



TABOR GROUP
HOPE • HEALING • RECOVERY

"FROM CRIMINALISATION TO CARE"

Rethinking our response to drugs use in Ireland

**Tabor Group Submission to
the Citizens' Assembly on Drugs Use**

30th June 2023

An **Tionól**  **The Citizens'**
Saoránach **Assembly**



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HOPE • HEALING • RECOVERY



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EXECUTIVE SUMMARY

The Citizens' Assembly on drugs use in Ireland is a timely opportunity for an honest conversation, bringing the full scale of the problems of many Irish citizens with drugs use finally out into the open to be discussed, acknowledged and understood.

Drugs use is very prevalent in Irish society. The impacts of it can adversely affect the lives of Irish people, families, children and whole communities. These impacts can cause lasting debilitation and severely impair personal potential, in many cases contributing to whole lifetimes of poverty, disadvantage and stigmatisation.

In preparing this submission to the Citizens' Assembly on Drugs Use, Tabor Group convened seven focus groups involving 90 participants. The groups represented people who were currently in treatment programmes, people now in early recovery, family members, volunteers and staff. Men and women were represented. All participants were over 18 years and ranged in age up to over 60 years.

This document captures this cross section of perspectives on drugs use in Ireland. It puts on record the voice of the people directly impacted by the problems of drugs use and as such makes a meaningful contribution to the deliberation of the Citizens' Assembly.

Here are some key messages from Tabor Group Focus Groups to the Citizens' Assembly on Drugs Use

- There is hypocrisy and shame about drugs use in Ireland.
- Drugs use is every day, everywhere and affects everybody in Ireland.
- Drugs use in Irish society has become normalised.
- People use drugs to fit in and connect with other people.
- People can make easy money selling drugs.
- Drugs use can generate significant debts.
- Drugs use can be linked to poverty, deprivation and poor education.
- Drugs use is rooted in trauma and creates vicious 'intergenerational' cycles.
- There is a lot of fear around drugs use.
- Problem drugs use can cause chaos in families.
- People fall through the cracks of addiction and mental health services.
- Is alcohol the elephant in the room?
- Are prescription drugs another 'elephant'?
- Why criminalise a person with a health condition?
- Treatment for drugs use is not as accessible as people think.



Some solutions put forward at the Tabor Group Focus Groups for the Citizens' Assembly to consider include:

- State-led measures to end the stigma and isolation around drugs use.
- A health-led approach rather than criminalisation of those that use drugs in Ireland.
- Drugs use treatment to be on a statutory footing and properly funded including programmes for families.
- Education for children and young people about drugs use in primary and secondary school.
- 'No wrong door' – make it real.
- Caution in and education about prescribing practices involving addictive medications.
- Equip and strengthen the powers of the Gardai in tackling drugs use, particularly around intimidation of families for drugs debts.
- Include housing as part of response to drugs use in Ireland.

Arising from what came through the Focus Group, our 30 + years of experience and the emerging evidence Tabor Group makes 10 recommendations to the Citizens' Assembly.

While the problems presented are complex, Tabor Group has delivered treatment for drugs use to thousands of people since 1989 to good standards and is crystal clear about the solutions that need to be implemented for an effective response. Fundamental to this is a national, health-led drugs and alcohol strategy overseen by senior government figures including the Taoiseach. Equally important is that the person at the centre of this distress be treated with care and not treated as a criminal. Treatment agencies like Tabor Group are established on a proper footing to make a meaningful, quality-assured contribution. This contribution is part of a collaboration with other relevant agencies supporting people, families and communities into recovery from the distress of drugs use and the co-occurring challenges.

In summary, Tabor Group urges that the Citizens' Assembly advises the Irish state to make a compassionate, health-led, and **not a criminal justice response to drugs use in Ireland**. The response should be a 'joined up' one, with the various systems and agencies working together with the person, family and community entangled in problem drugs use. Treatment and recovery programmes should be accessible to all at the point of need and put on a statutory footing.

Above all we hope the work of Citizens' Assembly helps Ireland to take a major step towards ending the shame and stigma experienced by people, and arising from its deliberations there is more hope with the range of supports emerging for people on the different parts of the person's journey: pre- and post-treatment and the pathway to sustainable recovery.



BACKGROUND

Tabor Group has offered residential addiction treatment services in Cork since 1989. During this time the organisation has supported thousands of people with addictions and their families. Some people access treatment more than once, experiencing relapse on their journey to recovery. We have worked with adult children of those previously in treatment. Some achieve recovery and some do not. Those who achieve sustained recovery from their addiction, speak of a transformation in their life and in the lives of their family.

Tabor Group is embedded into Cork city and county and Kerry healthcare landscape. A Section 39 Service Level Agreement with the Health Services Executive has been in place now for many years. Since its establishment in the 1990s, we have been committed partners in Cork City and Southern Regional Drug and Alcohol Task Forces. All Irish health insurers provide cover for the treatment offered by Tabor Group to their members.

In 2022, Tabor Group provided treatment to 277 people and post treatment support to 106 people through Continuing Care Programme, as well as 247 family members.

Tabor Group partners with University College Cork and Munster Technological University, providing student placements and teaching students about addiction. We have delivered education about addiction in the workplace for a diverse range of employers in the Cork region. Since 2008 we have engaged with establishing and maintaining Quality Assurance Standards for Drug and Alcohol Services.

Tabor Group is independently accredited by CHKS and ISO 9001:2015.

We joined with others in calling for a Citizen's Assembly on Drugs Use and wholeheartedly welcomed its establishment. It's a timely opportunity to enable an overdue national conversation on an issue that adversely impacts ever more people, from all walks of life, living in both urban and rural areas, and in every part of Ireland.

