



 Project supported by the PHA



Substance Use 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



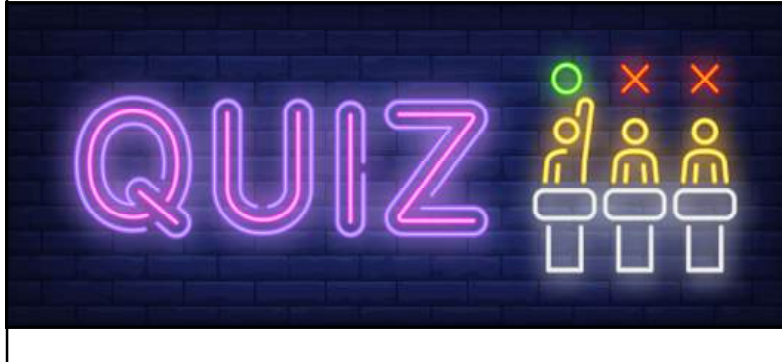
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1 Introduction

What is the prevalence of substance misuse in Northern Ireland?

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QUIZ



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Alcohol in Northern Ireland

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

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

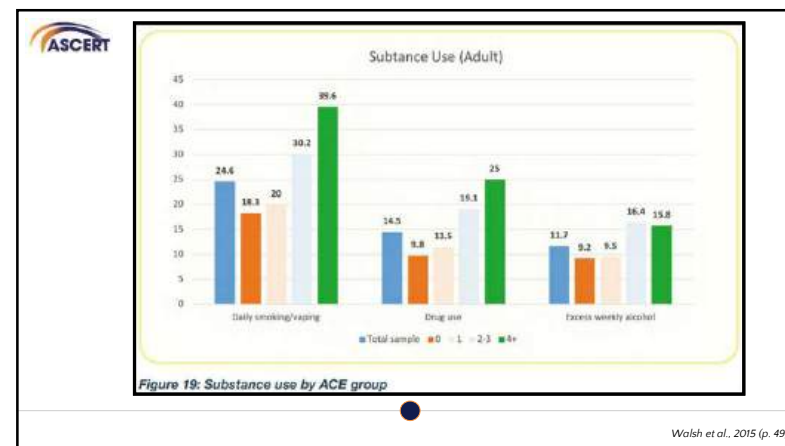
Binge Drinking by Gender

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 those who reported they drank above the limit in the last week. 10% of males & 6% of females.

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)

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

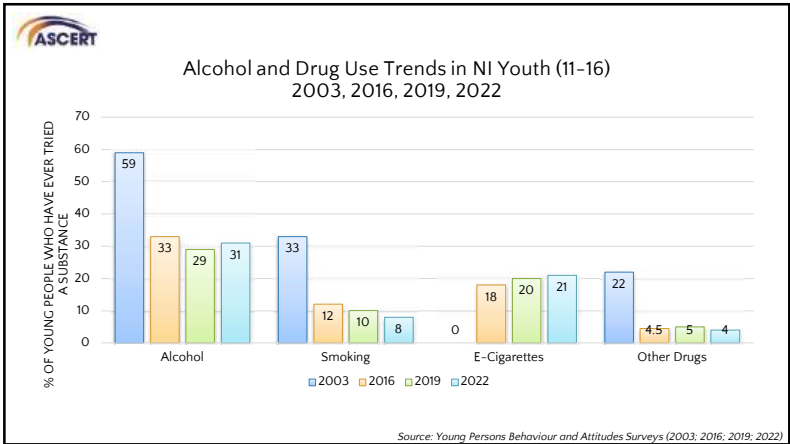
Alcohol

- 31% have ever drunk
- Boys were more likely to have ever taken a drink (33%) than girls (29%)
- 46% of young people that reported drinking alcohol said they have been drunk at least once

Other Drugs

- 4% have ever used drugs
- 3% reported using drugs within the last year
- 2% used drugs within the last month

Source: Young Persons Behaviour and Attitudes Survey (2022)



Who Seeks Support from Substance Misuse Services?

1,359 sought support for drugs only

- 70.5% male, 29.5% female

1,142 Sought support for drugs and alcohol

- 78.5% male, 21.5% female

1,473 sought support for alcohol only

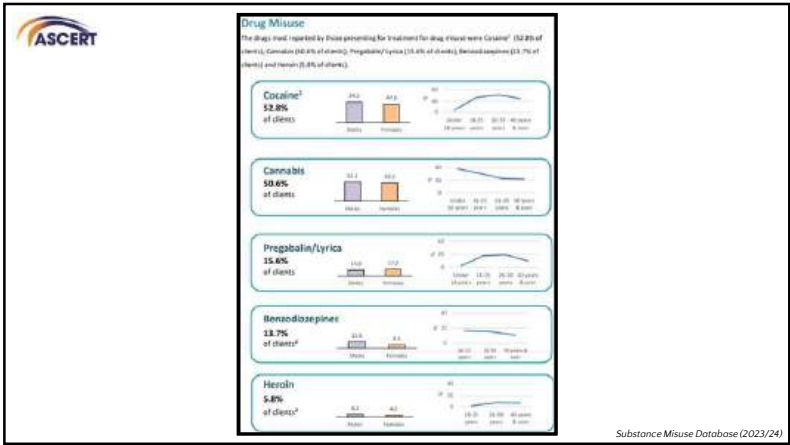
- 63% male, 37% female

26-39 years old was the most common age group for both drug only clients and alcohol/drug clients

