

Alcohol and other drug treatment services in Australia 2013–14: state and territory summaries

Introduction

Publicly funded alcohol and other drug (AOD) treatment services in Australia provide services to assist people to address their drug use through a range of treatments. Assistance may also be provided to support the family and friends of people using drugs.

Main findings on AOD treatment services in 2013–14 – including information on clients, drugs of concern and treatment provided – are available in the *Alcohol and other drug treatment services in Australia 2013–14* report. This report also contains details of the methods used in the analysis of the data, including the imputation methodology developed to adjust the data to account for missing information. Key findings and details of scope, coverage and data quality are available online. In addition, a series of supplementary tables accompanying the annual report is also available online.

This supplementary report presents key state and territory findings on clients and closed treatment episodes in 2013–14. Two types of counts of clients are included: distinct and imputed. Distinct clients refer to those closed treatment episodes for which a valid statistical linkage key (SLK) has been supplied. Imputed client numbers have been estimated based on closed treatment episodes with and without valid SLKs (refer to Appendix B of the *Alcohol and other drug treatment services in Australia 2013–14* report for further details on the imputation methodology).

Supplementary tables referred to in this report (tables with the prefix ‘S’) are available for download from <<https://www.aihw.gov.au/publications/>>.

Key facts

In 2013–14:

- A total of 795 publicly funded agencies provided data about services for clients seeking treatment services and support in Australia. This ranged from 15 in the Australian Capital Territory to 292 in New South Wales.
- Nationally, alcohol was the most common principal drug of concern in 2013–14, accounting for 40% of episodes and this was consistent across all states and territories.
- Cannabis was the second most common principal drug of concern in all states and territories except South Australia, where amphetamines was the most common drug of concern after alcohol. The proportion of episodes with cannabis as the principal drug of concern was well above the national average for Queensland (34% compared with 24% nationally), but well below for the Northern Territory (15%).
- The proportion of episodes where heroin was the principal drug was higher than the national average in the Australian Capital Territory (11% compared with 7% nationally).

- Nationally, counselling was the most common treatment type (43%). It was the most common in half of the states and territories. In South Australia and the Northern Territory, assessment only was most common, and in the Australian Capital Territory and Queensland, information and education only was most common.
- Nationally, the most common source of referral for treatment episodes was self or family (43%), and this was the case in most states and territories, except for South Australia and Tasmania, where referral from a health service was the most common.
- Nationally, over half (54%) of closed treatment episodes ended within 3 months. Among the states and territories, the proportion of closed episodes that ended within 1 month ranged from 28% in Tasmania to 67% in Queensland.

Over the 5-year period to 2013–14:

- The number of publicly funded agencies providing data about services for clients seeking treatment and support increased by 19% (from 670 to 795). This increase has largely been driven by increases in reporting agencies in New South Wales (from 258 to 292), Queensland (from 118 to 141), Western Australia (from 52 to 80) and South Australia (from 59 to 93).
- The top four principal drugs of concern have remained consistent over this period nationally and for all states and territories.

Australia

In Australia, 795 publicly funded alcohol and other drug treatment agencies provided 180,713 treatment episodes in 2013–14 to an estimated 118,741 clients (Figure 1 and tables 1 and SA.1). Nearly all (95%) clients in 2013–14 were receiving treatment for their own drug use. Most clients receiving treatment for their own drug use were male (69%), while the reverse was true for clients receiving treatment for someone else’s drug use (64% were female) (Figure 1). Around 1 in 7 clients (14%) were Aboriginal and Torres Strait Islander (from here on referred to as ‘Indigenous Australians’) (Table SC.3).

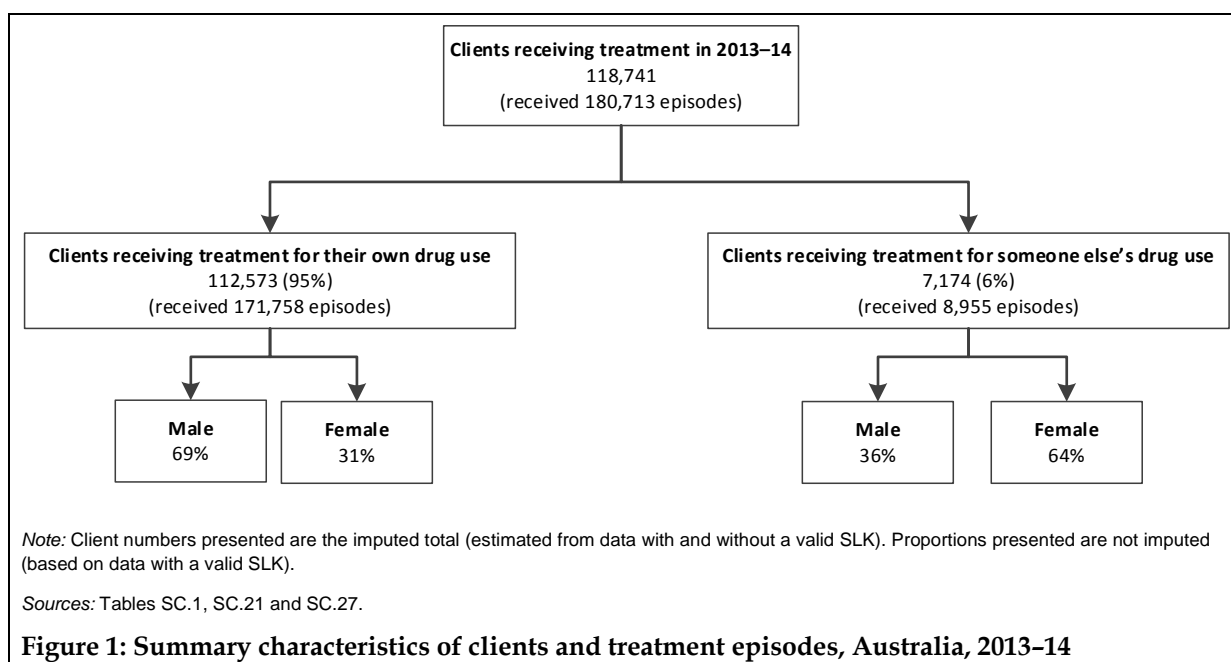


Table 1: Estimated clients, episodes and rates, by client type and state and territory, 2013–14

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Number of episodes	42,406	56,392	36,093	20,867	13,085	2,841	4,652	4,377	180,713
Number of clients ^(a)	26,402	29,877	29,207	15,760	9,365	2,444	3,332	2,963	118,741
Average number of episodes per client	1.6	1.9	1.2	1.3	1.4	1.2	1.4	1.5	1.5
Rate of episodes ^(b) (per 100,000 population)	568	974	769	818	780	553	1,211	1,804	775
Rate of clients ^(b) (per 100,000 population)	354	516	623	618	558	476	867	1,222	509

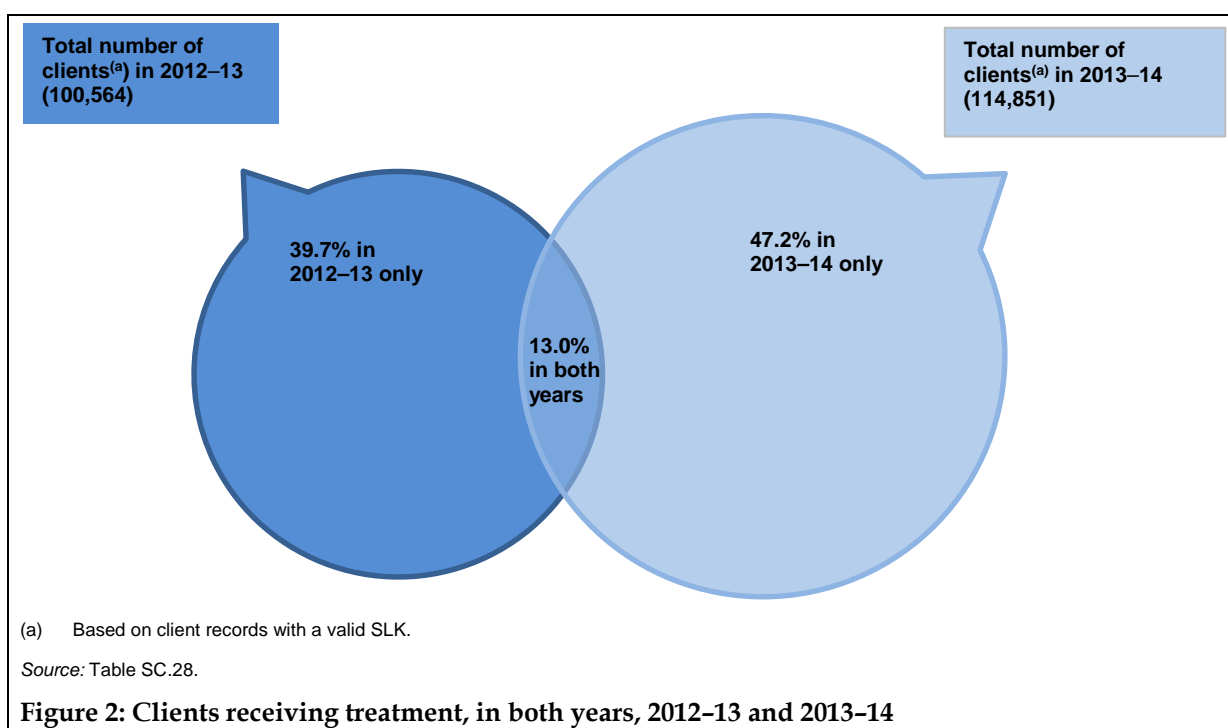
(a) Client numbers are imputed or estimated from data with a valid statistical linkage key SLK.

(b) Crude rate is based on the preliminary Australian estimated resident population as at 31 December 2013.

Source: Table SC.21.

Most (86%) clients received treatment from 1 agency and received an average of 1.5 treatment episodes (Table 1). Nationally, the number of clients presenting to publicly funded AOD services increased between 2012–13 and 2013–14. A total of 190,617 clients received treatment over these two years. Of these, 39.7% (75,766 clients) presented in 2012–13 only, 47.2% (90,053) presented in 2013–14 only, and 13.0% (24,798) received treatment in both years (Figure 2).

One-fifth (21.6%) of the total 114,851 clients receiving treatment in 2013–14, also received treatment in 2012–13.



In 2013–14, the most common principal drugs of concern (the primary drug leading someone to seek treatment) were alcohol (39% of clients and 40% of episodes), cannabis (26% of clients and 24% of episodes), amphetamines (16% of clients and 17% of episodes) and heroin (6% of clients and 7% of episodes). Since 2009–10, the proportion of treatment episodes where alcohol was the most common principal drug of concern has decreased (from 48% to 40%), while the proportion of episodes for amphetamines has increased (from 7% to 17%) (tables SC.4 and SD.2).

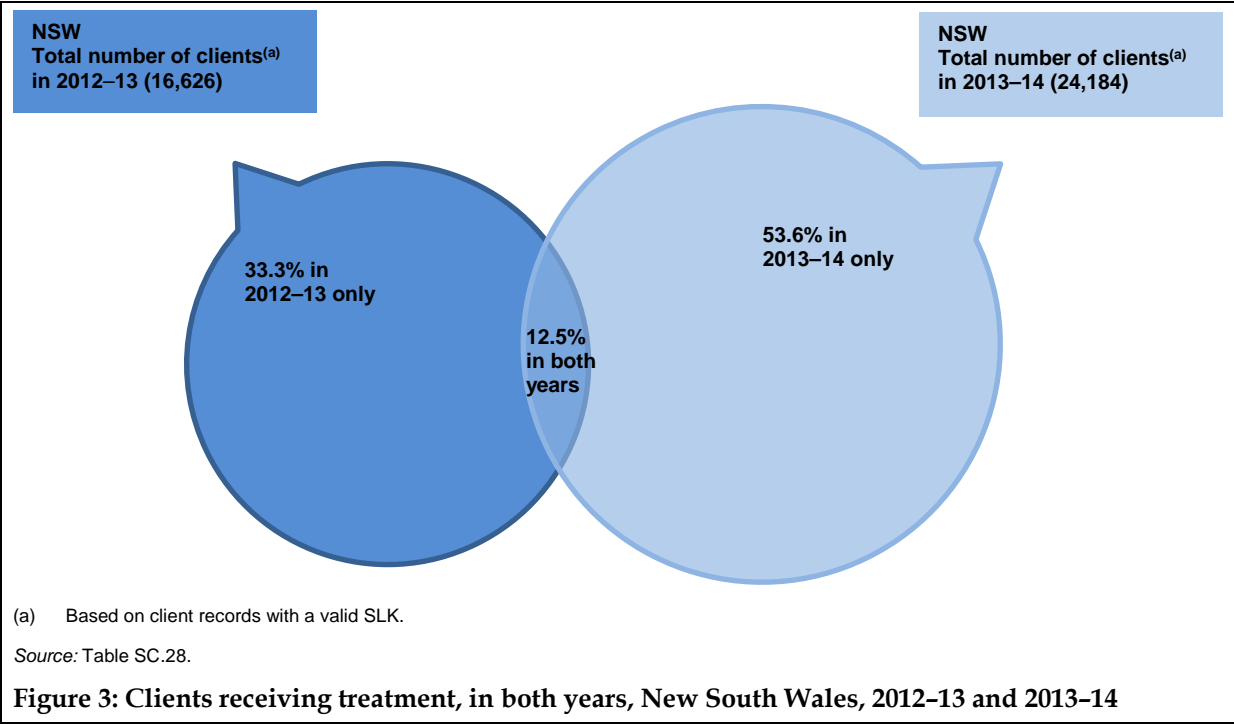
Since 2003–04, the proportion of treatment episodes for each main treatment type remained relatively stable. Counselling continues to be the most common main treatment type provided (comprising about 2 in 5 episodes (43%) since 2003–04, and 46% of clients in 2013–14), followed by assessment only (16% of clients and 16% of episodes) and withdrawal management (11% of clients and 14% of episodes) (tables SC.13 and ST.2).

New South Wales

In New South Wales, 292 publicly funded alcohol and other drug treatment agencies provided 42,406 treatment episodes completed in 2013–14 to an estimated 26,402 clients (Figure 4 and tables SA.1–2).

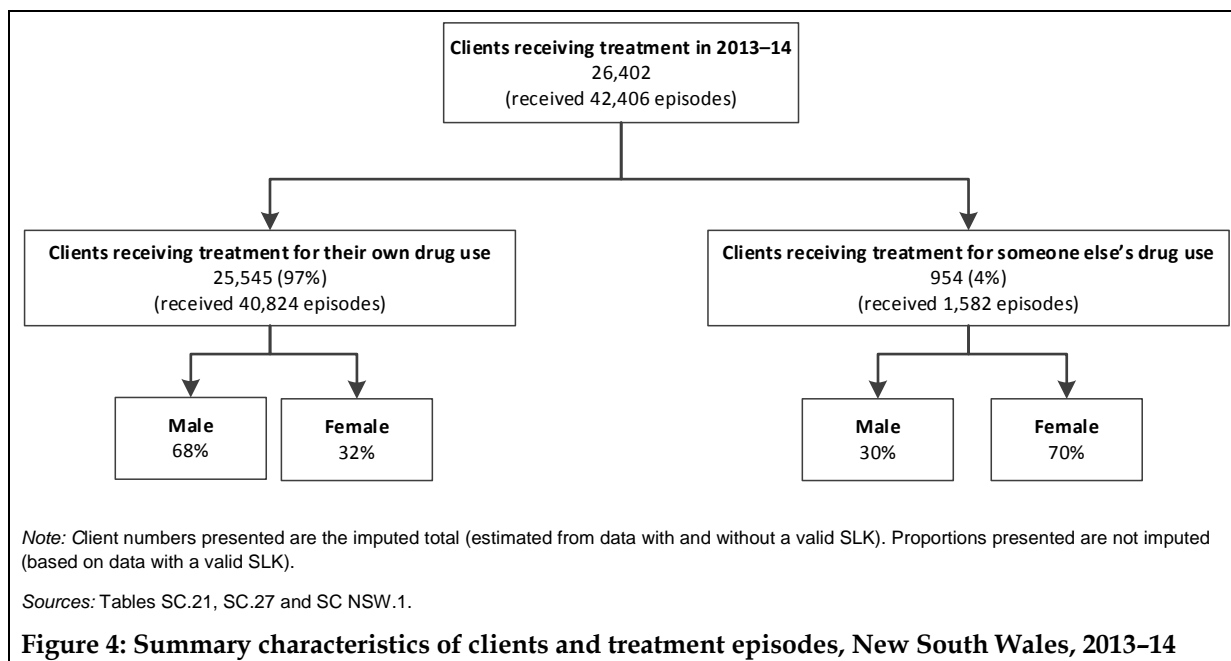
Most (82%) clients received treatment from 1 agency and received an average of 1.6 treatment episodes. This is consistent with national results (1.5 episodes) (tables 1 and SC.23). Over the two years from 2012–13 to 2013–14, a total of 36,288 clients received treatment. Of these, 33.3% (12,071 clients) presented in 2012–13 only, 53.6% (19,459) presented in 2013–14 only, and 12.5% (4,522) received treatment in both years (Figure 3).

