UKDPC

UK DRUG POLICY COMMISSION

The Impact of Drugs on Different Minority Groups: Ethnicity and Drug Treatment

Evidence Review
July 2010

The UK Drug Policy Commission (UKDPC) is an independent body providing objective analysis of evidence related to UK drug policy. It aims to improve political, media and public understanding of drug policy issues and the options for achieving an effective, evidence-led response to the problems caused by illegal drugs.

The views, interpretations and conclusions set out in this publication are those of the authors and are not necessarily those of the UK Drug Policy Commission.

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Acknowledgements

List of Abbreviations

NDTMS   National Drug Treatment Monitoring System

NFA   No Fixed Abode

TOP   Treatment Outcomes Profile

NTA   National Treatment Agency

1. Background and methods

INTRODUCTION

This short report has been produced as part of a wider review seeking to pull together the available information on the impact of illicit drugs on a number of diverse minority groups: ethnic minority groups; lesbian, gay, bisexual and transgender people; and disabled people. This wider review has considered the impact of drugs from a number of perspectives:

- The extent and nature of drug use within groups;

- Their need for and access to treatment and prevention programmes; and

- The impact of drug markets on different groups and interaction with the police and the criminal justice system associated with drugs.

The core of that review has been a series of reviews of the literature commissioned from the Office for Public Management (OPM) with funding from the Home Office which are published alongside this report. The government, local partnerships, commissioners and service providers have tried to address the challenges of a range of diverse groups over the years. Diversity legislation requires consideration to be given to the needs of a range of minority groups in the provision of services and for drug treatment. The National Treatment Agency (NTA) has published guidance for commissioners and services and also collects data to monitor provision for some groups (NTA, 2007). This report pulls together information relating to ethnicity and treatment services from a range of these sources as background to the wider evidence review.

DATA SOURCES

The information provided in this review was provided by the NTA and has been drawn from both published sources and some new analyses and includes:

- Analysis from the National Treatment Monitoring System (NDTMS) data for 2008/09 – including analysis of data from the baseline Treatment Outcomes Profile (TOP);

- The 2007 User Satisfaction Survey - Tier 2 and Tier 3; and

- A series of reports commissioned by the NTA from UCLAN (the University of Central Lancashire) looking at the treatment needs of different ethnic groups.

THE STRUCTURE OF THIS REPORT

Using these data sources this report first compares the characteristics of people from different ethnic groups engaging with treatment services then considers the evidence comparing their experiences of services and their satisfaction with them. Finally it considers the expressed needs from the community engagement exercises conducted by UCLAN.

This is only one part of the picture of how drugs impact on communities and these findings should be considered alongside those from the other reviews and the policy and practice briefings to obtain a fuller picture of the impact of drugs on minority ethnic groups.

2. Characteristics of people in treatment by ethnicity

This section compares the characteristics of people from different ethnic backgrounds entering treatment. Characteristics considered include:

- substances used;

- injecting risk behaviour;

- employment, education, and housing,

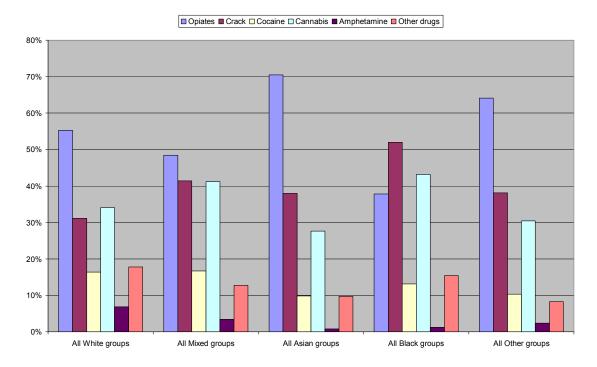- physical and psychological health, and

- quality of life.

When people enter drug treatment some baseline information is collected for use in monitoring progress during treatment. For some time information on ethnic background has been collected from people entering treatment. In October 2007 a new outcomes monitoring form, the Treatment Outcomes Profile (TOP) was introduced to collect a wider range of information on the outcomes of treatment. The TOP should be completed at the start of treatment (baseline TOP), every six months thereafter and on discharge. Use of the TOP is still bedding in, but baseline TOP assessments are available for a large cohort of individuals (60,606) who started a new treatment journey in 2008/09. These data are presented broken down into 16 different ethnic categories which are also grouped into five major broader categories: White, Mixed, Asian, Black and Other.

It is important to note that people of White ethnic backgrounds make up the vast majority of those entering treatment (86% in 2008/09) and of those included in the analysis of TOP data (83%). Also, the number of individuals in some of the more detailed categories, eg Chinese, may be small so the results must be interpreted with care. It is also important to remember that the findings represent those individuals who enter treatment and may not be representative of the whole population of drug users in each ethnic group.

SUBSTANCE USE

The TOP form collects information on the substances that individuals report having used in the 28 days prior to entering treatment. The types of drugs used vary by ethnic background as illustrated in Figure 1 and Table 1. Further details of variation by age and sex can be found in Table A.1 to A.6 in the Appendix to this report.

Types of substances used

Treatment entrants of Asian ethnic background are most likely to report opiate use upon commencement of structured drug treatment, with over 70% reporting use of opiates. Very few Asian women entered drug treatment and those that did were slightly less likely than the Asian men to report using opiates prior to treatment (60% against 71.3%, respectively). A deeper look within the broad Asian category shows that treatment entrants of Bangladeshi background are the group most likely to report opiate use prior to treatment, 81.3% had done so, while those of Pakistani and "Other Asian" background were less likely (65.6% and 62.5% respectively) to do so. In the Asian group, as was the case for all ethnic groups, younger treatment entrants were less likely than older people to report opiate use; 55% of those aged 18-24 reported opiate use compared with over 70% of those in older age groups.

In contrast to the situation with respect to opiate use, treatment entrants of Asian origin were less likely to report use of any of the other drug types. They were least likely of all groups to report cocaine use and also cannabis use.

The lowest rates of opiate use were found in the Black ethnic group, with 37.8% having used opiates prior to treatment. The drugs most commonly reported by Black treatment entrants were crack cocaine (reported as being used by 52% of people) and cannabis (used by 43.2%).

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Table 1: Number and percentage of individuals reporting use of different drugs at TOP baseline assessment by ethnic group

	Opiates		Crack		Cocaine		Cannabis		Amphetamine		Other drugs	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
White British	25485	54.9%	14097	30.6%	7642	16.7%	15838	34.3%	3250	7.1%	8072	17.8%
White Irish	441	58.4%	354	47.3%	111	14.9%	243	32.4%	35	4.7%	124	16.9%
Other White	1259	64.9%	705	36.7%	217	11.5%	526	27.7%	55	2.9%	309	16.5%
All White groups	**27185**	**55.3%**	**15156**	**31.1%**	**7970**	**16.4%**	**16607**	**34.1%**	**3340**	**6.9%**	**8505**	**17.8%**
White & Black Caribbean	423	49.0%	402	46.5%	146	17.1%	363	42.0%	23	2.7%	94	11.6%
White & Black African	93	50.0%	73	39.2%	26	14.1%	71	38.2%	5	2.7%	19	10.4%
White & Asian	120	48.0%	75	30.2%	46	18.6%	105	42.2%	13	5.3%	35	14.2%
Other Mixed	213	46.9%	176	38.7%	73	16.1%	185	40.4%	17	3.8%	67	15.1%
All Mixed groups	**849**	**48.4%**	**726**	**41.4%**	**291**	**16.7%**	**724**	**41.2%**	**58**	**3.4%**	**215**	**12.7%**
Indian	572	74.7%	273	36.4%	64	8.6%	174	23.2%	8	1.1%	54	7.3%
Pakistani	505	65.6%	274	36.0%	87	11.6%	247	32.4%	..	0.5%	85	11.5%
Bangladeshi	400	81.3%	242	49.9%	28	5.9%	126	26.5%	5	1.1%	42	8.9%
Other Asian	368	62.5%	192	32.9%	69	12.0%	161	28.0%	..	0.3%	64	11.2%
All Asian groups	**1845**	**70.5%**	**981**	**38.0%**	**248**	**9.8%**	**708**	**27.6%**	**19**	**0.8%**	**245**	**9.7%**
Caribbean	483	37.8%	690	54.0%	187	14.8%	577	45.1%	15	1.2%	85	6.8%
African	180	35.8%	211	41.9%	65	13.0%	209	41.5%	..	0.8%	62	12.6%
Other Black	323	39.1%	458	55.2%	85	10.4%	343	41.3%	11	1.4%	63	7.8%
All Black groups	**986**	**37.8%**	**1359**	**52.0%**	**337**	**13.1%**	**1129**	**43.2%**	*****	**1.2%**	**210**	**8.2%**
Chinese	21	61.8%	13	38.2%	..	12.5%	9	28.1%	0	0.0%	..	12.5%
Other	435	65.9%	243	37.0%	51	7.8%	195	29.9%	9	1.4%	97	15.2%
Not Stated	298	61.8%	189	39.6%	64	13.7%	148	31.4%	19	4.1%	72	16.0%
All Other groups	**754**	**64.1%**	**445**	**38.1%**	*****	**10.3%**	**352**	**30.4%**	**28**	**2.4%**	*****	**15.4%**
Missing	1601	75.8%	973	46.6%	210	10.3%	658	32.3%	67	3.3%	366	18.1%

.. = Number suppressed where there are less than 5 cases to avoid identification; * = total suppressed to protect against disclosure.

There is little difference between the sub-groups that make up the Black category with respect to the drugs used prior to entering treatment although people of Black African origin are slightly less likely to report crack cocaine use (42% did so, compared with 54% of those of Black Caribbean and 55% of those of Other Black origin).

In general, the 18-24 age group were less likely to be using opiates, particularly among those of Black ethnic background where 17.9% used opiates prior to treatment. Prevalence peaks in different age groups for different ethnicities. For the white and Asian groups it is in the 35-39 age group (61.9% and 77.2%, respectively); for the mixed group it is the 40+ group (54.8%) but the rates for the 30-34 and 35-39 groups are very similar (54.4% and 54.5% respectively); for the black population, the 40+ age group is also the group reporting most opiate use (45.1%), and for the 'Other' group it is the relatively younger group of 25-29 (68.4%).

The TOP has another category of substance, 'other', which can be one of a multitude of substances. That being the case, the data are shown but it is difficult to ascribe meaning to differences across ethnic groups.

Almost half of the white, mixed and black ethnic groups report alcohol use prior to starting structured drug treatment. Alcohol prevalence is lowest in the Asian group with 34% reporting use. For the white, mixed and Asian groups, alcohol use is most prevalent in the 18-24 group (55.4%, 51.6% and 37.6%, respectively). Similar proportions of black 18-24, 25-29 and 40+ treatment seekers use alcohol and for the 'other' group, it is the 35-39 age group that most alcohol use is witnessed. *(Table A.7)*

Injecting risk behaviour

Interestingly, while the Asian ethnic group has the greatest proportion of treatment seekers using opiates, they have the lowest proportion of individuals reporting injecting as a route of administration. Nearly a quarter of the White group (23.8%) inject while only about one in twenty (5.5%) of the Asian group report injecting. Young adults tend to inject less than older people. More males tend to inject, except in the Black group where women are slightly more likely to inject. However, the proportion of injectors in the Black group overall is low (5.7% - similar to the Asian group). *(Table 2 and Tables A.8 and A.9)*

These figures are consistent with information on current and past injecting behaviour routinely collected in NDTMS and shown in Table B.1 in the Appendix to the report. Among clients starting treatment in 2008/09 overall half (50%) had injected at some time and almost a quarter (24%) were current injectors. However, only 18% of people from Asian and Black ethnic backgrounds had ever injected and 7% were current injectors.

The prevalence of receptive sharing of injecting equipment seems to indicate that regardless of the level of injecting within an ethnic group, between a fifth and a quarter of injectors share equipment. For example, while 5.7% of the black group inject, 23.4% of these share equipment. In comparison, while nearly 24% of the white group inject, nearly 19% of those also share equipment. *(Table 2 and Table A.9)*

Table 2: Number and percentage of individuals reporting injecting drug and use of shared equipment in the previous 4 weeks at TOP baseline assessment by ethnic group, 2008/09

	Injected drugs		Shared Equipment	
	No.	*%*	*No.*	*%*
White British	10939	23.7%	2071	18.9%
White Irish	151	20.4%	38	25.2%
Other White	536	27.9%	88	16.4%
All White groups	**11626**	**23.8%**	**2197**	**18.9%**
White & Black Caribbean	113	13.2%	29	25.7%
White & Black African	23	12.4%	6	26.1%
White & Asian	38	15.4%	..	10.5%
Other Mixed	73	16.1%	18	24.7%
All Mixed groups	**247**	**14.2%**	*****	**23.1%**
Indian	51	6.9%	6	11.8%
Pakistani	40	5.3%	5	12.5%
Bangladeshi	15	3.2%	..	6.7%
Other Asian	33	5.7%	7	21.2%
All Asian groups	**139**	**5.5%**	*****	**13.7%**
Caribbean	54	4.3%	15	27.8%
African	25	5.1%	..	12.0%
Other Black	66	8.0%	16	24.2%
All Black groups	**145**	**5.7%**	*****	**23.4%**
Chinese	5	16.1%	0	0.0%
Other	109	16.7%	13	11.9%
Not Stated	111	23.4%	28	25.2%
All Other groups	**225**	**19.4%**	**41**	**18.2%**
Missing	550	26.8%	109	19.8%

.. = Number suppressed where there are less than 5 cases to avoid identification; * = total suppressed to protect against disclosure.