Over the years Tabor Group has had a unique vantage point to witness and observe the issues that are integral to drugs use in Ireland. More importantly, every day we work with the real experts in drugs use and the relevant issues that give rise to drugs use and that are consequences of drugs use. For our submission to the Citizens Assembly, we wanted to put that 'lived experience' centre stage.

TABOR GROUP CITIZENS' ASSEMBLY ON DRUGS USE FOCUS GROUPS

To amplify the voice of lived experience for our submission to the Citizens Assembly on Drugs use, Tabor Group sent an open invitation and convened seven Focus Groups (see Appendix 1) to gather data to inform our submission to the Citizens Assembly on Drugs Use. This enabled conversations to take place about the key questions being explored by the Citizens Assembly with people that were in treatment with Tabor Group at that time, people in early recovery, living in post treatment Tabor Group housing in the community, among family members, and with staff and volunteers.

90 people took part in the seven Focus Groups. Each was led by a Facilitator and lasted an hour. The Facilitator put questions to the participants. These were based on the Terms of Reference and from the Guidelines for Making Submissions to the Assemble for the Citizens' Assembly on Drugs Use. (See Appendix 1) The conversations that emerged were recorded and transcribed. A summary of the main points was captured at the end of each meeting.



CITIZENS' ASSEMBLY ON DRUGS USE: OBSERVATIONS FROM THE TABOR GROUP CITIZENS' ASSEMBLY FOCUS GROUPS.

The following feedback was drawn from the Tabor Group Citizens' Assembly Focus Groups. It was then collated and shared with participants, as well as with the Tabor Group Board of Directors.

We present the material in two parts:

- (1) Drugs Use in Ireland: The Problems?
- (2) Drugs Use in Ireland: The Solutions?

In each part the voices of people who are (a) currently in treatment (b) former clients now in early recovery, (c) family members, (d) volunteers with Tabor Group and (e) staff of Tabor Group are represented.

1. DRUGS USE IN IRELAND: THE PROBLEMS?

1.1 Observations from people who were in Tabor Group residential treatment programmes at time of the Citizens' Assembly Focus Groups.

"People who use drugs are trying to be cool. That's what it is like trying to fit in. Isolation drives drug use in our society, dysfunctional families, peer pressure, coping with working long hours, doctors prescribing drugs."

"It's easy to make money selling drugs. 15, 16 years of age, making it attractive for them, luring them in and then getting them to sell."

"There is really a lack of opportunity in the inner-city areas you know, you can see no jobs, shops closing down. You're buying into selling drugs because I need the money, the lack of opportunities for lack of education related."

"Recreational drugs' makes it sound okay."

"TV and stuff in school. It's all drugs and cool and hilarious. And you know, it's just so normalised."

"I think there's an attitude of hopelessness. The attitude of fear. It's like it's in your face all the time."

"Treatment isn't as accessible as a lot of people may think."

"My sister's daughter, she works in preschool, and she contends the kids in the school, they're not getting the proper nourishment they need at home, she can see they're shown already, starting to show, antisocial behaviour."

"Drugs make you someone you are not, 'Fear', 'Suicidal thoughts, Overdosing', 'Liver problems'".

"Chaos in family i.e., drug dealers calling to the door", "Lost teenage years", "Drugs use is glorified", "Financial ruin", "Not seeing my children", "Low levels of safety", "Loss of person as an asset to their community", "Drugs warps your values, you have a lower moral compass when use drugs, you engage in crime including robbing".



“But it could evolve into something more serious, and they will be mechanised or being sucked into it. They could be storing paraphernalia for mixing and cutting coke. And then they're given a bag of coke. And that goes on onto them becoming addicted, and they're dragged into it”.

“And poverty is a huge thing as well, where they make extra money plus the social welfare part of this”.

“The impacts depend on which end of the spectrum we're discussing”.

“The criminal record. Prison. Harder for people who live in the area to go about their daily businesses.”

“We've been in treatment a few times; we've been in prison, and I am not working. I'm not one of the people that can go through a certain area in college and try and get a job in that area. And you can't get a job because of your criminal record. And we're not going to treatment just to get away with day to day actually, we want to change or at least...”

“Drugs use takes away relationships, friends, family and sport. It holds you back, miss out on education. It numbs you, takes you into dangerous situations e.g., driving and crashing cars.”

“It creates fear in families, it compounds trauma, it means you lose your reputation, your teenage years. It isolates you and you have to deal with everything on your own. It makes you secretive, makes you vulnerable, makes you grow up quick.”

“To address addiction, you need help. Hard to do on your own. You need to change a whole lifestyle”.

Drugs use is driven by: “Boredom”, “Making money”, “Certain drugs use glamorised”, “a societal norm”, “Peer pressure”, “Trauma”, “Lack of love, compassion, people to listen”, “Lack of other supports”, “Lack of confidence...drugs can give false confidence”, “Environment i.e. family and/or community”, “Drink culture: gateway”, “Being homeless; a way of blocking things out”, “The amount of drugs available in the country”, “How easy it is to get drugs including prescription drugs”, “Mental health concerns and issues”, “Poverty”, “Lack of education (via schools) among very young”, “Getting addicted”, “People pay for drink with coke”.

Prevalence: “Every day, everywhere and everybody”, “It's across all socio-economic groups”, “In smaller towns”, “It's getting worse”, “All ages from teens to people in their 70's”, “In primary schools”, “Cocaine seen as a party drug”, “Cocaine in hospitality”, “Cocaine In treatment centre”, “Includes crack cocaine”.

Attitudes towards drugs use in Irish Society: “Ignorance”, “Attitudes different among younger generation to older generation”, “Worry and stress among parents”, “Fear”, “There is a hierarchy: Cocaine acceptable and tablets”, “Stigma associated with heroin and being homeless”, “Different attitude to legal prescription drugs and illegal”.