Almost 1 in 5 (18.7%) of the total 24,184 clients receiving treatment in 2013–14, also received treatment in 2012–13.



Client demographics

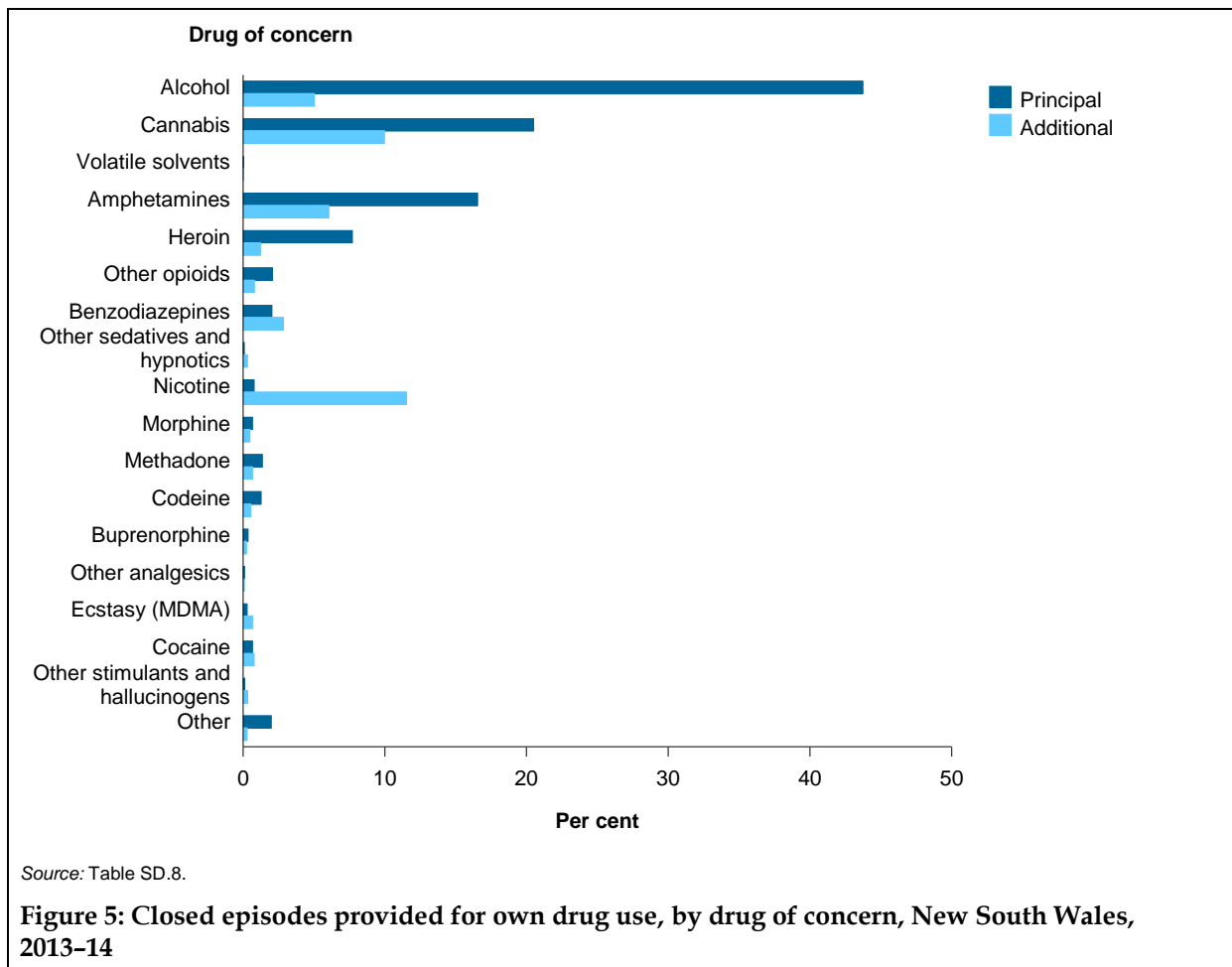
Nearly all (97%) clients in New South Wales in 2013–14 were receiving treatment for their own drug use (Figure 4). Most clients receiving treatment for their own drug use were male (68%), while the reverse was true for clients receiving treatment for someone else’s drug use (70% were female). In New South Wales in 2013–14, almost 1 in 7 clients were Indigenous Australians (13%) (Table SC NSW.3). This is consistent with the national picture.



Drug of concern

In New South Wales in 2013-14, alcohol was the most common principal drug of concern in episodes provided to clients for their own drug use (42% of clients and 44% of episodes) (Figure 5 and Table SC NSW.4). Cannabis was also relatively common as a principal drug, accounting for one-fifth of closed episodes (20%), followed by amphetamines (17%) and heroin (8%).

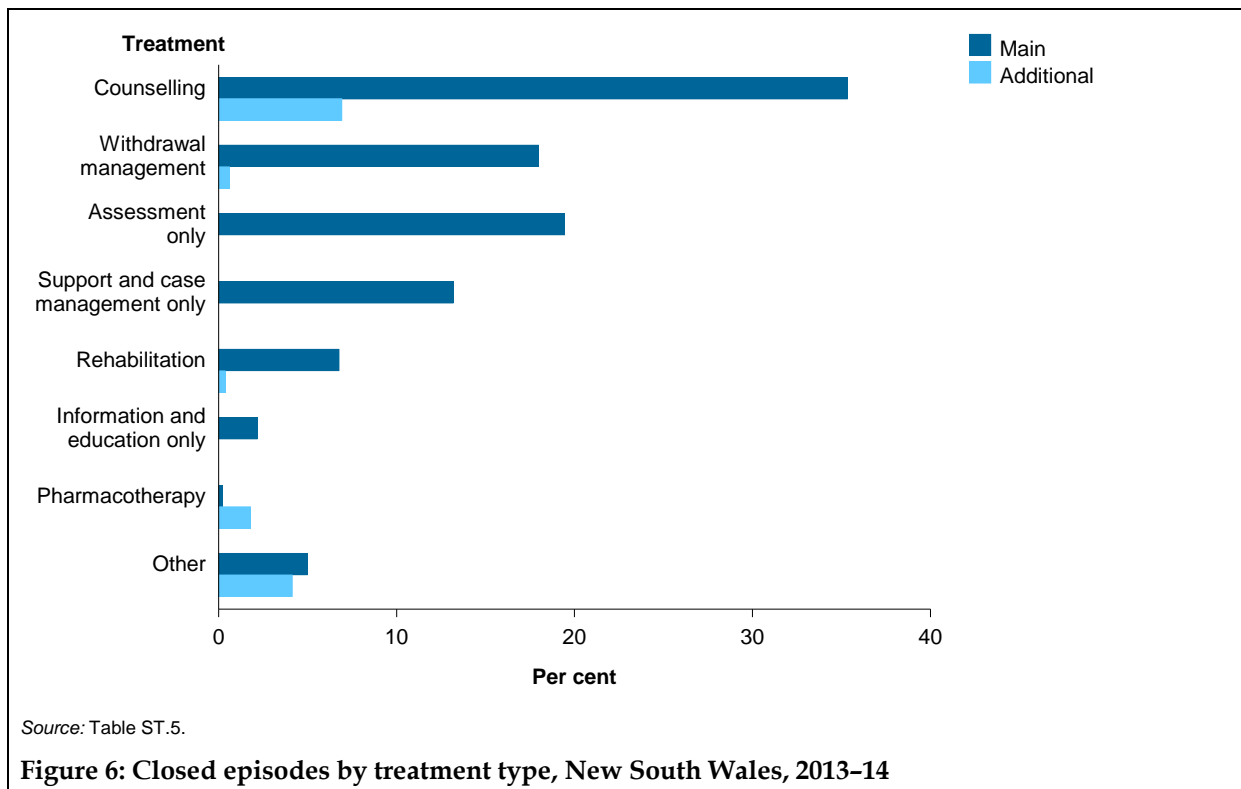
Nicotine was the most common drug when additional drugs were taken into account, accounting for 12% of closed episodes, followed by cannabis (10%), amphetamines (6%) and alcohol (5%) (clients can nominate up to 5 additional drugs of concern for their treatment episode) (Table SD.8).



Over the 5 years from 2009-10, alcohol remained the most common principal drug of concern for closed episodes provided for client’s own drug use, even though the proportion of these episodes declined (from 54% to 44%). Cannabis remained the second most common principal drug of concern over this time, while amphetamines replaced heroin as the third most common principal drug of concern from 2011-12 onwards (Table SD.2). This is consistent with the national picture.

Treatment

Counselling was the most common type of main treatment (42% of clients, and 35% of closed treatment episodes), followed by assessment only (19% of episodes) and withdrawal management (18% of episodes) (Figure 6). Counselling was also the most common type of treatment when closed episodes for additional treatments were taken into account (6.9%) followed by other (4.1%).



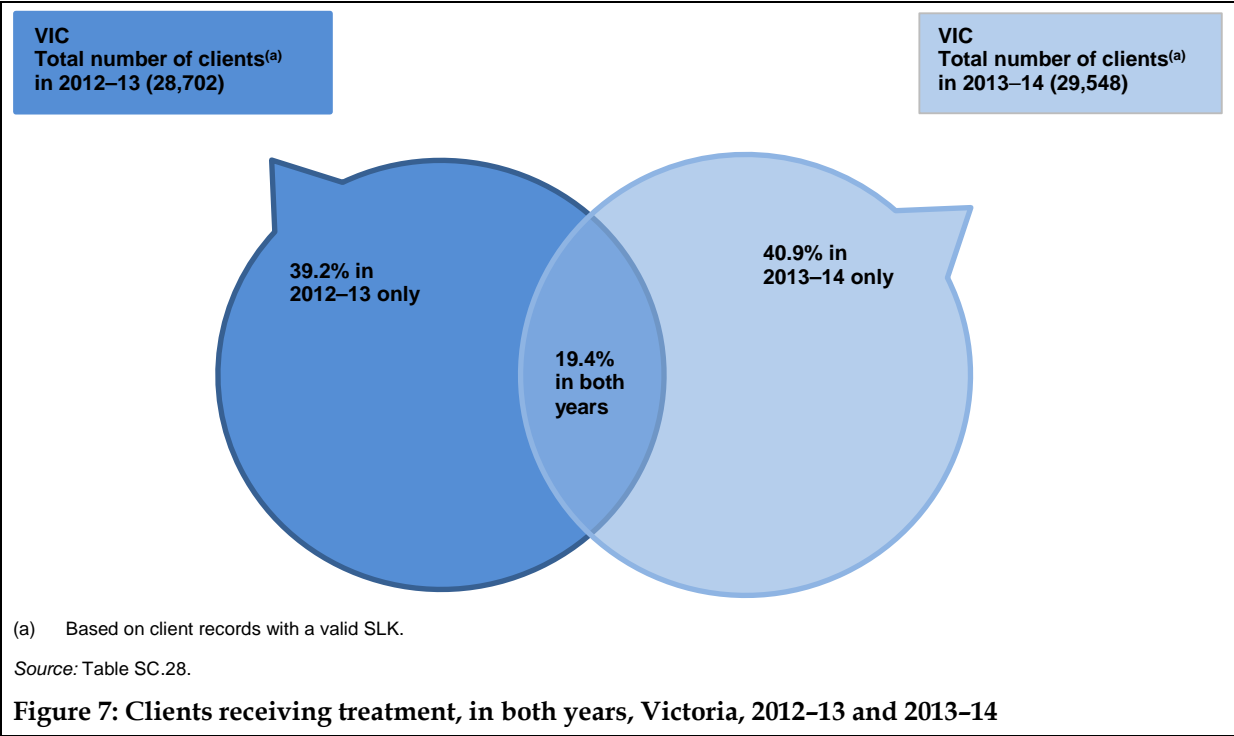
Over the 5 years from 2009-10, counselling has remained the most common main treatment type for closed episodes in New South Wales. Assessment only replaced withdrawal management as the second most common treatment in 2012-13 (increasing from 15% to 22% over the same period), however has decreased to 19% in the most recent year (Table SE NSW.20). The proportion of episodes where counselling was a main treatment type has remained consistently lower than the national average (Table ST.2).

Victoria

In Victoria, 130 publicly funded alcohol and other drug treatment agencies provided 56,392 treatment episodes completed in 2013–14 to an estimated 29,877 clients (Figure 8 and tables SA.1–2).

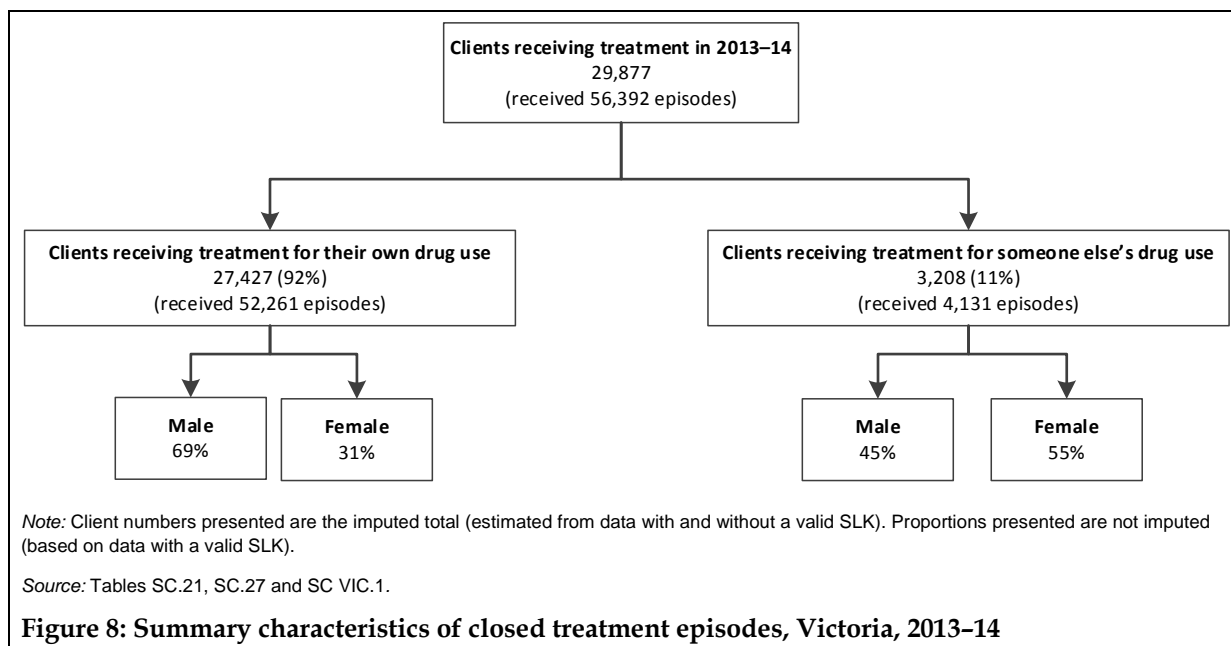
Most (84%) clients received treatment from 1 agency, and received an average of 1.9 treatment episodes, which is higher than the national result (1.5 episodes). This is due to the nuances of Victoria's data collection system, where each type of treatment results in a separate treatment episode (tables 1 and SC.23). Over the two years from 2012–13 to 2013–14, a total of 48,785 clients received treatment. Of these, 39.2% (19,133 clients) presented in 2012–13 only, 40.9% (19,956) presented in 2013–14 only, and 19.4% (9,465) received treatment in both years (Figure 7).

Almost one-third (32.0%) of the total 29,548 clients receiving treatment in 2013–14, also received treatment in 2012–13.