EMPLOYMENT, EDUCATION AND HOUSING

Questions on the number of days of paid work undertaken and the number of days of attendance at school or college in the past 4 weeks are also contained within the baseline TOP. People are also asked if they have an acute housing problem and if they are at risk of eviction. Table 3 shows the proportion of people from each ethnic group who reported any paid work, any school or college attendance or answered "Yes" to any of the questions about housing problems and more detailed breakdowns by detailed ethnicity, age and sex can be found in the Appendix. (Tables A.10 to A.12)

Table 3: Number and percentage of individuals reporting paid work, attendance at school or college or housing problems in the previous 4 weeks at TOP baseline assessment by broad ethnic category, 2008/09

Ethnic category	Undertaken paid work		Attended school / college		Acute housing problem		At risk of eviction	
	No.	*%*	*No.*	*%*	*No.*	*%*	*No.*	*%*
White	9390	19.3%	1209	2.5%	10415	21.2%	4782	9.8%
Mixed	273	15.6%	64	3.7%	448	25.3%	212	12.0%
Asian	676	26.2%	79	3.1%	324	12.5%	172	6.6%
Black	317	12.2%	106	4.1%	777	29.5%	373	14.3%
Other	287	24.7%	48	4.1%	267	22.8%	108	9.3%
Missing	317	15.5%	39	1.9%	484	23.2%	269	13.0%

In general, the proportion of people starting treatment who are in paid employment or attending school or college is low but there is variation between ethnic groups, particularly around the proportion doing paid work. People with Asian and "Other" ethnic backgrounds are most likely to be in employment; about a quarter reported some paid employment (26.2% and 24.7% respectively). In contrast, people in the Black group had the lowest rates in both cases: 12.2% had done some paid work in the previous 4 weeks and those of mixed ethnic background reported the second lowest rates. Attendance at school or college was rare for all groups with less than 1 in 20 attending and those in the White category were least likely to have done so (2.5%).

A similar pattern can be seen with respect to housing problems, with acute housing problems being most common and eviction risk highest among the Black groups (29.5% and 14.3% respectively). Asian treatment starters were the least likely to report housing problems; the proportions reporting such problems, 12.5% and 6.6% respectively are less than half the rates in the Black groups.

Information on accommodation need is also collected in NDTMS, identifying people with no fixed abode (NFA) or who report a housing problem. As shown in Table B.2 in the Appendix, 10% of clients starting treatment nationally in 2008/09, who had an accommodation status recorded, said they had no fixed abode, and a further 16% reported an unstable housing situation. Consistent with the TOP data above, there was some variation by ethnicity: in particular, a higher proportion of Black clients reported having a housing problem (13% NFA and 23% with an unstable housing situation) and a much lower proportion of Asian clients reported a housing problem (5% NFA and 12% with an unstable housing situation).

HEALTH AND QUALITY OF LIFE

In the TOP people are asked to rate their psychological health, their physical health and their overall quality of life on a score of 0 to 20 where 0 is 'Poor' and 20 is 'Good'.

Table 4 and Tables A.13 to A.15 show the average (mean) ratings provided at TOP baseline by ethnic group.

Table 4: Mean ratings of psychological and physical health status and overall quality of life at TOP baseline assessment by broad ethnic category, 2008/09

Ethnic category	Psychological health		Physical health		Quality of Life	
	No.	*Mean*	*No.*	*Mean*	*No.*	*Mean*
White	49616	10.4	49614	11.6	49585	10.5
Mixed	1793	10.7	1794	11.9	1793	10.5
Asian	2636	11.2	2635	11.9	2636	11.0
Black	2678	11.0	2674	12.1	2683	10.6
Other	1179	10.7	1177	11.5	1179	10.3
Missing	2116	10.7	2116	11.7	2116	10.4

Reported values for Psychological Health do not vary much across different ethnicity groups, although clients who identify as Black or Asian generally report slightly higher values than clients who identify as White, Mixed or other. Similarly, there does not seem to be any age related pattern to reported psychological health score.

Women consistently report lower values than men for psychological health at treatment start, with the difference between means being as high as 1.6 for clients that identify as Black or Asian.

The group of clients that report the highest psychological health are 18-24 year olds who identify as "White & Black African" (reporting 12.6 out of 20), although this is based on only 37 clients. The lowest reported psychological health comes from 40+ year old clients who identify as "White Irish" (reporting 8.5 out of 20) , based on 198 clients.

Clients who identify as Black report the highest values for physical health across all age groups. At the start of treatment, clients who identify as Black have a mean reported value of 12.1 out of 20, peaking in the 18-24 year old group at 12.8 and dipping to 11.6 in the 40+ year old group.

In general, reported physical health ratings decline as the age at triage increases. The difference between the mean physical health scores of the 18-24 year old group and the 40+ groups ranges between 0.9 (for clients who do not identify as either White, Black, Asian or Mixed) and 1.8 (for clients who identify as White).

The Black group also has the largest disparity between male and female clients' reported physical health values at the start of treatment, with women reporting scores on average 1.4 lower than their male counterparts. For other ethnicity groups the disparity is lower, with women reporting average scores 0.7 - 0.9 points lower than men.

The baseline TOP information suggests that clients who identify as Asian have the highest values for quality of life at the start of treatment, with a mean value of 11.0 on a scale of 0 to 20, with 20 being highest; however the difference in quality of life between the different ethnicity groups is small. In all age groups except 35-39 years, clients who identify as Asian report a higher quality of life. In the 35-39 years group it is clients who identify as Black that report the highest quality of life, narrowly above the other groups.

In all ethnicity groups, reported quality of life is inversely proportional to age, with the youngest age group (18-24 years) reporting scores between 0.7 and 1.2 points higher than the oldest age group (40+ years).

In all five broad ethnicity groups it is men that report a higher quality of life, scoring on average 0.4 to 1.1 points higher than women in the same ethnicity group. Men who identify as Asian report the highest quality of life at treatment start (11.1 out of 20) and women who identify as Black that report the lowest quality of life at treatment start (9.7 out of 20). Breaking down the ethnicity groups further, it is men who identify as Bangladeshi that have the highest average quality of life score (11.5 out of 20) and women that identify as White-Irish that have the lowest (9.3 out of 20), although women that identify as Caribbean report similarly low average scores (9.5 out of 20).

3. Experience of and satisfaction with treatment services

INTRODUCTION

The information in this chapter comes from several sources. These include data from the National Drug Treatment Monitoring System (NDTMS) for 2008/09 and the 2007 user satisfaction survey of Tier 2 and 3 service users in England conducted by the NTA. The 2007 user satisfaction survey of Tier 2 and 3 service users had a particular focus on diversity and obtained responses from over 12,000 users of drug services across England including about 2,000 people from ethnic minority backgrounds (Gordon et al., 2008).

Other data are drawn from a series of reports by Fountain (2009a-e) published by the NTA in 2009. These looked at different ethnic groups in turn and compiled information from a range of reports based on work with community members that took place in three phases between 2000 and 2006 and reflect the situation at that time. It should be noted that, although the work was commissioned by the Department of Health and published by the NTA, the interpretation of the findings and the conclusions reached are those of the authors. Coverage of communities within these reports was extensive, but the nature of the community engagement approach taken makes assessing the representativeness of the samples and the reliability of the findings difficult, which needs to be borne in mind when considering the findings.

One report (Fountain, 2009a) collated the findings of 42 reports on issues surrounding drug use and services among England's Black African communities. In total 4,657 members of these communities originated from 30 different African countries provided data for these reports. Another (Fountain, 2009b) covered Black Caribbean communities and drew on the findings of 34 reports on issues surrounding drug use and services among England's Black Caribbean communities (87%) and those of mixed Black Caribbean and white heritage (13%). A total of 1,863 members of these communities provided data for the 34 reports. The report considering drug use and service issues among South Asian communities in England (Fountain, 2009c) collated the findings of 65 reports. 10,485 members of these communities provided the data for the reports, 48 of which were concerned solely with South Asian, while the remaining 17 included a substantial proportion of members of these communities in their samples. The remaining two reports focused on Chinese and Vietnamese communities (Fountain, 2009d) and on Kurdish, Turkish Cypriot and Turkish populations (Fountain, 2009e) in England. The first of these collated the findings from four reports from community organisations. Three of these are from Chinese community organisations and relate to issues surrounding drug use and drug services among 202 members of England's Chinese populations and one from a Vietnamese community organisation involving 113 community members. The other was based on 9 reports from community organisations involving 1,395 members of the communities providing data for these reports.

KNOWLEDGE OF SERVICES AVAILABLE AND PREFERENCES

Sources of advice

Black African communities suggested that there was general reluctance to seek 'outside' help for any problem. The family were the most cited as a potential source of help. A number of other perceived sources of help were mentioned less often, for example, community organisations and drug services. In some cases they would not approach a service in their local area because of the stigma surrounding drug use in their community. When discussing drug services many believed that 'counselling' was the only treatment option available. Very few appeared to be aware of detoxification or of ameliorative and substitute prescribing.

In the Black Caribbean community study a majority of participants were asked where they would go – or would advise someone to go – if they needed information, advice or help with a drug problem. There was no consensus on this issue, although GPs, friends and a telephone helpline (FRANK was most often mentioned) were cited slightly more often than other sources. Other reported sources of advice were family members, the internet, religious leaders, Yellow Pages, libraries, Citizens Advice Bureaux, magazines, hospitals, Connexions, community centres, youth clubs/workers.

A common response from South Asian community members when asked what they would do if someone in their family used drugs was to send the drug user to the parents' or grandparents' country of origin. GP's were the most frequently-cited source of professional help that community members (particularly women) said they would access if a family member needed help with a drug problem, because "*they understand what it is we need*". However few had gone to their GP for help and those who had done so reported that their GP had not been helpful.

Drug service providers reported that, compared to the white population, South Asians are under-represented as recipients of drug information, advice and treatment services (many adding that this was particularly the case for females), although a few reported a recent increase. Most of the 1,316 lifetime and current drug users were asked if they had ever sought information, advice or treatment from a drug service, but only a small minority had done so.

Of South Asian problematic drug users who had not accessed any drug service, some had made no other attempt to tackle their drug use. The strategy reported most often by the remainder was attempting to stop by willpower alone, and any support they received usually came from friends and/or other drug users.

Compared to the white population, Chinese and Vietnamese people are under-represented as recipients of drug information, advice and treatment services. Indeed, drug services providers in the areas where the studies were conducted reported that they had very few – or no – clients from these communities. GPs were most commonly cited by study participants as the main source for drug information, advice and treatment. They were followed by a wide variety of others – friends, Chinese community organisations, the media, schools and health centres. Drug services were

rarely mentioned as a source of help, and then only by a few heroin and/or crack cocaine users.

The most commonly cited sources of drug information (both perceived and reported) for people of Kurdish, Turkish Cypriot and Turkish origin were **GPs**, **private doctors** and **community organisations**, followed by **friends** and **family.** They were particularly interested in going to private doctors because they had no previous medical records and it was perceived that GP's would inform drugs users' families of their visit.

Barriers to information and receipt of services

The main reasons communities identified for not seeking services or as barriers to access were:

- a lack of awareness of drug services and the help they could provide (Black African, Black Caribbean, Chinese & Vietnamese, Kurdish, Turkish Cypriot & Turkish);

- the perception that the services were not appropriate e.g. not using hard drugs, or they could handle the problem themselves (Black African, Black Caribbean;

- lack of confidence in service confidentiality (Black African).

- a perceived lack of services' cultural understanding (Black Caribbean);

- a lack of consideration on the part of services for the needs of families and carers (Black Caribbean); and

- pride and the avoidance of stigma and stereotyping (Black Caribbean, Chinese).

Four studies asked Kurdish, Turkish Cypriot and Turkish community members if they would approach a drug agency for information, advice or treatment, and the majority said they would. However, the question was asked in a tick-box, yes/no form, and it was clear from the rest of the four studies' findings that a very large majority of their samples were unaware of what drug services were available locally, and of their functions. If the question had been open-ended and asked 'Where would you go to seek help?' it appears unlikely that drug services would have been cited as frequently.

The reports indicate that the stigma of drug use prevents Chinese drug users from revealing a drug problem to their families, as well as from attending a drug information, advice or treatment service based in an area frequented by other Chinese people, because of the possibility of being recognised.

The major barrier to drug information, advice and treatment services facing the Chinese and Vietnamese communities is a lack of knowledge about drugs and, especially, the range of drug services that exist and the help they can offer. This impedes access to information and advice for all members of the communities, including non-problematic drug users who would benefit from information about the substances they use and advice on harm reduction strategies. The lack of awareness also hinders access to treatment for problematic drug users, and means that, if

treatment is accessed, there is an unrealistic expectation of what can be achieved and the process by which it is achieved.

EXPERIENCE OF SERVICES

The studies reported on by Fountain (2009a-e) did not set out to answer the question of whether, once they had entered treatment, people from black and other minority ethnic backgrounds have different experiences and outcomes as a result of their ethnicity. However, information from NDTMS and the NTA user satisfaction survey of Tier 2 and Tier 3 service users can provide some insight into this issue.

Once people access a service, the speed with which a person receives any treatment or other intervention is an important factor in whether they remain engaged. Table 5 and Table B.3 shows the proportion of people who waited less than three weeks to receive their first intervention by ethnic grouping. Nationally, 93% of first interventions were preceded by a wait of less than 3 weeks. This proportion does not appear to vary to any significant degree between different ethnic groups (varying between 93% and 95%).

All people receiving treatment should have a care plan identifying their treatment needs and how these will be met. The user satisfaction survey showed the importance of this with a strong relationship between having a care plan and reporting treatment had a positive impact (Gordon et al., 2008). Table 5 and table B.3 in the appendix show the number of clients of each ethnicity and broader ethnic group starting a new treatment journey in 2008/09 who had a care plan when starting treatment. A small proportion of clients who started a new treatment journey did not commence an intervention. Overall, a huge majority (98%) of clients have a care plan and this proportion does not vary to any significant degree between different ethnic groups (varying between 98% and 99%).