Trends: “Using two drugs at the same time”, “Start with weed...then moving on to harder drugs”, “Start with alcohol....why is alcohol not illegal?”, “Take coke when drunk”, “Drug debts”, “Get into crime to pay for drugs including dealing”, “It's getting worse”, “Dealers selling drugs they don't take”, “Dealing drugs is a route to fast money and nice things e.g. paying for things in cash in BT”, “Take drugs for as long and as hard as you can”, “Drugs are engrossing”.



Harmful Impacts: “Drugs make you someone you are not”, “Fear”, “Suicidal thoughts”, “Over dosing”, “Liver problems”, “Chaos in family i.e. drug dealers calling to the door”, “Lost teenage years”, “Drugs use glorified”, “Financial ruin”, “Not seeing children”, “Low levels of safety”, “Negative impact and

image for some communities”, “Loss of person as an “asset to their community”, “Drugs warp values”, “Lose moral compass when use drugs”, “Crime including robbing”, “A person is unhappy and unwell”.

Lived Experience: “Drugs use.....takes away relationships, friends, family and sport holds you backmiss out on education”, “numbs you”, “takes you into dangerous situations e.g. driving and crashing cars”, “means hospitalisation in psychiatric wards”, “creates fear in families”, “compounds trauma”, “means you lose your reputation”, “lose your teenage years”, “isolates you, you have to deal with everything on your own”, “makes you secretive”, “makes you vulnerable”, “makes you grow up quick”, “To address addiction, you need help. Hard to do on own. You need to change a whole lifestyle”.

1.2 Observations from people who were resident and are now in Tabor Group ‘Recovery Living’ accommodation in community.

“When I went in to hospital I went in for everything, right for mental health, it was a year later I was put on medication, I wasn't informed. I wasn't even told about PTSD. So, my lack of education left me struggling for a while. And then I was prescribed opioids, when I was pregnant, that was my addiction. And that's where my addiction began with prescribed medications from the hospital. And I was not informed. But I didn't have the awareness or the understanding of these medications. I didn't have understanding what was going on for me. So, me not understanding, led to fear. And then fair enough, I was wide open, wide open.”

“Our kids grow up thinking they need to take a tablet for everything. So therefore when they feel bad, they're given a tablet, they make you feel better. So therefore, when they start feeling emotionally bad, the solution is to take something that's going to make you feel better.”

“Think once you use everybody and fancies themselves, nobody really wants to pay for it. You're always inviting someone new into it. I thought it was an appealing lifestyle. If you start selling and making money, it's very easy to make money out of it. Because we're very low breakeven.”

“Like your tolerance goes up and up and up and you need more and more.”

“In disadvantaged areas I think there's an expectation of drugs use maybe because ... as regards the cocaine and the judges and the law those various trends would be expected. As for the higher class making sure that they make it more acceptable and a lot more people use you know.”

“Via divorce children being separated from parents separated from families, in foster care, that goes back to mental health and isolation and depression.”

“We have so many children born addicted.”

“Because if they don't have the coping skills, because they think they're not gonna get addicted anyway, and they think I can just try it, no matter all the warnings you're gonna get, you think you can manage before you even started that. Because I never thought I had an addiction. And I was so careful.”



I thought I knew, but I knew nothing, because I didn't have the emotional skills or the 'know how'. So, then I have kids and I can see that they were emotionally neglected due to my using. Just because I was there, I thought they were okay. But our children, they were not regulated by me because I wasn't ready to regulate myself. So, I've impacted on them. But the damage is done for me using and my gosh, I emotionally neglected them. No matter what way I look at it. That's what I did. So, I do watch all my children, they are lucky so far. But I knew that they're going to need to learn a lot more about emotions, you know? And is it too late for support work to be brought in for the families? Do you know? Like, giving them emotional intelligence around all this? Because then they have the better skills to say no, because if they haven't got the ability to regulate themselves, they are not going to be okay, in my view."

"A person is unhappy and unwell. The negative impact was that they had a criminal conviction, it stays, it sticks. there's a lot of shame. Mental health issues, self-esteem of youngster's brain, psychosis, cardiac problems connected with cocaine, cancer, hypertension. Lose everything, even try killing yourself. Hospitalisations in psychiatric wards, criminal convictions and prison."

"You have someone who has an Instagram and says, 'perfect, it all seems fine', but actually underneath how is the person doing, mentally, you know. Underneath that I think not seeing the effect we don't get to see the effect; you just get peoples revised versions of themselves. I do think sometimes drugs use can play into wanting to feel different, wanting to be mood altered, wanting to look a different way, appear a different way."

"When I got my first conviction for possession, there wasn't that much. Instead of scaring me away from doing that again, I thought, I have a record. And I got six or seven more. I never got locked up or nothing. But you get that conviction for something so small. You have a record."

1.3 Observations from people who are family members of people in Tabor Group treatment programmes – past and present.

"Where the family would be so full of shame, so they're more likely to pay the debt faster, rather than face the neighbours with the shame of this. So, dealers are actually preying on this type of young fellas. And I also believe that even women at the school gate, they're actually approached by other women at the gate who would have partners or relationships with people who are in the cocaine business."

"And if the father does get a criminal record that impacts the whole family."

"My family had to consider putting the house up for sale."

"Drugs use is detrimental to individuals and families. Physical and emotional damage to the whole family – it can make family members sick. There is mental and physical stress on the whole family....a father's health has been directly impacted. Huge impact on family, especially younger siblings. Some siblings 'not speaking' to a family member using drugs."

"Negative impact on young children of person using drugs (aged 5 and 7) children anxious and nervous."

"In laws and people in the community are supportive."



“Can be judgemental if families set boundaries: ‘you are very hard’.”