Client demographics

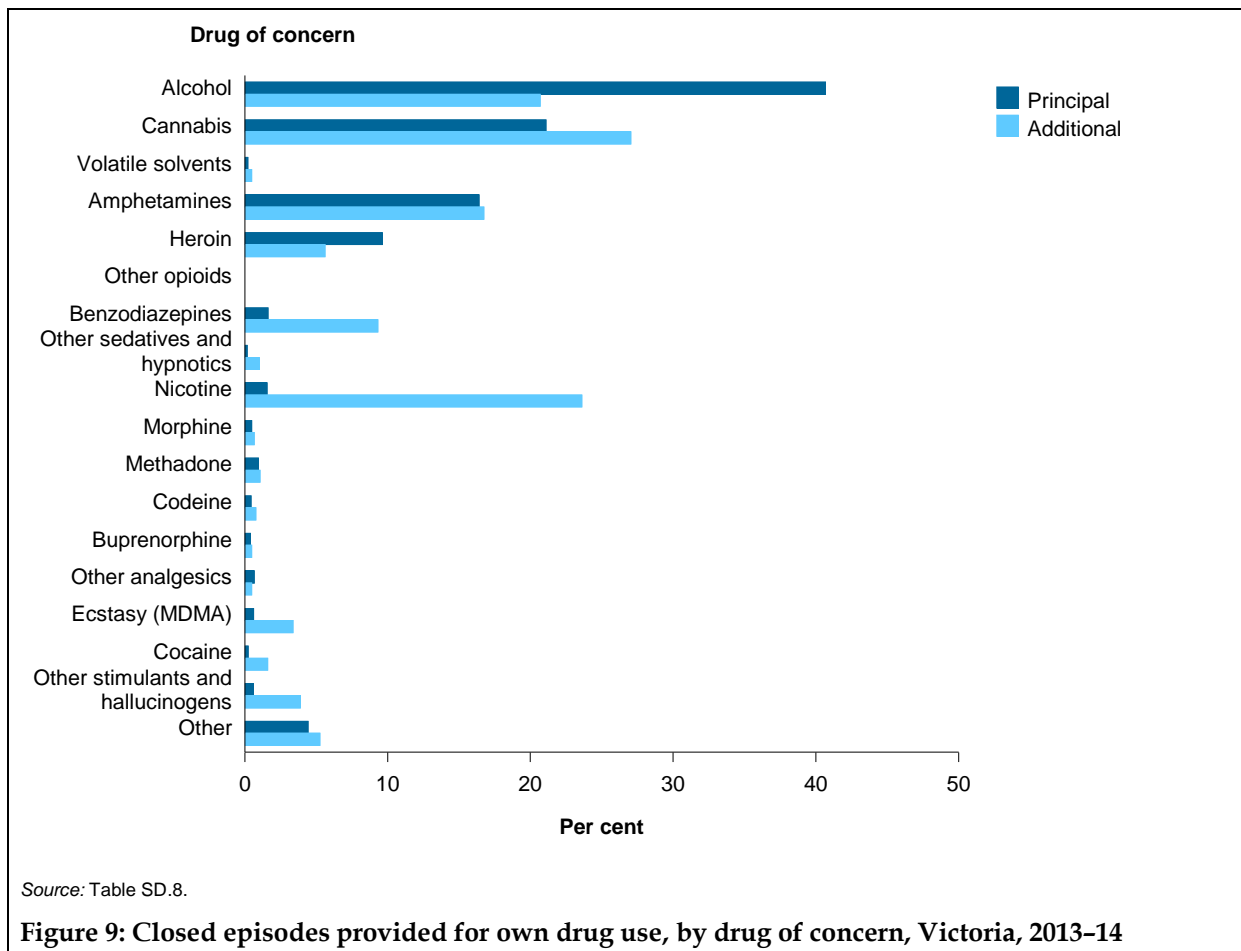
Nearly all (91%) clients in Victoria in 2013–14 were receiving treatment for their own drug use and most (69%) clients were male. The picture was different for clients receiving treatment for someone else’s drug use (55% were female) (Figure 8). These results are consistent with the national picture. In Victoria in 2013–14, around 1 in 16 clients were Indigenous Australians (6%), which is lower than the national results (14%) (Table SC VIC.3).



Drug of concern

In 2013–14 in Victoria, alcohol was the most common principal drug of concern in episodes provided to clients for their own drug use (40% of clients and 41% of episodes) (Figure 9 and Table SC VIC.4). Cannabis was also relatively common as a principal drug, accounting for more than one-fifth of episodes (21%), followed by amphetamines (16%) and heroin (10%).

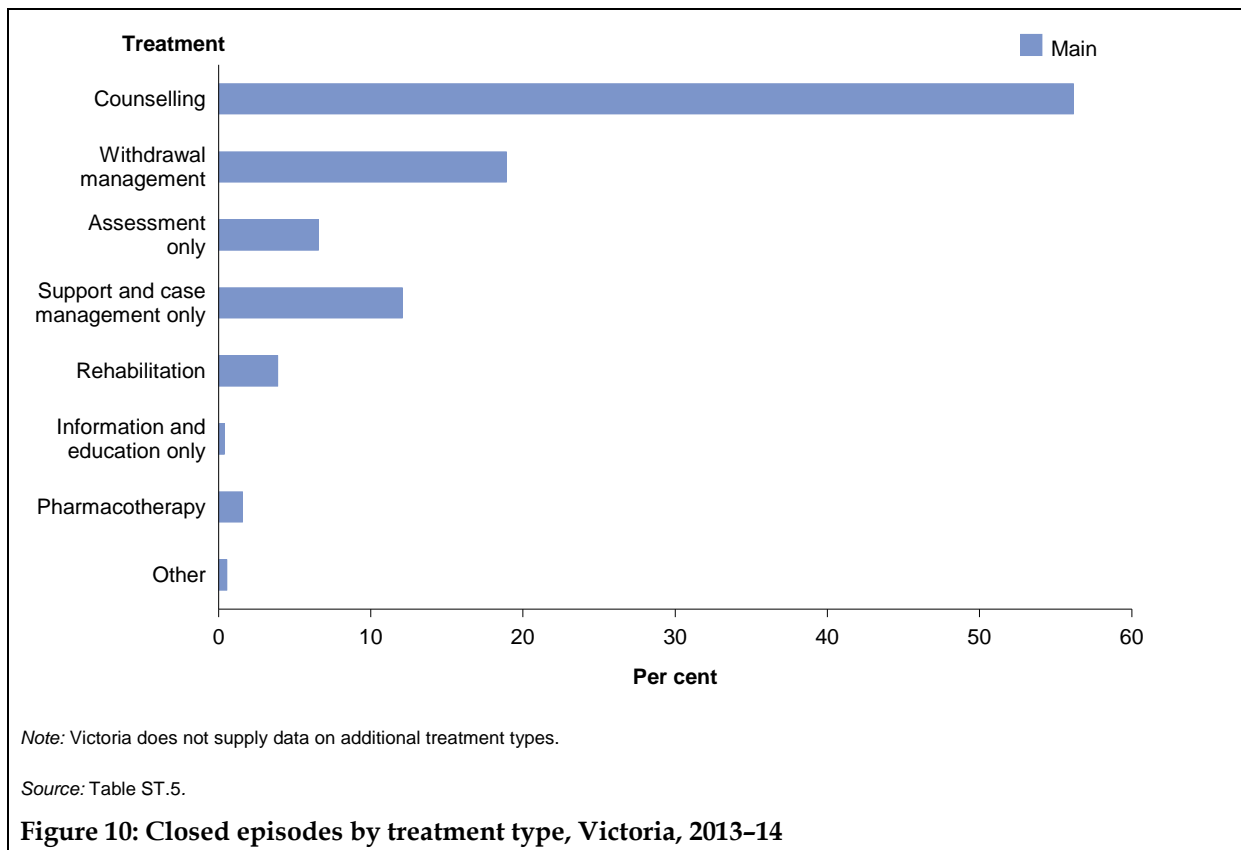
Cannabis was the most common drug when episodes for additional drugs were taken into account, accounting for 27% of closed episodes, followed by nicotine (24%) and alcohol (21%) (Table SD.8).



Over the 5 years from 2009-10, alcohol remained the most common principal drug of concern in episodes provided to clients for their own drug use. Cannabis remained the second most common principal drug of concern over this time, while amphetamines replaced heroin as the third most common principal drug of concern from 2012-13 onwards. Over the 5 years from 2009-10, treatment episodes with a principal drug of concern of amphetamines increased from 5% to 16%, while episodes with a principal drug of concern of heroin decreased from 14% to 10% (Table SD.2).

Treatment

In Victoria in 2013-14, counselling was the most common type of main treatment (61% of clients and 56% of episodes), followed by withdrawal management (19%) and support and case management only (12%) (Figure 10). Due to the nuances of Victoria's data collection system, with each type of treatment resulting in a separate episode, Victoria cannot supply data on additional treatment types.



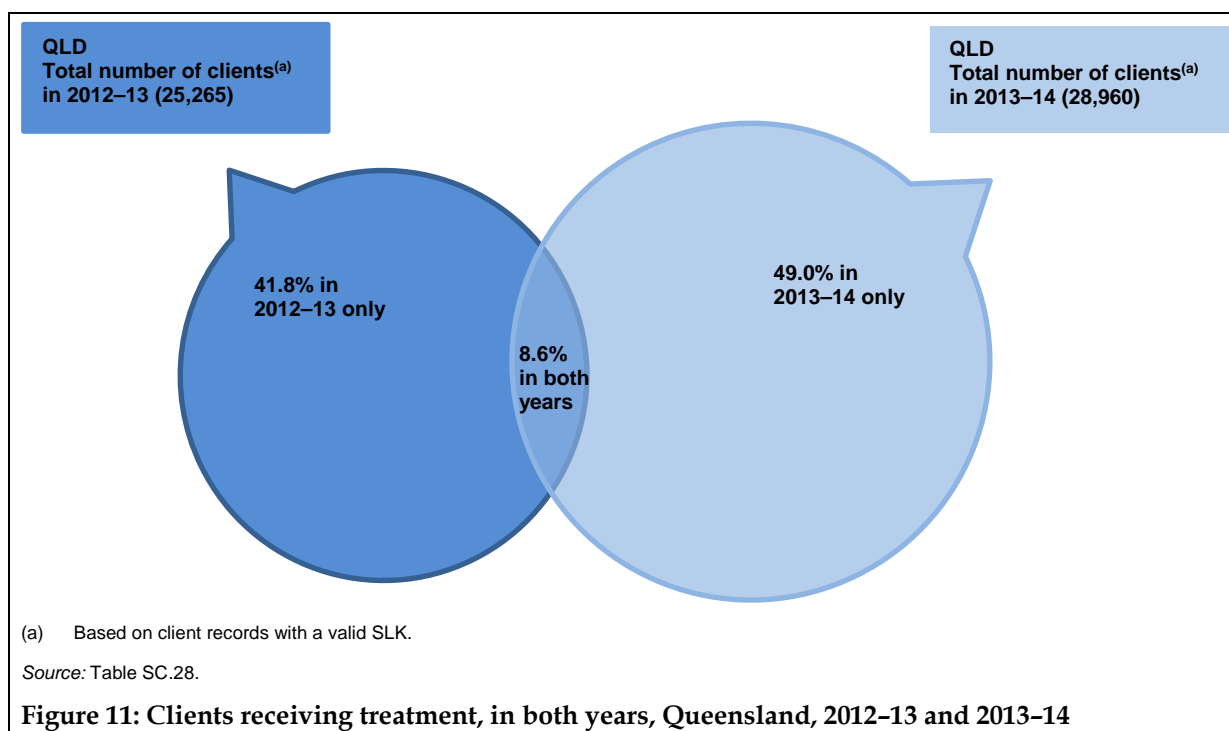
Over the 5 years from 2009-10, there was no change to the most common treatment types for closed episodes in Victoria; counselling was the most common treatment type, followed by withdrawal management and support and case management only. Over the same period, the proportion of closed episodes for the 3 most common main treatment types remained higher than the national average, most noticeably counselling (ranging from 51-56% in Victoria compared with 40-41% nationally) (tables SE VIC.20 and ST.2).

Queensland

In Queensland, 141 publicly funded alcohol and other drug treatment agencies provided 36,093 treatment episodes completed in 2013–14 to an estimated 29,207 clients (Figure 12 and tables SA.1–2).

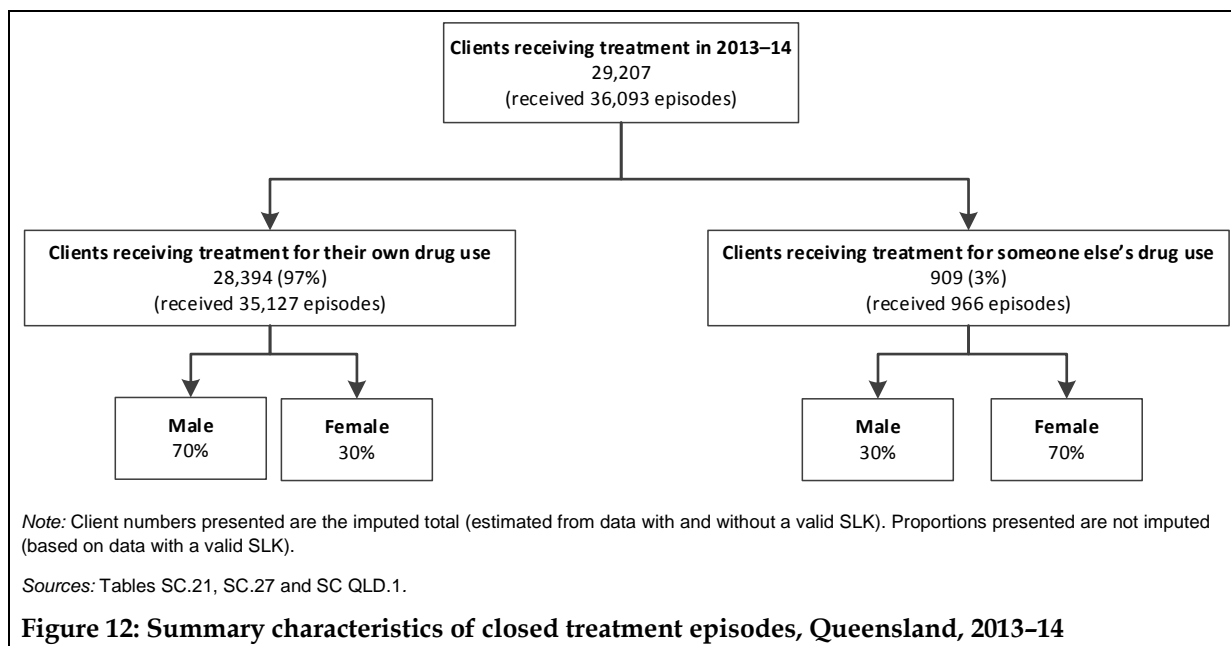
Most (92%) clients received treatment from 1 agency and received an average of 1.2 treatment episodes, slightly lower than national results (1.5 episodes) (tables 1 and SC.23). Over the two years from 2012–13 to 2013–14, a total of 49,950 clients received treatment. Of these, 41.8% (20,861 clients) presented in 2012–13 only, 49.0% (24,452) presented in 2013–14 only, and 8.6% (4,275) received treatment in both years (Figure 11).

Around 1 in 7 (14.8%) of the total 28,960 clients receiving treatment in 2013–14, also received treatment in 2012–13.



Client demographics

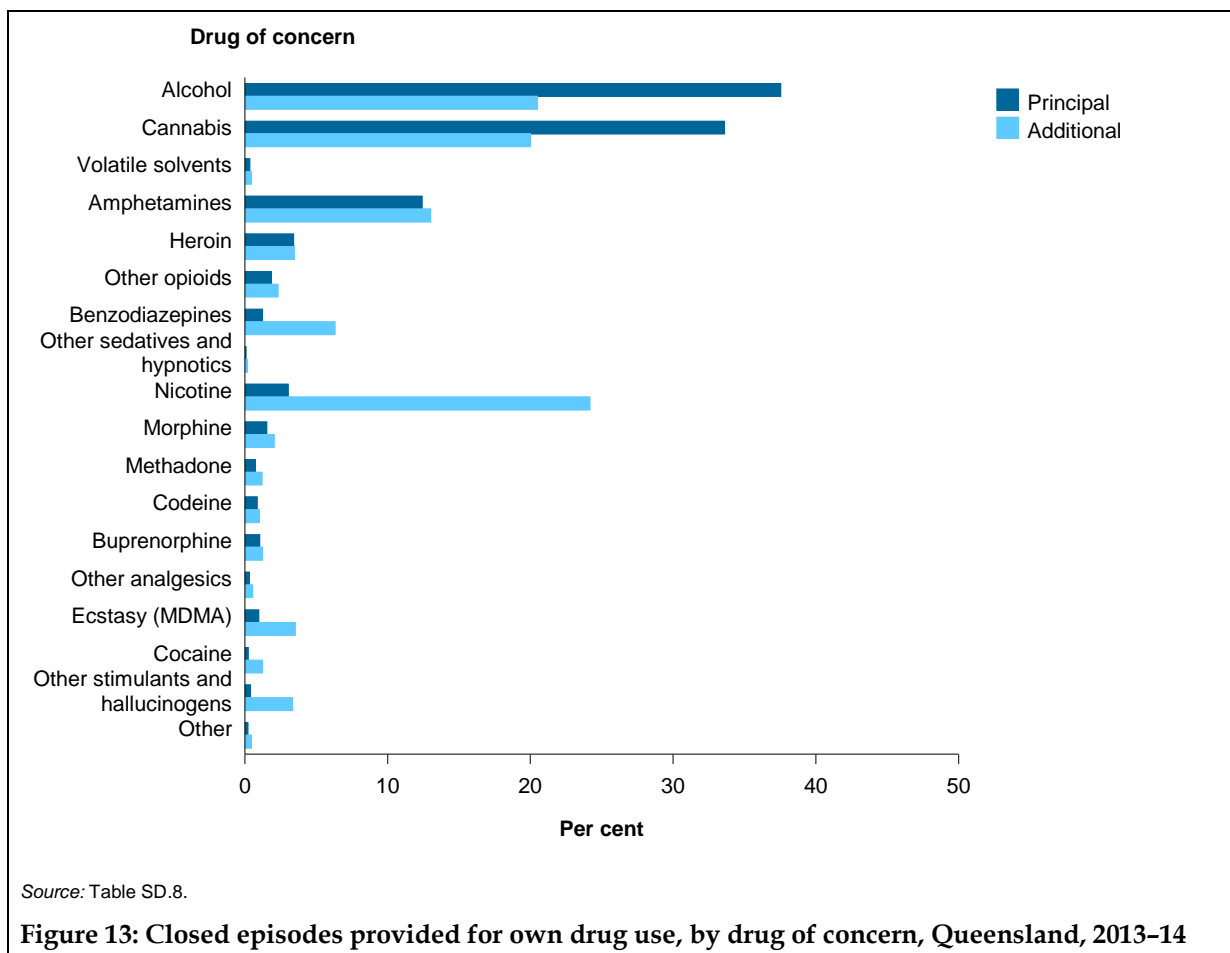
Nearly all (97%) clients in Queensland in 2013–14 were receiving treatment for their own drug use and most (70%) were male (Figure 12). The reverse was true for clients receiving treatment for someone else's drug use (70% were for females). In Queensland in 2013–14, just over 1 in 7 clients were Indigenous Australians (15%) (SC QLD.3). These results are consistent with the national picture.



