

The South Inner City Drug and Alcohol Task Force (SICDATF) invite tender proposals for the delivery of actions under the Cocaine and Crack Cocaine – A Health-Led Approach Project (CCCHLA). SICDATF | South Inner City Drug and Alcohol Task Force

This initiative aims to respond to the growing challenges associated with cocaine and crack cocaine use through **evidence-based**, **health-centred interventions** that support individuals, families, and communities impacted by substance use.

Organisations and individuals with relevant expertise are encouraged to apply. The successful tender will demonstrate:

- A strong understanding of community-based addiction responses
- Cultural competence and sensitivity to diverse lived experiences
- A commitment to partnership, innovation, and co-production

Scope of Work

The successful applicant, in collaboration with SICDATF addiction service providers and individuals in addiction recovery, will conduct a Peer Participant Study, with a particular emphasis on people using cocaine and crack cocaine. This study will focus on mapping existing peer participation roles, documenting lived experiences, benchmarking approaches with similar programmes, and developing pathways for peer participants to transition into leadership roles, supported by structured training, mentoring, and practical involvement in service delivery.

Key requirements include:

- Co-production with peers in recovery to ensure that all processes reflect their lived experiences, needs, and values.
- Exploration of service-user collaboration models, identifying how SICDATF, addiction services, and people in recovery can work together.
- Recommendations on structured training pathways for participants with lived experience to develop as peer leaders.

Rationale

Peer leadership has the potential to be transformative – offering support, empowerment, and opportunity to individuals in recovery while strengthening communities as a whole.

Evidence highlights several effective models of peer leadership in recovery, including:

- **Peer Support Networks** where individuals in recovery support each other through shared experiences, improving both clinical and personal recovery outcomes.
- **Co-Production Models** where peers are directly involved in designing and delivering recovery services, ensuring that programmes reflect the needs, values, and aspirations of those with lived experience.

Service required	A Peer-Participant Study - employing a Trauma-Informed Approach
	 Create psychologically safe spaces for participation (e.g., workshops, interviews).
	Incorporate trauma-sensitive methods for data collection and discussion.
	Acknowledge historical and systemic trauma (e.g., racism, poverty, intergenerational violence).
	Employ the IHREC principles to underpin the work.
Budget and payment	Indicative upper limit 10K, Inclusive of VAT
Location	South Inner City Dublin
Context	Introduction
	The Drug and Alcohol Task Forces are committed to implementing the goals of Government policy on drug and alcohol use as set out in the National Drugs Strategy (NDS), Reducing Harm, Supporting Recovery 2017 – 2025. The foundation for the strategy is the Healthy Ireland Framework. The strategy aims to promote healthier lifestyles within society and encourage people to make healthier choices around drug and alcohol use. Five strategic goals have been identified under the strategy:

- Promote and protect health and well-being
- 2. Minimise the harms caused by the use and misuse of substances and promote rehabilitation and recovery
- 3. Address the harms of drug markets and reduce access to drugs for harmful use
- 4. Support the participation of individuals, families and communities
- 5. Develop sound and comprehensive evidence-informed policies and actions

Project Background

HSE-led Initiatives to Reduce the Health-related Harms from Cocaine and 'Crack' Cocaine

In January 2022, the National Social Inclusion Office (NSIO) invited all Community Health Organisations (CHOs) to submit proposals for initiatives aimed at reducing the health-related harms associated with cocaine and crack cocaine use.

With cocaine use increasing in Ireland in recent years, there has been a corresponding rise in demand for specialist cocaine treatment services. This trend underscores the need for targeted, evidence-informed interventions to support individuals in recovery, reduce harm, and enhance health outcomes.

Cocaine Use in Ireland: Current Landscape

Recent data highlights the growing concern over cocaine use in Ireland:

- Prevalence: In 2023, 7.3% of adults reported using an illicit drug in the past year, with cocaine being the most commonly used drug after cannabis.
- Treatment Demand: Cocaine remains Ireland's most common drug treated (excluding alcohol), accounting for 40% (5,289 cases) of all drug treatment cases in 2024, a 7% increase from 2023.
- Hospital Admissions: The number of cocaine-related acute hospital discharges per 100,000 population increased from 1.4 in 2000 to 24.3 in 2023, indicating a significant rise in health-related harms.

Crack Cocaine: Between 2017 and 2023, there was a 594.2% increase in crack cocaine cases, highlighting the escalating challenge posed by this substance.

SICDATF's Role and Strategic Focus

The South Inner City Drugs and Alcohol Task Force (SICDATF) has been at the forefront of addressing these issues. In December 2021, the Minister for State for Public Health, Well-being, and the National Drugs Strategy announced funding to enhance community-based drug and alcohol services, specifically targeting the reduction of health-related harms from cocaine and crack cocaine use.