“It’s very traumatic. You’re living on your nerves – people coming to the door looking for money, threatening you. This is frightening.”

“A lot of incidents and violence in the home, and home damaged. Mother held down at knife point by son while using drugs and mental health issues. House set on fire. Thousands of euro worth of damage. Insurance company refused to pay.”

“Person using drugs is not working. Family have to ‘keep him’.”

“Families isolated and feel shame. People don’t want to know about what is happening.”

“Son went to prison and was using heroin within days. Prison made my son worse. Prison doesn’t work for people using drugs.”

“People fall between cracks of addiction and mental health supports. Need services that can respond to a person who has both. ‘No wrong door’, is not there in reality. Families left to pick up pieces. Sometimes at risk themselves.”

“Insensitive communications from professional. Untimely hospital discharge...‘it’s ok for person to come home.’ ‘It wasn’t’. People should be kept in hospital until stable and with an assessment. People might need to be sectioned. Families reported difficulties with consent when person under the influence of drugs or in withdrawal and also lack of information by health professionals with families of adults.”

“We don’t know where to turn to” – reports of siblings being threatened.

“These people (dealers) can do what they want. They know how to manipulate Gardaí!”

“Not enough open and honest conversations about drugs use e.g. when a parent reported son being offered drugs in secondary school, told by the Principal that ‘there are no drugs in this school’.”

“Par for courses in secondary schools including first and second years. These are seen as ‘cool kids.’”

“A lot of denial. People prefer to turn a blind eye. Drugs are everywhere. Not to be normalised but it should be ‘normal’ to be able to speak about it.”

1.4 Observations from people who are volunteers with Tabor Group

“Drugs use is normalised. There is a great availability of drugs. People who use drugs are affected by a lack of personal connection with others in their life. Social media is having a growing influence on the drugs use of young people. There are no ‘rites of passage’ for young people today.”

“There is an increased acceptance of alcohol and cocaine use in Irish society today. Drugs are more openly used. They are as available as milk or crisps. There is much polydrugs use.”



“There are many impacts: financial, emotional, death, sickness, Adverse Childhood Experiences, drug debts, educational failure, mental health challenges, hospitals challenged to cope. There is school drop-out self-harm, suicide.”

1.5 Observations from Staff of Tabor Group

“Somebody gets curious about drugs or alcohol and they're gonna lose a weekend.”

“I think the cost of beer and drink. It's too much effort to go to pubs.”

“Valency of cocaine is massively increased and the prevalence of cocaine addiction has also increased as well with that, just the opportunity, it's very easily accessible.”

“They were saying it's easier than buying a cup of coffee, because you know, the coffee shop closes and six, whereas you can get drugs the whole night, and the home or whatever you want. Like you go into the pub and stare.”

“It's the actual lines of coke at the table of a wedding, of christenings, of communions, of all the main events.”

“Social media, you're on the young lads and young girls as well. They're very, very consumed with how you look, you know, going to the gym and, you know, guy, you just need to go ‘hmm’.”

“It could evolve into something more serious, and they will be mechanised or being sucked into it. They could be storing jobs for them, they could be storing paraphernalia for mixing and cutting coke. And then they're given a bag of coke. And that goes on onto the then addicted, and they're dragged into it.”

“I suppose you know, great jobs, lots of money, and add more pressure in the jobs where these people feel that they need to keep up and keep up with the pressure at work, especially in hospitals.”

“They had a criminal conviction, nothing to do with the actual drug itself or the actual aspects of drugs use. You didn't see them in any way addicted or having any of the traits that are hallmarks of addiction.”

“Social media as well like having to seem a certain way or an inflated sense of self.”

“You have someone who has an Instagram and said perfect is all seems fine but actually underneath how is the person doing mentally you know, underneath that I think not seeing that effect we don't get to see that affect you just get people's revised versions of themselves and I do think sometimes drugs use can play into wanting to feel different wanted to be mood altered wanted to look a different way appear a different way.”

“One's abilities and feelings of loneliness and things like that, connection, struggling to connect, social anxiety comes up a lot I think as well, not knowing how to connect with others. Communication has changed so your clients in treatment I don't have I don't know how to talk. I don't know how to put my point across at all. I don't know how to show vulnerability. I think in certain communities showing vulnerability is seen as a weakness sometimes.”



“It is the experience of trauma that drove users to appreciate that drugs help them with that whole drive to be able to be sociable and to be able to connect. And if there is underlying trauma, then those kinds of tasks are more challenging for people after drugs use.”

“Break up of families caused by drugs use, young men raised by a single parent. People living in poverty due to the financial cost of addiction. Cocaine can lead to large debts and family intimidation. Leads to criminality in the community. And violence.”

“People manage a cocaine addiction with other drugs. This leads to mental health issues. Another layer of trauma. Psychosis. Put on medication that becomes abused.”

“How are families supposed to cope? ‘Put him on the street?’”

“Leads to homelessness. Shelters are full. Living on the street is the only option. Dependent on the state to take care of the person. There is no effective multi-agency response.”

“The abnormal becomes abnormal. There is a lack of education. People fall out of education. The capacity to parent is reduced. People’s expectations are not being fulfilled. Children end up in care.”

“Hospitals are impacted. Ambulance staff are tied up and overworked. People are afraid to go to the Emergency Room. Older people are afraid. More people are being attacked.”

“People go for help and the medical profession respond with medication. They have no time. No information.”

“Suicide, overdose and death.”



2. DRUGS USE IN IRELAND: THE SOLUTIONS?

2.1 Observations from people who were in Tabor Group residential treatment programmes at the time of Citizens' Assembly Focus Groups.

"People with addictions are normal people struggling with a disease".

"So, someone goes to treatment, and the record should be clear."

"But politics is always reactive, reacting and firefighting the problem rather than trying to prevent young people getting into addiction."