Drug of concern

In 2013-14, alcohol was the most common principal drug of concern in treatment episodes provided to clients for their own drug use in Queensland (34% of clients and 37% of episodes) (Figure 13 and Table SC QLD.4). Cannabis was the second most common principal drug of concern, accounting for just over one-third of closed treatment episodes (34%), followed by amphetamines (12%).

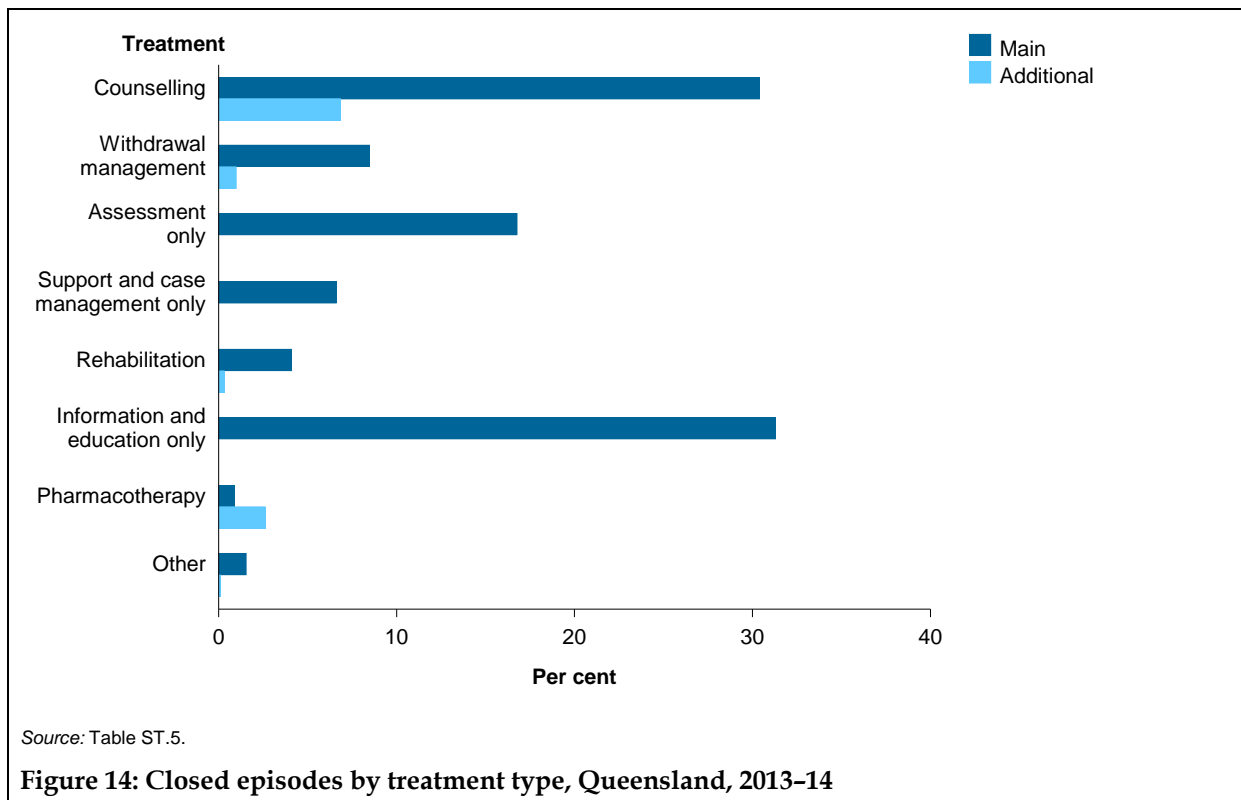
When episodes for additional drugs of concern are considered, nicotine was the most common drug, accounting for 24% of episodes, followed by alcohol (21%) and cannabis (20%) (Table SD.8).



Over the 5 years from 2009-10, alcohol remained the most common principal drug of concern in episodes provided to clients for their own drug use, followed by cannabis and amphetamines. The proportion of episodes involving amphetamines increased from 6% in 2009-10 to 12% in 2013-14. Over the same period, the proportion of episodes for client's own drug use where cannabis was the principal drug have remained consistently higher than the national average (ranging from 29% to 36% in Queensland compared with 22% to 24% nationally) (Table SD.2).

Treatment

Information and education only was the most common type of main treatment (36% of clients and 31% of closed episodes), followed by counselling (30% of episodes) and assessment only (17% of episodes) (Figure 14). When additional treatments were taken into account counselling (37% of episodes) was the most common type of treatment, followed by information and education only (31% of episodes) and assessment only (17% of episodes).



Over the 5 years from 2009-10, the proportion of episodes where information and education only was a main treatment type has declined markedly in Queensland (from 42% to 31%, with a low of 19% in 2011-12). Over the same period, the proportion of episodes where counselling was a main treatment type fluctuated – increasing from 28% to 35% between 2009-10 and 2011-12, then decreasing from 33% to 30% between 2012-13 and 2013-14 (Table SE QLD.20).

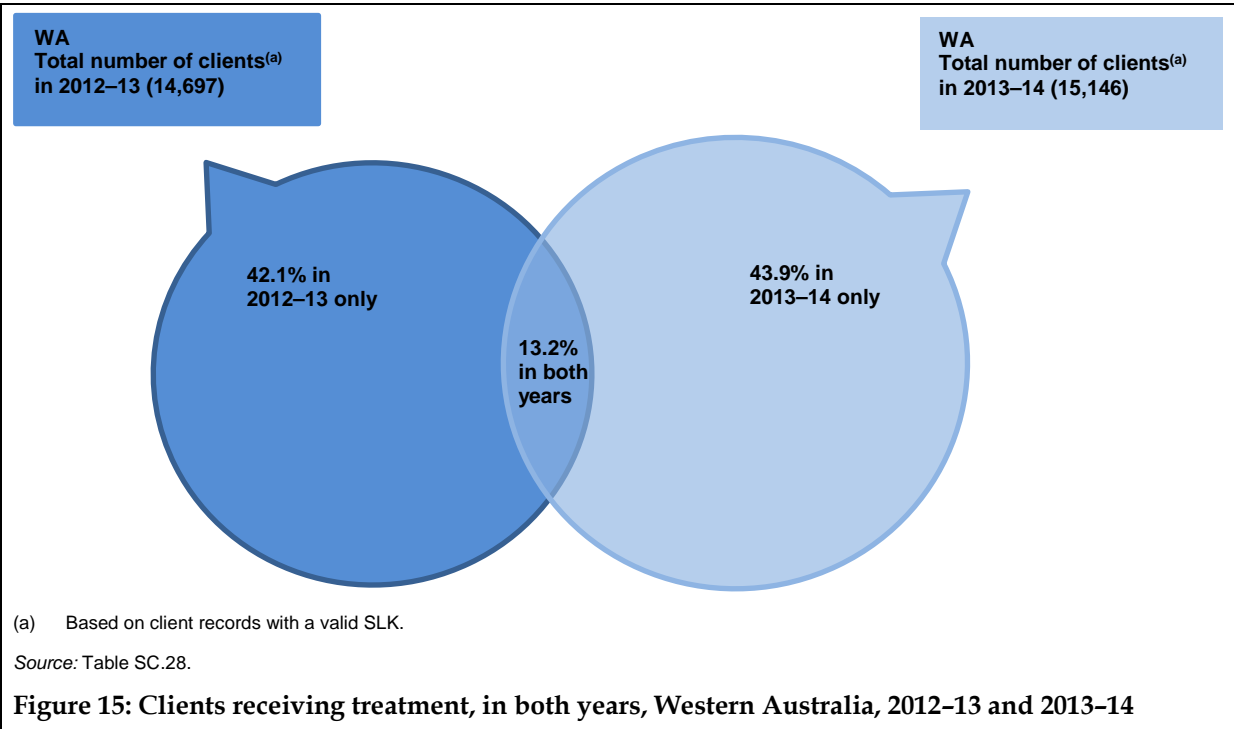
Over the 5 years from 2009-10, nationally, the proportion of episodes where information and education only was a main treatment type has remained the highest in Queensland, and was just over 3 times the national average in 2013-14 (31% compared with 9%) (tables SE QLD.20 and ST.2). In Queensland, treatment provided to people diverted to services by police and the courts is recorded as ‘information and education only’. Actual treatment involves a 2-hour treatment session that includes extensive alcohol and drug assessment to determine dependence, assessment of risk-taking behaviours, provision of advice and information on reducing/ceasing drug use and harm minimisation, motivational intervention, provision of resources and referral.

Western Australia

In Western Australia, 80 publicly funded alcohol and other drug treatment agencies provided 20,867 treatment episodes completed in 2013–14 to an estimated 15,760 clients (Figure 16 and tables SA.1–2).

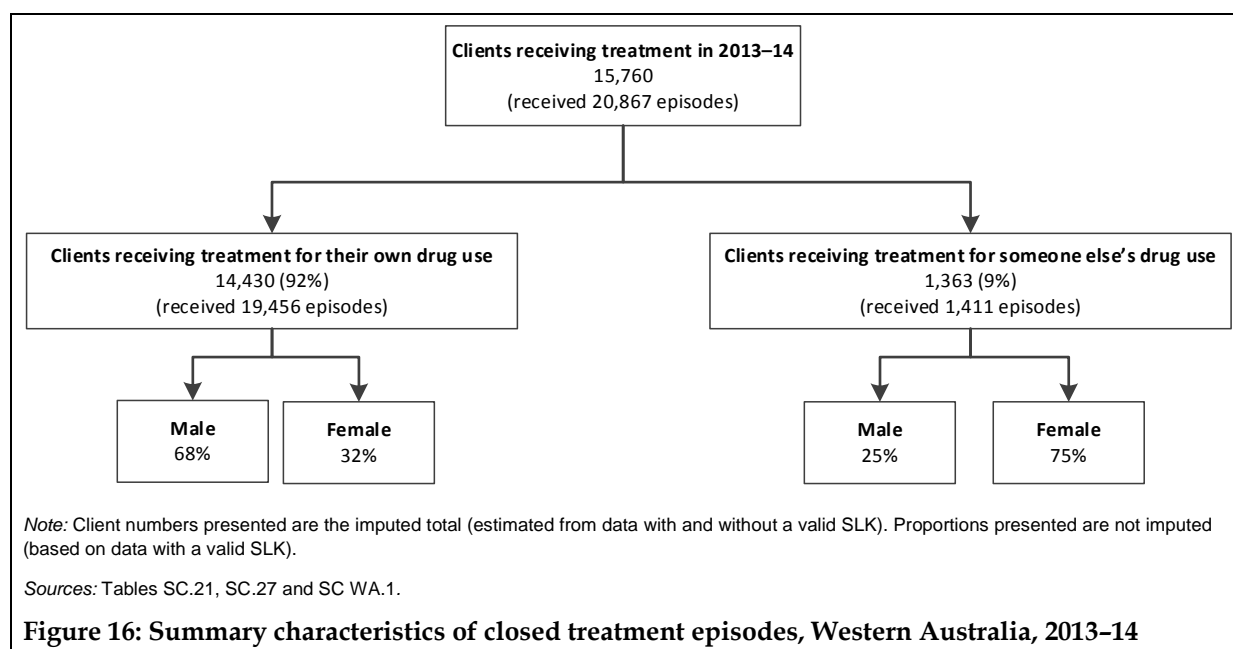
Most (86%) clients received treatment from 1 agency and received 1.3 treatment episodes, slightly lower than national results (1.5 episodes) (tables 1 and SC.23). Over the two years from 2012–13 to 2013–14, a total of 26,364 clients received treatment. Of these, 42.1% (11,102 clients) presented in 2012–13 only, 43.9% (11,582) presented in 2013–14 only, and 13.2% (3,479) received treatment in both years (Figure 15).

Just under one-fifth (23.0%) of the total 15,146 clients receiving treatment in 2013–14, also received treatment in 2012–13.



Client demographics

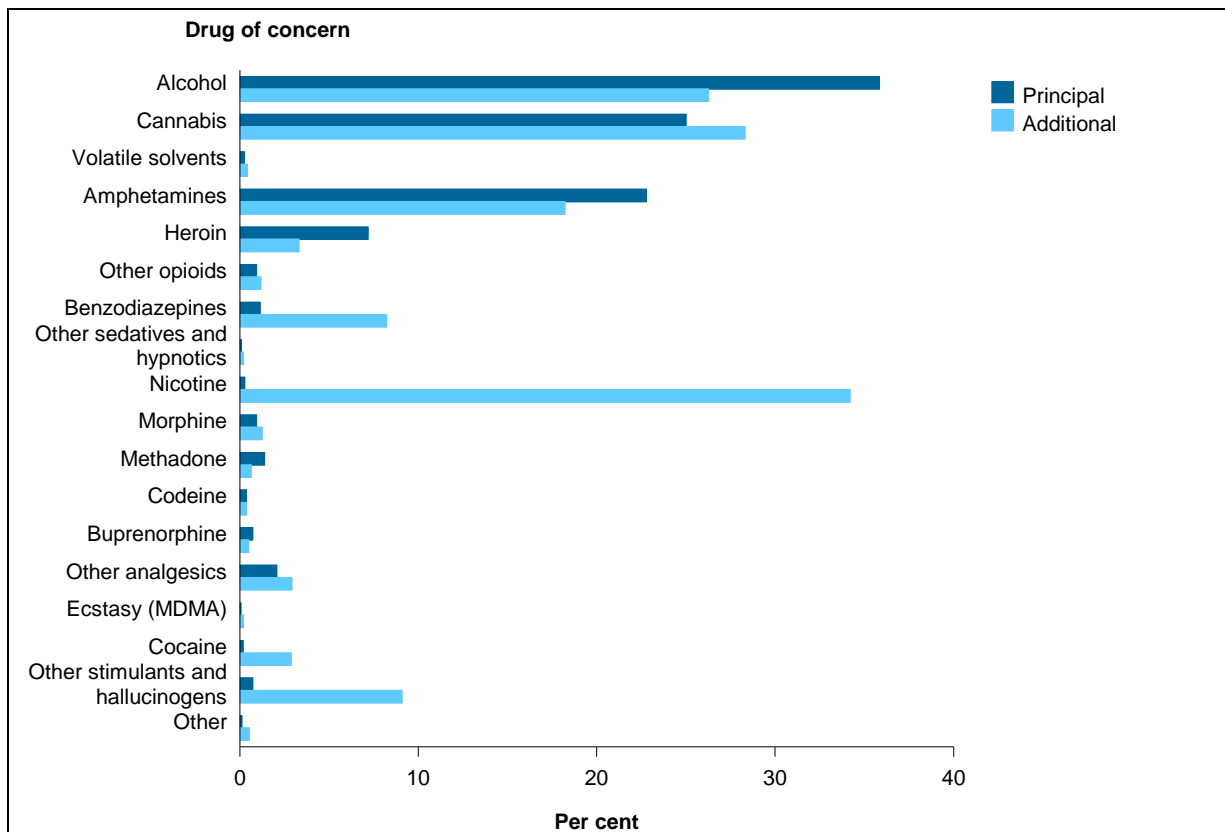
Nearly all (92%) clients in Western Australia in 2013–14 were receiving treatment for their own drug use and most (68%) were male. The reverse was true for clients receiving treatment for someone else’s drug use (75% were for females) (Figure 16). In Western Australia in 2013–14, 1 in 5 clients were Indigenous Australians (20%), which is higher than the national results (14%) (Table SC WA.3).