Table 5: Number and percentage of individuals entering treatment who: waited less than 3 weeks for the first intervention; had a care plan; and were effectively engaged in treatment; an the number and percentage of those leaving treatment who had a planned discharge by broad ethnic category, NDTMS 2008/09

Ethnic category	Waited < 3 weeks to 1st intervention		Had a care plan		Effectively engaged in treatment		Planned discharge	
	No.	*%*	*No.*	*%*	*No.*	*%*	*No.*	*%*
White	68807	93%	67252	98%	59486	83%	20764	40%
Mixed	2597	94%	2549	98%	2181	81%	775	39%
Asian	3456	95%	3412	99%	2999	83%	1136	42%
Black	3619	95%	3553	98%	3090	82%	1297	43%
Other	877	94%	868	99%	770	85%	320	44%
Not stated	716	90%	679	95%	614	81%	205	37%
Missing	1129	96%	1045	93%	977	82%	472	46%

Evidence shows that for most drug users engaging in treatment for 12 weeks is sufficient to achieve positive benefits. However, for some types of drugs, or less entrenched problems, a shorter treatment programme might be appropriate. Therefore an overall measure of effective engagement in routine use is either being retained in treatment for 12 weeks or more or having successfully completed a treatment programme in less that 12 weeks. Table 5 and Table B4 in the appendix show the number of clients of each ethnicity and broader ethnic group starting a new treatment journey in 2008/09 who were effectively engaged in treatment. The majority of clients (83%) are considered to be effectively engaged in treatment. This proportion is relatively consistent between different ethnic groups; when broad ethnic categories are considered it varies from 81% for those of mixed ethnicity to 85% of those in the 'Other' category. When more detailed ethnic categories are considered the figures vary from 78% in the 'Other Mixed' ethnic category to 85% in the Indian and 'Other' groups and 86% for the very small group of Chinese treatment entrants.

Another measure of successful engagement is whether people leave treatment in a planned way. Table 5 and Table B4 show the number of clients of each ethnicity and broader ethnic group completing treatment in 2008/09, who had a planned discharge from treatment[1]. Overall, 41% of clients who left treatment in 2008/09 exited in a planned way. This proportion is relatively consistent between different ethnic groups (varying between 39% for those of mixed ethnicity and 44% for those from 'Other' groups when broad ethnic categories are considered). When a more detailed ethnic breakdown is considered people of Bangladeshi and mixed White and Black Caribbean backgrounds have the lowest rate of planned exit (36%) and people of 'Other Asian' (46%), and mixed White & Black African, Indian and Black African (45%) backgrounds the highest. However, it should be noted that, people who drop out of treatment may do so for a range of reasons, some of them positive, for example they feel they are well enough no longer to need treatment, and people who drop out may still have achieved benefits from their treatment.

SATISFACTION WITH SERVICES

Statistics from NDTMS are able to give valuable information about the experiences of people receiving services, particularly as they are collected for everyone in a service not just a sample. However, they give no direct information about how people feel about the treatment they receive. The series of user satisfaction surveys conducted by the NTA provide a continuing opportunity to explore service users' experiences of drug treatment and ensure that their views are taken into account. The surveys were carried out each year between 2005 and 2007. The findings reported here come from the 2007 survey of users of Tier 2 and 3 services (Gordon et al., 2008) in which 12,398 service users completed and returned their questionnaire and which had a specific focus on diversity.

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[1] It should be noted that a small proportion of the remainder were referred on to other agencies so could also be considered to have had a planned exit from treatment.

The vast majority of service users who completed questionnaires were white 88.5%, 2.4% black Caribbean and 3.7% mixed. These proportions are similar to those for all people in treatment as shown by NDTMS 2006/07 figures, except for those who described themselves as having a mixed ethnic background who are slightly overrepresented.

Service users were asked about their long-term goals regarding their use of a range of drugs. Most users of heroin, crack, cocaine, amphetamines and methadone reported wanting to stop using these drugs completely, ranging from 80% of heroin users to 51% of methadone users. Asian service users who used heroin were more likely than any other ethnic group (87.7%) to report that they wanted to stop using the drug. Asian cocaine and crack users were also the most likely ethnic group to report they would like to stop completely but the difference was not statistically significant.

The survey showed that substantial numbers of service users reported that entering drug treatment had made a positive impact on their lives. Most service users reported falls in drug use and crime since starting treatment, and treatment was found to have a positive impact on general health, mental health, housing and relationships with other people. Although not reaching statistical significance, Asian service users were slightly less positive about treatment effects when compared with mixed race, white and black service users.

The majority of service users in the survey agreed that drug service staff and pharmacy staff treated them with respect. Key workers were perceived to be the most respectful group by service users. Though not statistically significant, the highest levels of perceived respect were reported by black service users followed by those from 'other' ethnic backgrounds and then white service users. Lower levels of perceived respect were reported by service users from mixed ethnic background and Asian service users.

There is strong evidence to suggest that respondents were satisfied with the support offered by drug treatment agencies: 91% either agreed or strongly agreed with the statement "You are satisfied with this programme" while 90% either agreed or strongly agreed with the statement "This service meets your needs". Higher overall satisfaction was reported by service users of mixed race, white backgrounds, black backgrounds and those of other ethnicities when compared to Asian service users, who reported lower levels of satisfaction overall.

The studies undertaken by Fountain (2009a-e) provide another perspective on peoples' experiences of treatment services. Although the samples in these studies may not be representative of the populations as a whole, they have the advantage of including people not engaged with services and so give some insight into what might make the services better able to meet everyone's needs.

In the study by Fountain (2009a), around half of Black Africans who had used drug services said experience of the services was positive and their needs had been met. The remainder were dissatisfied, particularly because of a perceived lack of cultural

competence among staff, their *'unfriendliness'*, their *'lack of compassion'* and communication problems because of language.

Although only a minority of those who reported problematic drug use had accessed drug treatment services, nine of the studies in Black Caribbean communities (Fountain, 2009b) talked to drug users who had done so. A large majority of them reported positive experiences. The exception was a sample of those who had a dual diagnosis of drug dependence and mental health problems and who preferred to rely on friends, family and cannabis to cope.

Throughout the project in the South Asian community (Fountain, 2009c), a high proportion of South Asian drug users reported little or no idea of what drug services entailed, nor of how to access them. Many of those who had accessed treatment services therefore may have had unrealistic expectations of what drug treatment could achieve and the process by which it is achieved.

A minority of problematic drug users in the South Asian study had accessed treatment such as counselling, substitute prescribing and detoxification; obtained clean injecting equipment from a needle exchange; or received advice and referral from GPs and street agencies. In a few cases, detoxification treatment had been obtained from a private clinic, paid for by their families and named or unspecified drug services. While some drug users were satisfied with the drug services they received and felt that their needs had been met, more drug users rated services poorly (including those in prison), particularly because of:

- too long waiting times for treatment;
- the lack of follow-up support, particularly after detoxification;
- the services' lack of understanding of South Asian clients' cultural and religious traditions; and
- in a few cases, racism

SUGGESTED AREAS FOR IMPROVEMENT

There have been some creditable efforts by some drug service planners, commissioners and providers to address the needs of drug users from black and minority ethnic populations as clients of mainstream drug services. Despite this the studies by Fountain (2009a-e) suggest that many minority groups are have difficulty accessing drug information, advice and treatment services for a range of reasons.

In the study of Black African communities (Fountain 2009a) it was suggested this may be because there is less illicit drug use and problematic use among Black African communities. However there are proportionately more young people in the Black African communities than in the general population and as these young people grow up they might be more exposed to illicit drugs. Therefore, drug service planners, providers and commissioners and the communities themselves were urged by the study reports to take proactive measures to ensure that the Black African communities have information about drugs, harm reduction and drug services.

Black Caribbean communities in England lacked information about illicit drugs and drug information, advice and treatment services and their function (Fountain, 2009b). It was suggested that to attract black clients, services should recruit more black Caribbean service staff. Also services for crack cocaine users need to be better developed. This is particularly relevant to black Caribbean as they are more likely to use crack cocaine than heroin.

Engagement plays an important role. The majority of the studies reported a range of problems facing members of Black Caribbean communities (where drugs is just one of them). As a result they stressed that partnerships including community members and organisations and a wide range of health and social services are necessary to address this situation.

The drug-related needs of South Asians are, above all, information about drugs and drug services (Fountain 2009c). In addition, their trust in the confidentiality and the cultural competence of drug services must be built up. Engagement between and commitment from local South Asian communities and local drug service planners, commissioners and providers is essential for progress towards meeting these needs.

The study in Chinese and Vietnamese communities (Fountain 2009d) strongly recommended that drug service planners, commissioners and providers should understand and address how the cultures of the Chinese and Vietnamese communities affect access to drug information, advice and treatment services in terms of:

- **Language**, including drug education materials in Vietnamese and the appropriate Chinese dialects, and drug service staff who speak these.

- **The ethnicity of drug service staff**, because Chinese and Vietnamese staff could explain the relevant culture and traditions to other staff, and their presence would encourage members of these communities to access drug services.

- The **diversity** of the Chinese population, which may comprise immigrants from mainland China, Hong Kong, Malaysia, Singapore and Taiwan; British-born Chinese; and children and young people temporarily living in the UK to study. Understanding diversity includes recognising the discreteness of England's relatively small Vietnamese community and that it has a different culture and needs from the Chinese communities.

- **Social exclusion**, particularly of the Vietnamese community, as unemployment, a lack of English language skills and the consequent lack of integration are risk factors for drug use and problematic use.

The community organisations participating in the project stressed that partnerships between them and drug services were the way forward to addressing the barriers to drug service access facing Chinese and Vietnamese people. These partnerships are likely to be 'starting from square one' and face challenges that must be overcome – such as community members' lack of trust in the confidentiality of drug services and a tendency to hide drug problems. Therefore, increased access to drug services by

members of the Chinese and Vietnamese communities is unlikely to be an immediate outcome of partnership working.

The Kurdish, Turkish Cypriot and Turkish communities' drug service needs were categorised as:

- information needs (by far the largest barrier to drug service access was a lack of awareness of drugs, drug services and their functions)
- cultural competence (the various reports suggest there should be more staff that can communicate in the Turkish language and / or written material for this community)
- engagement (e.g. workspace at community centres for a drug worker employed by a local drug service or drug action team (DAT), to run a drop-in and referral service)
- and funding (the majority of the study reports recommended funding for community organisations in order to increase their capacity to assist their communities with a range of drug-related needs e.g. training and support for community organisations, funding for drug workers to be based in community organisations) (Fountain, 2009e).

4. Conclusions

The information gathered in this report illustrates the diversity within English society. Based as it is on information gathered by the National Treatment Agency it relates directly to England only, but many of the broader messages will be relevant to other parts of the UK.

SUMMARY OF MAIN FINDINGS

The patterns of drug problems show clear variation between ethnic groups and hence a focus beyond treatment for opiates is required in response. The growing provision for treatment of stimulants and cannabis will help to address this.

The studies by Fountain (2009a-e) suggest that many minority communities have difficulty accessing drug information, advice and treatment services for a range of reasons. To address this, information provision which is culturally appropriate and makes use of community resources will be necessary and there have been some creditable efforts by some drug service planners, commissioners and providers to address the needs of drug users from black and minority ethnic populations as clients of mainstream drug services. The NTA (2009) publication *Diversity: learning from good practice in the field* considers the issue of information alongside other aspects of service provision for different groups and provides examples of good practice.

The issue of stigma, making it difficult for drug users to acknowledge their use and seek help for fear of others in their community will know and shun them, was raised by several groups. This issue is one that is common throughout the country, although not to the same degree, and needs to be addressed both nationally and within the communities themselves to promote help-seeking and facilitate recovery and rehabilitation.

It appears that once in services, the experiences of people from different ethnic groups are broadly similar. The NTA is committed to fostering diversity and equality throughout the treatment system and carries out differential treatment impact assessments every year. These assessments and the statistics presented in this report suggest there is no apparent ethnic-related differential impact when it comes to treatment itself. While different people respond to treatment differently, service user demographic characteristics do not have a major impact on the treatment provided to them – this also applies to gender and age. The characteristics of the service provider and the main drug of use are more likely to affect how an individual responds to treatment.

People from Asian ethnic groups seem slightly less satisfied with treatment services, and the reasons behind this need to be explored further, although there is some indication that it may relate to different expectations from treatment. Also, as ethnic

groups have different patterns of drug use experiences of services may be affected by the extent to which services are able to provide appropriate treatment for a wider range of drug types.

The wide variety of ethnic communities and their differing service needs provides a challenge for commissioners and providers of treatment services. It will clearly not be appropriate for specialist treatment services for different ethnic groups to be provided everywhere, so mainstream services and their workforce need to develop the knowledge, skills and sensitivity to provide services that meet the needs of everyone who needs them regardless of ethnic background.

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Appendix: Supplementary tables

A. **BASELINE TREATMENT OUTCOME PROFILE DATA BY ETHNICITY, AGE GROUP AND SEX, 2008/09**

Table A1: Number and proportion of individuals reporting opiate use in the 28 days prior to TOP baseline assessment by ethnicity, age group and sex, 2008/09.

