JUST SAYING...

The views of young people about drugs and alcohol
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Foreword

The Prevention and Education sub-committee of the North Inner City Drug and Alcohol Task Force worked together to plan and organise a number of youth conventions for young students from second level schools in the north inner city to hear their views on substance abuse and alcohol. This was facilitated by youth leaders from the youth projects in the north inner city.

We are committed to listening to young people and we would like to acknowledge their openness and frankness in engaging with us. There is no doubting the unhealthy relationship some young people have with alcohol and there is no doubting the extent of illicit drug use but we did find a significant number of young people who do not engage in substance abuse.

We believe a collaborative engagement with young people is the way forward in addressing these very serious issues and we look forward to further work with the schools. The support of their schools, in particular the Home School Liaison teachers, was invaluable. The area of prevention and education and the perspectives of young people do not get the prominence they should in the development of national alcohol and drugs strategies. We hope that this report can begin to address that issue.

Prevention & Education sub-committee members:
Maureen O’Sullivan T.D. Chairperson; Pauline Brennan; Bradóg; Miriam Coffey and Denise Carroll; NICDATF; Sue Carter and Niamh Fingleton; Dublin Aids Alliance; Irene Crawley: HOPE; Gerard Roe: BeLonG To.
Acknowledgments

The North Inner City Drugs and Alcohol Task Force would like to thank all involved in the organisation and facilitation of the four youth conventions.

Chairperson of the Prevention & Education committee: Maureen O’Sullivan, TD.

Prevention & Education committee members: Pauline Brennan; Brádog; Miriam Coffey and Denise Carroll; NICDATF; Sue Carter and Niamh Fingleton, Dublin Aids Alliance; Irene Crawley; HOPE; Gerard Roe: BeLonG To.

Staff and volunteers from local projects: Brádog, BeLonG To, HOPE, Dublin Aids Alliance, Talbot Centre, North West Inner City Network, North Inner City Drugs and Alcohol Task Force.

School staff: Principals, teachers and home school liaison officers from the participating schools.

Venues: Staff and management of Tony Gregory Community, Youth and Sport Centre, Dublin 3, and the Law Society, Dublin 7.

Report: Dr Johnny Connolly of the Health Research Board for his comments on an earlier draft of this report. Miriam Coffey who prepared the report.

And most especially, all the young people who so openly and enthusiastically contributed to the discussions, North Inner City Drugs and Alcohol Task Force.
Introduction

There was a time when drugs were only associated with Dublin’s north inner city and that drug was heroin. Today’s drug scene sees a wide variety of drugs with tablets playing a significant role, poly drug use and alcohol in the mix too. There has been a huge growth in New Psychoactive Substances and increasingly, drugs are bought online and on the darknet.

Consequently we see considerable damage being done to individuals who are in addiction, their loved ones and their communities. We see wonderful young people who, for a wide variety of reasons, succumb to addiction with devastating effects for them, including illnesses, breakdowns, loss of jobs, opting out of school, suicide ideation and fatalities.

In spite of progress on Treatment and Rehabilitation and Supply Control, the North Inner City continues to be adversely affected by addiction, open drug dealing, intimidation and crime. Drug markets have become more violent in the last decade, with younger people involved in greater numbers as runners and dealers. For some, the temptation of easy cash from the local drug trade is difficult to resist when surrounded by unemployment and limited life opportunities.

Prevention and Education are key to providing young people with the skills to resist such options and even though one of the pillars of the National Drug Strategy (NDS) there is no doubt this area does not get the attention, research and resources necessary to make a difference. The NDS is currently under review, with a commitment to also include the main problem drug in Ireland, Alcohol, within its remit.

It is essential that the perspectives of young people are central to the development of the new strategy. The Prevention and Education sub-committee of the N.I.C.D.A.T.F. re-formed in 2010. Although children and young people make up 34% of the population of the state, their voices are seldom heard. We decided to work with Transition Year/5th Year (15-17 years) students in the second-level schools in the north inner city.