40+ years old was the most common age group for alcohol only clients

56.6% of drug use clients and 47.7% of alcohol use clients indicated they used their substances daily

Source: Substance Misuse Database (2023/2024)



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

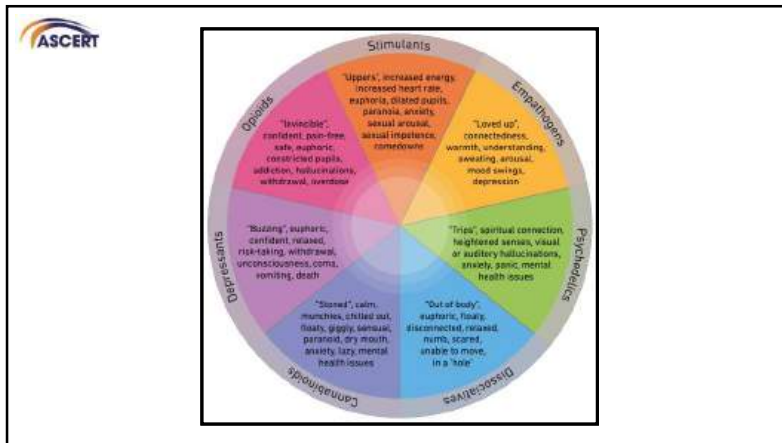
- Opium
- Heroin
- Codeine
- Methadone
- Fentanyl
- Dihydrocodeine
- Buprenorphine

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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

Individuals and Substance Use: Introduction

3 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

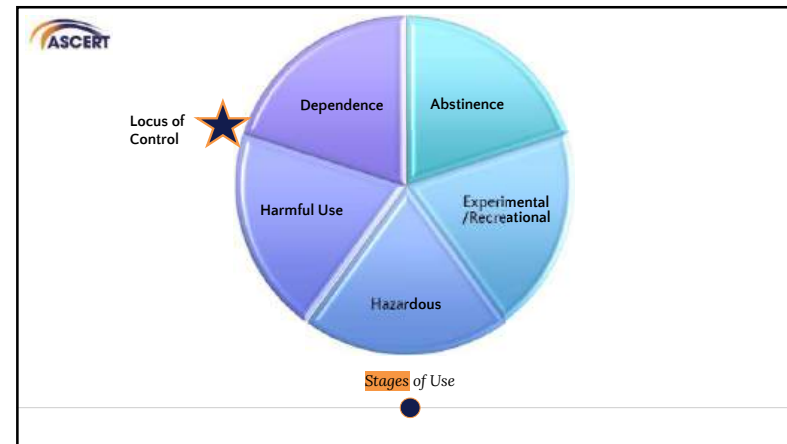


Rituals

Rebellion

Self-medication

Social norms and/or peer pressure



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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

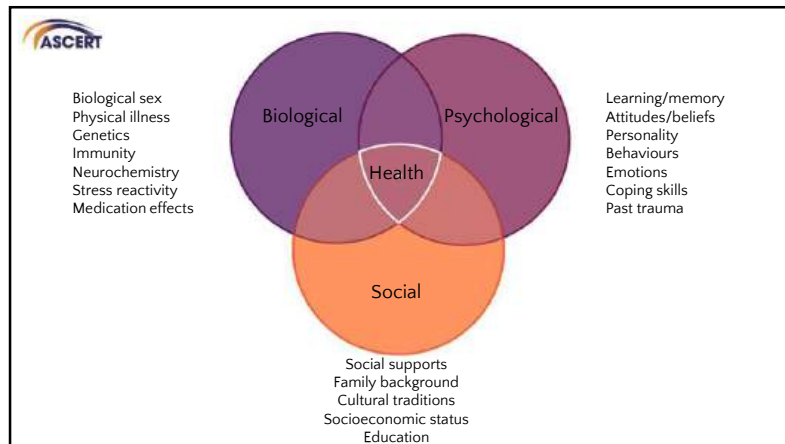


Biological

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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Problem Substance Use: Impacts on Family and Children

How does problem substance use impact the family and the child?


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Impact on Families

- Not all families involving a person using substances problematically 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 individual's life and substance use in an attempt to make them stop using
- Apathy
 - Withdrawing; kicking the individual 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 problem parental alcohol use



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12%
of drug use clients on the NI Substance Misuse Database live with dependent children

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

70%
of Looked After Children are there as a direct result of problem parental substance use

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 use 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 use 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 problem substance use





7 Signposting
Who's available to help?



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




Family Support NI

familysupportni.gov.uk

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

Thanks!

Any questions?

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0800 2545 123
info@ascert.biz
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)