	Overall		18-24		25-29		30-34		35-39		40+		Female		Male	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
White British	25485	54.9%	3514	37.8%	5847	56.3%	5948	60.6%	4995	61.7%	5181	58.5%	6841	56.4%	18644	54.3%
White Irish	441	58.4%	37	40.2%	96	64.9%	93	59.2%	104	63.8%	111	56.9%	120	55.8%	321	59.4%
Other White	1259	64.9%	177	59.6%	334	71.2%	274	66.3%	202	64.5%	272	60.6%	221	58.2%	1038	66.5%
White	**27185**	**55.3%**	**3728**	**38.5%**	**6277**	**57.0%**	**6315**	**60.8%**	**5301**	**61.9%**	**5564**	**58.6%**	**7182**	**56.4%**	**20003**	**54.9%**
White & Black Caribbean	423	49.0%	56	32.0%	91	48.4%	85	54.1%	82	52.2%	109	58.3%	125	49.8%	298	48.6%
White & Black African	93	50.0%	14	40.0%	15	34.9%	23	60.5%	19	55.9%	22	61.1%	21	51.2%	72	49.7%
White & Asian	120	48.0%	22	32.8%	31	51.7%	26	57.8%	16	53.3%	25	52.1%	26	52.0%	94	47.0%
Other Mixed	213	46.9%	30	28.8%	55	53.9%	46	50.5%	40	59.7%	42	46.7%	55	44.0%	158	48.0%
Mixed	**849**	**48.4%**	**122**	**32.0%**	**192**	**48.9%**	**180**	**54.4%**	**157**	**54.5%**	**198**	**54.8%**	**227**	**48.6%**	**622**	**48.3%**
Indian	572	74.7%	74	63.2%	185	74.9%	165	80.9%	93	76.2%	55	72.4%	36	66.7%	536	75.3%
Pakistani	505	65.6%	39	30.7%	131	63.0%	129	72.1%	118	81.9%	88	78.6%	25	58.1%	480	66.0%
Bangladeshi	400	81.3%	55	67.1%	149	86.6%	125	83.3%	53	81.5%	18	78.3%	21	77.8%	379	81.5%
Other Asian	368	62.5%	85	64.4%	86	58.5%	77	62.6%	57	67.1%	63	61.8%	26	46.4%	342	64.2%
Asian	**1845**	**70.5%**	**253**	**55.2%**	**551**	**71.2%**	**496**	**75.6%**	**321**	**77.2%**	**224**	**71.6%**	**108**	**60.0%**	**1737**	**71.3%**
Caribbean	483	37.8%	33	21.3%	54	27.7%	95	47.0%	74	37.8%	227	42.8%	87	34.8%	396	38.5%
African	180	35.8%	14	15.4%	30	29.4%	46	44.2%	35	38.0%	55	48.2%	25	33.3%	155	36.2%
Other Black	323	39.1%	12	14.5%	50	38.2%	65	39.6%	53	35.3%	143	48.0%	58	31.9%	265	41.1%
Black	**986**	**37.8%**	**59**	**17.9%**	**134**	**31.3%**	**206**	**43.8%**	**162**	**37.0%**	**425**	**45.1%**	**170**	**33.5%**	**816**	**38.9%**
Chinese	21	61.8%	..	50.0%	7	77.8%	..	50.0%	5	71.4%	..	50.0%	..	50.0%	19	63.3%
Other	435	65.9%	83	65.9%	106	75.2%	90	58.1%	59	65.6%	97	65.5%	62	56.4%	373	67.8%
Not Stated	298	61.8%	40	52.6%	73	59.8%	71	74.7%	42	56.0%	72	63.2%	63	60.6%	235	62.2%
Other	**754**	**64.1%**	*	**60.6%**	**186**	**68.4%**	*	**64.1%**	**106**	**61.6%**	*	**64.2%**	*	**58.3%**	**627**	**65.4%**
Missing	1601	75.8%	197	65.7%	502	77.2%	434	81.0%	257	76.5%	211	72.5%	336	74.0%	1265	76.3%

.. = Number suppressed where there are less than 5 cases to avoid identification; * = total suppressed to protect against disclosure.

Table A2: Number and proportion of individuals reporting crack use in the 28 days prior to TOP baseline assessment by ethnicity, age group and sex, 2008/09.

	Overall		18-24		25-29		30-34		35-39		40+		Female		Male	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
White British	14097	30.6%	2078	22.5%	3236	31.3%	3234	33.2%	2790	34.7%	2759	31.4%	4027	33.4%	10070	29.6%
White Irish	354	47.3%	28	31.1%	70	47.6%	74	47.4%	90	55.9%	92	47.2%	99	46.3%	255	47.7%
Other White	705	36.7%	81	27.8%	174	37.3%	158	38.6%	125	40.3%	167	37.4%	128	34.0%	577	37.3%
White	**15156**	**31.1%**	**2187**	**22.7%**	**3480**	**31.8%**	**3466**	**33.6%**	**3005**	**35.3%**	**3018**	**32.1%**	**4254**	**33.6%**	**10902**	**30.2%**
White & Black Caribbean	402	46.5%	43	24.6%	86	45.7%	82	52.6%	82	52.6%	109	57.4%	121	48.2%	281	45.8%
White & Black African	73	39.2%	10	28.6%	12	27.9%	15	39.5%	17	50.0%	19	52.8%	14	34.1%	59	40.7%
White & Asian	75	30.2%	16	23.9%	21	35.6%	16	35.6%	10	33.3%	12	25.5%	18	36.0%	57	28.8%
Other Mixed	176	38.7%	30	28.6%	39	37.9%	36	39.1%	29	42.6%	42	48.3%	57	46.0%	119	36.0%
Mixed	**726**	**41.4%**	**99**	**25.9%**	**158**	**40.2%**	**149**	**45.0%**	**138**	**47.9%**	**182**	**50.6%**	**210**	**45.1%**	**516**	**40.1%**
Indian	273	36.4%	31	26.7%	93	38.6%	72	36.2%	49	41.2%	28	36.8%	20	37.7%	253	36.2%
Pakistani	274	36.0%	19	14.8%	77	37.4%	74	41.1%	63	45.3%	41	37.6%	11	25.6%	263	36.6%
Bangladeshi	242	49.9%	34	42.0%	88	51.8%	79	54.1%	32	49.2%	9	39.1%	13	50.0%	229	49.9%
Other Asian	192	32.9%	44	33.3%	57	39.0%	36	30.0%	30	36.1%	25	24.5%	15	26.8%	177	33.6%
Asian	**981**	**38.0%**	**128**	**28.0%**	**315**	**41.3%**	**261**	**40.5%**	**174**	**42.9%**	**103**	**33.2%**	**59**	**33.1%**	**922**	**38.4%**
Caribbean	690	54.0%	48	31.2%	79	40.7%	115	57.2%	103	52.6%	345	64.8%	148	58.7%	542	52.9%
African	211	41.9%	14	15.6%	42	40.8%	51	49.5%	44	46.8%	60	52.6%	32	42.7%	179	41.7%
Other Black	458	55.2%	18	21.4%	56	43.1%	92	55.4%	83	54.6%	209	70.1%	101	55.5%	357	55.1%
Black	**1359**	**52.0%**	**80**	**24.4%**	**177**	**41.5%**	**258**	**54.9%**	**230**	**52.0%**	**614**	**65.0%**	**281**	**55.2%**	**1078**	**51.3%**
Chinese	13	38.2%	..	33.3%	..	33.3%	..	50.0%	..	14.3%	..	66.7%	0	0.0%	13	43.3%
Other	243	37.0%	38	29.9%	54	38.8%	55	35.5%	41	46.1%	55	37.4%	41	37.3%	202	36.9%
Not Stated	189	39.6%	25	32.9%	40	33.1%	38	41.3%	37	50.0%	49	43.0%	39	37.5%	150	40.2%
Other	**445**	**38.1%**	*****	**31.1%**	*****	**36.1%**	*****	**37.9%**	*****	**46.5%**	*****	**40.4%**	**80**	**36.7%**	**365**	**38.4%**
Missing	973	46.6%	146	48.8%	307	47.4%	242	46.0%	152	45.9%	126	44.2%	214	47.9%	759	46.3%

.. = Number suppressed where there are less than 5 cases to avoid identification; * = total suppressed to protect against disclosure.

Table A3: Number and proportion of individuals reporting cocaine use in the 28 days prior to TOP baseline assessment by ethnicity, age group and sex, 2008/09.

	Overall N	Overall %	18-24 N	18-24 %	25-29 N	25-29 %	30-34 N	30-34 %	35-39 N	35-39 %	40+ N	40+ %	Female N	Female %	Male N	Male %
White British	7642	16.7%	2551	27.6%	1835	17.9%	1379	14.3%	938	11.8%	939	10.8%	1508	12.6%	6134	18.1%
White Irish	111	14.9%	14	15.6%	27	18.6%	35	22.3%	13	8.1%	22	11.5%	26	12.2%	85	16.0%
Other White	217	11.5%	45	15.7%	48	10.4%	38	9.5%	36	11.8%	50	11.4%	44	11.8%	173	11.4%
White	**7970**	**16.4%**	**2610**	**27.1%**	**1910**	**17.6%**	**1452**	**14.2%**	**987**	**11.7%**	**1011**	**10.8%**	**1578**	**12.6%**	**6392**	**17.8%**
White & Black Caribbean	146	17.1%	40	22.9%	39	21.0%	26	16.8%	19	12.3%	22	11.9%	35	14.3%	111	18.2%
White & Black African	26	14.1%	9	26.5%	9	20.9%	5	13.2%	..	6.1%	..	2.8%	..	9.8%	22	15.4%
White & Asian	46	18.6%	17	25.8%	13	22.0%	7	15.6%	5	16.7%	..	8.5%	8	16.3%	38	19.2%
Other Mixed	73	16.1%	26	24.5%	20	19.0%	11	12.4%	..	4.5%	13	14.9%	16	12.9%	57	17.3%
Mixed	**291**	**16.7%**	**92**	**24.1%**	**81**	**20.6%**	**49**	**15.0%**	**29**	**10.2%**	**40**	**11.3%**	*	**13.7%**	**228**	**17.8%**
Indian	64	8.6%	15	13.0%	27	11.3%	10	5.2%	9	7.8%	..	3.9%	..	5.7%	61	8.9%
Pakistani	87	11.6%	34	26.8%	23	11.3%	16	9.1%	11	8.1%	..	2.8%	..	9.5%	83	11.8%
Bangladeshi	28	5.9%	5	6.3%	9	5.4%	8	5.6%	..	6.5%	..	8.7%	..	4.0%	27	6.0%
Other Asian	69	12.0%	20	15.2%	26	17.8%	16	13.4%	..	5.0%	..	3.0%	9	16.1%	60	11.5%
Asian	**248**	**9.8%**	**74**	**16.3%**	**85**	**11.3%**	**50**	**7.9%**	**28**	**7.1%**	**11**	**3.6%**	**17**	**9.7%**	**231**	**9.8%**
Caribbean	187	14.8%	31	19.6%	41	21.5%	32	16.2%	27	14.1%	56	10.7%	18	7.2%	169	16.7%
African	65	13.0%	21	23.1%	23	22.5%	9	8.8%	8	8.7%	..	3.5%	12	16.2%	53	12.4%
Other Black	85	10.4%	13	15.3%	16	12.3%	24	14.7%	15	10.1%	17	5.9%	12	6.7%	73	11.5%
Black	**337**	**13.1%**	**65**	**19.5%**	**80**	**18.9%**	**65**	**14.0%**	**50**	**11.5%**	*	**8.3%**	**42**	**8.3%**	**295**	**14.2%**
Chinese	..	12.5%	0	0.0%	0	0.0%	..	16.7%	..	28.6%	..	16.7%	..	25.0%	..	10.7%
Other	51	7.8%	12	9.5%	13	9.6%	11	7.2%	6	6.7%	9	6.1%	12	10.9%	39	7.2%
Not Stated	64	13.7%	20	26.3%	21	17.6%	8	9.0%	9	12.5%	6	5.4%	10	9.9%	54	14.7%
Other	*	**10.3%**	**32**	**15.4%**	**34**	**13.0%**	*	**8.1%**	*	**10.1%**	*	**6.0%**	*	**10.7%**	*	**10.3%**
Missing	210	10.3%	61	21.2%	59	9.4%	43	8.3%	32	9.8%	15	5.4%	34	7.9%	176	11.0%

.. = Number suppressed where there are less than 5 cases to avoid identification; * = total suppressed to protect against disclosure.

Table A4: Number and proportion of individuals reporting amphetamine use in the 28 days prior to TOP baseline assessment by ethnicity, age group and sex, 2008/09.

	Overall		18-24		25-29		30-34		35-39		40+		Female		Male	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
White British	3250	7.1%	745	8.1%	630	6.2%	671	7.0%	559	7.0%	645	7.4%	973	8.2%	2277	6.8%
White Irish	35	4.7%	..	4.4%	6	4.1%	10	6.5%	4	2.5%	11	5.8%	11	5.2%	24	4.5%
Other White	55	2.9%	11	3.9%	15	3.2%	10	2.5%	5	1.6%	14	3.2%	12	3.2%	43	2.8%
White	**3340**	**6.9%**	*****	**8.0%**	**651**	**6.0%**	**691**	**6.8%**	**568**	**6.7%**	**670**	**7.2%**	**996**	**8.0%**	**2344**	**6.6%**
White & Black Caribbean	23	2.7%	..	1.7%	..	2.2%	8	5.2%	..	2.0%	5	2.7%	9	3.7%	14	2.3%
White & Black African	5	2.7%	..	5.9%	..	2.4%	..	2.6%	..	3.0%	0	0.0%	..	4.9%	..	2.1%
White & Asian	13	5.3%	..	6.1%	..	1.7%	..	6.7%	..	3.3%	..	8.5%	7	14.3%	6	3.0%
Other Mixed	17	3.8%	6	5.8%	7	6.9%	..	1.1%	0	0.0%	..	3.5%	8	6.5%	9	2.8%
Mixed	**58**	**3.4%**	**15**	**4.0%**	**13**	**3.4%**	**13**	**4.0%**	**5**	**1.8%**	**12**	**3.4%**	*****	**5.7%**	*****	**2.5%**
Indian	8	1.1%	0	0.0%	..	0.8%	..	0.5%	..	2.6%	..	2.6%	0	0.0%	8	1.2%
Pakistani	..	0.5%	..	0.8%	..	1.0%	..	0.6%	0	0.0%	0	0.0%	0	0.0%	..	0.6%
Bangladeshi	5	1.1%	0	0.0%	0	0.0%	..	2.1%	..	3.2%	0	0.0%	0	0.0%	5	1.1%
Other Asian	..	0.3%	..	1.5%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	..	0.4%
Asian	**19**	**0.8%**	**..**	**0.7%**	**..**	**0.5%**	**5**	**0.8%**	**5**	**1.3%**	**..**	**0.7%**	**0**	**0.0%**	**19**	**0.8%**
Caribbean	15	1.2%	..	1.3%	..	1.0%	5	2.5%	..	1.6%	..	0.6%	..	0.8%	13	1.3%
African	..	0.8%	0	0.0%	..	2.0%	..	1.0%	..	1.1%	0	0.0%	..	1.4%	..	0.7%
Other Black	11	1.4%	0	0.0%	..	1.6%	..	1.2%	..	2.0%	..	1.4%	0	0.0%	11	1.7%
Black	*****	**1.2%**	**..**	**0.6%**	**6**	**1.4%**	**8**	**1.7%**	**7**	**1.6%**	**7**	**0.8%**	**..**	**0.6%**	*****	**1.3%**
Chinese	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Other	9	1.4%	..	3.2%	..	1.5%	0	0.0%	..	1.1%	..	1.4%	..	2.8%	6	1.1%
Not Stated	19	4.1%	..	2.7%	7	5.9%	..	2.2%	5	6.9%	..	2.7%	..	1.0%	18	4.9%
Other	**28**	**2.4%**	**6**	**2.9%**	*****	**3.4%**	**..**	**0.8%**	*****	**3.6%**	**5**	**1.9%**	**..**	**1.9%**	**24**	**2.6%**
Missing	67	3.3%	13	4.5%	19	3.0%	17	3.3%	8	2.5%	10	3.6%	18	4.2%	49	3.1%

.. = Number suppressed where there are less than 5 cases to avoid identification; * = total suppressed to protect against disclosure.