Drug of concern

In Western Australia, alcohol was the most common principal drug of concern in episodes provided to clients for their own drug use in 2013–14 (37% of clients and 36% of episodes) (Figure 17 and Table SC WA.4). Cannabis was also relatively common as a principal drug, accounting for almost one-quarter of treatment episodes (25%), followed by amphetamines (23%) and heroin (7%).

When episodes for additional drugs of concern are considered, nicotine (34% of episodes) was the most common drug, followed by cannabis (28% of episodes), alcohol (26% of episodes) and amphetamines (18% of episodes) (Table SD.8).



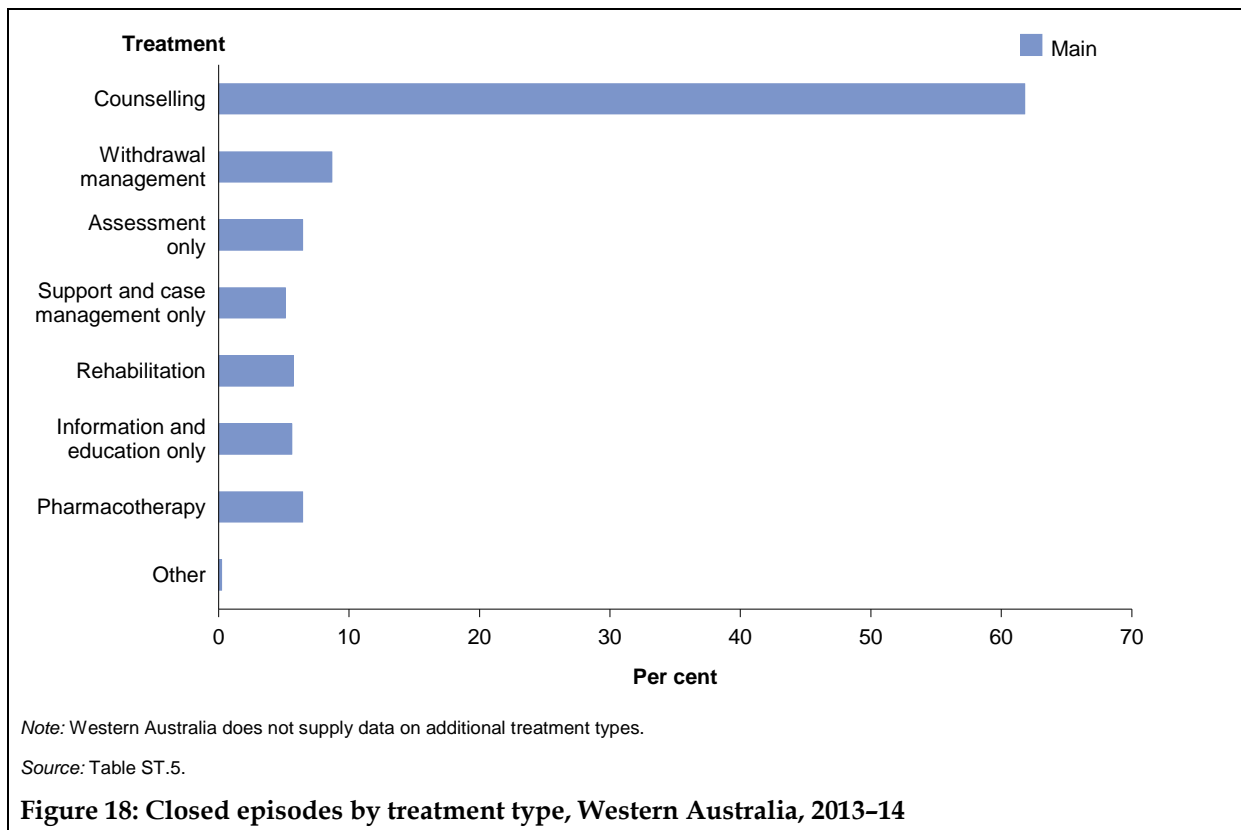
Source: Table SD.8.

Figure 17: Closed episodes provided for own drug use, by drug of concern, Western Australia, 2013–14

Over the 5 years from 2009–10, alcohol has remained the most common principal drug of concern in closed treatment episodes provided to clients for their own drug use, followed by cannabis and amphetamines. However, alcohol has declined over this period, from 49% of treatment episodes to 36% in 2013–14. The proportion of episodes involving amphetamines was higher than the national average (ranging from 14%–23% in Western Australia compared with 7%–17% nationally) (Table SD.2).

Treatment

In Western Australia, counselling was the most common type of main treatment (69% of clients and 62% of episodes) in 2013–14, followed by withdrawal management (9%) (Figure 18). Note that Western Australia does not supply data on additional treatment types. Each type of treatment results in a separate episode, though a small number of episodes provided in Western Australia through the Non-Government Organisation Treatment Grants Program (NGOTGP) may have additional treatment types.



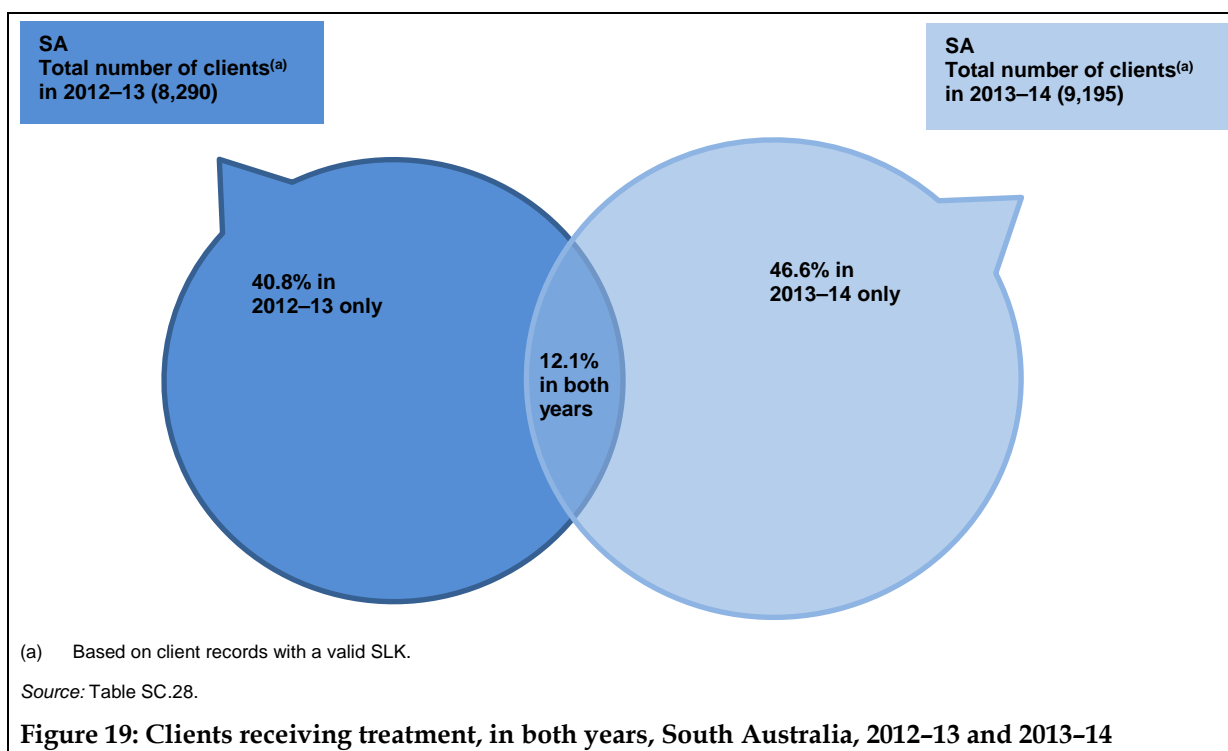
Over the 5 years from 2009-10, counselling has remained the most common main treatment type for closed episodes in Western Australia, followed by withdrawal management. The proportion of episodes where counselling was a main treatment type (fluctuating between 60-64%) has remained substantially higher than the national average (ranging from 41-43%) (tables SE WA.20 and ST.2).

South Australia

In South Australia, 93 publicly funded alcohol and other drug treatment agencies provided 13,085 treatment episodes completed in 2013–14 to an estimated 9,365 clients (Figure 20 and tables SA.1–2).

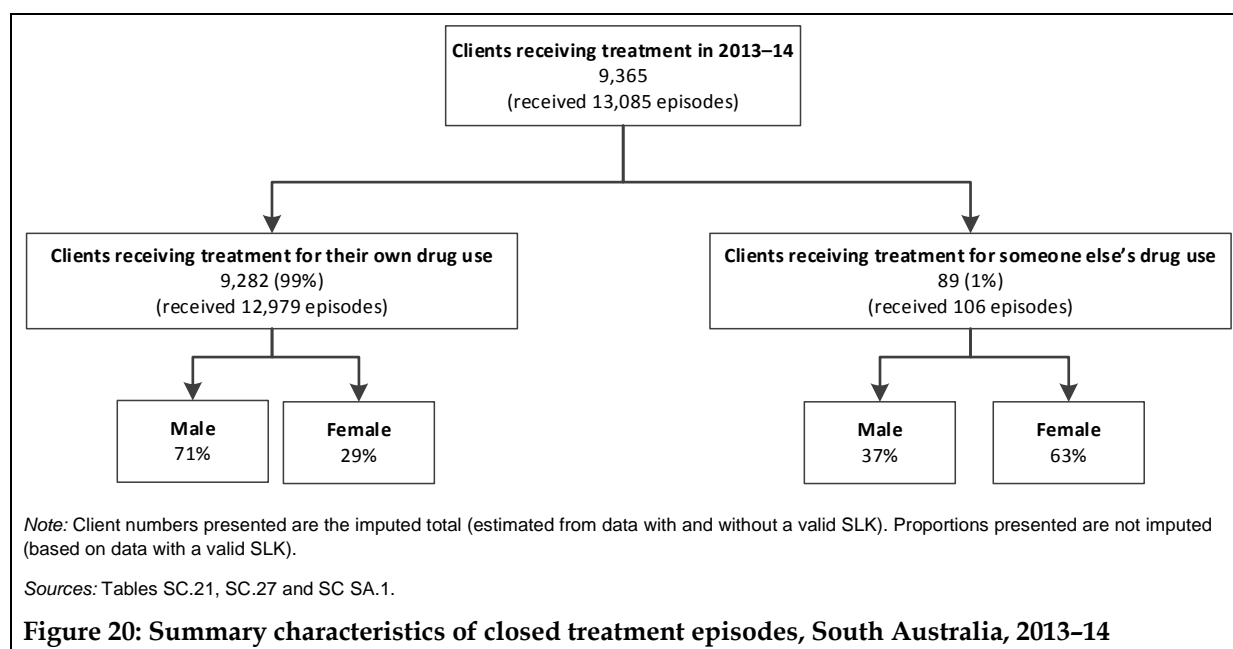
Most (87%) clients received treatment from 1 agency and received 1.4 treatment episodes. This is consistent with national results (1.5 episodes) (tables 1 and SC.23). Over the two years from 2012–13 to 2013–14, a total of 15,591 clients received treatment. Of these, 40.8% (6,360 clients) presented in 2012–13 only, 46.6% (7,259) presented in 2013–14 only, and 12.1% (1,894) received treatment in both years (Figure 19).

One-fifth (20.6%) of the total 9,195 clients receiving treatment in 2013–14, also received treatment in 2012–13.



Client demographics

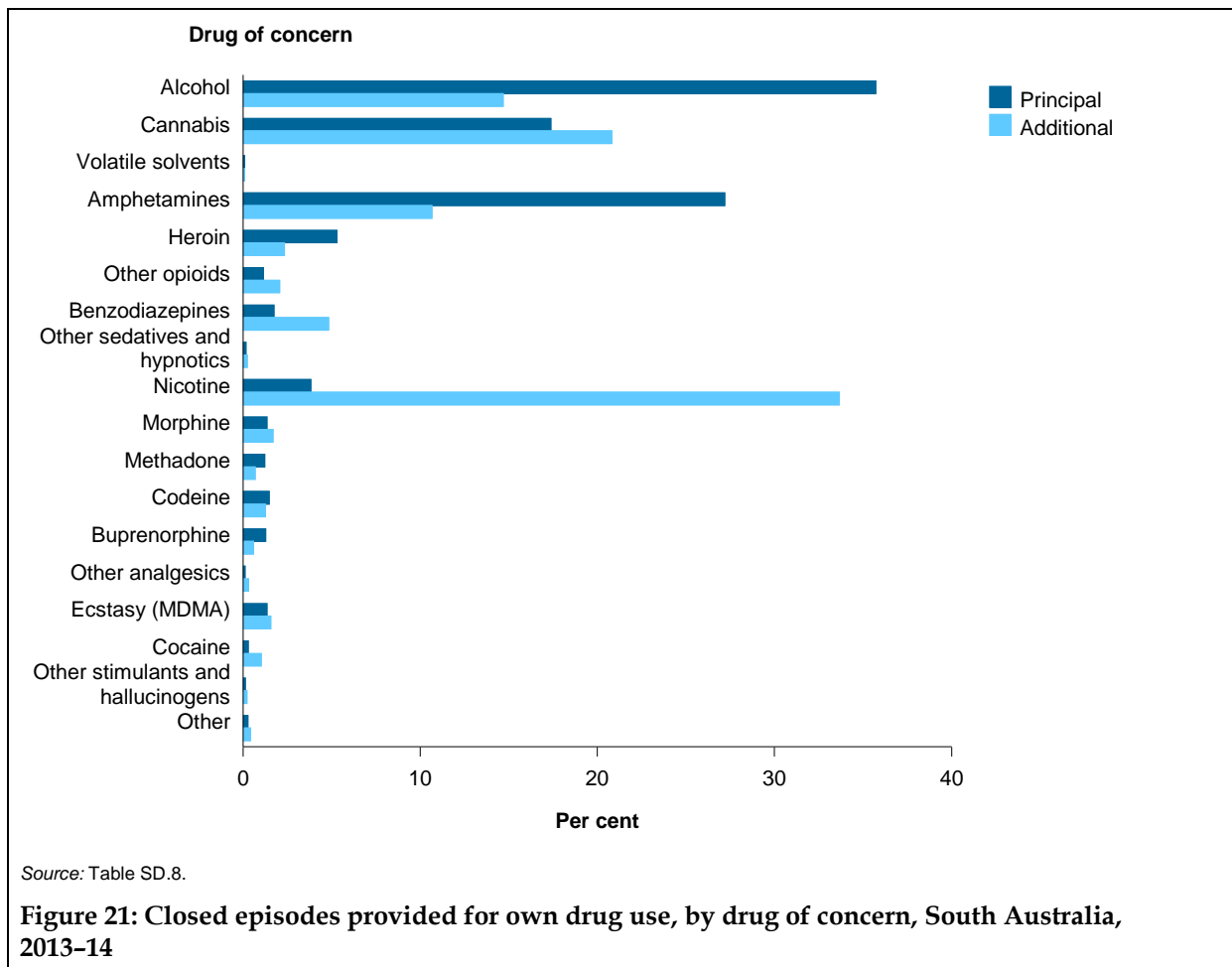
Nearly all (99%) clients in South Australia in 2013–14 were receiving treatment for their own drug use and most (71%) clients were male. The reverse was true for clients receiving treatment for someone else's drug use (63% were for females) (Figure 20). In South Australia in 2013–14, just over 1 in 10 clients were Indigenous Australians (11%), which is lower than the national results (14%) (Table SC SA.3).



Drug of concern

In South Australia, alcohol was the most common principal drug of concern in episodes provided to clients for their own drug use in 2013–14 (33% of clients and 36% of episodes) (Figure 21 and Table SC SA.4). Amphetamines were also relatively common as a principal drug, accounting for almost one-quarter of treatment episodes (27%), followed by cannabis (17%) and heroin (5%).

When closed episodes for additional drugs of concern are considered, nicotine was the most common drug, accounting for 34% of closed episodes, followed by cannabis (21%), alcohol (15%) and amphetamines (11%) (Table SD.8).