Our aim was to listen to young people, to hear their views on drugs/alcohol, their experiences, both positive and negative, their opinions on the various education/prevention inputs they had to date through their schools or clubs, their views on the advertising relating to drugs and alcohol, what works in terms of getting them to think about

This report looks at those views of the 400 young students from 9 local schools who took part in 4 Youth Conventions we organised in 2013 and 2014.

I want to acknowledge the young people who took part and who gave their views openly and frankly during round-table discussions, facilitated by the youth workers from the clubs and projects working in the north inner city. I also wish to acknowledge the support from the schools, their Principals and Home School Liaison Teachers.

Young people must be listened to, we can learn from them and I hope their views, as outlined in this report, will help inform policy on Prevention and Education into the future. If we can get Prevention and Education right, if we can make a difference and get young people to stop and think it would be a massive saving in personal and economic terms.

I believe young people are key.

Keeping time Chairperson Maureen O’Sullivan
About the Youth Conventions

Aims:

To LISTEN to young people’s views on the following broad issues:

- What a typical night out consisted of and what role illicit drugs and alcohol played in their social activities?

- What were the positive and negative effects of drug/alcohol use?

- What impact alcohol promotion and marketing had on their choices?

- What relevance existing education and prevention approaches had for the choices they made?

The schools:

The following schools took part, all of whom had students from the Task Force catchment area – Larkin Community College, Marino College, Mount Carmel Secondary, O’Connell’s CBS, Pobail Scoil Rosmni, St Joseph’s Secondary Stanhope Street, St Paul’s CBS Brunswick Street, St Vincent’s Glasnevin. The conventions were held in the Tony Gregory Community, Youth and Sports Centre and the Law Society, Blackhall Place.

Let’s get talking:

The students took part in facilitated discussions around a number of key questions and then responded in groups to Vox Pops and alcohol advertisements. Their views on various drug/alcohol education/prevention publications were then discussed. The findings are presented below.
A Night out / drug and alcohol use

A number of surveys have identified high levels of alcohol and illicit drug consumption among young Irish people relative to their European peers. A selection of audio clips of local young people talking about their experiences of socialising was played to encourage the participants to discuss their own experiences.

1. What does a night out consist of for you/young people your age?

For most people, they came together at weekends and during school holidays. The primary forms of social activities in which they engage involve: ‘Hanging out with friends’, going to house parties or nightclubs (although they’re often under age) and going into the city centre, with a specific mention of the Temple Bar area by some. Many also highlighted playing football in the park and going to the cinema among a number of other typical youth activities. With regard to substance use, alcohol was mentioned mostly with weed (herbal cannabis) next and then ecstasy.

2. What are the most commonly used drugs among this age group?

A wide range of drugs were mentioned in focus groups but the most common were weed followed closely by ecstasy (Blue ghost, Hello kitty) cocaine, benzodiazepines and head shop products (snow blow) and amphetamine (speed). Alcohol rarely featured in response to this question considering it featured predominantly in question one and would suggest that they don’t see it as a drug or don’t define it as such.

3. How easy is it to access them? In terms of where: prescription, internet, street, supermarket, and what do they cost?

Young people said that it is easy for them to get alcohol and drugs. Many said that it was easier to access drugs than alcohol and that drugs were cheaper. A wide range of alcoholic products were consumed including beer, spirits and cider. A lot said that they can get served in off licenses or have someone go to the off licence for them to buy alcohol. Others would ask passers-by to purchase alcohol for them. People also referred to the ease with which they could get fake identification so as to be served in pubs and clubs. Some referred to ‘Dial a Can’. With regards to drugs, many said that they are just a phone call away or that they know someone who can get them. Drugs were mostly bought on the street, with a number of specific locations mentioned, or from or through friends. Drugs were also often shared. Buying from the internet also featured but this was regarded as risky. Young people had a very precise knowledge of the costs of various drugs and this supports their claims. Costs are between €20–€50 for weed, €5 for ecstasy, €50–€100 for cocaine (€15 per line) and benzodiazepines can be bought for €1.

