes
- Family members have needs *in their own right*

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**Impact on Families**



- Family members living with someone's addiction can show:
  - A higher risk of physical and psychological problems
  - Poorly-defined problems (e.g. frequent trips to the doctor)
  - More use of mental health services
  - Isolation
  - Chronic low self-esteem

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**Impact on Families: Coping Styles**

- Denying
  - Ignoring the problem; hoping it will go away
- Enabling
  - Inadvertently enabling drug/alcohol use to continue
- Controlling
  - Taking control of the user's life and substance use in an attempt to make them stop using
- Apathy
  - Withdrawing; kicking the user out of the home; giving up

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**Impact on Children: Hidden Harm**

- Serious negative consequences on children due to living with parents/carers who misuse drugs/alcohol (including OTC and prescribed medication)
- 1 in 11 children in NI is affected by parental alcohol misuse



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**7.4%**  
of clients on the NI Substance Misuse Database live with children (315 households)

**40%**  
of children on the Child Protection Register are there as a direct result of parental substance misuse

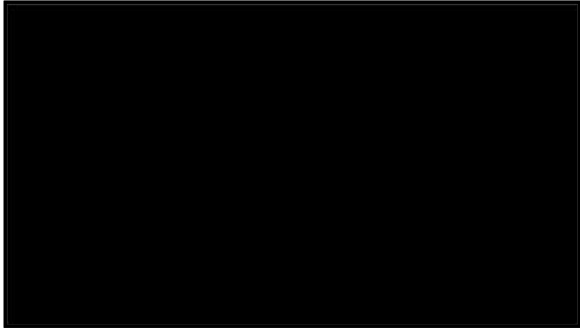
**70%**  
of Looked After Children are there as a direct result of parental substance misuse

**1 in 1000 births**  
are affected by Foetal Alcohol Spectrum Disorders

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Sources: Substance Misuse Database (2019/20); PHA/HSCB Hidden Harm Action Plan (2009)


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When Harm is Hidden

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Laura's Story

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No money/poverty	Physical, emotional, and/or sexual abuse	Inappropriate responsibilities
Secrecy		Stigma
Low self-esteem		Stress
Poor supervision		Poor diet
Emotional needs unmet	Criminal behaviour	Poor attendance at school

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	Witnessing conflict at home	
No fun/hobbies		Fear/anxiety
Separation and loss		Neglect
Shame		Faulty attachments
Behaviour problems	Difficulty making friends	Drug/alcohol use seen as "normal"

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**Child's Internal World**

- Adults won't provide for me
- I can't expect love or warmth
- I have to monitor people's moods very closely
- Things usually go badly
- I can't trust adults to be fair, reasonable or consistent
- Things are entirely my fault or totally out of my control

*Not all children and young people are in need of protection, but most are in need of support.*

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**6 Your Values Around Substance Use**

What are your values around substance misuse and how might they affect your work?

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**Values in Working With Substance Users**


- In all interactions, workers should integrate the following professional values:
  - Employ an empathetic approach to understanding the individual's perception of the issues
  - Demonstrate respect for the unique situation of the individual
  - Be aware of the wider context/factors that led to the development of the substance misuse problem



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**Values in Working With Substance Users**

- In all interactions, workers should integrate the following professional values
  - Acknowledge the complexity of the presenting issues alongside the underlying problems
  - Acknowledge the stigma associated with substance misuse



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7 **Signposting**  
Who's available to help?

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 **NIDACTS**

drugsandalcoholni.info

A website from the Public Health Agency/Drug and Alcohol Coordination Teams with local service directories, educational information, and self-help resources



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 **Family Support NI**

familysupportni.gov.uk

A directory of various support services (e.g. mental health, finances) and registered childcare services in NI



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 **Thanks!**

**Any questions?**

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0800 2545 123  
[info@ascert.biz](mailto:info@ascert.biz)  
[www.ascert.biz](http://www.ascert.biz)

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**Commonly Used Substances in NI**

Substance-specific information

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**Alcohol**

- Ethyl alcohol
  - Booze, drink, liquor, etc.
- Appearance: liquid
- Method of use: swallowed
- Category: depressant
- Possible effects
  - Decreased tension/anxiety
  - Increased sociability
  - Blurred vision, slurred speech, loss of coordination

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**Alcohol: Health Risks**

- Drinking too much in one go can slow your body down to the point where it stops working altogether
- Other risks
  - Mood swings/aggression
  - Depression
  - Heart problems
  - Kidney and liver damage
  - Throat cancer
  - Inflammation of the pancreas
  - Paranoia


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**Cannabis**


- AKA weed, green, grass, bud, brown, hash, dope, blow
- Appearance: dried leaves, black/brown lumps, oil, resin blocks
- Method of use: inhaled (smoked/vaped) or ingested
- Category: depressant/cannabinoid
- Possible effects
  - Relaxation, cheerfulness
  - Talkativeness
  - Increase in appetite