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Table A5: Number and proportion of individuals reporting cannabis use in the 28 days prior to TOP baseline assessment by ethnicity, age group and sex, 2008/09.

	Overall		18-24		25-29		30-34		35-39		40+		Female		Male	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
White British	15838	34.3%	4660	49.9%	3493	33.9%	2966	30.6%	2345	29.2%	2374	27.1%	3473	28.9%	12365	36.3%
White Irish	243	32.4%	47	50.5%	46	31.5%	44	28.2%	46	28.2%	60	31.1%	60	28.2%	183	34.0%
Other White	526	27.7%	105	36.5%	131	28.2%	101	25.3%	87	28.3%	102	23.2%	101	27.0%	425	27.9%
White	**16607**	**34.1%**	**4812**	**49.5%**	**3670**	**33.6%**	**3111**	**30.3%**	**2478**	**29.2%**	**2536**	**27.0%**	**4812**	**49.5%**	**3670**	**33.6%**
White & Black Caribbean	363	42.0%	106	58.9%	90	47.9%	69	44.2%	51	32.9%	47	25.4%	95	38.5%	268	43.4%
White & Black African	71	38.2%	22	61.1%	16	37.2%	6	15.8%	12	36.4%	15	41.7%	11	26.8%	60	41.4%
White & Asian	105	42.2%	39	58.2%	23	39.0%	16	35.6%	12	38.7%	15	31.9%	19	38.8%	86	43.0%
Other Mixed	185	40.4%	64	59.8%	37	35.9%	34	37.0%	22	32.4%	28	31.8%	44	35.5%	141	42.2%
Mixed	**724**	**41.2%**	**231**	**59.2%**	**166**	**42.2%**	**125**	**37.8%**	**97**	**33.8%**	**105**	**29.5%**	**231**	**59.2%**	**166**	**42.2%**
Indian	174	23.2%	38	32.8%	47	19.6%	45	22.8%	30	25.0%	14	18.4%	17	30.9%	157	22.6%
Pakistani	247	32.4%	78	59.1%	72	35.0%	42	23.7%	35	25.2%	20	18.3%	14	32.6%	233	32.4%
Bangladeshi	126	26.5%	36	44.4%	43	25.9%	30	20.8%	13	21.0%	..	17.4%	5	20.0%	121	26.8%
Other Asian	161	28.0%	50	37.9%	45	30.8%	30	25.4%	17	21.3%	19	19.2%	20	36.4%	141	27.1%
Asian	**708**	**27.6%**	**202**	**43.8%**	**207**	**27.3%**	**147**	**23.1%**	**95**	**23.7%**	***	**18.6%**	**202**	**43.8%**	**207**	**27.3%**
Caribbean	577	45.1%	111	66.9%	103	52.0%	83	41.9%	71	36.8%	209	39.8%	108	42.4%	469	45.8%
African	209	41.5%	67	69.8%	44	43.6%	36	35.3%	31	33.7%	31	27.4%	25	32.9%	184	43.0%
Other Black	343	41.3%	58	63.7%	61	46.6%	69	41.6%	48	32.2%	107	36.4%	71	38.8%	272	42.0%
Black	**1129**	**43.2%**	**236**	**66.9%**	**208**	**48.4%**	**188**	**40.3%**	**150**	**34.6%**	**347**	**37.2%**	**236**	**66.9%**	**208**	**48.4%**
Chinese	9	28.1%	..	50.0%	..	28.6%	..	16.7%	..	14.3%	..	33.3%	..	50.0%	7	25.0%
Other	195	29.9%	42	33.1%	42	30.7%	48	31.4%	26	29.2%	37	25.2%	33	30.3%	162	29.8%
Not Stated	148	31.4%	32	41.6%	36	30.3%	29	32.2%	17	23.3%	34	30.1%	24	23.5%	124	33.5%
Other	**352**	**30.4%**	***	**36.7%**	***	**30.4%**	***	**31.3%**	***	**26.0%**	***	**27.4%**	***	**36.7%**	**80**	**30.4%**
Missing	658	32.3%	109	37.2%	209	33.2%	148	28.7%	100	30.9%	92	33.2%	120	27.6%	538	33.5%

.. = Number suppressed where there are less than 5 cases to avoid identification; * = total suppressed to protect against disclosure.

Table A6: Number and proportion of individuals reporting other drug use in the 28 days prior to TOP baseline assessment by ethnicity, age group and sex, 2008/09.

	Overall		18-24		25-29		30-34		35-39		40+		Female		Male	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
White British	8072	17.8%	1457	16.0%	1836	18.1%	1764	18.5%	1420	18.0%	1595	18.5%	2269	19.2%	5803	17.3%
White Irish	124	16.9%	10	11.4%	19	13.4%	33	21.6%	22	13.7%	40	20.9%	40	19.2%	84	15.9%
Other White	309	16.5%	33	11.7%	59	12.9%	65	16.6%	59	19.5%	93	21.4%	73	19.7%	236	15.8%
White	**8505**	**17.8%**	**1500**	**15.9%**	**1914**	**17.8%**	**1862**	**18.4%**	**1501**	**17.9%**	**1728**	**18.7%**	**2382**	**19.2%**	**6123**	**17.3%**
White & Black Caribbean	94	11.6%	12	7.3%	20	11.6%	22	14.5%	20	13.8%	20	11.2%	32	13.4%	62	10.8%
White & Black African	19	10.4%	6	17.1%	..	9.5%	..	7.9%	..	12.5%	..	5.6%	..	7.3%	16	11.3%
White & Asian	35	14.2%	10	15.4%	5	8.5%	6	13.3%	3	10.0%	11	23.4%	10	20.4%	25	12.7%
Other Mixed	67	15.1%	17	15.9%	9	8.9%	22	25.3%	8	11.9%	11	13.3%	19	15.3%	48	15.0%
Mixed	**215**	**12.7%**	**45**	**12.1%**	*****	**10.2%**	*****	**16.5%**	*****	**12.8%**	*****	**12.8%**	*****	**14.2%**	**151**	**12.2%**
Indian	54	7.3%	..	2.6%	13	5.4%	21	10.8%	10	8.5%	7	9.2%	5	9.6%	49	7.1%
Pakistani	85	11.5%	9	7.2%	22	10.9%	16	9.3%	19	14.1%	19	17.6%	6	14.6%	79	11.3%
Bangladeshi	42	8.9%	9	11.3%	17	10.3%	8	5.7%	5	8.1%	..	13.0%	..	12.0%	39	8.7%
Other Asian	64	11.2%	10	7.7%	10	6.9%	11	9.5%	15	18.1%	18	18.4%	..	3.6%	62	12.0%
Asian	**245**	**9.7%**	*****	**6.9%**	**62**	**8.3%**	**56**	**9.0%**	**49**	**12.3%**	*****	**15.4%**	**16**	**9.2%**	**229**	**9.7%**
Caribbean	85	6.8%	..	2.6%	15	7.9%	25	12.7%	13	6.9%	28	5.5%	17	6.9%	68	6.8%
African	62	12.6%	10	11.2%	14	13.9%	10	10.0%	16	17.4%	12	10.8%	12	16.2%	50	11.9%
Other Black	63	7.8%	8	9.8%	12	9.3%	16	9.8%	10	6.8%	17	5.9%	6	3.4%	57	9.0%
Black	**210**	**8.2%**	*****	**6.7%**	**41**	**9.8%**	**51**	**11.1%**	**39**	**9.1%**	**57**	**6.3%**	**35**	**7.0%**	**175**	**8.5%**
Chinese	..	12.5%	0	0.0%	0	0.0%	..	16.7%	0	0.0%	..	50.0%	0	0.0%	..	14.3%
Other	97	15.2%	15	12.2%	12	8.9%	28	18.7%	18	20.5%	24	16.7%	18	16.8%	79	14.8%
Not Stated	72	16.0%	14	18.9%	27	23.3%	5	5.8%	11	15.9%	15	14.4%	15	15.6%	57	16.1%
Other	*****	**15.4%**	**29**	**14.3%**	**39**	**15.1%**	*****	**14.0%**	**29**	**17.7%**	*****	**16.5%**	**33**	**15.9%**	*****	**15.3%**
Missing	366	18.1%	38	13.3%	108	17.3%	105	20.5%	68	21.1%	47	17.0%	85	19.8%	281	17.7%

.. = Number suppressed where there are less than 5 cases to avoid identification; * = total suppressed to protect against disclosure.

Table A7: Number and proportion of individuals reporting alcohol use in the 28 days prior to TOP baseline assessment by ethnicity, age group and sex, 2008/09.

	Overall		18-24		25-29		30-34		35-39		40+		Female		Male	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
White British	23072	49.8%	5234	56.0%	5117	49.4%	4761	48.8%	3896	48.3%	4064	46.2%	5316	44.0%	17756	51.9%
White Irish	361	48.2%	45	49.5%	62	42.5%	85	54.1%	80	49.4%	89	46.1%	96	45.1%	265	49.4%
Other White	726	38.1%	114	39.4%	170	36.7%	157	38.7%	119	38.6%	166	37.6%	147	39.2%	579	37.8%
White	**24159**	**49.3%**	**5393**	**55.4%**	**5349**	**48.8%**	**5003**	**48.5%**	**4095**	**48.0%**	**4319**	**45.8%**	**5559**	**43.9%**	**18600**	**51.2%**
White & Black Caribbean	436	50.3%	92	52.0%	101	54.0%	74	47.4%	80	50.6%	89	47.3%	121	48.4%	315	51.1%
White & Black African	79	42.5%	17	50.0%	14	31.8%	15	39.5%	15	45.5%	18	48.6%	18	43.9%	61	42.1%
White & Asian	127	51.0%	38	56.7%	31	51.7%	21	46.7%	11	36.7%	26	55.3%	29	59.2%	98	49.0%
Other Mixed	198	43.6%	51	48.1%	39	37.9%	34	37.8%	31	45.6%	43	49.4%	56	44.8%	142	43.2%
Mixed	**840**	**47.9%**	**198**	**51.6%**	**185**	**47.0%**	**144**	**43.8%**	**137**	**47.4%**	**176**	**49.0%**	**224**	**48.2%**	**616**	**47.8%**
Indian	324	43.3%	51	44.3%	103	42.9%	81	40.7%	56	47.1%	33	43.4%	19	35.8%	305	43.8%
Pakistani	216	28.6%	50	39.1%	65	31.7%	50	28.2%	26	18.8%	25	23.1%	12	27.9%	204	28.6%
Bangladeshi	129	26.8%	30	37.0%	50	29.6%	29	20.0%	16	25.4%	..	17.4%	7	28.0%	122	26.8%
Other Asian	204	35.2%	40	30.5%	56	38.1%	43	35.8%	27	33.8%	38	37.3%	15	26.8%	189	36.1%
Asian	**873**	**34.0%**	**171**	**37.6%**	**274**	**36.0%**	**203**	**31.7%**	**125**	**31.3%**	*****	**32.4%**	**53**	**29.9%**	**820**	**34.3%**
Caribbean	633	49.8%	81	50.6%	96	49.5%	103	51.8%	90	45.9%	263	50.4%	127	50.6%	506	49.6%
African	197	39.0%	42	45.2%	38	37.3%	41	39.8%	31	33.0%	45	39.8%	29	39.2%	168	39.0%
Other Black	407	48.9%	43	48.9%	71	53.4%	75	45.5%	71	47.0%	147	49.8%	93	50.0%	314	48.6%
Black	**1237**	**47.4%**	**166**	**48.7%**	**205**	**47.8%**	**219**	**46.9%**	**192**	**43.5%**	**455**	**48.9%**	**249**	**48.7%**	**988**	**47.1%**
Chinese	12	36.4%	..	50.0%	..	37.5%	..	33.3%	..	42.9%	..	16.7%	..	50.0%	10	34.5%
Other	228	34.8%	44	35.2%	51	36.7%	52	33.8%	37	41.1%	44	29.7%	34	30.6%	194	35.6%
Not Stated	217	45.6%	38	50.0%	60	49.6%	39	42.4%	35	47.9%	45	39.5%	39	37.5%	178	47.8%
Other	**457**	**39.2%**	*****	**41.1%**	*****	**42.5%**	*****	**36.9%**	*****	**44.1%**	*****	**33.6%**	*****	**34.2%**	**382**	**40.4%**
Missing	943	45.8%	155	53.3%	280	44.6%	237	45.1%	153	46.2%	118	41.8%	188	42.9%	755	46.6%

.. = Number suppressed where there are less than 5 cases to avoid identification; * = total suppressed to protect against disclosure.