4. Where are drugs/alcohol usually taken e.g. party, pub, street etc?

The most likely places where drugs and alcohol are consumed are at house parties, on the street, in parks or in clubs or at home. The importance of being in a place out of sight of gardaí was mentioned by a few respondents.

For a review of this research see Ireland’s Annual Reports to the European Monitoring Centre on Drugs and Drug Addiction Available at the National Documentary Centre on Drugs at http://www.drugsandalcohol.ie/
5. Does cheap alcohol make a difference to young people’s drinking?

The price of the alcohol and whether or not there was a deal on offer did make a difference to most. However, for some, they went for specific brands that they liked.

6. What good/bad things can happen/potentially happen on these nights out?

The most common response to this question was that alcohol or drugs were associated with having fun. They helped people to forget their worries and to relax, boosted their confidence and lowered their inhibitions which may lead to intimate encounter with a girl/boy, or simply enables them to meet new people. Young people were quite aware of the bad things that can happen as the list was longer and more varied in comparison to the positive things. The most frequently mentioned concern was that they might get into a fight or get into trouble with the police and be arrested or brought home by a garda. They were aware of the dangers of overdose, rape and other sexual assaults, STI’s, unwanted pregnancy, getting too drunk, becoming sick or being hospitalized or dying. The possibility of being spiked with drugs or blacking out was also mentioned by many as were the prospects of losing their money and/or phone, becoming depressed after as part of the ‘come down’ from drink or drugs, or becoming addicted. Another common concern was bad/embarrassing photos being posted on facebook. This would suggest that this group know using drugs and alcohol is a risk but one they are willing to take.

7. Is it necessary to drink/take drugs on a night out?

The general sense of things was that it is not necessary but more like the normal thing to do as most of their friends are doing it which would imply that peer pressure plays a big factor in their decision to use drugs/alcohol. Some said it depended on what group they hang around with.

8. If you don’t want to drink/use drugs, can you say no? What would happen? What would your friends say?

The general sense when asked this question was that young people feel that they can say no, even if the pressure is there from friends. Whether they take drink/drugs can depend on a number of factors including the nature of the occasion and whether they have money. If the rest of the group they are with is doing it then they are more likely to take part. Some said they feel pressure, but if they say no, they feel their decision is respected, at least by their close friends. Others said they might be ridiculed for not drinking but not for refusing drugs. Some would go home if they felt under pressure and others said they might not be invited out with the group again.
Making informed choices – The Media and Alcohol Promotion

A selection of alcohol sponsored adverts, sports events and sales promotions were shown and discussed. In response, the students answered the following questions.

What are the ads saying about the products?

The ads say that the products are fun and relaxing, they give you confidence, enable you to have a great time, to party, they make you a winner and make you popular. They encourage people to go out and have a drink and are aimed at people with boring lives. Some believed they were targeted at young people (e.g. Bacardi) and others targeted young men in particular, telling them to be tough or to drink to get girls or, for older lads, to get together and escape from the wife/girlfriend. The Guinness ad links Guinness and hurling with being male, tough and Irish.

What lifestyle do they promote?

The ads promote a partying lifestyle that is fun, relaxing and adventurous. The people in the ads seemed to have money, were rich and very popular. The ads promoted a ‘free’ lifestyle. The Guinness ad linked alcohol with sports, winning and celebrations.

Is this the reality?

The young people believed the ads show an unrealistic lifestyle and that alcohol was linked to loss of control, being sick and having a hangover. Although alcohol can be linked with having fun, it wasn’t necessary for it and the reality was about drinking in the park or pub than what was shown on the ads.

Would these ads or similar ads encourage you to use these products?

This question received a mixed response. Some believed that yes ads could and would encourage them to drink particularly if there was a catchy tune and they promoted a fun and social lifestyle. Others felt that ads would have no bearing on their decision about what they would drink (they drink what they like the taste of and it’s not based on ads).

Does alcohol sponsorship of sport influence your drinking?

The majority said no but some said yes. Adverts might make you think about drinking but not necessarily the product being promoted. Most sports ads are directed at men older than them. A bigger influence was that it’s normal in Ireland to watch sport in a pub and it didn’t really matter who sponsors the event.