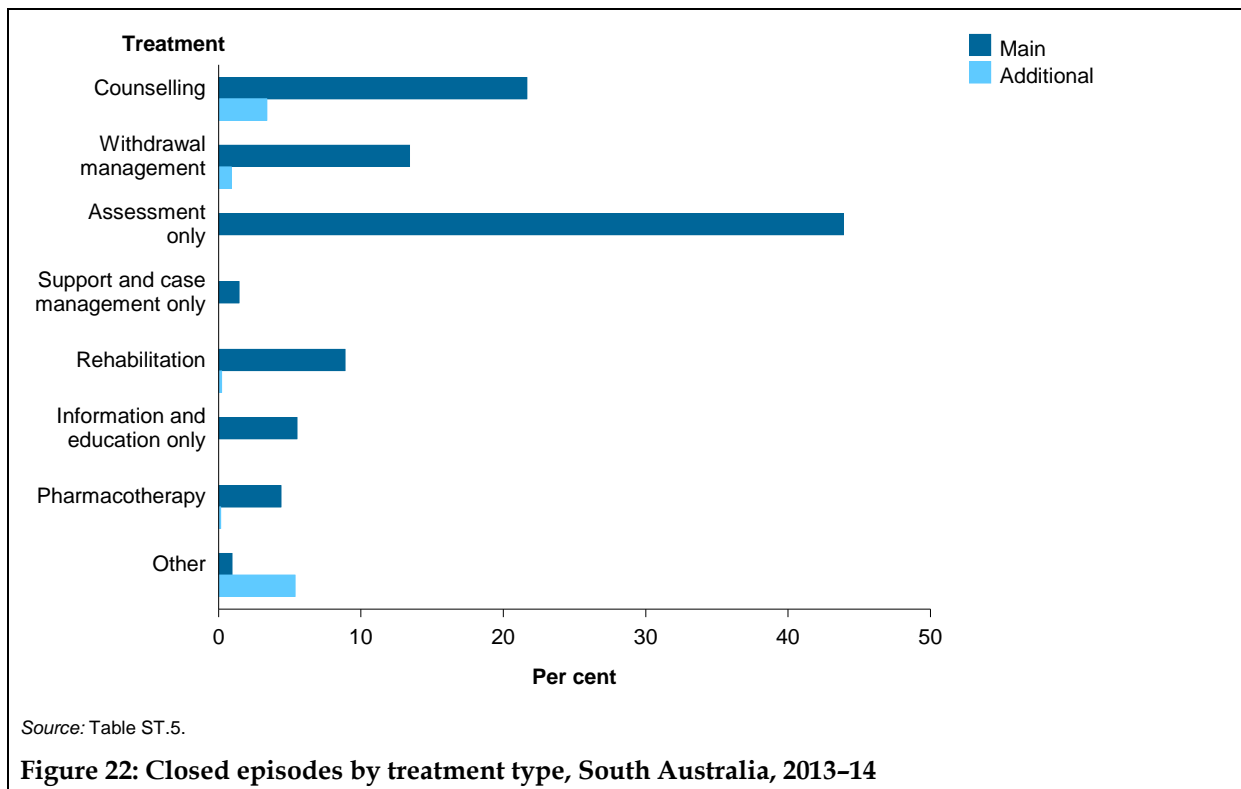


Over the 5 years from 2009-10, there has been no change to the most common principal drugs of concern in closed treatment episodes for clients receiving treatment for their own drug use. Alcohol remains the most common principal drug of concern, but has declined markedly (from 56% of episodes in 2009-10 to 36% of episodes in 2013-14), while the opposite is true for amphetamines (increasing from 11% to 27%, in the same period) (Table SD.2).

The proportion of treatment episodes for client's own drug use where amphetamines were the principal drug of concern has been consistently higher in South Australia than the national average over the same period (ranging from 7-17% nationally). Cannabis also had a gradual increase, from 10% of episodes in 2009-10 to 17% of episodes in 2013-14 (Table SD.2).

Treatment

In 2013-14 in South Australia, assessment only was the most common type of main treatment (40% of clients and 44% of episodes), followed by counselling (22% of episodes) and withdrawal management (13% of episodes) (Figure 22). Similarly, when additional treatments were taken into account, assessment only (44% of episodes) remained the most common type of treatment, followed by counselling (25% of episodes) and withdrawal management (14% of episodes).



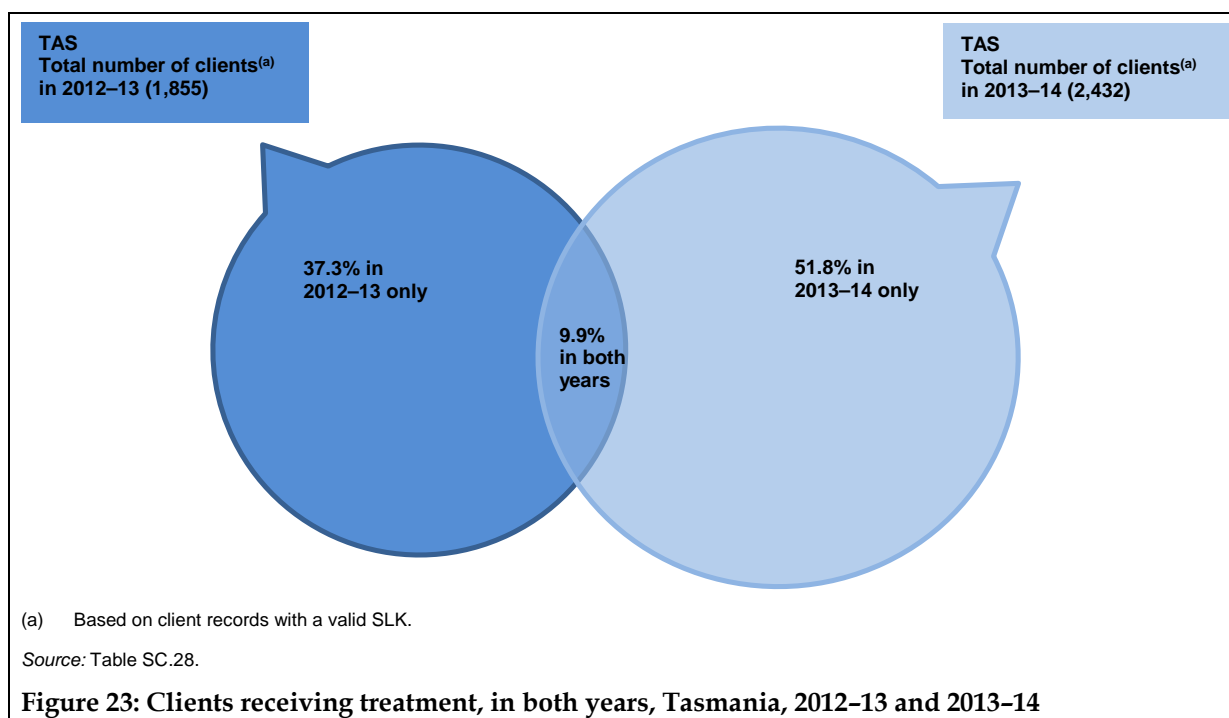
Over the 5 years from 2009-10, the proportion of closed episodes where assessment only was a main treatment type has increased from 26% to 44%, replacing counselling from 2012-13 as the most common main treatment type. Over the same period, the proportion of closed episodes where assessment only was the main treatment remained considerably higher in South Australia than the national average (ranging from 23-44% compared with 14-17% nationally) (tables SE SA.20 and ST.2).

Tasmania

In Tasmania, 22 publicly funded alcohol and other drug treatment agencies provided 2,841 treatment episodes completed in 2013–14 to an estimated 2,444 clients (Figure 24 and tables SA.1–2).

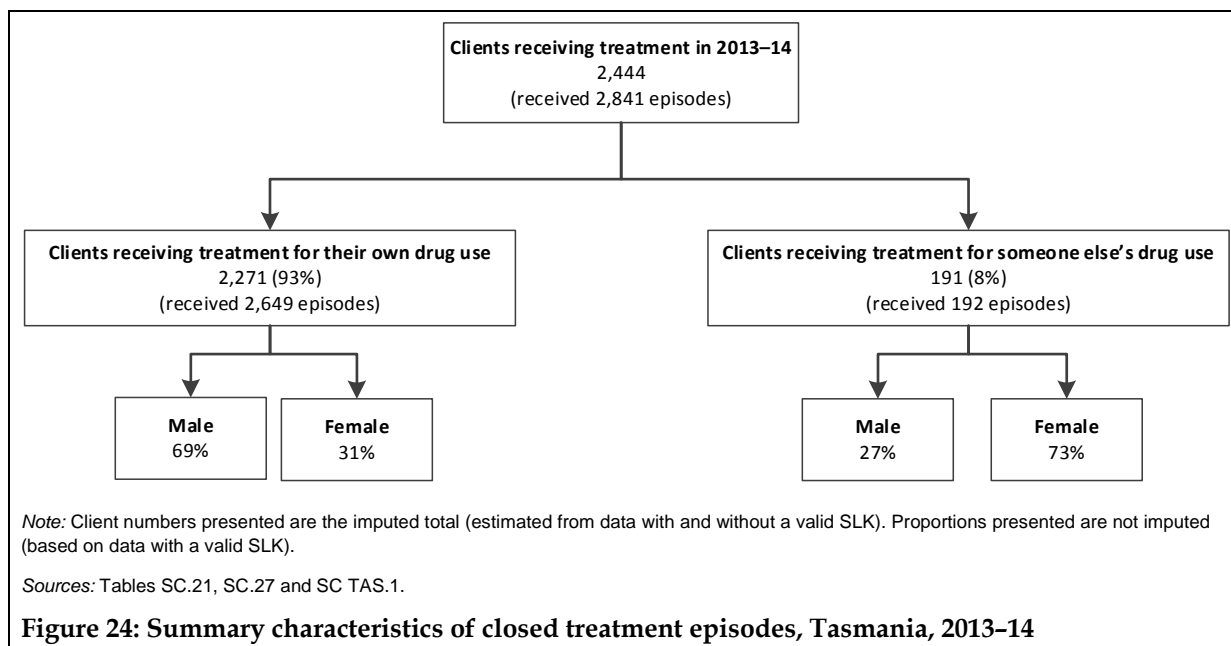
Most (93%) clients received treatment from 1 agency and received 1.2 treatment episodes, slightly lower than national results (1.5 episodes) (tables 1 and SC.23). Over the two years from 2012–13 to 2013–14, a total of 3,902 clients received treatment. Of these, 37.3% (1,456 clients) presented in 2012–13 only, 51.8% (2,023) presented in 2013–14 only, and 9.9% (385) received treatment in both years (Figure 23).

More than 1 in 7 (15.8%) of the total 2,432 clients receiving treatment in 2013–14, also received treatment in 2012–13.



Client demographics

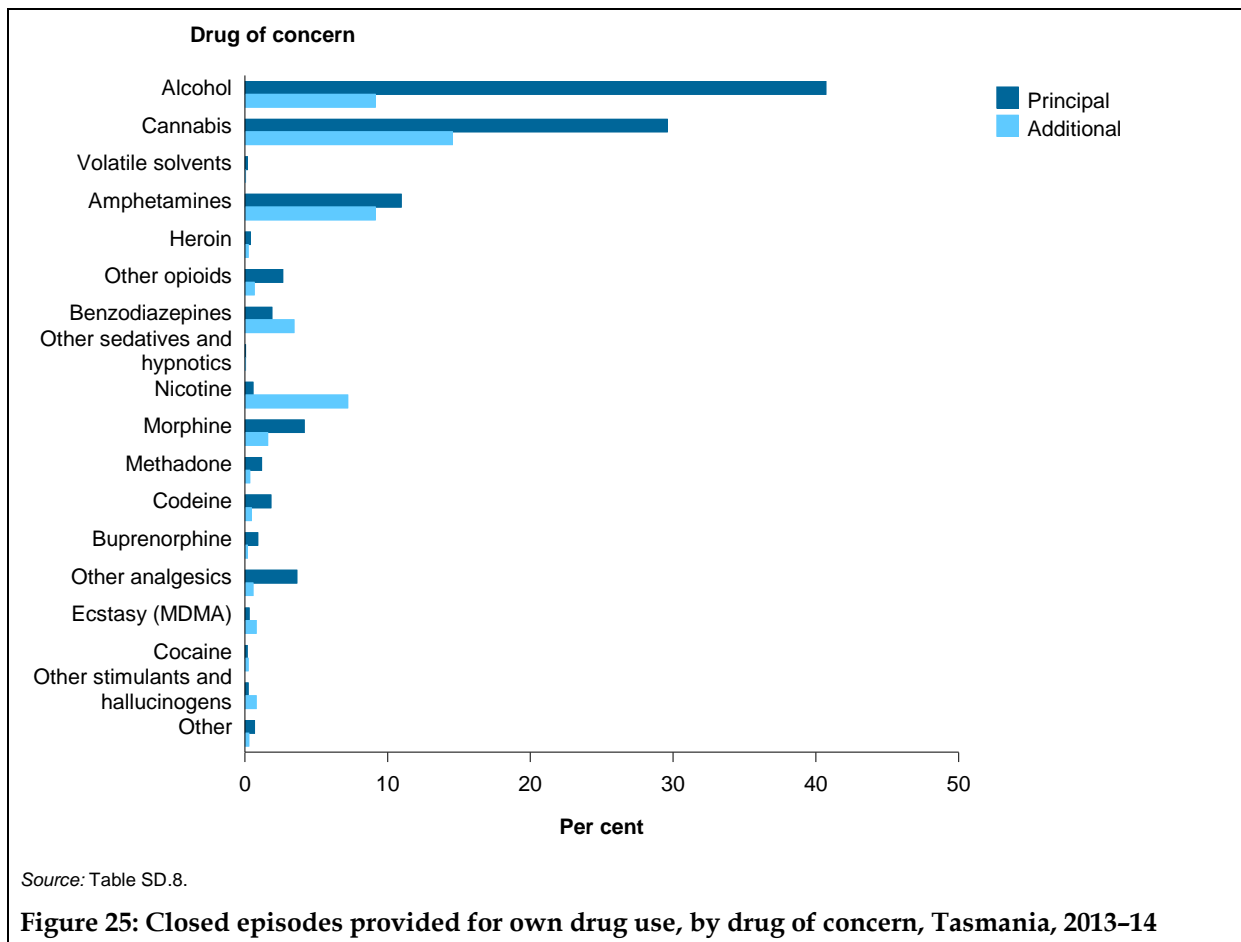
Nearly all (93%) clients in Tasmania in 2013–14 were receiving treatment for their own drug use and most (69%) were male. The reverse was true for clients receiving treatment for someone else's drug use (73% were for females) (Figure 24). In Tasmania in 2013–14, just over 1 in 12 clients were Indigenous Australians (8%), which is lower than the national results (14%) (Table SC TAS.3).



Drug of concern

In Tasmania, alcohol was the most common principal drug of concern in episodes provided to clients for their own drug use in 2013–14 (39% of clients and 41% of episodes) (Figure 25 and Table SC TAS.4). Cannabis was also relatively common as a principal drug, accounting for almost one-third of treatment episodes (30%), followed by amphetamines (11%) and morphine (4%).

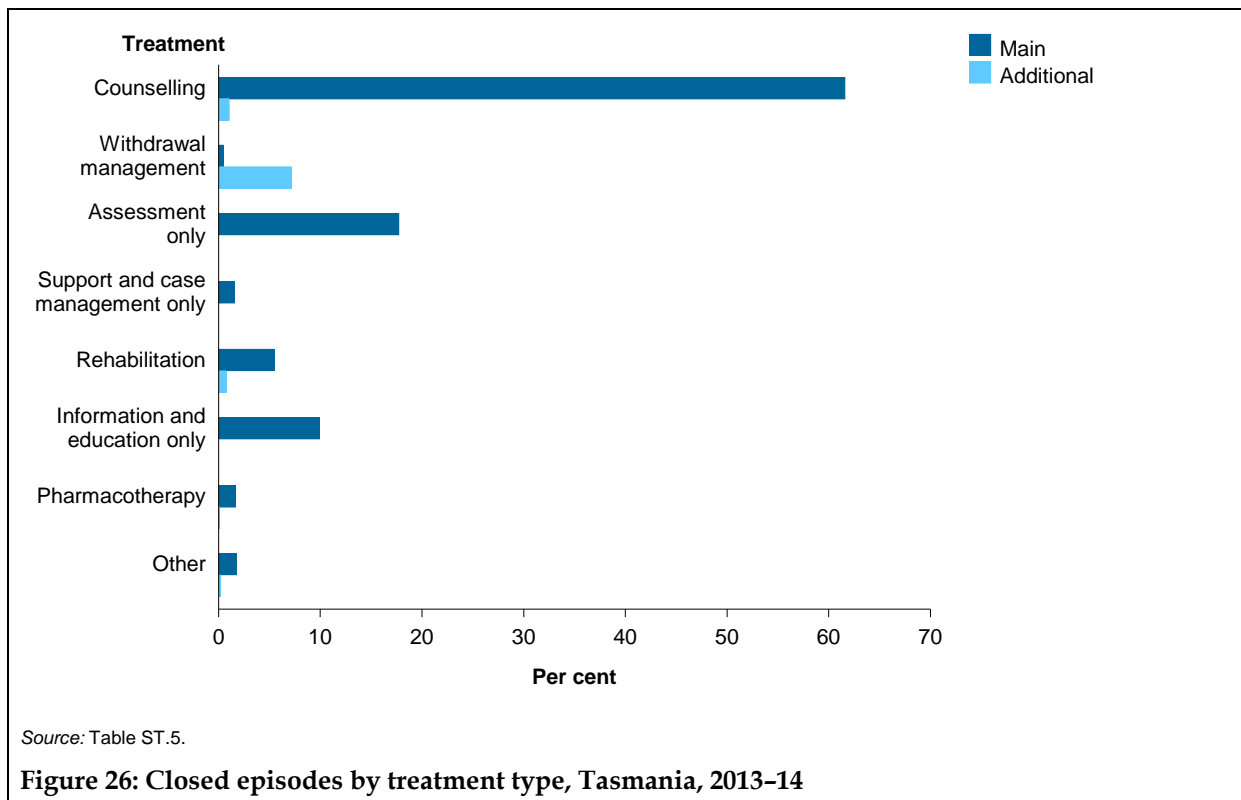
Cannabis was the most common drug when additional drugs of concern were taken into account, accounting for 15% of closed episodes, followed by alcohol and amphetamines (both 9%) (Table SD.8).



