

Drug and Alcohol Use

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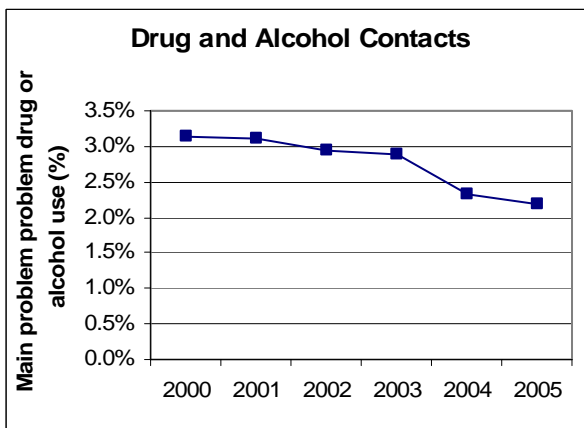


Definition

Callers concerned about drug or alcohol use, either their own or another's. Drug use includes prescription or illegal drugs, tobacco, inhalants etc, from experimentation to overdose. Alcohol use includes occasional use, bingeing, passing out and alcoholism.

Kids Help Line (KHL) responds to over 1,800 contacts per year from young people with concerns regarding drugs or alcohol via its phone, web and email counselling services. In addition, a further 400 contacts per year are received where drug or alcohol concerns are considered to be a significant secondary issue. Together these 2,200 contacts account for 3.1% of all counselling contacts responded to each year.

The number and proportion of contacts where drug or alcohol related concerns are recorded as the young person's main concern have been decreasing in recent years (see figure below). Nevertheless, the average duration in relation to these contacts have increased significantly during this time. The average duration for drug and alcohol related contacts in 2005 was 19 minutes compared with 14 minutes in 2003.



The following information is based on 5,443 phone, web and email counselling contacts received from 5 to 18 year olds between 2003-2005 where drug (4,389 contacts) or alcohol (1,054 contacts) related issues were the young persons main concern.

Client Gender and Age

Males make 46% of the contacts relating to drug or alcohol use - more than double the proportion of contacts made by males across all other concerns (22%). Females make the remaining 54% of contacts (see table below).

	Drug and Alcohol Contacts	All Other Contacts
Males	46%	22%
Females	54%	78%
Total	100%	100%

Older adolescents aged 15 to 18 years make the majority of contacts in relation to drug or alcohol concerns (67% - see following table).

	Drug and Alcohol Contacts	All Other Contacts
5-9 yrs	1%	4%
10-14 yrs	32%	43%
15-18 yrs	67%	53%
Total	100%	100%

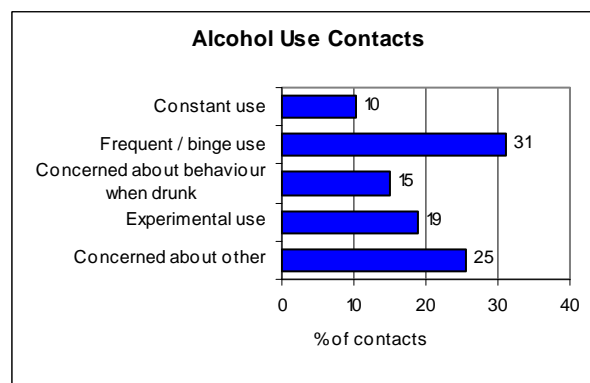
The proportion of contacts from 15 to 18 year old males in relation to drug or alcohol concerns (70%) is slightly higher than females aged 15 to 18 years (65%).

Cultural Background

A small but significant proportion of contacts about drug or alcohol concerns come from young people of Indigenous (7%) backgrounds. A further 2% of contacts are from young people of non-English speaking backgrounds with another 2% from young people of other English speaking backgrounds. The remaining contacts are from young people of Anglo-Australian background (89%).

Nature Alcohol Related Contacts

One quarter of alcohol related contacts are made by young people concerned about the alcohol use of a friend or significant other. The remainder are concerned about their own alcohol use with 19% experimenting or using occasionally, 15% concerned about their behaviour whilst drunk, 31% using frequently or binge drinking and a further 10% using constantly and requiring referral (see figure below).