What influences your choice of which alcohol to drink?

(i) Taste (ii) Price (iii) Promotions

All of the above influence what they would drink. For most the taste was paramount. Price was the next. Promotions did influence – could get more drink. Sales promotions also influenced how much people would drink. You would also be more likely to drink all the ‘deal’ e.g. if the deal was 6 cans for a tenner then you’d drink the six cans. Two young people said ‘No’, deals do not influence what and how much they drink. Another interesting factor was mood i.e. if they were in the mood to just have a few drinks or to get really drunk. This would influence what they would choose to drink, i.e. spirits over beer. If things were too cheap they wouldn’t buy them, the taste wins over price in this case.
Following on from a report of the Steering group on a National Substance Misuse Strategy, the Government has agreed to consider measures to address low cost alcohol, harmful alcohol advertising and sports sponsorship by the alcohol industry.

Should drinks companies be allowed to sponsor sports events?

In the main the young people felt that yes, drinks companies should be allowed to sponsor sporting events as it provides funding and creates jobs. Most people opposed a ban on the basis that they didn’t pay attention to who sponsors what event, that people would still drink and that sport and alcohol consumption were part of a tradition in Ireland. Those who supported a ban felt that the link between sport and alcohol was contradictory as sport encouraged a healthy lifestyle and alcohol was unhealthy, that it could encourage young people to drink and that it could make those people who were addicted even worse.

Should the government introduce a minimum price on alcohol?

This question received a mixed response. Those who thought that there should be a minimum pricing policy felt that people would drink less and that the reason teenagers drink so much is because it is so cheap. Others felt the price goes up all the time and it doesn’t stop people from drinking. More expensive alcohol would also create a black market. The young people who disagreed with minimum pricing felt that it would be unfair on adults but also that young people would still drink no matter what the price was. Things wouldn’t change.

What do you think of the current legal age limit for buying alcohol? Should it be changed? Why? What should it be changed to?

Many felt that the age limit was ok as it is. Some felt that it should be lowered to 16 like in other European countries because young people would drink less because they are allowed to do it! However some thought that it would encourage young people to start drinking at an even earlier age. Many felt that the age limit doesn’t stop young people from drinking anyway so it should just stay the same. It was ok at 16/17 to have a few drinks but not to go to pubs or clubs.

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2 www.drugsandalcohol.ie/16908/
3 As part of its 2009 investigation into the conduct of the UK alcohol industry, the House of Commons Health Select Committee obtained access to internal marketing documents from both producers and their advertising agencies. These reveal major shortcomings in the current self regulatory codes covering alcohol advertising.

Drug and Alcohol Education

Drug prevention interventions in schools are delivered through the Walk Tall (primary schools) and the Social, Personal and Health Education (SPHE) (post-primary schools) programmes. The SPHE programme aims to improve social and personal competencies in students so that they can understand and counter the many social influences that are seen as contributing to their use of drugs and alcohol.4

1. Have you ever received drug and alcohol education before? Where e.g. school youth project?

There was a general acknowledgement of some type of education in school at Civic Social and Political Education (CSPE), SPHE and religion classes. What they knew was also influenced by a number of other sources including the following: parents; youth club; friends; TV, Gardai; Church; Internet; the Neighbourhood Youth Project 2; the Cavan Centre5; helplines; former drug/alcohol users; books, dealers; Adam & Paul film, video games, posters, common sense, Facebook.

People talked openly about their experiences and many felt there was a lack of real drug information in school.

2. Was it a once off talk, or longer?

Responses varied from once off talks to a few classes, a half day, once a week or six week youth club programmes. These might involve guest speakers including former drug/alcohol users.

3. What topics did it cover?

The negative effects of drugs, true stories of the speakers’ experience including prison life, awareness raising, types and samples of drugs, condom use, alcohol and drug withdrawals, case studies about people’s lives.