Table A8: Number and proportion of individuals reporting injecting in the 28 days prior to TOP baseline assessment by ethnicity, age group and sex, 2008/09.

	Overall		18-24		25-29		30-34		35-39		40+		Female		Male	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
White British	10939	23.7%	1519	16.4%	2600	25.2%	2629	27.1%	2133	26.5%	2058	23.4%	2532	21.0%	8407	24.7%
White Irish	151	20.4%	5	5.7%	31	21.7%	34	21.7%	41	25.3%	40	20.8%	30	14.2%	121	22.8%
Other White	536	27.9%	76	26.2%	143	30.6%	133	32.5%	85	27.3%	99	22.2%	70	18.6%	466	30.1%
White	**11626**	**23.8%**	**1600**	**16.6%**	**2774**	**25.4%**	**2796**	**27.2%**	**2259**	**26.5%**	**2197**	**23.3%**	**2632**	**20.9%**	**8994**	**24.9%**
White & Black Caribbean	113	13.2%	14	8.0%	27	14.7%	27	17.2%	22	14.1%	23	12.3%	31	12.4%	82	13.5%
White & Black African	23	12.4%	..	8.8%	..	4.5%	..	10.5%	9	27.3%	5	13.9%	..	9.8%	19	13.2%
White & Asian	38	15.4%	7	10.6%	10	17.2%	11	24.4%	..	10.0%	7	14.9%	7	14.3%	31	15.7%
Other Mixed	73	16.1%	11	10.6%	19	18.4%	15	16.7%	12	17.6%	16	18.0%	18	14.4%	55	16.7%
Mixed	**247**	**14.2%**	*	**9.3%**	*	**14.9%**	*	**17.3%**	*	**16.0%**	**51**	**14.2%**	*	**12.9%**	**187**	**14.6%**
Indian	51	6.9%	..	3.5%	15	6.3%	11	5.7%	9	7.6%	12	15.6%	..	7.5%	47	6.8%
Pakistani	40	5.3%	..	3.1%	9	4.4%	11	6.3%	9	6.6%	7	6.5%	..	4.9%	38	5.3%
Bangladeshi	15	3.2%	0	0.0%	6	3.6%	6	4.2%	..	3.2%	..	4.3%	0	0.0%	15	3.3%
Other Asian	33	5.7%	..	2.3%	6	4.1%	5	4.1%	10	12.3%	9	8.9%	..	5.5%	30	5.7%
Asian	**139**	**5.5%**	**11**	**2.4%**	**36**	**4.8%**	**33**	**5.2%**	*	**7.5%**	*	**9.4%**	**9**	**5.2%**	**130**	**5.5%**
Caribbean	54	4.3%	..	2.6%	8	4.2%	11	5.6%	15	7.9%	16	3.1%	16	6.4%	38	3.8%
African	25	5.1%	..	4.5%	..	2.0%	6	5.9%	5	5.6%	8	7.1%	..	5.6%	21	5.0%
Other Black	66	8.0%	5	5.7%	9	7.0%	13	7.9%	15	10.1%	24	8.2%	15	8.1%	51	8.0%
Black	**145**	**5.7%**	**13**	**4.0%**	*	**4.6%**	**30**	**6.5%**	**35**	**8.2%**	**48**	**5.2%**	*	**6.9%**	**110**	**5.4%**
Chinese	5	16.1%	0	0.0%	0	0.0%	..	33.3%	..	14.3%	..	40.0%	..	25.0%	..	14.8%
Other	109	16.7%	22	17.3%	29	21.2%	28	18.3%	13	14.6%	17	11.6%	16	14.8%	93	17.1%
Not Stated	111	23.4%	16	21.6%	34	28.3%	28	30.1%	10	13.5%	23	20.4%	22	21.2%	89	24.1%
Other	**225**	**19.4%**	**38**	**18.4%**	**63**	**23.9%**	*	**23.0%**	*	**14.1%**	*	**15.8%**	*	**18.1%**	*	**19.7%**
Missing	550	26.8%	65	22.4%	190	30.1%	143	27.5%	87	26.4%	65	23.1%	84	19.2%	466	28.9%

.. = Number suppressed where there are less than 5 cases to avoid identification; * = total suppressed to protect against disclosure.

Table A9: Number and proportion of individuals who had injected drugs in the 28 days prior to TOP baseline assessment reporting needle or syringe sharing by ethnicity, age group and sex, 2008/09.

	Overall		18-24		25-29		30-34		35-39		40+		Female		Male	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
White British	2071	18.9%	387	25.5%	509	19.6%	474	18.0%	345	16.2%	356	17.3%	599	23.7%	1472	17.5%
White Irish	38	25.2%	0	0.0%	8	25.8%	5	14.7%	13	31.7%	12	30.0%	6	20.0%	32	26.5%
Other White	88	16.4%	16	21.1%	24	16.8%	20	15.0%	16	18.8%	12	12.1%	13	18.6%	75	16.1%
White	**2197**	**18.9%**	**403**	**25.2%**	**541**	**19.5%**	**499**	**17.8%**	**374**	**16.6%**	**380**	**17.3%**	**618**	**23.5%**	**1579**	**17.6%**
White & Black Caribbean	29	25.7%	5	35.7%	..	7.4%	9	33.3%	8	36.4%	5	21.7%	6	19.4%	23	28.1%
White & Black African	6	26.1%	..	33.3%	0	0.0%	..	75.0%	..	11.1%	..	20.0%	0	0.0%	6	31.6%
White & Asian	..	10.5%	0	0.0%	..	20.0%	..	18.2%	0	0.0%	0	0.0%	..	28.6%	..	6.5%
Other Mixed	18	24.7%	..	27.3%	6	31.6%	..	26.7%	..	25.0%	..	12.5%	6	33.3%	12	21.8%
Mixed	*****	**23.1%**	**9**	**25.7%**	**10**	**17.2%**	**18**	**31.6%**	**12**	**26.1%**	**8**	**15.7%**	*****	**23.3%**	*****	**23.0%**
Indian	6	11.8%	0	0.0%	..	13.3%	..	27.3%	0	0.0%	..	8.3%	0	0.0%	6	12.8%
Pakistani	5	12.5%	..	25.0%	..	22.2%	0	0.0%	..	11.1%	..	14.3%	..	50.0%	..	10.5%
Bangladeshi	..	6.7%	0	0.0%	..	16.7%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	..	6.7%
Other Asian	7	21.2%	0	0.0%	..	16.7%	..	40.0%	..	10.0%	..	33.3%	..	33.3%	6	20.0%
Asian	*****	**13.7%**	**..**	**9.1%**	**6**	**16.7%**	**5**	**15.2%**	**..**	**6.7%**	**5**	**17.2%**	**..**	**22.2%**	**17**	**13.1%**
Caribbean	15	27.8%	..	25.0%	..	25.0%	..	18.2%	..	26.7%	6	37.5%	..	18.8%	12	31.6%
African	..	12.0%	0	0.0%	..	50.0%	..	16.7%	0	0.0%	..	12.5%	..	25.0%	..	9.5%
Other Black	16	24.2%	0	0.0%	..	33.3%	6	46.2%	..	20.0%	..	16.7%	5	33.3%	11	21.6%
Black	*****	**23.4%**	**..**	**7.7%**	**6**	**31.6%**	**9**	**30.0%**	**7**	**20.0%**	**11**	**22.9%**	**9**	**25.7%**	*****	**22.7%**
Chinese	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Other	13	11.9%	..	13.6%	..	10.3%	..	14.3%	..	23.1%	0	0.0%	0	0.0%	13	14.0%
Not Stated	28	25.2%	..	25.0%	11	32.4%	8	28.6%	0	0.0%	5	21.7%	11	50.0%	17	19.1%
Other	**41**	**18.2%**	**7**	**18.4%**	*****	**22.2%**	*****	**20.7%**	**..**	**12.5%**	**5**	**11.9%**	**11**	**28.2%**	**30**	**16.1%**
Missing	109	19.8%	18	27.7%	30	15.8%	25	17.5%	22	25.3%	14	21.5%	20	23.8%	89	19.1%

.. = Number suppressed where there are less than 5 cases to avoid identification; * = total suppressed to protect against disclosure.

Table A10: Number and proportion of individuals reporting paid work in the 28 days prior to TOP baseline assessment by ethnicity, age group and sex, 2008/09.

	Overall		18-24		25-29		30-34		35-39		40+		Female		Male	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
White British	8659	18.9%	2073	22.4%	2069	20.2%	1802	18.6%	1367	17.1%	1348	15.4%	1546	12.9%	7113	20.9%
White Irish	108	14.6%	12	13.5%	26	18.1%	28	17.9%	23	14.3%	19	9.9%	24	11.4%	84	15.8%
Other White	623	32.5%	119	40.5%	178	38.3%	153	37.4%	89	29.1%	84	19.0%	88	23.4%	535	34.7%
White	**9390**	**19.3%**	**2204**	**22.9%**	**2273**	**20.9%**	**1983**	**19.3%**	**1479**	**17.5%**	**1451**	**15.5%**	**1658**	**13.2%**	**7732**	**21.5%**
White & Black Caribbean	110	12.8%	34	19.2%	30	16.1%	17	11.0%	17	11.0%	12	6.5%	32	13.0%	78	12.7%
White & Black African	26	13.9%	5	14.3%	8	18.2%	5	13.2%	..	9.1%	5	13.5%	..	7.3%	23	15.8%
White & Asian	50	20.2%	14	21.2%	14	23.7%	10	22.2%	..	12.9%	8	17.0%	7	14.3%	43	21.6%
Other Mixed	87	19.1%	17	16.2%	20	19.2%	27	29.7%	12	17.6%	11	12.6%	13	10.4%	74	22.4%
Mixed	**273**	**15.6%**	**70**	**18.3%**	**72**	**18.3%**	**59**	**17.9%**	**36**	**12.5%**	**36**	**10.1%**	*	**11.9%**	**218**	**16.9%**
Indian	235	31.2%	38	32.5%	79	32.5%	70	35.2%	32	27.4%	16	20.8%	..	7.4%	231	33.0%
Pakistani	157	20.5%	31	23.5%	50	23.8%	39	22.0%	21	15.2%	16	14.8%	9	21.4%	148	20.5%
Bangladeshi	101	21.0%	18	22.0%	33	19.4%	33	22.9%	14	22.6%	..	13.6%	..	8.3%	99	21.7%
Other Asian	183	31.6%	52	39.7%	50	34.2%	37	30.6%	21	25.9%	23	23.0%	12	21.4%	171	32.7%
Asian	**676**	**26.2%**	**139**	**30.1%**	**212**	**27.6%**	**179**	**27.9%**	**88**	**22.1%**	*	**18.9%**	**27**	**15.3%**	**649**	**27.0%**
Caribbean	152	12.0%	25	15.6%	27	14.1%	28	13.8%	23	12.0%	49	9.4%	17	6.8%	135	13.2%
African	67	13.3%	16	17.2%	18	17.5%	8	7.8%	13	14.3%	12	10.6%	13	17.6%	54	12.6%
Other Black	98	11.8%	12	13.6%	15	11.7%	26	15.8%	20	13.2%	25	8.4%	15	8.1%	83	12.9%
Black	**317**	**12.2%**	**53**	**15.5%**	**60**	**14.2%**	**62**	**13.2%**	**56**	**12.9%**	**86**	**9.2%**	**45**	**8.8%**	**272**	**13.0%**
Chinese	10	30.3%	..	50.0%	..	25.0%	0	0.0%	..	42.9%	..	33.3%	0	0.0%	10	34.5%
Other	175	26.8%	37	29.1%	39	28.3%	40	26.3%	27	30.3%	32	21.9%	21	19.3%	154	28.4%
Not Stated	102	21.5%	23	30.3%	24	20.0%	19	20.7%	15	20.0%	21	18.8%	14	13.6%	88	23.7%
Other	**287**	**24.7%**	*	**30.1%**	*	**24.4%**	**59**	**23.6%**	*	**26.3%**	*	**20.8%**	**35**	**16.2%**	**252**	**26.7%**
Missing	317	15.5%	50	17.0%	94	14.9%	79	15.3%	58	17.7%	36	12.9%	30	6.8%	287	17.8%

.. = Number suppressed where there are less than 5 cases to avoid identification; * = total suppressed to protect against disclosure.

Table A11: Number and proportion of individuals reporting attending college or school in the 28 days prior to TOP baseline assessment by ethnicity, age group and sex, 2008/09.

