

Oireachtas Joint Committee on Health: 1st December 2021

Opening statement of Tallaght Drugs & Alcohol Task Force (TDATF)

Proposed attendees: Grace Hill: Coordinator, TDATF and Shane Hamilton, Coordinator JADD (Jobstown Assisting Drug Dependency)

Chairperson, Members of the Oireachtas, we want to thank you for inviting us to address the joint health committee this morning, following the recent launch of our research 'The landscape of substance misuse and its impact on the communities of Tallaght Drugs & Alcohol Task Force. In summary the report provides an insight into the current picture of drug and alcohol misuse and related issues, across our communities of Tallaght and Whitchurch. I would like to address the impact of crack cocaine on our area, to discuss what community projects are doing with limited resources to support people affected, why this is now a crisis in our communities and why we urgently need a government response and funding. I am joined by Shane Hamilton, Manager of Jobstown Assisting Drugs Dependency who is here to talk about their work, focusing on the response to increased crack cocaine use.

The report confirms that over the past ten years, Tallaght has seen significant growth in population, deprivation, substance misuse and drug related crime. With a young population of approximately 100,000, the size of our area exceeds Irish cities like Limerick and Galway and is still expanding. Tallaght is also surrounded by areas like City west, Saggart, Rathcoole and Knocklyn, from which referrals often present to our funded services too.

The number of people accessing drug treatment in our area has doubled in the past ten years with most people using two or more substances. While heroin was the most used drug in 2020 in our area, cocaine came in second with crack cocaine use proving the most problematic for individuals and families. After consulting with our frontline services and community reps, TDATF named crack cocaine as our number one issue in 2021 and this is supported by feedback from the public consultation with terminology such as "epidemic" and "tsunami" being used to describe what was happening on the ground. Examples include open drug dealing and drug related intimidation, drug users presenting with complex needs (Shane will touch on more of this). Already in 2021, over 4000 crack pipes have been issued by our community harm reduction services. Just as a comparison, this figure exceeds the total number of pipes issued this year, in the whole Mid-Western Region,

which includes Limerick City and beyond, according to Ana Liffey Drug Project. What really caught people's attention in our report was the increase of women using crack cocaine, which accounts for a third of those seeking help. The involvement of women in prostitution has also come up as something some women resort to, to fund their use or pay off drug debts.

Interim funding for our Taskforce (€1.2m is below the level of funding in 2010) Despite Government funding increasing by about 50% in the last decade and a health budget of €21bn, we have not seen any increase, this is also the case for the other 13 Drug & Alcohol Task Forces in Dublin and Cork. Tallaght Drugs and Alcohol Task Force, while discussing our research findings, have been very open with their views concerning the proposed budget for the National Drugs Strategy in 2022, noting that it lacks the urgency required to support frontline community drug services that are struggling NOW. In addition, with respect to the crack cocaine issue, the budget of €500k for the entire country, lacks understanding of the scale of the problem and level of supports required to address it. We know that crack cocaine is an issue for other Task Force areas but not every community is seeing the same concentration of the issue that we are, so targeting of any available funds is essential. When we launched the research earlier this month, we made the case for an additional allocation of €1m in funding; most pressing on our needs list was to address the crack cocaine issue and support struggling frontline community services. As a Task Force our role is to empower community drug services to meet the needs of their communities, the same rationale applies to the crack cocaine issue. In 2018 we set up two crack cocaine specific programmes, one in Jobstown, one in Killinarden. Today these programmes are effectively working with crack users around their many complex issues, albeit on a part-time basis; come the 1st of January however, we will have no funding to sustain this crucial work, so we **urgently need support**. In Budget 2022, there was an announcement of an additional €500,000 to deal with crack cocaine. While in our view, that is completely insufficient to deal with the crack cocaine crisis in Dublin and across the country, it is vital with 4 weeks to the end of the year that the allocation of this funding is announced. We are calling on Government to allocate this funding to Tallaght and other areas affected by the crack cocaine crisis as soon as possible. We welcome the fact that Minister Feighan has indicated that he will visit Tallaght before the end of the year, we look forward to discussing our report and the need for urgent funding with him. I'd like to make three last brief points

before handing over to Shane Hamilton, Coordinator of one of those pilot projects, who will provide a brief overview of what the service looks like.

- 1) Recovery is possible and recovery communities are growing in our communities which we are extremely proud of. In tandem with our research, we launched a series of videos which give an insight into what recovery can look like, if supported and funded – these can be viewed here:

<https://www.youtube.com/channel/UCZAJ0Mgkvjt0mkXZxK9P36A/videos>

- 2) Our Task Force works well with the HSE Addiction Services locally. When we liaise with the Drugs Programmes Unit or through PQ responses, we are regularly referred to them to seek funds for emerging needs which we know they don't have. It's clear to us that like our community drug services, the HSE Addiction Services also need to be empowered and funded to meet the needs of LDATFs

- 3) Lastly, I wanted to provide this additional insight if I may: last Thursday night I accompanied community drug workers from the crack cocaine service run by JADD, on their assertive outreach run, supporting the most vulnerable drug users across the Jobstown / Tallaght communities. From this experience I can say one thing with complete certainty:

- The supports being provided JADD and CARP in response to the crack cocaine crisis in Tallaght, are extremely essential, frontline and even lifesaving. No other organization is providing such a rounded service in terms of nourishment (hot food), contact point, harm reduction (clean works), sign posting and referrals. Community drug services are well placed and, in our view, best placed to do this work within the community they are based.

Good morning, Chairperson and committee members.