SICDATF's approach emphasises a partnership model, collaborating with local stakeholders, service users, and both statutory and voluntary sectors. This collaborative effort aims to develop and implement effective, community-based strategies to mitigate the impact of cocaine and crack cocaine use

& Deliverables

Scope of Work Current Landscape Review: Map existing peer participation roles within relevant services.

> **Experiential Insights**: Document the lived experiences of peer participants through targeted interviews or focus groups.

Benchmarking: Compare peer involvement approaches with similar national and international models, identifying transferable lessons.

Peer Leadership Development Framework: Propose a structured pathway for service users to transition into peer participant and leadership roles, supported by training, mentoring, and practical involvement in service delivery.

Sustainability & Outcome Plan: Recommend mechanisms to embed peer participation into service provision, including measurable milestones, monitoring tools, and long-term sustainability strategies.

Desktop Review

Data & Documentation Review: Analyse existing service data and documentation, with a focus on mechanisms for service user involvement.

Resource Integration: Apply learning from existing resources, including the Peer Guidance Manual and pilot aftercare projects, to strengthen peer involvement strategies. Peer Guide.pdf

Engagement with Stakeholders

- Field Assessment Report (if applicable): Conduct structured field assessments of services to capture real-time practices, gaps, and opportunities.
- Stakeholder Interview Summary: Facilitate and document interviews with key stakeholders, including service users, peer workers, frontline staff, and management.
- Best Practice Implementation Guide: Provide recommendations for embedding and monitoring best practices across services, with mechanisms for continuous quality improvement.
- Policy & Template Pack: Develop or adapt relevant policy templates (e.g. peer engagement, leadership development, safeguarding, governance) to underpin sustainable practice across the programme.

Deliverables Desktop Rev

Desktop Review – Deliverables

- Synthesis Report: A summary of recommendations from the CCCHLA programme evaluation, highlighting actionable learning relevant to the tender objectives.
- Service User Involvement Analysis: A review of existing data and documentation from services, with a focus on current mechanisms for service user engagement and participation.
- Resource Integration Brief: Application of learning from existing resources, including the Peer Guidance Manual and pilot aftercare projects, to inform proposed approaches.
- Peer Leadership Pathway Framework: Development of an outline process for service users to transition into peer participant and leadership roles, supported by structured training, mentoring, and practical service delivery opportunities.
- 5. **Milestone & Outcome Plan**: A set of clear, measurable milestones for peer leadership development, accompanied by an implementation plan to ensure sustainability within existing service provision.

Contract

The appointed Contractor must be able to commence work with SICDATF Project Management Group in October a completion date no later than December 2025.

Applicants will need access to transport. A guarantee must be provided about the provision of all relevant insurance, including professional indemnity, employers' liability and public liability insurance.

Conflict of Interest

Any interest involving the Contractor and SICDATF or its staff or their relative must be fully disclosed in response to this Invitation to Tender. It should be communicated to the Chairperson immediately upon such information becoming known to the Contractor or in the event of this information only coming to their notice after the submission of a bid and before the awarding of the contract.

Reporting Arrangements

- The Contractor will report to the SICDATF Project Management Group.
- Provide updates on progress and emerging findings to the oversight group, as required.
- Deliver the final report, taking into account corrections and requests.
- Presentation of the report to the SICDATF and stakeholders

Requirements

Please submit a statement of suitability and experience to carry out this work. Send links to work. The Organisation/Contractor must have an editing service or a second person to execute the work.

Key requirements

- High-level written and oral communication skills and a second-person editor.
- Must be results-oriented, exhibiting a high level of tact and diplomacy.
- Stakeholder engagement skills.
- Experience in conducting similar work in the Addiction and Social Care Sector.

Application

Process

Format of Proposal

Tenderers are required to submit proposals in a clear and structured format, including the following sections:

- Cover Letter outlining interest, relevant expertise, and commitment to the project.
- Understanding of the Assignment demonstrating awareness of the issues, aims, and context.
- 3. **Methodology and Approach** outlining proposed methods of engagement, co-production processes, and research/consultation methods.
- 4. **Project Plan** including timelines, key milestones, and deliverables.
- 5. **Experience and Expertise** evidence of previous work in community-based addiction services, co-production, peer leadership, or related fields.
- 6. **Team Composition** details of personnel involved, roles, and responsibilities.
- 7. **Budget and Costing** clear breakdown of costs, including daily rates, VAT (if applicable), and any other relevant expenses.
- 8. **References** contact details for at least two relevant clients/projects.

Please forward an application by the 17th of September.

Further information is available upon request from

sicdatf1@gmail.com

Management and oversight of the work

Day-to-day management of the contract will be led by the SICDATF coordinator and the oversight group that will support and oversee the work. The successful tenderer will be required to engage with the relevant SICDATF governance and oversight structure for the duration of the project. Progress updates to the SICDATF governance and oversight structure will be required at intervals agreed upon once the project is commenced.