	Overall		18-24		25-29		30-34		35-39		40+		Female		Male	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
White British	1138	2.5%	488	5.3%	194	1.9%	185	1.9%	131	1.7%	140	1.6%	379	3.2%	759	2.3%
White Irish	18	2.4%	7	7.9%	..	2.1%	..	2.6%	..	0.6%	..	1.6%	5	2.4%	13	2.5%
Other White	53	2.8%	20	6.9%	8	1.7%	10	2.5%	..	1.3%	11	2.5%	18	4.8%	35	2.3%
White	**1209**	**2.5%**	**515**	**5.4%**	*****	**1.9%**	*****	**2.0%**	**136**	**1.6%**	*****	**1.7%**	**402**	**3.2%**	**807**	**2.3%**
White & Black Caribbean	20	2.3%	9	5.1%	7	3.8%	..	1.3%	..	0.7%	..	0.5%	7	2.9%	13	2.1%
White & Black African	10	5.3%	..	8.6%	..	4.7%	..	2.6%	..	5.9%	..	5.4%	..	4.9%	8	5.5%
White & Asian	10	4.0%	..	6.0%	..	3.4%	..	2.2%	..	3.3%	..	4.3%	..	6.1%	7	3.5%
Other Mixed	24	5.3%	15	14.0%	..	1.9%	..	1.1%	..	1.5%	5	5.7%	9	7.2%	15	4.5%
Mixed	**64**	**3.7%**	**31**	**8.1%**	**13**	**3.3%**	**5**	**1.5%**	**5**	**1.8%**	**10**	**2.8%**	**21**	**4.6%**	**43**	**3.4%**
Indian	19	2.6%	6	5.2%	9	3.8%	..	2.1%	0	0.0%	0	0.0%	..	5.6%	16	2.3%
Pakistani	18	2.4%	8	6.1%	6	2.9%	..	1.1%	0	0.0%	..	1.9%	..	7.1%	15	2.1%
Bangladeshi	9	1.9%	5	6.3%	..	1.8%	0	0.0%	..	1.6%	0	0.0%	0	0.0%	9	2.0%
Other Asian	33	5.7%	18	13.8%	..	2.8%	..	3.4%	..	4.9%	..	3.0%	..	7.3%	29	5.6%
Asian	**79**	**3.1%**	**37**	**8.1%**	**22**	**2.9%**	**10**	**1.6%**	**5**	**1.3%**	**5**	**1.6%**	**10**	**5.7%**	**69**	**2.9%**
Caribbean	44	3.5%	13	8.1%	8	4.2%	..	1.0%	7	3.7%	14	2.7%	12	4.8%	32	3.2%
African	26	5.2%	15	16.0%	..	3.9%	..	2.0%	..	1.1%	..	3.5%	5	6.8%	21	4.9%
Other Black	36	4.4%	9	10.3%	9	7.0%	..	2.4%	6	4.0%	8	2.7%	12	6.5%	24	3.8%
Black	**106**	**4.1%**	**37**	**10.9%**	**7**	**5.0%**	**8**	**1.7%**	*****	**3.2%**	*****	**2.8%**	**29**	**5.7%**	**77**	**3.7%**
Chinese	..	3.1%	0	0.0%	..	14.3%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	..	3.6%
Other	34	5.2%	17	13.3%	..	2.2%	..	2.6%	..	4.5%	6	4.1%	..	3.7%	30	5.5%
Not Stated	13	2.7%	..	1.3%	..	2.5%	..	4.4%	..	2.7%	..	2.7%	5	4.9%	8	2.2%
Other	*****	**4.1%**	*****	**8.6%**	**7**	**2.7%**	**8**	**3.2%**	**6**	**3.5%**	*****	**3.4%**	*****	**4.2%**	*****	**4.1%**
Missing	39	1.9%	13	4.4%	17	2.7%	..	0.6%	..	0.9%	..	1.1%	11	2.5%	28	1.8%

.. = Number suppressed where there are less than 5 cases to avoid identification; * = total suppressed to protect against disclosure.

Table A12: Number and proportion of individuals reporting acute housing problems in the 28 days prior to TOP baseline assessment by ethnicity, age group and sex, 2008/09.

	Overall		18-24		25-29		30-34		35-39		40+		Female		Male	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
White British	9705	20.9%	1824	19.5%	2106	20.3%	2133	21.7%	1763	21.8%	1879	21.3%	2552	21.1%	7153	20.8%
White Irish	224	30.0%	24	26.4%	40	27.8%	48	30.6%	55	33.7%	57	29.7%	62	29.0%	162	30.4%
Other White	486	25.1%	65	21.8%	100	21.5%	126	30.3%	75	24.2%	120	26.9%	80	21.2%	406	26.1%
White	**10415**	**21.2%**	**1913**	**19.6%**	**2246**	**20.4%**	**2307**	**22.2%**	**1893**	**22.1%**	**2056**	**21.8%**	**2694**	**21.2%**	**7721**	**21.2%**
White & Black Caribbean	245	28.2%	44	24.3%	47	25.7%	52	32.9%	51	32.9%	51	26.6%	73	29.3%	172	27.7%
White & Black African	41	21.6%	9	24.3%	9	20.0%	9	24.3%	7	20.6%	7	18.9%	6	15.4%	35	23.2%
White & Asian	52	21.0%	10	15.2%	15	25.4%	11	24.4%	8	25.0%	8	17.4%	14	28.6%	38	19.1%
Other Mixed	110	23.8%	19	17.4%	30	28.8%	19	20.2%	21	31.8%	21	23.6%	36	29.3%	74	21.8%
Mixed	**448**	**25.3%**	**82**	**20.9%**	**101**	**25.8%**	**91**	**27.2%**	**87**	**30.3%**	**87**	**23.9%**	**129**	**28.0%**	**319**	**24.4%**
Indian	86	11.4%	10	8.9%	25	10.3%	24	11.9%	17	13.7%	10	13.0%	7	13.2%	79	11.2%
Pakistani	77	9.9%	12	9.0%	18	8.6%	21	11.8%	17	11.9%	9	8.0%	..	9.1%	73	10.0%
Bangladeshi	67	13.8%	10	12.3%	21	12.2%	21	14.3%	12	19.0%	..	13.6%	5	18.5%	62	13.5%
Other Asian	94	16.2%	16	12.3%	21	14.7%	17	14.2%	23	27.4%	17	16.5%	9	16.7%	85	16.2%
Asian	**324**	**12.5%**	**48**	**10.5%**	**85**	**11.1%**	**83**	**12.8%**	**69**	**16.7%**	*****	**12.4%**	*****	**14.0%**	**299**	**12.4%**
Caribbean	366	28.4%	40	23.5%	51	26.2%	50	24.5%	53	27.2%	172	32.7%	73	28.6%	293	28.3%
African	155	30.4%	29	31.5%	33	31.1%	29	28.4%	25	26.6%	39	33.6%	21	29.6%	134	30.5%
Other Black	256	30.6%	21	22.6%	30	23.3%	53	31.7%	46	30.5%	106	35.8%	48	25.5%	208	32.1%
Black	**777**	**29.5%**	**90**	**25.4%**	**114**	**26.5%**	**132**	**27.9%**	**124**	**28.2%**	**317**	**33.8%**	**142**	**27.6%**	**635**	**29.9%**
Chinese	..	9.4%	0	0.0%	..	12.5%	..	16.7%	0	0.0%	..	16.7%	..	33.3%	..	6.9%
Other	145	22.1%	28	22.0%	39	27.9%	33	21.7%	23	25.0%	22	15.1%	24	21.8%	121	22.1%
Not Stated	119	24.8%	19	25.0%	31	25.6%	31	33.0%	13	17.6%	25	21.7%	25	24.0%	94	25.0%
Other	*****	**22.8%**	**47**	**22.6%**	*****	**26.4%**	*****	**25.8%**	**36**	**20.8%**	*****	**18.0%**	*****	**23.0%**	*****	**22.8%**
Missing	484	23.2%	69	23.3%	139	21.6%	118	22.3%	83	25.1%	75	26.5%	114	25.7%	370	22.6%

.. = Number less than 5.

Table A13: Number and proportion of individuals reporting risk of eviction in the 28 days prior to TOP baseline assessment by ethnicity, age group and sex, 2008/09.

	Overall		18-24		25-29		30-34		35-39		40+		Female		Male	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
White British	4436	9.6%	966	10.4%	943	9.1%	912	9.3%	772	9.6%	843	9.6%	1234	10.2%	3202	9.4%
White Irish	98	13.2%	10	11.0%	20	14.1%	19	12.3%	27	16.8%	22	11.5%	26	12.1%	72	13.7%
Other White	248	12.9%	36	12.2%	52	11.3%	56	13.6%	40	13.0%	64	14.4%	49	13.0%	199	12.9%
White	**4782**	**9.8%**	**1012**	**10.4%**	**1015**	**9.3%**	**987**	**9.6%**	**839**	**9.9%**	**929**	**9.9%**	**1309**	**10.3%**	**3473**	**9.6%**
White & Black Caribbean	116	13.4%	25	13.8%	23	12.6%	28	17.7%	20	13.1%	20	10.5%	33	13.4%	83	13.5%
White & Black African	23	12.2%	..	11.1%	6	13.3%	6	16.2%	..	8.8%	..	10.8%	..	10.3%	19	12.7%
White & Asian	26	10.5%	11	16.7%	6	10.2%	6	13.3%	..	3.1%	..	4.4%	9	18.4%	17	8.6%
Other Mixed	47	10.2%	10	9.2%	12	11.5%	9	9.6%	8	12.1%	8	9.0%	17	13.8%	30	8.8%
Mixed	**212**	**12.0%**	*****	**12.8%**	**47**	**12.1%**	**49**	**14.7%**	**32**	**11.2%**	**34**	**9.4%**	*****	**13.8%**	**149**	**11.4%**
Indian	46	6.1%	5	4.4%	16	6.6%	14	6.9%	9	7.3%	..	2.6%	..	7.5%	42	6.0%
Pakistani	50	6.5%	12	9.0%	14	6.7%	11	6.2%	11	7.7%	..	1.8%	..	6.8%	47	6.4%
Bangladeshi	33	6.8%	..	1.2%	17	9.9%	7	4.8%	5	7.9%	..	13.6%	..	7.4%	31	6.8%
Other Asian	43	7.4%	7	5.4%	8	5.6%	8	6.6%	13	15.5%	7	6.8%	..	3.7%	41	7.8%
Asian	**172**	**6.6%**	*****	**5.5%**	**55**	**7.2%**	**40**	**6.2%**	**38**	**9.2%**	**14**	**4.5%**	**11**	**6.2%**	**161**	**6.7%**
Caribbean	166	13.0%	21	12.7%	24	12.3%	21	10.3%	26	13.5%	74	14.2%	37	14.6%	129	12.6%
African	85	16.9%	18	19.6%	18	17.1%	14	14.1%	12	12.9%	23	20.4%	8	11.3%	77	17.9%
Other Black	122	14.7%	14	15.2%	11	8.6%	29	17.6%	23	15.3%	45	15.4%	23	12.4%	99	15.4%
Black	**373**	**14.3%**	**53**	**15.2%**	**53**	**12.4%**	**64**	**13.7%**	**61**	**14.0%**	**142**	**15.3%**	**68**	**13.3%**	**305**	**14.6%**
Chinese	..	6.3%	0	0.0%	..	12.5%	..	16.7%	0	0.0%	0	0.0%	..	33.3%	..	3.4%
Other	55	8.5%	7	5.6%	16	11.6%	12	8.0%	11	12.1%	9	6.2%	8	7.3%	47	8.7%
Not Stated	51	10.7%	6	8.0%	13	10.7%	13	13.8%	8	11.0%	11	9.6%	15	14.4%	36	9.6%
Other	*****	**9.3%**	**13**	**6.3%**	*****	**11.2%**	*****	**10.4%**	**19**	**11.1%**	**20**	**7.5%**	*****	**11.1%**	*****	**8.9%**
Missing	269	13.0%	44	14.9%	82	12.8%	62	11.8%	44	13.3%	37	13.1%	72	16.3%	197	12.1%

.. = Number suppressed where there are less than 5 cases to avoid identification; * = total suppressed to protect against disclosure.

Table A14: Mean rating of psychological health status in the 28 days prior to TOP baseline assessment by ethnicity, age group and sex, 2008/09.

	Overall		18-24		25-29		30-34		35-39		40+		Female		Male	
	N	Mean	N	Mean	N	Mean	N	Mean	N	Mean	N	Mean	N	Mean	N	Mean
White British	46912	10.4	9468	10.6	10480	10.7	9878	10.5	8166	10.4	8920	9.8	12218	9.5	34694	10.7
White Irish	759	9.7	92	10.3	148	9.9	159	10.4	162	9.8	198	8.5	215	9.1	544	9.9
Other White	1945	10.5	301	11.3	467	10.9	417	10.5	312	10.2	448	9.8	381	9.4	1564	10.8
White	**49616**	**10.4**	**9861**	**10.6**	**11095**	**10.7**	**10454**	**10.5**	**8640**	**10.3**	**9566**	**9.8**	**12814**	**9.5**	**36802**	**10.7**
White & Black Caribbean	884	10.9	185	11.6	190	10.4	158	10.4	159	11.4	192	10.6	253	10.1	631	11.2
White & Black African	193	11.1	37	12.6	46	10.6	38	10.3	34	10.9	38	11.0	40	10.8	153	11.1
White & Asian	251	10.2	67	10.4	60	10.8	45	10.6	31	9.6	48	9.5	50	9.0	201	10.5
Other Mixed	465	10.4	109	10.6	103	10.7	94	10.6	68	10.5	91	9.4	125	9.4	340	10.8
Mixed	**1793**	**10.7**	**398**	**11.2**	**399**	**10.6**	**335**	**10.5**	**292**	**11.0**	**369**	**10.2**	**468**	**9.9**	**1325**	**11.0**
Indian	771	11.5	116	11.5	246	12.0	207	11.8	125	10.7	77	11.0	56	9.5	715	11.7
Pakistani	782	11.2	134	10.9	212	11.1	178	11.1	146	11.5	112	11.2	45	9.2	737	11.3
Bangladeshi	491	11.3	83	11.6	171	11.2	149	11.1	65	11.5	23	11.8	27	11.7	464	11.3
Other Asian	592	10.8	131	11.0	147	11.3	124	10.9	86	10.0	104	10.6	56	9.4	536	11.0
Asian	**2636**	**11.2**	**464**	**11.2**	**776**	**11.5**	**658**	**11.3**	**422**	**10.9**	**316**	**11.0**	**184**	**9.7**	**2452**	**11.3**
Caribbean	1311	11.1	171	11.3	198	11.1	208	10.5	197	12.0	537	10.9	256	9.7	1055	11.4
African	522	10.7	99	10.9	107	10.4	104	11.6	96	10.0	116	10.7	78	9.6	444	10.9
Other Black	845	11.1	93	12.0	133	11.1	166	11.1	152	11.2	301	10.9	186	9.8	659	11.5
Black	**2678**	**11.0**	**363**	**11.4**	**438**	**10.9**	**478**	**10.9**	**445**	**11.3**	**954**	**10.9**	**520**	**9.7**	**2158**	**11.3**
Chinese	33	10.0	6	9.2	8	11.0	6	10.5	7	9.0	6	10.2	..	12.0	29	9.7
Other	665	10.5	128	10.9	145	10.5	154	10.1	92	11.0	146	10.1	111	10.1	554	10.5
Not Stated	481	11.0	75	11.1	121	10.6	94	11.3	76	11.0	115	11.2	104	10.3	377	11.2
Other	**1179**	**10.7**	**209**	**10.9**	**274**	**10.6**	**254**	**10.6**	**175**	**10.9**	**267**	**10.6**	*****	**10.2**	**960**	**10.8**
Missing	2116	10.7	300	10.9	654	10.8	535	10.8	334	10.4	293	10.4	454	9.7	1662	10.9

.. = Number suppressed where there are less than 5 cases to avoid identification; * = total suppressed to protect against disclosure.