 **Cannabis: Health Risks**


- Carcinogenic properties when smoked
- Can negatively affect concentration and motivation levels
- Negative impact on fertility, immune system, and memory
- Has been associated with paranoia and psychotic episodes (including the presentation of schizophrenia)

 **Ecstasy**



- Methylenedioxyamphetamine (MDMA)
  - AKA E, XTC, Roxelax, snowballs, molly
- Appearance: powder or tablet (usually pale and bearing a stamp/logo)
- Method of use: most commonly swallowed (but reports of smoking and snorting)
- Category: empathogen; stimulant/hallucinogen

 **Ecstasy**



- Possible effects
  - Rush followed by a sense of calm
  - Increased feelings of friendliness, confidence, and energy
  - Heightened perception of senses
- Health risks
  - Anxiety/panic, paranoia, confusion, insomnia (higher doses)
  - Depression and mood swings
  - Lowered immune system
  - Affects levels of serotonin

 **Amphetamines**



- E.g. Benzedrine, Dexedrine, methedrine
  - AKA phet, base, fast, uppers, whizz, billy, sulph, speed, amphet, white
- Appearance: off-white/grey powder sold in wraps or self-sealed plastic bags; tablets
- Method of use: snorted, smoked, swallowed, injected, mixed into a drink, rubbed into gums
- Category: stimulants

  **Amphetamines**



- Possible effects
  - Stimulant effects – increased breathing, heart beat, talkativeness, increased confidence
- Health risks
  - Tense/anxious while under the influence
  - Memory and concentration issues
  - Comedown can last for a couple days → tiredness, depression, irritability
  - Long-term use → additional stress on the heart and immune system; linked to occurrences of psychosis

  **Benzodiazepines: Health Risks**



- Risks of long-term use
  - Tolerance/decrease in effectiveness and need to increase dosage to achieve similar effects
  - Insomnia
  - Anxiety
  - Tremors
  - Convulsions
- Significant risk of overdose when mixed with other depressants (e.g. alcohol)

  **Cocaine**



- Benzoylmethylecgonine
  - AKA coke, white, Charlie, gear
- Appearance: fine white powder usually chopped up (cut) and snorted using a tube; can be prepared into a liquid
- Method of use: snorted, injected, or smoked (crack)
- Category: stimulant
- Possible effects
  - Feelings of wellbeing, confidence, and energy
  - Indifference to pain
  - Decreased hunger

  **Cocaine: Health Risks**



- Raises blood pressure very quickly
- Regular users may appear nervous, paranoid, and restless
- If sniffed, can cause severe irreversible damage to the nose
- If injected, can cause circulatory problems
- High doses: increased body temp, extreme agitation, convulsions, respiratory failure

  **Heroin**



- Diacetylmorphine, diamorphine
  - AKA smack, skag, brown, gear, H
- Appearance: white/brown powder
- Method of use: predominately smoked or injected
- Category: opiates/opioids
- Possible effects
  - Feelings of warmth and detachment
  - Drowsiness
  - Sedation
  - Nausea/decreased appetite

  **Heroin: Health Risks**



- High overdose risk caused by respiratory depression
- Risks associated with routes of administration
  - Skin lesions
  - Vein collapse
  - Abscesses
  - Sharing preparation equipment → increased risk of bloodborne viruses (e.g. HIV, hepatitis)

  **Ketamine**

- Ketamine hydrochloride
  - AKA K, Special K, Super K, ket, Vitamin K
- Appearance: variety of forms, including liquid, powders, and pills
- Method of use: injected, swallowed, sniffed, or smoked
- Category: could be classified multiple ways; analgesic, stimulant, and psychedelic properties



  **Ketamine**

- Possible effects
  - Mainly used for dissociative effects → feelings of detachment from user's body and outside world
  - Sensory loss and analgesic effects without actual loss of consciousness
- Health risks
  - Hallucinations
  - Blurred vision
  - Seizures
  - Breathing difficulties
  - Muscle paralysis



### New Psychoactive Substances / "Legal Highs"

- NPS names change depending on locality, substance, and where/how it was purchased
- Appearance: variety of forms including herbal mixtures, powders, rocks, tablets, capsules, liquids, incense, and tinctures
- Method of use: variety of routes including sniffing, smoking, inhaling, and ingestion
- Category: varies by substance; NPS can be found in all categories/Drug Wheel sections



### New Psychoactive Substances / "Legal Highs"

- Possible effects
  - Vary from person to person depending on the substance taken, the amount, and other substances taken; mimic the effects of other illicit substances
- Health risks
  - In most cases, the chemicals haven't been trialled for human consumption → knowledge of health risks is anecdotal
  - Appear to be similar to a range of other substances (e.g. negative effects on mental health, issues with organ function)