4. What do you remember most?

The impact of these interventions varied. For most the impact was limited as they already were aware of the negative effects but education might have impacted on the types of drugs they chose to use or they encouraged a belief that alcohol was not as bad as drugs. They listened to people who already had experiences such as former drug/alcohol addicts. People felt they learn more on the street than in school and that the school programmes did not involve discussion around their views. Most of the awareness/education classes were anti-drugs and anti-smoking in school but not anti-drinking.

4 For further information see the National Drugs Strategy (interim) 2009-2016 See also Ireland’s Annual Reports to the European Monitoring Centre on Drugs and Drug Addiction. Available on the National Documentary Centre on Drugs website at http://www.drugsandalcohol.ie/

5 A residential centre that promotes youth and community work http://www.cavancentre.ie/
Prevention and Education

A selection of existing prevention and education approaches were discussed including videos, information booklets and posters. The students responses are as follows:

**Another Night Wasted Video**

Video: www.likeadrink.tv

*What worked:* Reasonable, powerful, shocking, effective, off putting, believable – see it all the time.

*What didn’t work:* Too dramatic, not really aimed at young people, it’s a disgraceful state to be in, good visual, shows different side, wouldn’t want to be in this state of drinking.

*Would you believe the information:* Yes, but some felt this was the worst case scenario.

**I’ve had enough: Drinkaware Video**

www.drinkaware.ie

*What worked:* Make you think about behaviour, put different perspective on it, realistic impact, effective, true, typical, credible, pity people in ad, can relate to it.

*What didn’t work:* Not good, too harsh, boring, would turn you off staying sober.

*Would you believe the information:* Yes, sometimes the reality is worse, but doesn’t put us off.

**1 in 2 Smokers will die of a tobacco related disease.**

www.quit.ie

*What worked:* Some felt it had a big impact…. 1 in 2 die so know people who will die, powerful – especially about people dying, makes you think, statistics are convincing. You hope it doesn’t happen to you/with your family.

*What didn’t work:* Topic should be flagged at beginning of ad: took too long to get what the ad was for. Smokers didn’t relate to it, boring, sad, in your face message, needs to be more shocking/ visual like the pictures on cigarette boxes.

*Would you believe the information:* Mixed views but most believed it.
Dr. Drew Life Changers - Liver Cirrhosis Video

Section from a TV programme where the presenter dissected human livers to show the effect of alcohol misuse on the liver.

What worked: Shocking, horrible, convincing, sick, powerful, worst one. Very visual impact makes us think, especially young women. Scientific and matter of fact.

What didn’t work: Not much impact, people will still drink. Not going to watch Dr. Drew - people live in the moment - it’s about long term effects, we don’t relate to that.

Would you believe the information: All believe, but see it as worst case scenario.

Talk to Frank - Cannabis Video

www.talktofrank.com

What worked: Funny, captures attention, shows different possible side effects, gives information without long discussion, very realistic, good.

What didn’t work: Not representing young people, couldn’t relate, exaggerated. Stupid, not real, over reacting, it’s not like that, doesn’t work.

Would you believe the information: Divided views.

Hello Sunday Morning Campaign: Introduced by Des Bishop

Video source: www.hellosundaymorning.org

What worked: Funny, good, good idea, different, sense of community, good about reducing drink, missing out because of hang over.

What didn’t work: Majority of young people didn’t like Des Bishop or were side tracked by his presentation. Stupid, not for them, won’t work for young people, more for older, wouldn’t work for addicts, boring, no information.

Would you believe the information: Yes in general, but mixed, would still go out.
Information Publications

**Legal & Illegal Highs**
Credit card size and A5 booklet

*What worked:* Good, but too much info/writing, hard to read.

*What didn’t work:* Credit card size: too fragile/too small, too many words, yellow boxes too squashed, not eye-catching

**Know the facts about drugs**

*What worked:* Good, but some felt was too long.

*What didn’t work:* Too big, too many words.

**Cocaine The Facts**
Booklet and poster

*What worked:* Good generally, informative and factual, good colour scheme.

*What didn’t work:* Too much info, need pictures, need bullet points.

**Just be smoke free**

*What worked:* Good, clear, very effective, eye catching.

*What didn’t work:* Messy, text too small.