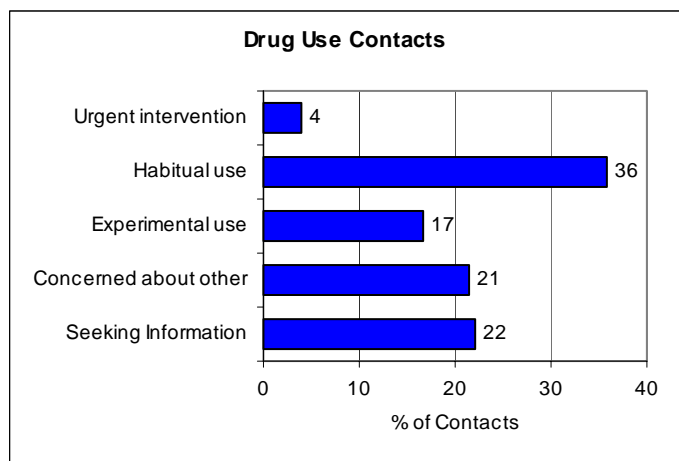


Males are much more likely to contact about their own alcohol use compared to females. In contrast, females are much more likely to contact out of concern for a friend or significant other than males.

Nature of Drug Related Contacts

Over one in five drug related contacts are made by young people who are concerned about the drug use of a friend or significant other, with a further 22% of young people seeking information about drugs.

While 17% of young people report experimenting or using occasionally, 36% use frequently or habitually with 4% requiring urgent intervention or referral at the time of their call (see figure below).



As for alcohol use contacts, males are much more likely to contact about their own drug use compared to females. In contrast, females are twice as likely as males to contact out of concern for a friend or significant other.

Location of Contacts

The following table shows the rate of drug or alcohol related contacts from each state and territory where drug or alcohol use was the young person's main concern. Compared to the national rate (2.5%), the Australian Capital Territory has the lowest rate of contacts in relation to drug or alcohol concerns (1.9%) while the Northern Territory has the highest rate (3.9%). It is important to note that higher rates do not necessarily equate to higher levels of drug or alcohol use. Higher contact rates may be due to regional public health campaigns promoting Kids Help Line as service able to respond to drug or alcohol use among young people.

	Rate of Drug and Alcohol Related Contacts (%)
Australian Capital Territory	1.9%
New South Wales	2.6%
Northern Territory	3.9%
Queensland	2.7%
South Australia	2.1%
Tasmania	3.5%
Victoria	2.6%
Western Australia	3.1%
National Rate	2.5%

The proportion of contacts in relation to drug or alcohol concerns made from rural and remote regions of Australia (43%) is slightly higher than contacts from these regions in relation to all other concerns (37%).

Suicide and Self Injury*

Kids Help Line counsellors record information for every contact in relation to suicidal thoughts and recent incidents of self-injury. Five percent of young people contacting Kids Help Line with concerns about drugs or alcohol reported having recently engaged in deliberate self-injury. This is less than half the rate for contacts about all other problem types (12%).

Less than 1% of young people contacting Kids Help Line with concerns about drugs or alcohol reported having current thoughts of suicide. This is substantially lower than the rate for contacts about all other problem types (4%).

Ongoing and Case Managed Clients

Forty-four percent of contacts in relation to drug or alcohol concerns are from young people connecting with KHL for the first time. Five percent of young people with drug or alcohol related concerns have formed ongoing counselling relationships with one or more counsellors and a further 2% are case managed by a designated team of counselling staff. The remaining 48% have contacted the service at least once previously.

Outcome of Drug and Alcohol Calls

KHL plays a vital role in assisting young people to deal with drug and alcohol issues. By providing a safe and confidential environment, counsellors help young people to clearly identify short and long term consequences of drug and alcohol use and develop strategies for change.

In the majority of contacts (58%), young people with drug or alcohol related concerns do not require a referral. This is either due to the nature of their concern not requiring a referral or the support provided by the counsellor sufficiently meeting the young person's needs at that point in time.

Referrals to appropriate services are required and accepted by 27% of young people with drug or alcohol related concerns - this is double the referral rate for all other problem types (11%). A further 10% are given non-specific referrals back to their own youth worker, school counsellor or to their general practitioner. The remaining 6% of young people are unable to be referred due to their being no appropriate services in their local area or the young person terminating contact before a referral could be given.

Kids Help Line's Duty of Care

Kids Help Line counsellors have a duty of care when responding to serious issues such as mental health, child abuse, homelessness and overdose. If a child is in a potentially harmful situation help is provided by 3-way telephone link, liaison with the client's case worker (if known to Kids Help Line) or immediate connection with emergency services or other authorities. Between 2003 and 2005 KHL enacted 41 duty of care responses for young people in relation to drug overdose.

*Suicide and self injury based on 2004 to 2005 data only.

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24 hour telephone counselling line: 1800 55 1800

Kids Help Line is a service of BoysTown.