"Decriminalising certain drugs?"

"The State could play an important role in destigmatising people with addictions. People with addictions 'are normal people struggling with a disease'. Challenge the stigma associated with drug addiction; 'it's an illness.'"

"Offering a menu of options to people in the community so that they have a number of avenues that they can follow to find a way to recovery if this is what they're seeking."

Promoting Rehabilitation: "Ads showing impact of driving under the influence of drugs RSA", "Challenge the stigma associated with drug addiction, it's an illness", "Recognition of what addiction is, how to recognise it. Decriminalise it", "Families can look down on addicts", "Re-education", "Work in schools with people with lived experience", "Important that the wider public hear the stories", "Article in media", "People with addictions are normal people struggling with a disease", "Decriminalise people with small amounts of drugs for personal use", "More treatment places including for under 18s", "Wipe criminal record after a period of time. Offer people a second chance....to work, to travel. A criminal record blocks that." "Offer people choice of treatment or criminal justice path/prison".

Opportunities: "More links across addiction support and mental health system", "Offer talking therapies rather than meds in mental health settings", "Focus on bigger fish not users in terms of criminal justice system", "Prison makes things worse. No structure. Do 'sentence' in treatment centre. "Criminal records stay with you and the shame", "Compassion by Gardai", "Not enough Gardai in rural areas to catch dealers", "Some gardai who confiscate are selling and using drugs. Also, security staff in bars and clubs", "More awareness including of rohypnol", "More treatment options", "Drug testing".

2.2 Observations from people who were resident and are now in Tabor Group 'Recovery Living' accommodation in the community.

"There needs to be proper investment in addiction treatment services."

"Education programmes should help citizens recognise what addiction is, and how to recognise it. Decriminalise it. It is important that the wider public hear the stories."

"Housing problems need to be addressed: homelessness leads to despair, boredom and addiction."

"There needs to be more treatment places for under 18s."



“Decriminalise people with small amounts of drugs for personal use. Wipe criminal record after a period of time. Offer people a second chance... to work, to travel. A criminal record blocks that. Offer people a choice of treatment or criminal justice system/prison.”

“Drugs use should carry health warnings, like tobacco boxes.”

“Education of children on the topic of drugs use needs to start much sooner, especially on the consequences of drugs use.”

“Do you know what? We even asked the doctor ‘you're over prescribing’ and it was over prescribing. But it made no difference. They still did. You know, and there was no consequence. Still practicing.”

“I think ‘take away the stigma of treatment’. I think there has to be a lot more open discussion about treatment for addiction. So, it's the cost because cost is the last barrier.”

“Come 14, 15, 16, a teenager is going to start experimenting and drinking. Like it's not there's not more punishment, and, you know, ridicule and shame about it, you know, I don't think that ends the situation. Whereas if you actually turned around and you had that teenager, make an informed decision and educate them. That's where it's at. It needs to be pointed out what the options are. If they lose control, you know that, yes, there is a possibility that you could lose control over drugs use. Education is needed.”

“That we have a history of taking a long time to get legislation in place. It's talked about six times it's passed and then the legislation takes another 10 years to come in, by which time it is different, and the legislation is leaving the person stranded.”

“Reforming legislation I suppose is an opportunity to get more funding into treatment and give people the chance to get clean.”

“There is an assumption by guards and judges and prosecutors, when people learn to do drugs, they're a bad person.”

2.3 Observations from people who are family members of people in Tabor Group treatment programmes – past and present.

“Support people with a dual diagnosis. Ramp up treatment options. More Gardai – not enough. Gardai to be trained in how to respond to a person using drugs.”

“Treatment Centres as an alternative to prison and instead of a sentence. Possibly ‘secure’ treatment centres.”

“More help for families being intimidated.”

“Parents to be educated on the signs....what to look out for with adolescent children. Education about drugs use should be part of the curriculum.”

“What works? Treatment centres, access to practical advice, support for families.”



2.4 Observations from people who are volunteers with Tabor Group.

“An education programme to communicate to young people that it is not normal to live with drugs use. Young people need education about recovery. Evening activities for young people are needed. Personal development is important and an increase in coping skills for young people.”

“Prison reform is needed. A multi-agency approach is needed for decriminalisation. We need to see people as human, not criminals. A widespread acknowledgement of the effects of drugs use to challenge an ‘us not them’ perspective.”

2.5 Observations from staff of Tabor Group.

“Residential treatment agencies like Tabor Group need to be properly resourced. Humanistic ways of treatment. Services need to be professional. They should be licensed and accredited by HIQA or similar body. Services should be provided by CORU Registered personnel. Services delivered by counsellors who are non-judgemental, congruent, genuine, empathic and validating. Services need to address the whole mental health dimension of the impact of drugs use and the trauma dimension.”

“The state should properly fund research projects to see what outcomes are and what effect treatment programmes have on people and how long the effects last. This can help address the stigma of drugs use in our society.”

“The HSE Drug and Alcohol Services Case Management Protocols should be more widely implemented and governed.”

“I think addressing the stigma of drugs use in Ireland would be very beneficial to supporting rehabilitation.”

“It's good that treatment is trauma informed as it improves outcomes.”

“Decriminalising and destigmatizing as well.”

“Direct excess funds in the Irish economy into treatment services.”

“Education in schools on drugs use. Sports can influence the outcomes of drugs use. Needs to begin in primary schools. Education for living skills and personal development. Build confidence and psychoeducation skills. Kids don't know what's happening. It needs to be part of the curriculum and there needs to be counsellors in schools.”

“Strategy needs to be driven by a health led approach, not justice.”

“Provide housing.”

“Provide access to Mental Health Services. Voluntary agencies provide the services. Treatment services and mental health services need to collaborate and work together in a shared care approach.”