**You can quit**

*What worked:* Good, well laid out.

*What didn’t work:* Too dark / aggressive, wouldn’t read it.

**Quit Card**

*What worked:* Good, easy to read

*What didn’t work:* Wouldn’t read it.

**Alcohol Info Leaflet**

*What worked:* Good, clear, very effective, eye catching.
Posters

What worked: Very good, eye catching, powerful. To the point, young people would read.
Best: ‘I’m shaking all over’. ‘I used to be a hard man’ ‘Have you ever’.
What didn’t work: Wouldn’t read.

What worked: Bright colour.
What didn’t work: Print was too small. The number should be for all areas instead of singling out one.

Other comments: Waste of paper - would look at visuals, helpful in getting insight on drugs, need to be funny, creative.

Would you believe the information in the publications and posters: In all cases the answer was yes.
Ten Key Findings

Following on from the youth convention, the facilitators came together to discuss the key outcomes from the youth conventions.

Experiences of socializing:

Their experience of socializing varied widely and were not untypical of youth their age. Alcohol, followed by weed and then ecstasy were the substances commonly used mostly at weekends but a notably large number of this age group did not use drugs and/or alcohol.

Drug and alcohol use:

Alcohol seemed to be widely used and acceptable. There is a perception that weed is not really a drug as it was very acceptable. Young people seemed very knowledgeable about the availability and cost of drugs, although in general most spoke about it in terms of friends doing drugs rather than themselves. Some young people said they only drank. Most felt that it was not necessary to take drink/drugs on night out but that it was normal. At the same time, young people believe that they can say no without coming under too much pressure from their peers.

The positive effects:

Alcohol and/or drugs are associated with having fun, relaxing and they are important as a confidence booster and to lower inhibitions.

The negative effects:

Young people are quite aware of the many negative things that can happen as a consequence of alcohol/ drug misuse. The most frequently mentioned concern was getting into a fight or getting into trouble with the Gardaí. The dangers of overdose, sexual violence and a range of other hazards were also listed. The risks associated with drug/alcohol misuse were ones they were mostly willing to take.
**Alcohol advertising:**

Most did not believe that drink advertisements influenced their choices but there was a degree of uncertainty as to whether such ads would encourage young people to use alcohol.

**Alcohol sponsorship of sport:**

A majority felt that alcohol sponsorship of sports events would not influence their drinking, and most felt alcohol companies should be allowed to continue sponsoring such events. A greater influence was that sport and the consumption of alcohol were traditionally associated together in Ireland.

**School-based education and prevention:**

There was a general acknowledgement of some type of education/prevention in school but the level of intervention in terms of topics and intensity varied greatly. The negative effects of drugs featured prominently but not so much those associated with alcohol. They felt they were more influenced by what they learned on the street or from other sources than what they learned in school. A key criticism was that school-based interventions did not involve enough discussion of their own views.

**Prevention campaigns:**

Drug and alcohol print material discussed during the conventions was generally seen as boring and too wordy. There were very mixed reactions to the videos shown. Most believed the information that was presented, but that the videos with a high shock factor showed only the worst case scenarios.

**Future prevention approaches:**

The students discussed the various types of prevention approaches that would have most effect on them and they had many ideas as to how to get the message across to their peers, particularly through social media. They believe that extreme examples and shock tactics did have a small role to play, particularly for younger people, but that it was more important to present them with the facts so that they could make informed choices. Some of the topics highlighted were: What drugs are made of, the effects of different drugs, how people got involved in drugs, how they coped with addiction in their families, information on STIs, depression and mental health, how to promote healthy lifestyles. Most young people felt that drug and alcohol prevention education should start much younger, in sixth class and first year and that it should be more interactive and involve motivational speakers with real life experiences.