Over the 5 years from 2009-10, the proportion of closed episodes for client's receiving treatment for their own drug use where cannabis was the principal drug of concern declined (from 44% to 30%). For all years across the same period, the proportion of episodes involving cannabis in Tasmania was higher than the national average (ranging from 22-24% nationally). Alcohol was the most common principal drug of concern for client's receiving treatment from 2011-12 to 2013-14. Amphetamines as a principal drug of concern increased from 6% to 11% over the 5 years from 2009-10 (Table SD.2).

Treatment

In 2013-14 in Tasmania, counselling was the most common type of main treatment (63% of clients and 62% of episodes), followed by assessment only (18% of episodes) and information and education only (10% of episodes) (Figure 26). This remained the case when additional treatments were taken into account: counselling (63%), assessment only (18%) and information and education only (10%).



Over the 5 years from 2009-10, counselling remained the most common main treatment type for closed episodes in Tasmania. Assessment only increased from 5% in 2009-10 to 18% in 2013-14, replacing information and education only as the second most common form of treatment provided in Tasmania since 2012-13 (Table SE TAS.20).

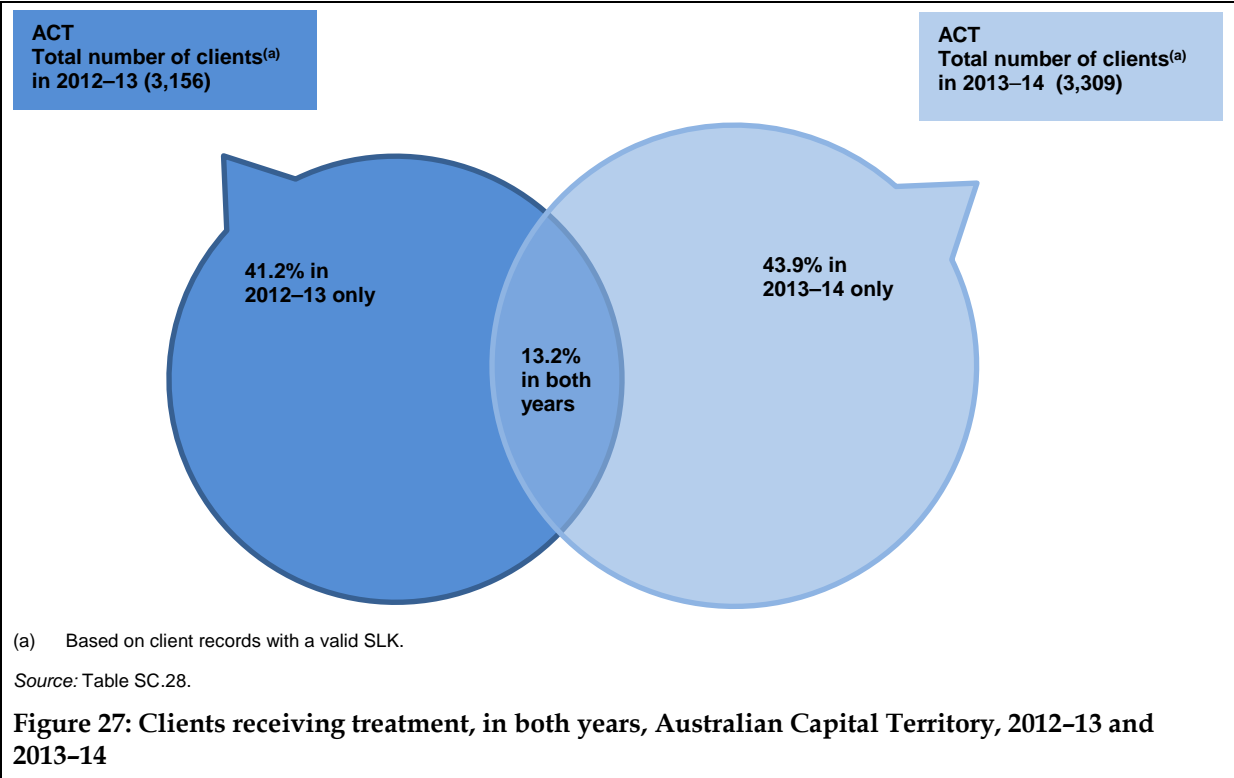
Over the same period, the proportion of closed episodes where counselling was the main treatment remained higher in Tasmania than the national average (ranging from 50-66% compared with 41-43% nationally) (tables SE TAS.20 and ST.2).

Australian Capital Territory

In the Australian Capital Territory, 15 publicly funded alcohol and other drug treatment agencies provided 4,652 treatment episodes completed in 2013–14 to an estimated 3,332 clients (Figure 28 and tables SA.1–2).

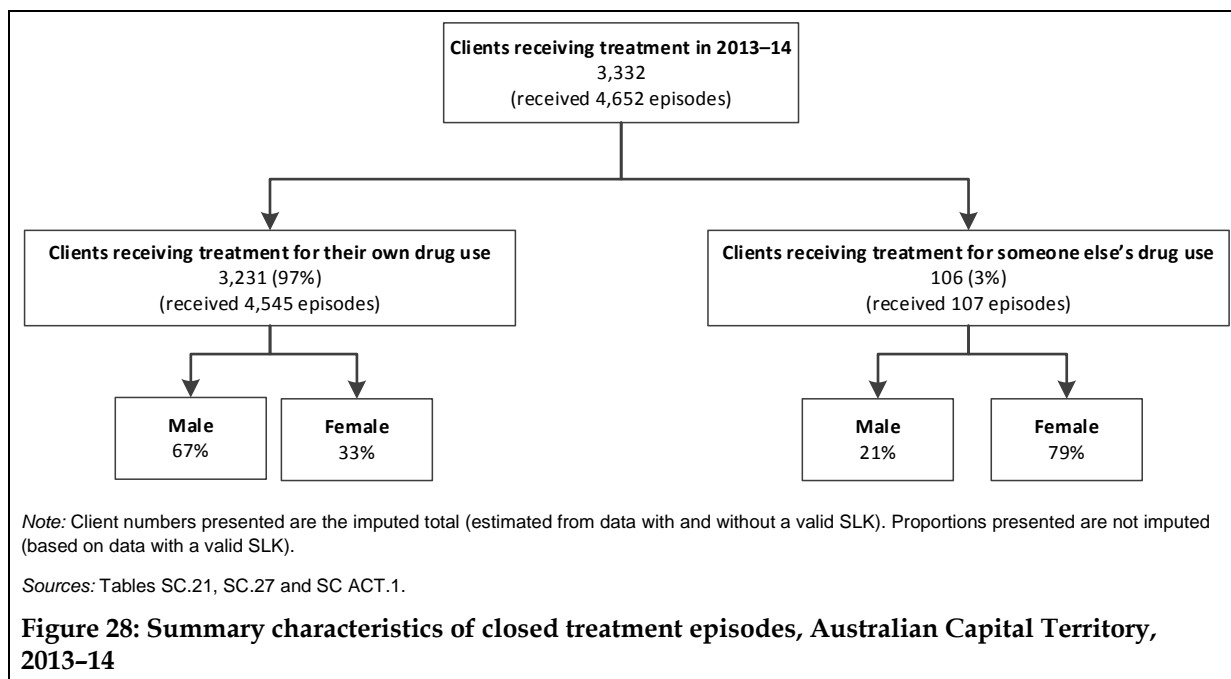
Most (90%) clients received treatment from 1 agency and received 1.4 treatment episodes. This is consistent with national results (1.5 episodes) (tables 1 and SC.23). Over the two years from 2012–13 to 2013–14, a total of 5,712 clients received treatment. Of these, 41.2% (2,356 clients) presented in 2012–13 only, 43.9% (2,510) presented in 2013–14 only, and 13.2% (753) received treatment in both years (Figure 27).

More than one-fifth (22.8%) of the total 3,309 clients receiving treatment in 2013–14, also received treatment in 2012–13.



Client demographics

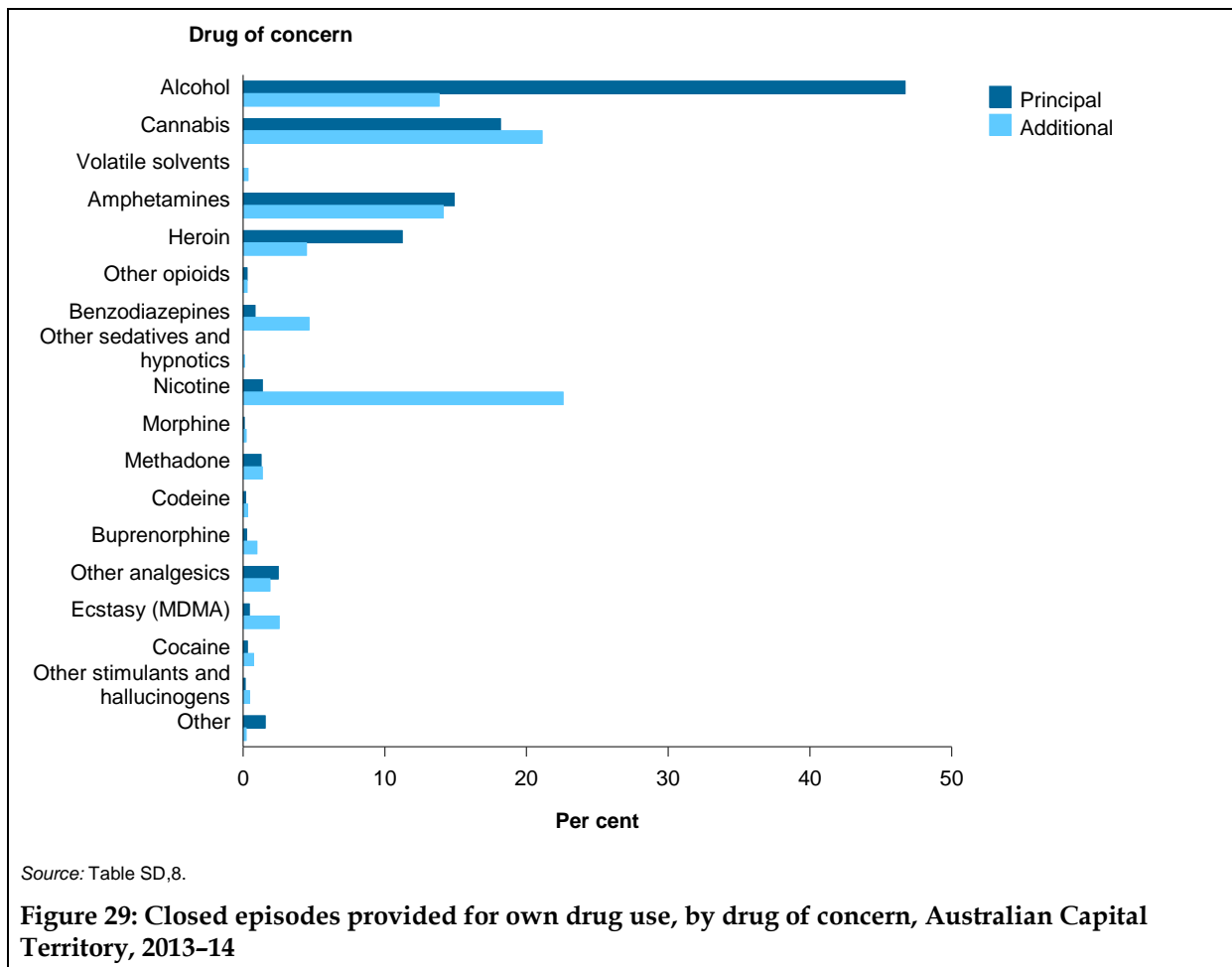
Nearly all (97%) clients in the Australian Capital Territory in 2013–14 were receiving treatment for their own drug use and most (67%) were male. The picture was different for clients receiving treatment for someone else’s drug use with almost 4 in 5 (79%) female (Figure 28). In the Australian Capital Territory in 2013–14, just over 1 in 10 clients were Indigenous Australians (11%), which is lower than the national results (14%) (Table SC ACT.3).



Drug of concern

In the Australian Capital Territory, alcohol was the most common principal drug of concern in episodes provided to clients for their own drug use in 2013–14 (47% of clients and 47% of episodes) (Figure 29 and Table SC ACT.4). Cannabis was also relatively common as a principal drug, accounting for one-sixth (18%) of treatment episodes, followed by amphetamines (15% of episodes) and heroin (11%).

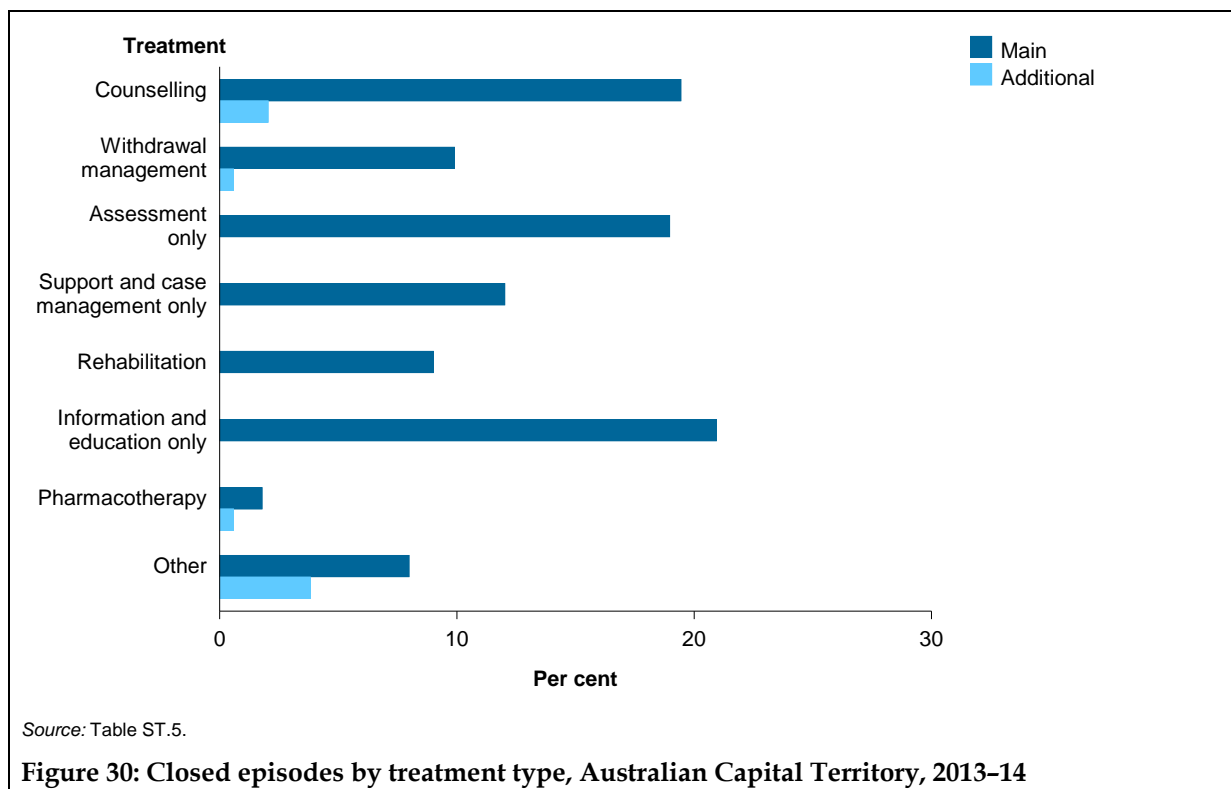
When additional drugs of concern are considered, nicotine (23% of episodes) was the most common drug, followed by cannabis (21%) and alcohol and amphetamines (both 14%) (Table SD.8).



Over the 5 years from 2009-10, alcohol remained the most common principal drug of concern in episodes provided to clients for their own drug use, followed by cannabis. Heroin remained the third most common drug for clients seeking treatment for their own drug use in the Australian Capital Territory up until 2013-14, when amphetamines became the third most common. The proportion of episodes involving heroin was higher than the national average (ranging from 11%-16% in the Australian Capital Territory compared with 7%-10% nationally). Amphetamines as a principal drug of concern increased from 6% to 15% of treatment episodes over the 5 years from 2009-10 (Table SD.2).