“The longer the length of stay of a treatment episode, the better.”



“Support services should be available to respond to family needs. Families need support to manage the kids.”

“There should be a review of how Gardai support intimidated families. They need extra powers. Gardai need addiction training.”

“There needs to be education on addiction in the workplace.”

“Not just an Irish problem. Inventive solutions are needed. Safe injection centres. Increase harm reduction measures. Take away the shame.”

“Promote recovery.”

“Criminal sanctions serve no one. Convictions hamper efforts to change lives. Prison exacerbates the problems. There is a pressure on prisons to contain the problems of drugs use.”

“Legalise substances and you reduce intimidation and supply issues.”

“Treatment is important to remove people from the environment. It helps people find peace.”

“Break the intergenerational cycle of addiction and save a family.”



3. KEY MESSAGES FROM TABOR GROUP FOCUS GROUPS FOR THE CITIZENS' ASSEMBLY.

Some key messages that emerged from across the various Tabor Group Focus Groups for the Citizens Assembly to note and act upon include:

3.1 DRUGS USE IN IRELAND: THE PROBLEM:

There is hypocrisy and shame about drugs use in Ireland.

- The attitude of Irish society to drugs use is hypocritical. Using drugs is accepted until a person admits that they have a problem, then the person is frowned upon.
- There is ignorance and there is a hierarchy. There are different attitudes to prescription drugs, with cocaine acceptable, and a stigma attached to heroin.
- There are consistent and multiple examples of the shaming impact of the stigmatisation of people who use drugs.
- There is a lack of open and honest conversations about drugs use in Ireland.

Drugs use is everyday, everywhere and affects everybody in Ireland.

- Drugs use is extremely prevalent in Irish society; in rural and urban areas, and across all socio-economic groups, and it's getting worse.
- Drugs are as available as crisps, coffee and milk. Cocaine is offered at weddings and christenings - seen as a 'party drug' and part of hospitality.

Drugs use in Irish society has become normalised.

- Drugs use can start out as a recreational activity that is glamorised, cool, fun. It can be an appealing lifestyle.
- When drugs use is described as 'recreational', it sounds ok. Young people don't think they are going to get addicted.

People use drugs to fit in and connect with other people.

- Lack of confidence, loneliness and a desire to connect with others can encourage people to use drugs.
- Using drugs can give people 'false confidence'.
- Extensive use of social media like Instagram can put pressure on people to look like they are fitting in and looking like they are having a good time.
- Using drugs can 'numb' people.
- Using drugs can be all-encompassing and 'engrossing' and make you someone you are not, taking away relationships and holding people back.

People can make easy money selling drugs.

- People get sucked into selling drugs to make money especially when they don't have the education, the opportunity to go to college and to get a good job.
- Dealers are selling drugs they don't take themselves.

Drugs use can generate significant debts.

- Drugs debts can create financial ruin for people and families.
- People using drugs often turn to crime to pay for them.
- Families are so full of shame that they pay drug dealers, sometimes taking out loans from the Credit Union for 'so-called' home renovations or other purchases.



Drugs use can be linked to poverty, deprivation and poor education.

- There is a lack of opportunity in inner-city areas, no jobs and shops closing down.
- Drugs use can interrupt a person's education.

Drugs use is rooted in trauma and vicious 'intergenerational' cycles.

- Childhood trauma can lead to drugs use problems later in life. Children can be emotionally neglected when the parents are using drugs.
- Drugs use can initially help people who have experienced trauma, helping people to be sociable and to be able to connect with others.
- Some children are born addicted to drugs.

There is a lot of fear around drugs use.

- In many cases drugs use becomes a frightening experience that robs people of their youth, their reputation, their moral standards, makes a person into someone you are not, and can lead to hopelessness, homelessness, hospitalisations on psychiatric wards, overdosing and other serious health problems including self-harm and death by suicide.
- Drugs use and its consequences can have a chaotic effect on people and their family. Children end up going into care. Family relationships are lost.

Problem drugs use can cause chaos in families.

- Families are often living on their nerves, with people coming to the door looking for money.
- Families feel isolation and shame when someone in the family has problem drugs use.
- Where there is problem drugs use there can be physical neglect, violence and emotional damage to the whole family. There is often physical stress on the whole family, especially siblings. Young children can become anxious.

People fall through the cracks of addiction and mental health services.

- People fall between the cracks of addiction and mental health services. 'No wrong door' is not there in reality.
- Problem drugs use can go with poor mental health, self-harming, feeling suicidal, overdosing and even death.

Is alcohol the elephant in the room?

- Polydrug use including alcohol is common. Alcohol use can be 'the gateway' drug.
- Why is alcohol not illegal?
- Parental alcohol use can harm children's development and wellbeing, resulting in childhood trauma. These small children can sometimes develop problems with drugs (and alcohol) use in later life.

Are prescription drugs another 'elephant'?

- Addictions sometimes begin with prescribed medications.
- People go for help and the medical profession responds with medication rather than giving a person time, referring them for 'talking' therapies and proper information.



Why criminalise a person with a health condition?

- People with problem drugs use are unhappy and unwell.
- People can end up with a criminal record and in prison, with severe and long-lasting consequences for employment and travel. It can get in the way of a person's recovery and affect the whole family.
- People pay for drugs by selling small amounts of drugs to their friends. People get convictions and don't care about getting more convictions.
- Prison doesn't work for people using drugs.

Treatment for drugs use is not as accessible as people think.

- Treatment Centres need to be put on a stronger financial footing and to be on par with other parts of healthcare.
- There needs to be an adequate number of treatment beds to meet need.
- Pre-residential treatment programmes are useful as well as adequately funded post-treatment recovery programmes.