**Having their voices heard:**

Young people relished the opportunity to sit down with their peers and facilitators and discuss their views about their experiences of going out and of drug and alcohol use. In a follow up survey 90% found the event worthwhile and 63% said they would like to get involved in future related events. They would like to see a campaign driven by young people.
Conclusions

That Irish society has a serious problem with alcohol and illicit drug consumption is now beyond question. It is also clear and broadly accepted that many of the current approaches appear to be ineffective in preventing, delaying or reducing substance use among young people. School-based education/prevention programmes remain very uneven in their delivery. Meanwhile, poly substance use, including alcohol and a range of licit and illicit drugs is increasingly the norm in many parts of the country. The rapid emergence of new psychoactive substances and their availability online and via the dark web means that young people are increasingly being faced with choices in ways that are often hidden from view and scrutiny by adults. Consequently, it is more important than ever that children are empowered to make informed choices. ‘Just say no’ strategies are largely irrelevant as they make decisions about substance use.

The Youth Conventions in the north inner city, an area long associated with Dublin’s drugs crisis, was an attempt to engage with young people on their own terms. As preparations are made for the development of a new substance misuse strategy, it is essential that the perspective of young people are central to the formation of that strategy.

Recommendation

The North Inner City Drugs and Alcohol Task force calls on the Minister with special responsibility for the National Drugs Strategy to develop innovative ways to ensure that the voices of young people are not only heard, but that their input forms a central role in the development of the future National Substance Misuse Strategy.
Appendix One

Thinking differently about drugs and alcohol

As part of the discussion a fact sheet was distributed and the young people were asked to circle which of the following statements/facts would cause them to think differently about drugs and alcohol. 134 responses were received.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol is the most common drug used in sexual assault. 76% of all rape</td>
<td>66%</td>
</tr>
<tr>
<td>defendants had been drinking at the time of the alleged offence.</td>
<td></td>
</tr>
<tr>
<td>The more alcohol you drink the more you increase your risk of developing a</td>
<td>64%</td>
</tr>
<tr>
<td>number of cancers, such as cancers of the mouth, larynx, throat,</td>
<td></td>
</tr>
<tr>
<td>oesophagus, liver, 10% of those who committed murder were under the</td>
<td>60%</td>
</tr>
<tr>
<td>influence of alcohol when committing murder. 10% of Irish children say</td>
<td></td>
</tr>
<tr>
<td>their lives have been badly affected by their parents' drinking. One in</td>
<td>60%</td>
</tr>
<tr>
<td>three road crash deaths alcohol related. Alcohol kills 1,200 people per</td>
<td>50%</td>
</tr>
<tr>
<td>year. Alcohol and drug taking are strongly associated with deaths by</td>
<td>56%</td>
</tr>
<tr>
<td>suicide. There is an alarming increase in the number of young people</td>
<td>54%</td>
</tr>
<tr>
<td>suffering from liver disease due to their drinking. Approximately 2,000</td>
<td>51%</td>
</tr>
<tr>
<td>Irish people in hospitals today due to alcohol/drug use. One in five</td>
<td>49%</td>
</tr>
<tr>
<td>recreational drug users in the U.K. had been taken advantage of sexually</td>
<td>46%</td>
</tr>
<tr>
<td>vulnerable due to drugs and/or alcohol. One in four deaths of young men</td>
<td>43%</td>
</tr>
<tr>
<td>(15 to 39) due to alcohol. Alcohol contributed to 37% of public order</td>
<td>41%</td>
</tr>
<tr>
<td>offences. Intoxication (through drugs or alcohol) can impair a person's</td>
<td>39%</td>
</tr>
<tr>
<td>ability to give informed consent, remove themselves from a risky situation</td>
<td></td>
</tr>
<tr>
<td>or take safe sex. Alcohol/drug related issues cost Ireland over 3 billion</td>
<td>30%</td>
</tr>
<tr>
<td>euro every year - 1.2 crime related, 2.5 health related. One in eleven of</td>
<td></td>
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<tr>
<td>said that they or a family member were assaulted by someone under the</td>
<td>38%</td>
</tr>
<tr>
<td>influence of alcohol in the past year.</td>
<td></td>
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</tbody>
</table>
2014

NORTH INNER CITY DRUG AND ALCOHOL TASK FORCE
PREVENTION & EDUCATION YOUTH CONVENTION