Treatment

Information and education only was the most common type of main treatment (23% of clients and 21% of episodes), followed by assessment only and counselling (19% of episodes each) and support and case management only (12% of episodes) (Figure 30). Counselling and information and education only were the most common type of treatment when additional treatments were taken into account (both 21% of episodes), followed by assessment only (19% of episodes).



Over the 5 years from 2009-10, the proportion of episodes where counselling was a main treatment type declined markedly (from 30% to 19% in 2013-14), while the opposite is true for information and education only (increasing from 11% to 21%). As a result, since 2012-13, information and education only has been the most common main treatment type, followed by assessment only and counselling (Table SE ACT.20)

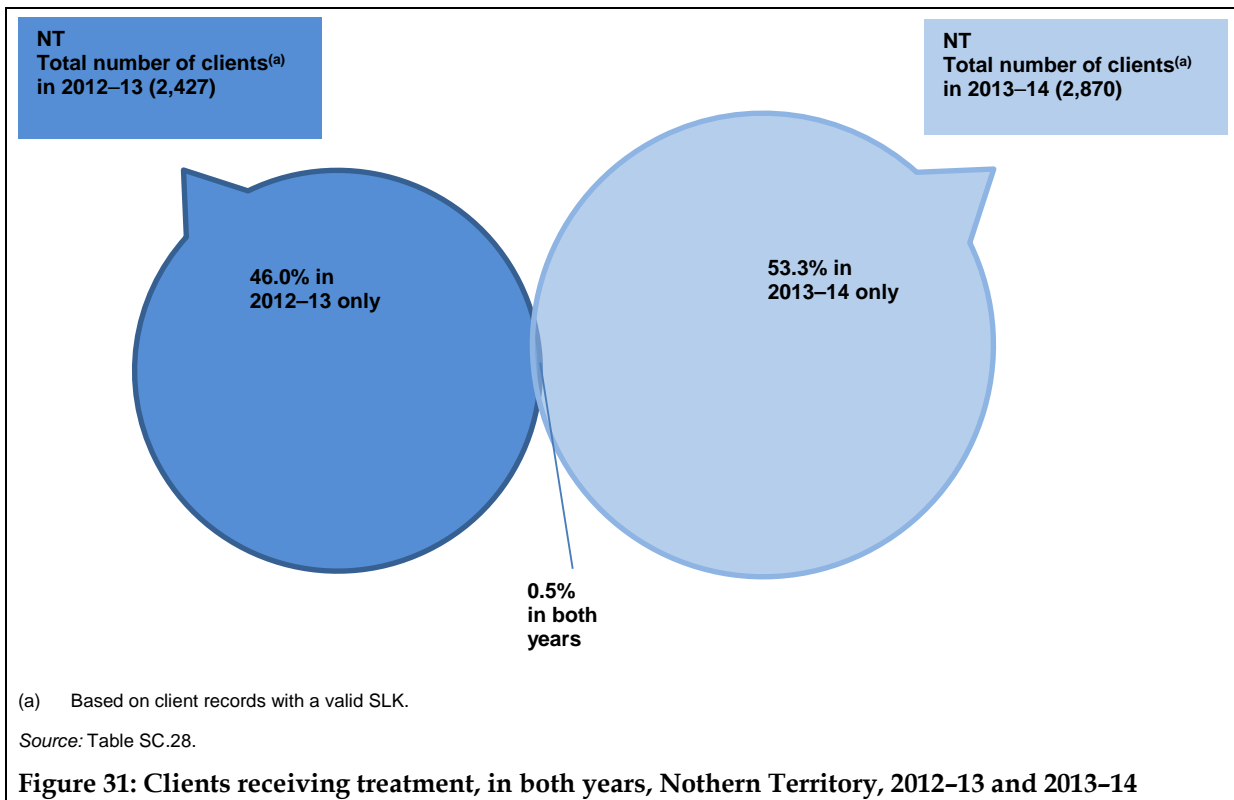
Over the same period, the Australian Capital Territory provided proportionally less counselling than the national average (ranging from 17-30% compared with 41-43% nationally), and withdrawal as a main treatment type decreased from 24% in 2011-12 to 10% in 2013-14 (tables SE ACT.20 and ST.2).

Northern Territory

In the Northern Territory, 22 publicly funded alcohol and other drug treatment agencies provided 4,377 treatment episodes completed in 2013–14 to an estimated 2,963 clients (Figure 32 and tables SA.1–2).

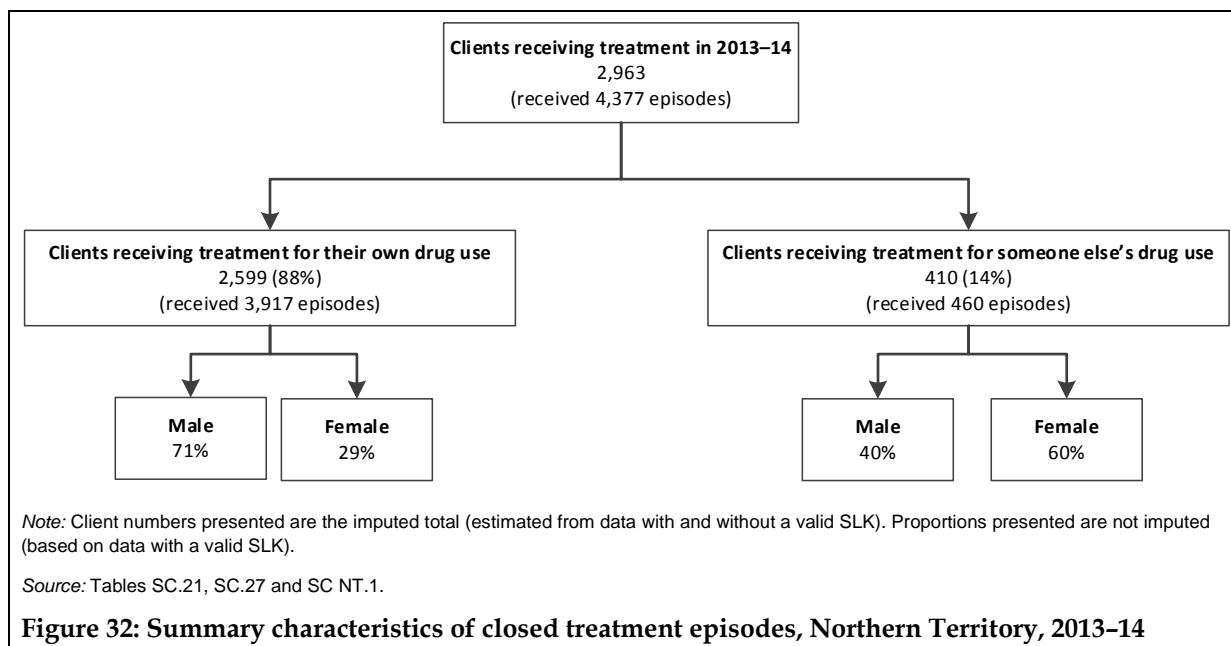
Most (87%) clients received treatment from 1 agency and received 1.5 treatment episodes. This is consistent with national results (1.5 episodes) (tables 1 and SC.23). Over the two years from 2012–13 to 2013–14, a total of 5,272 clients received treatment. Of these, 46.0% (2,427 clients) presented in 2012–13 only, 53.3% (2,812) presented in 2013–14 only, and 0.5% (25) received treatment in both years (Figure 31).

Of the total 2,870 clients receiving treatment in 2013–14, only 0.9% also received treatment in 2012–13.



Client demographics

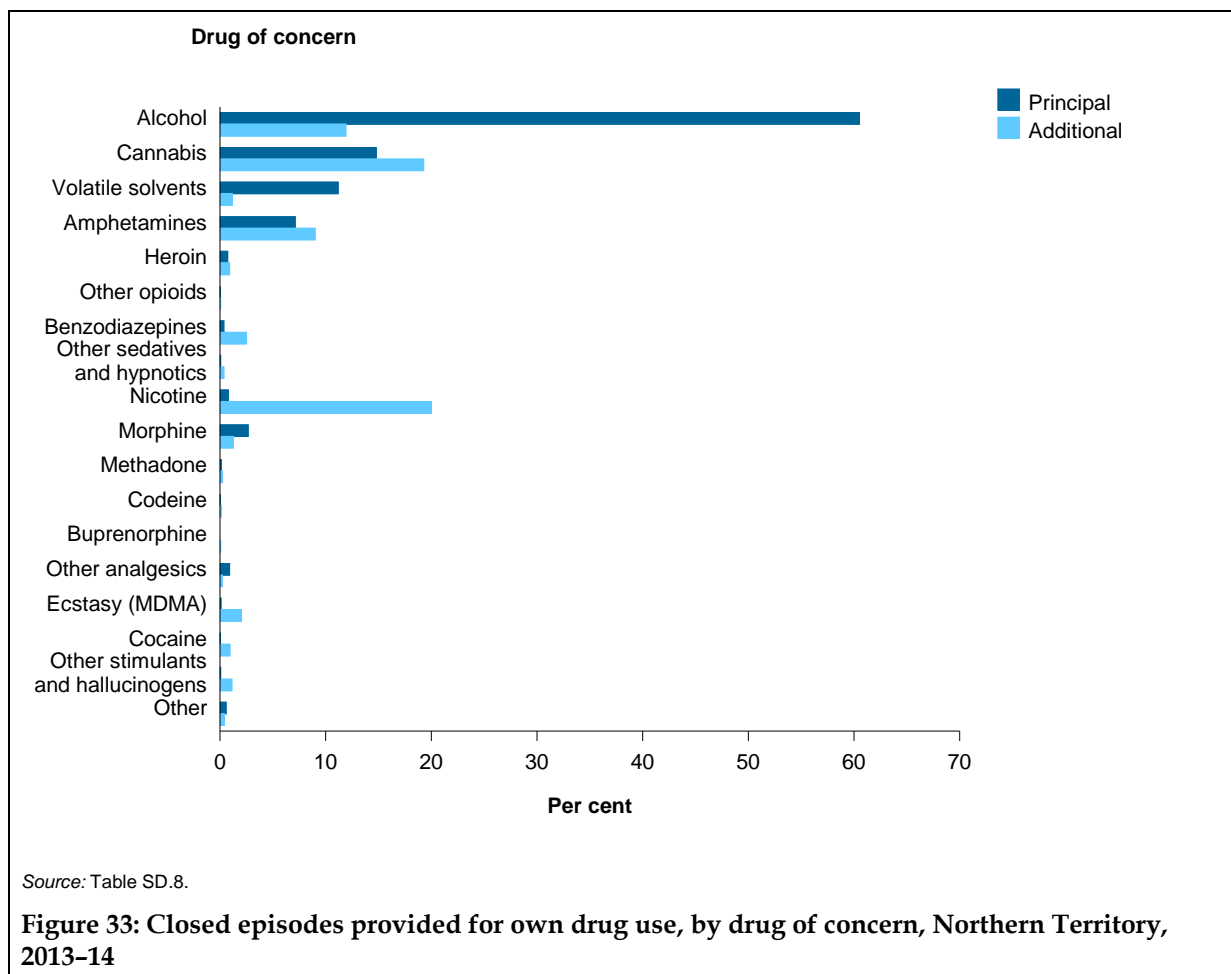
Most (88%) clients in the Northern Territory in 2013–14 were receiving treatment for their own drug use. Nearly three-quarters (71%) of clients receiving treatment for their own drug use were male, while 3 in 5 clients (60%) receiving treatment for someone else's drug use were females (Figure 32). In the Northern Territory in 2013–14, nearly two-thirds of clients were Indigenous Australians (65%), which is significantly higher than the national results (14%) (Table SC NT.3).



Drug of concern

In the Northern Territory, alcohol was the most common principal drug of concern in episodes provided to clients for their own drug use in 2013–14 (62% of clients, and 61% of episodes) (Figure 33 and Table SC NT.4). Cannabis was also relatively common as a principal drug, accounting for 1 in 7 episodes (15%), followed by volatile solvents (11% of episodes) which was much higher than the national picture.

When additional drugs of concern are considered, nicotine (20% of episodes) was the most common drug, followed by cannabis (19%) and alcohol (12%) (Table SD.8).



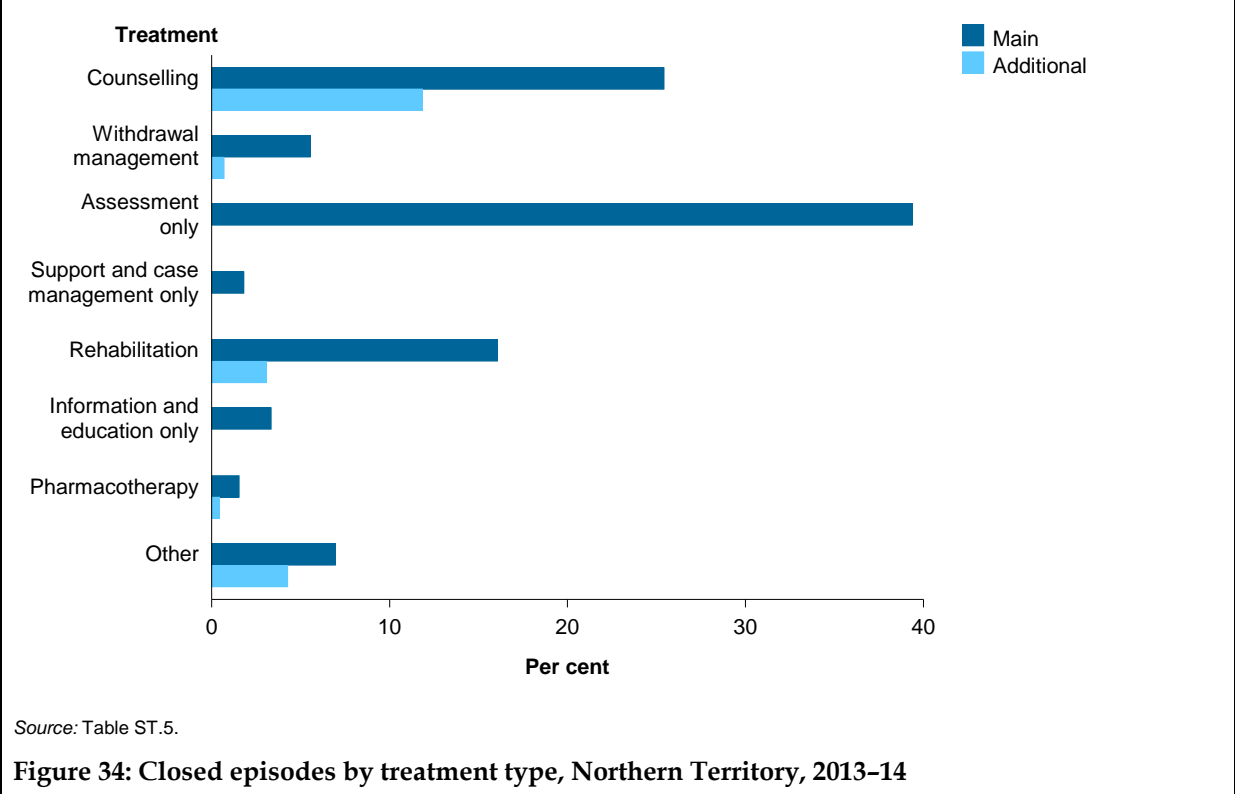
Over the 5 years from 2009-10, alcohol has remained the most common principal drug of concern in episodes for clients receiving treatment for their own drug use in the Northern Territory. Even though the proportion of these episodes where alcohol was the principal drug of concern has declined (from 69% to 61%) in the Northern Territory, it has remained the highest (proportionally) across all states and territories and has been considerably higher than the national average (ranging from 61-69% in the Northern Territory to 41-48% nationally) over the same period (Table SD.2).

The proportion of closed episodes for a client's own drug use where volatile solvents were a drug of concern has increased in the 5 years since 2009-10, fluctuating from 7% to 14% in 2012-13. It has also been noticeably higher than the national average (less than 1% nationally) across this period. Amphetamines as a principal drug of concern increased from 2% to 7% and cannabis from 9% to 15% of episodes over the 5 years from 2009-10 (Table SD.2).

Treatment

In 2013-14 in the Northern Territory, assessment only was the most common type of main treatment (42% of clients and 39% of closed episodes), followed by counselling (25% of episodes) and rehabilitation (16% of episodes) (Figure 34). Assessment only was also the most common type of treatment when additional treatments were taken into account (39% of episodes), followed by counselling (37% of episodes) and rehabilitation (19% of episodes).

Over the 5 years from 2009–10, assessment only has remained the most common main treatment type in the Northern Territory. The proportion of these episodes has consistently been much higher than the national average (ranging from 37–44% in the Northern Territory compared with 14–17% nationally) (tables SE NT.20 and ST.2). There has been little change to the proportion of closed episodes where counselling or rehabilitation were the main treatment types, with counselling remaining the second most common main treatment type, and rehabilitation the third most common over the same period (Table SE NT.20).



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