3.2 DRUGS USE IN IRELAND: THE SOLUTIONS:

State-led measures to end the stigma and isolation around drugs use

- Take away the shame.
- Instead of stigmatising, there should be greater public understanding across the board about the circumstances that have led to a person's drugs use.
- People need help with an addiction. It's not easy to access treatment. People can feel alone and isolated.
- There should be a caring attitude towards people caught in the situation of using drugs, and to not exclude people.
- The State could play an important role in challenging the stigma associated with drug use destigmatising the experience...People with addictions. People with problem drugs are unhappy and unwell. We are "normal people struggling with a disease".

A Health-led approach not criminalisation to drugs use in Ireland

- Wipe the criminal record after a period of time. Offer people a second chance to work, to travel. A criminal record blocks that.
- Offer people the choice of treatment or a criminal justice path and an alternative to prison.
- The length of stay in residential should be linked with what people need rather than costs and there needs to be enough beds available as well as pre-treatment and recovery programmes
- Drugs use is not just an Irish problem. Inventive solutions are needed including safe injection centres and more harm reduction measures. We can learn from experiences in other countries of 'what works'.

Drugs use treatment to be on a statutory footing and properly funded including programmes for families.

- Residential treatment centres need to be trauma-informed and on a solid financial footing e.g., Section 38 status in line with other parts of health care treatment.
- Practical advice and support programmes for families.

Education for children and young people about drugs use in primary and secondary school.

- Calls for open discussion and facts-based education programmes in schools about drugs use from primary school upwards. People in recovery could be involved in the delivery of this programme.

'No wrong door' – make it real.

- Support people with a dual diagnosis. Ramp up treatment options.
- Provide access to both Mental Health Services as well as addiction services.
- Support services should be available to respond to family needs. Families can need support to parent and support their children.

Caution in and education about prescribing practices involving addictive medications.

- Training and education for medical professionals in prescribing addictive medications including opioids.
- Preference for alternatives including talking therapies and access to treatment and recovery programmes.



Equip and strengthen the powers of the Gardaí in tackling drugs use particularly around intimidation of families for drug debts.

- Gardaí to be trained in how to respond to a person using drugs and their family.
- More help for families being intimidated by drug dealers for debts including additional powers for Gardaí.

Include housing as part of response to drugs use in Ireland.

- Housing problems associated with problem drugs used need to be addressed. Ramping up the Housing First model with wider access to this programme.
- A call to provide housing as part of addiction treatment and recovery programmes.



4. RECOMMENDATIONS FROM TABOR GROUP TO THE CITIZENS ASSEMBLY ON DRUGS USE

The following are recommendations arising from this engagement with people directly impacted by drugs use in Ireland today and on the questions being explored by the Citizens Assembly on Drugs Use.

The recommendations also reflect Tabor Group's more than 30 years of experience as a drug treatment centre and draw from the range of evidence presented to the Citizens' Assembly including policy response from other counties and what works for the people at the centre of it all:

- 1.** Take necessary measures to destigmatise the issue of drugs use, the experience of people who use drugs and their families and whole communities.
- 2.** Establish a national drug and alcohol strategy on a human rights foundation.
- 3.** Ensure national drug and alcohol strategies have a high government priority overseen by senior government figures.
- 4.** Be guided by principles of 'Recovery' in responding to drugs use combining residential, community and peer support-based services that accompany individuals and their families out of addiction. National Protocols for Drug and Alcohol Services must be implemented nationwide.
- 5.** Ensure a multi-sectoral response comprising agencies addressing housing, education and training, mental health and other disabilities.
- 6.** Develop a bio/psycho/social approach with trauma-informed principles to responding to problems of drugs use.
- 7.** Establish treatment agencies demonstrating a sustained quality standard with HSE section 38 status, and HIQA oversight with CORU registered professionals.
- 8.** Establish a 'Health Diversion' response to drugs use and decriminalise people caught in possession of some drugs for their personal use.
- 9.** Equip Gardai with the skills and powers necessary to intervene effectively in cases of drugs related intimidation of families.
- 10.** Bring alcohol out into the open in Irish society and come to terms with the problems associated with alcohol use and the hidden harms caused to children by parental alcohol misuse.



5. CONCLUSION

The Citizens' Assembly on Drugs Use is very welcome as it allows the deep pain of many people, and communities, in our society to emerge and be acknowledged. There is an onus now on us to do something about alleviating this pain in a way that really changes the circumstances of many people. This change must be driven by the understanding and compassion of ordinary citizens like us and those representing us in the Assembly.

As the 90 people who joined Tabor Group's Citizen's Assembly Focus Group shared with us so clearly, compellingly and cogently, the problems associated with drugs use are very prevalent in Irish society. No community is untouched by the issue. In many cases, these problems go deeply into the well-being of individuals and families. There can be extremely debilitating impacts on people's lives, in families especially children and whole communities. Sometimes these impacts last a whole lifetime and repeat intergenerationally.

Services need to be properly established, resourced and trauma-informed. There are multiple challenges involved for people. Multiple agencies need to work in partnership to comprehensively address the issue. Rehabilitation is a gradual process and people need a variety of ongoing supports to establish 'recovery' into a lifestyle. Peer support is essential to this success.

The exclusion of a group of vulnerable people through stigmatisation is now exposed and we can recognise, as one young man said, people with addictions are unhappy and unwell, "normal people struggling with an illness".



APPENDIX 1

Tabor Group Citizen's Assembly Focus Group Schedule and Questions

A series of Focus Groups were held in Tabor Group to gather data to make a submission to the Citizens Assembly on Drugs Use.