My name is Shane Hamilton, and I am the manager of the Jobstown Assisting Drug Dependency, referred to hereafter as JADD. Thank you for providing us with the opportunity to present to you today, and I am hopeful that from today's session you will have a better understanding of the significant negative impact that crack cocaine is having on individuals, families and communities in the Jobstown/Tallaght area.

In relation to JADD, we are a not-for-profit community-based organization that has been providing treatments & supports to individuals and families affected by addiction problems from the Jobstown community, since 1996. With regards to JADD's service provision, we provide the following:

- Assessment services
- Treatment and rehabilitation services
- Addiction counselling
- Harm reduction service
- Education
- Childcare services
- Family support
- Crack cocaine supports (will cease December 2021)

In partnership with the HSE, JADD also provides a 7 day per week methadone treatment service to individuals affected by use of heroin. Up until 2018, heroin was the primary drug of choice among individuals accessing services in JADD, with services developed primarily to respond to the problems associated with heroin use.

However, since 2018, crack cocaine has emerged and become the primary problematic drug in Jobstown, and surrounding areas. Crack cocaine is no longer an emerging drug, its availability and use are widespread across Tallaght, and highly problematic. Crack cocaine use is a permanent feature in most addiction services in Tallaght and will be for the foreseeable future. Crack cocaine is a completely different drug to heroin, there is no substitute pharmacological treatment, no silver bullet to address this issue.

In relation to the prevalence of crack cocaine use in JADD's methadone service, we have just over 60 patients who attend daily, with close to 70% reporting crack cocaine use. This high

prevalence of crack cocaine use among opioid users is in line with European data, with the EMCDDA (2018) finding that 40% of all those seeking treatment for crack cocaine use report heroin as their secondary drug. The majority of these patients in JADD would have previously had long periods of stability on methadone treatment; they would have completed education courses, returned to the workforce, etc; however, the majority are now back attending the clinic on a daily basis such is the extent of their respective crack cocaine use. Crack cocaine use has destabilized the recovery of a significant number of individuals on methadone treatment.

As outlined in the research, there is a considerable proportion of women using crack cocaine. According to international data, every third person seeking treatment for crack cocaine related problems is a woman (EMCDDA, 2018), with one study finding that 90% of woman reported involvement in the sex trade as a means to fund their addiction to crack cocaine (Rash et al, 2016). JADD are concerned about this, particularly around the impact on women with children. Since 2018, JADD have supported 20 women whose children have been removed from their care because of their use of crack cocaine, and whose crack cocaine use is a barrier to children returning to the family home. Across these 20 women, there are 45 children in care, with a sizeable number having previously attended JADD's childcare service. It is unlikely that these children will be returning to their parents any time soon, primarily because of substance use concerns, as research has found that women involved in sex work who are single mothers have been found to develop the most chaotic crack cocaine dependency (Connolly, 2008). Therefore, it is of critical importance that any response to this issue must include a broader, early intervention response to families affected by crack cocaine use.

The role of a frontline crack cocaine service has evolved to provide extensive and intensive support services towards the most damaging and complex elements in the service users lives. For example, over the course of the past few years, JADD has dedicated significant resources, in partnership with the TDATA development worker & the South Dublin County Council, in relation to tenancy issues associated with service users crack cocaine use. JADD have found that an individual's use of crack cocaine significantly increases where there is a loss of tenancy.

Drug use is a restrictive factor in many areas of an individual's life, which is exacerbated by crack cocaine regarding accessing residential treatment, domestic violence accommodation

and the ability to engage with multiple agencies. This is the role of any future service responding to this issue.

In response to the extent of the crack cocaine issue, and wanting to understand the issue further, JADD self-funded an assertive outreach service from September – December 2021. This service was developed and piloted to access and support the most vulnerable and isolated crack cocaine users in the community, for example, those sleeping rough, those couch surfing, and/or using in houses where use is permitted. This service has allowed JADD to scope the prevalence further, and we identified many more service users within the immediate area, and many using in very unsafe environments, which is concerning from a public health perspective. JADD's assertive outreach service have attended dwellings, and are aware of many more, where there were multiple users present, with the sharing of drug paraphernalia a concern. These issues are also having the unintended consequences of stigmatizing these houses as "crack houses". I would like to note to the committee that many of these homeowners are vulnerable women, whose homes are often controlled by others, through violence, intimidation, etc., therefore, I believe, require a compassionate and considered approach to resolving these issues. Not all of these instances are of an anti-social nature.

However, because this service was limited to two evenings per week, our scope was restricted, therefore, we still do not have a comprehensive understanding of the nature and extent of crack cocaine use in the Tallaght area. The pilot assertive outreach service will cease operation on the 31st of December 2021, hence data of this nature will no longer be collected or collated. The only data and information then available will be that of individuals seeking treatment which research will show is a small number in comparison to the total prevalence.

In relation to funding for crack cocaine supports and treatments, as it currently stands, JADD do not know if they will be providing crack cocaine supports in 2022. The lack of clarity around funding is of major concern to JADD, particularly as it prevents us from planning services towards crack cocaine users. I would say to the committee, that should this issue not receive the appropriate level of funding, the public health costs that could emerge will be significant, and would more than likely, outweigh the cost of an appropriate response.

Closing comments

In my closing comments, I would say Chairperson, Deputies, & members, these individuals, families, and communities I spoke about, need you on their side. They need your support, as we all know, drugs are available in most communities, but they do not impact all communities in the same way. Crack cocaine is destroying the sense of community in parts of Tallaght. I would urge you to support our call for funding to keep individuals safe, to keep families in their homes, to keep children with their families, and to minimize the public health risks and to increase treatment supports to individuals & families affected by crack cocaine use.

Thank you.

We are happy to answer any questions that you may have.

Grace Hill, Shane Hamilton



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County Partnership
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Átha Cliath Theas