Table A15: Mean rating of physical health status in the 28 days prior to TOP baseline assessment by ethnicity, age group and sex, 2008/09.

	Overall		18-24		25-29		30-34		35-39		40+		Female		Male	
	N	Mean	N	Mean	N	Mean	N	Mean	N	Mean	N	Mean	N	Mean	N	Mean
White British	46912	11.6	9470	12.3	10477	12.1	9873	11.7	8171	11.4	8921	10.6	12224	11.0	34688	11.9
White Irish	758	10.7	92	11.4	148	11.3	160	11.8	162	10.5	196	9.0	215	10.4	543	10.8
Other White	1944	11.5	302	12.4	467	12.1	417	11.4	310	11.3	448	10.5	380	10.6	1564	11.7
White	**49614**	**11.6**	**9864**	**12.3**	**11092**	**12.1**	**10450**	**11.7**	**8643**	**11.4**	**9565**	**10.5**	**12819**	**11.0**	**36795**	**11.8**
White & Black Caribbean	883	12.0	185	13.2	190	11.9	158	11.8	159	12.0	191	11.3	253	11.4	630	12.3
White & Black African	193	12.0	37	12.8	46	12.1	38	11.4	34	11.0	38	12.9	40	11.7	153	12.1
White & Asian	251	11.4	67	12.0	60	11.4	45	11.9	31	11.0	48	10.4	50	10.9	201	11.6
Other Mixed	467	12.0	109	12.0	105	12.8	94	12.1	68	12.0	91	11.1	125	11.3	342	12.2
Mixed	**1794**	**11.9**	**398**	**12.6**	**401**	**12.1**	**335**	**11.9**	**292**	**11.8**	**368**	**11.3**	**468**	**11.4**	**1326**	**12.1**
Indian	770	12.1	116	12.6	246	12.2	207	12.2	124	12.0	77	11.0	56	11.5	714	12.1
Pakistani	783	11.7	134	12.5	212	11.5	178	11.7	146	11.9	113	11.1	45	10.3	738	11.8
Bangladeshi	490	11.9	83	12.1	171	11.5	149	11.9	64	12.6	23	11.7	26	12.1	464	11.9
Other Asian	592	11.7	131	11.9	148	12.2	123	12.2	86	11.0	104	10.5	56	10.5	536	11.8
Asian	**2635**	**11.9**	**464**	**12.3**	**777**	**11.8**	**657**	**12.0**	**420**	**11.9**	**317**	**10.9**	**183**	**11.0**	**2452**	**11.9**
Caribbean	1310	12.3	171	12.7	198	12.9	208	11.9	197	13.0	536	11.8	256	11.0	1054	12.6
African	521	11.9	99	12.7	106	12.1	105	12.3	96	11.2	115	11.0	78	10.1	443	12.2
Other Black	843	12.1	92	13.2	131	12.7	167	12.4	152	12.1	301	11.4	186	11.3	657	12.4
Black	**2674**	**12.1**	**362**	**12.8**	**435**	**12.7**	**480**	**12.2**	**445**	**12.3**	**952**	**11.6**	**520**	**11.0**	**2154**	**12.4**
Chinese	34	11.0	6	9.0	9	13.6	6	10.5	7	11.0	6	9.5	..	10.8	30	11.0
Other	662	11.4	128	12.2	145	11.3	153	11.0	91	12.7	145	10.4	111	10.8	551	11.5
Not Stated	481	11.6	75	11.7	121	11.8	94	11.9	76	10.6	115	11.9	104	11.0	377	11.8
Other	**1177**	**11.5**	**209**	**11.9**	**275**	**11.6**	**253**	**11.3**	**174**	**11.7**	**266**	**11.0**	*****	**10.9**	**958**	**11.6**
Missing	2116	11.7	300	12.0	655	12.2	535	11.8	333	11.2	293	10.7	454	11.1	1662	11.9

.. = Number suppressed where there are less than 5 cases to avoid identification; * = total suppressed to protect against disclosure.

Table A16: Mean rating of quality of life in the 28 days prior to TOP baseline assessment by ethnicity, age group and sex, 2008/09.

	Overall		18-24		25-29		30-34		35-39		40+		Female		Male	
	N	Mean	N	Mean	N	Mean	N	Mean	N	Mean	N	Mean	N	Mean	N	Mean
White British	46884	10.5	9459	10.9	10472	10.8	9873	10.6	8163	10.5	8917	9.7	12212	10.0	34672	10.7
White Irish	759	9.5	92	10.3	148	9.6	160	10.4	162	9.7	197	8.3	216	9.3	543	9.7
Other White	1942	10.2	300	11.4	467	10.4	416	10.0	311	10.1	448	9.4	381	9.6	1561	10.3
White	**49585**	**10.5**	**9851**	**10.9**	**11087**	**10.7**	**10449**	**10.6**	**8636**	**10.4**	**9562**	**9.7**	**12809**	**10.0**	**36776**	**10.6**
White & Black Caribbean	883	10.5	185	11.8	190	10.2	157	10.3	159	10.3	192	10.1	253	9.7	630	10.9
White & Black African	192	11.1	37	11.0	45	12.1	38	9.9	34	11.2	38	11.1	40	12.4	152	10.8
White & Asian	250	10.3	67	11.0	59	10.3	45	11.1	31	9.1	48	9.5	50	10.0	200	10.4
Other Mixed	468	10.3	109	10.7	105	10.7	94	9.8	68	10.1	92	10.1	125	9.9	343	10.5
Mixed	**1793**	**10.5**	**398**	**11.3**	**399**	**10.6**	**334**	**10.2**	**292**	**10.2**	**370**	**10.1**	**468**	**10.0**	**1325**	**10.7**
Indian	771	11.2	116	11.6	246	11.5	207	11.4	125	10.2	77	10.4	56	10.2	715	11.2
Pakistani	781	11.0	134	11.8	212	11.0	178	10.8	146	10.3	111	11.1	45	9.6	736	11.1
Bangladeshi	491	11.4	83	11.6	171	11.3	149	11.6	65	11.3	23	10.2	27	9.9	464	11.5
Other Asian	593	10.7	131	10.8	148	11.0	124	11.0	86	9.5	104	10.6	56	10.2	537	10.7
Asian	**2636**	**11.0**	**464**	**11.4**	**777**	**11.2**	**658**	**11.2**	**422**	**10.3**	**315**	**10.7**	**184**	**10.0**	**2452**	**11.1**
Caribbean	1311	10.8	172	11.0	198	11.1	208	10.9	197	11.4	536	10.4	255	9.5	1056	11.1
African	526	10.2	99	10.7	108	10.3	106	10.7	96	9.6	117	9.6	79	10.2	447	10.2
Other Black	846	10.5	92	11.3	133	10.8	168	11.0	152	10.4	301	9.8	188	9.7	658	10.7
Black	**2683**	**10.6**	**363**	**11.0**	**439**	**10.8**	**482**	**10.9**	**445**	**10.7**	**954**	**10.1**	**522**	**9.7**	**2161**	**10.8**
Chinese	34	11.0	6	10.8	9	12.1	6	10.3	7	10.1	6	11.3	..	12.3	30	10.9
Other	664	10.0	128	11.0	145	10.0	153	9.8	92	9.9	146	9.5	111	9.9	553	10.0
Not Stated	481	10.5	75	10.8	121	10.8	94	10.6	76	10.3	115	10.3	104	9.8	377	10.7
Other	**1179**	**10.3**	**209**	**10.9**	**275**	**10.4**	**253**	**10.1**	**175**	**10.1**	**267**	**9.9**	*****	**9.9**	**960**	**10.3**
Missing	2116	10.4	300	10.3	654	10.8	535	10.5	334	10.4	293	9.7	454	9.6	1662	10.7

.. = Number suppressed where there are less than 5 cases to avoid identification; * = total suppressed to protect against disclosure.

B. **NDTMS** DATA FOR CLIENTS ENTERING OR EXITING TREATMENT IN **2008/09** BY ETHNICITY

Table B.1: Proportion on people starting treatment in 2008/09 who have ever or currently inject drugs, by ethnicity (NDTMS data)

Ethnicity	% current injectors	% ever injected	Number of clients with known injecting status
White British	26%	53%	64553
White Irish	24%	51%	1043
Other White	32%	56%	2669
All White	**26%**	**53%**	**68265**
White & Black Caribbean	15%	34%	1328
White & Black African	13%	32%	257
White & Asian	18%	34%	357
Other Mixed	18%	40%	605
All Mixed	**16%**	**35%**	**2547**
Indian	7%	19%	939
Pakistani	6%	18%	1022
Bangladeshi	4%	14%	619
Other Asian	8%	22%	761
All Asian	**7%**	**18%**	**3341**
Caribbean	6%	16%	1770
African	6%	16%	649
Other Black	8%	22%	1068
All Black	**7%**	**18%**	**3487**
Chinese	16%	44%	32
Other	20%	38%	813
All Other	**19%**	**38%**	**845**
Not Stated	22%	49%	658
Missing	31%	54%	688
Total	**24%**	**50%**	**79831**

Table B.2: Proportion of people starting treatment in 2008/09 who report accommodation need, by ethnicity (NDTMS data)

Ethnicity	% with No Fixed Abode (NFA)	% with housing problem (including NFA	Number of clients with accommodation status recorded
White British	9%	25%	60374
White Irish	15%	37%	979
Other White	12%	29%	2542
All White	**10%**	**26%**	**63895**
White & Black Caribbean	11%	31%	1274
White & Black African	10%	31%	256
White & Asian	9%	27%	344
Other Mixed	11%	27%	571
All Mixed	**11%**	**30%**	**2445**
Indian	5%	17%	891
Pakistani	4%	14%	953
Bangladeshi	7%	21%	580
Other Asian	5%	19%	731
All Asian	**5%**	**17%**	**3155**
Caribbean	13%	36%	1697
African	13%	39%	650
Other Black	13%	34%	1055
All Black	**13%**	**36%**	**3402**
Chinese	6%	15%	34
Other	12%	26%	803
All Other	**11%**	**26%**	**837**
Not Stated	13%	29%	537
Missing	14%	29%	502
Total	**10%**	**26%**	**74773**

Table B.3: Proportion of people starting treatment in 2008/09 who (a) waited less than 3 weeks for first intervention and (b) had a care plan, by ethnicity (NDTMS data)

Ethnicity	Waited for first intervention less than 3 weeks		Had a care plan	
	No.	*%*	*No.*	*%*
White British	60403	93%	63528	98%
White Irish	1021	96%	1045	98%
Other White	2550	94%	2679	99%
All White	**63974**	**93%**	**67252**	**98%**
White & Black Caribbean	1278	94%	1339	99%
White & Black African	255	95%	264	99%
White & Asian	344	95%	354	98%
Other Mixed	566	93%	592	97%
All Mixed	**2443**	**94%**	**2549**	**98%**
Indian	918	95%	956	99%
Pakistani	996	95%	1035	99%
Bangladeshi	599	92%	635	98%
Other Asian	753	95%	786	99%
All Asian	**3266**	**95%**	**3412**	**99%**
Caribbean	1744	96%	1776	98%
African	647	95%	669	99%
Other Black	1061	94%	1108	98%
All Black	**3452**	**95%**	**3553**	**98%**
Chinese	34	97%	35	100%
Other	794	94%	833	99%
All Other	**828**	**94%**	**868**	**99%**
Not Stated	641	90%	679	95%
Missing	1080	96%	1045	93%
Total	**75684**	**93%**	**79358**	**98%**

Table B.4: (a) Proportion of people starting treatment in 2008/09 who were effectively engaged in treatment and (b) the proportion of people who left treatment in 2008/09 who had a planned discharge, by ethnicity (NDTMS data)

Ethnicity	Effectively engaged*		Planned discharge	
	No.	*%*	*No.*	*%*
White British	56261	83%	19494	40%
White Irish	907	83%	316	37%
Other White	2318	83%	954	44%
All White	**59486**	**83%**	**20764**	**40%**
White & Black Caribbean	1135	81%	359	36%
White & Black African	233	83%	99	45%
White & Asian	310	82%	117	42%
Other Mixed	503	78%	200	40%
All Mixed	**2181**	**81%**	**775**	**39%**
Indian	852	85%	337	45%
Pakistani	908	82%	311	39%
Bangladeshi	551	82%	162	36%
Other Asian	688	83%	326	46%
All Asian	**2999**	**83%**	**1136**	**42%**
Caribbean	1548	83%	644	42%
African	574	81%	259	45%
Other Black	968	82%	394	42%
All Black	**3090**	**82%**	**1297**	**43%**
Chinese	31	86%	16	43%
Other	739	85%	304	44%
All Other	**770**	**85%**	**320**	**44%**
Not Stated	614	81%	205	37%
Missing	977	82%	472	46%
Total	**70117**	**83%**	**24969**	**41%**

* effectively engaged = either retained in treatment for 12+ weeks or successfully completed treatment in less than 12 weeks.