	DATE	VENUE	FOCUS GROUP	NUMBER OF PARTICIPANTS
1	May 2nd	Tabor Lodge	People who are Tabor Lodge Staff	8
2	May 2nd	Tabor Lodge	People who are Tabor Lodge Current Residents and Former Residents in Continuing Care Groups	14 & 10
3	May 8 th	Tabor Fellowship	People who are Tabor Fellowship Residents in Recovery Living Houses and former Residents in Continuing Care Groups	14
4	May 9 th	Tabor Fellowship	People who are Current Residents of Tabor Fellowship	16
5	May 13 th	Tabor Lodge	People who are Tabor Group Volunteer Continuing Care Group Facilitators and Family Support Group Facilitators	15
6	May 15 th	Tabor Fellowship	People who are Family Members	3
7	May 18 th	Tabor Fellowship	People who are Tabor Fellowship Staff	10
Total				90

Questions devised from Citizens Assembly Terms of Reference are printed below and were used to generate discussion at focus groups 1, 2, 3, 4 and 5.

1. What drives drugs use in Irish society?
2. What is the prevalence of drugs use in Irish society?
3. What are the attitudes to drugs use in Irish society?
4. What are the trends in relation to drugs use in Irish society?
5. What are the harmful impacts of drugs use on individuals, families, communities and wider societies.
6. What is the lived experience of young people and adults affected by drugs use, as well as their families and communities?
7. What is best practice in promoting and supporting rehabilitation and recovery from drug addiction?
8. What are the opportunities and challenges of reforming legislation and strategy responses to drugs use?

When guidelines for making submissions to the Citizens Assembly on Drugs Use became available the following questions were devised to guide focus groups 6 and 7.

1. What are the harmful impacts of drugs use on individuals, families, communities, and wider society?
2. What could the State do to significantly reduce the harmful impacts of illicit drugs on individuals, families, communities and wider society?



3. What works, and what doesn't work, in terms of current legislation, policy and service delivery?
4. What should be done to reduce supply, demand, and harm?
5. What should be done to increase resilience, health, and well-being?
6. Any other comments?

Each focus group was recorded, and the data was transcribed. Notes were also taken during some of the focus groups and an agreed summary was also made of the material at the end of each group.

Poster Used to Promote Focus Groups

**“ Have Your Say
On Drugs Use
in Ireland Today ”**

**Tabor Group & The Citizens' Assembly on Drugs Use
Invites You to take part in our**

FOCUS GROUPS
on Drugs Use in Ireland

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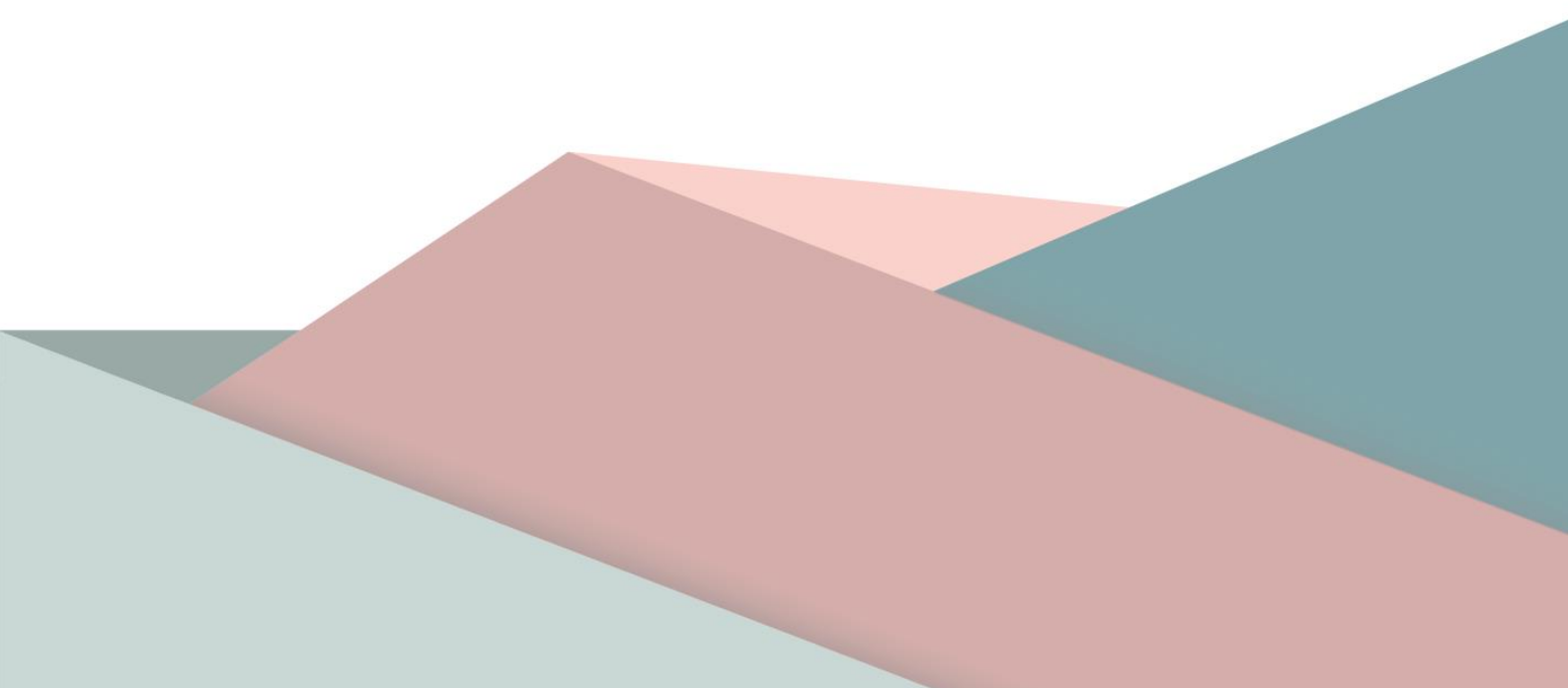
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