TD1 YOUTH HUB

October 2022

On the Street

A report highlighting young people's use of alcohol and drugs and the barriers to accessing support services in Galashiels.

Arrivo Consulting Ltd

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INTRODUCTION

PURPOSE OF THE REPORT

TD1 Youth Hub was commissioned by the Scottish Borders Alcohol and Drug Partnership (ADP) to carry out research to:

- identify the drivers around alcohol and drugs use that affect behaviours and life outcomes for young people aged 15-19 years
- identify any gaps in services available to young people to address these issues
- identify the interventions that are most appropriate for each age-group/cohort to risk manage negative impacts of alcohol and drug use of young people aged 15-19 years, and
- involve young people in development and co-design of services to address issues identified by research.

METHODOLOGY

The research for this report was carried out by TD1 Youth Hub with input from Arrivo Consulting Ltd.

Primary research with young people in Galashiels

TD1 Youth Hub carried out primary research with young people in Galashiels to explore their use of drugs and alcohol, their needs for services, and their experiences of services.

Desk research

Arrivo Consulting Ltd carried out desk research:

- a review of literature to provide a context on the prevalence and harms related to alcohol and drug use among young people.
- a review of SALSUS data to provide an overview of young people's use of drugs and alcohol in Scotland and in the Scottish Borders

Consultation with partner organisations

Arrivo Consulting Ltd consulted with several organisations that work with or provide services to young people. The purpose of the consultation was to understand the issues and trends in behaviours in relation to drug and alcohol use among young people, and the services available to address these issues.

The list of consultees is at Appendix 1.

CONTEXT FOR THE RESEARCH

OVERVIEW

Problematic drug and alcohol use are significant issues in Scotland, causing damage to people's lives, to their families and to their communities.

Scotland has the highest level of drug-related deaths in Europe, and drug deaths in Scotland are around five times higher than across the rest of the UK.

Alcohol-related harms are consistently high in Scotland:

- there were 1,190 alcohol-specific deaths in 2020,
- there were over 35,000 hospital stays in 2019/20 which were the result of alcohol use.

We also know that alcohol and drug-related harms affect some sections of our population far more severely than others.[1]

- Alcohol-specific deaths are nearly seven times higher in the most deprived decile compared to the least deprived decile
    - hospital admissions are eight times higher.
- 54% of drug-related hospital admissions were patients living in the 20% most deprived areas.
- Diseases associated with drug use are seventeen times higher in the most deprived areas compared with the least deprived areas.

Although the trends in drug and alcohol deaths have been driven primarily by people in older age-groups, research shows that alcohol and drug-related problems often emerge at a younger age:

- Over 70% of those accessing Tier 3 and 4 treatment services for problem drug use in 2015/16 started using drugs under the age of 25, with a median age of 15.[2]

However, a recent report published by the Scottish Government[3] in October 2021 highlighted the following trends on drug and alcohol use among young people in Scotland.

- there are signs of increasing harms from alcohol and drugs among younger people, with the emergence of a particularly strong trend for drug-related hospitalisations and deaths, and
- the profile of drugs causing harms, particularly hospital admissions, among younger people are markedly different to those among older age-groups.

The same report identifies that there is a range of risk factors which increase the likelihood of developing harms from alcohol and drug use among young people. These risk factors are primarily rooted in socioeconomic determinants.

[1]https://www.gov.scot/policies/alcohol-and-drugs/
[2]A review of the existing literature and evidence on young people experiencing harms from alcohol and drugs in Scotland, Scottish Government, Oct 2021
[3]A review of the existing literature and evidence on young people experiencing harms from alcohol and drugs in Scotland, Scottish Government, Oct 2021

THE LOCAL CONTEXT

TD1 Youth Hub has a track record of engaging and supporting some of the most vulnerable and difficult to reach young people in Galashiels. Through its work with young people, TD1 sees the impact of poverty, trauma, substance use, lack of opportunity, lack of aspiration on the behaviours of young people, (crime and negative behaviours) on their health and wellbeing, on their employment outcomes and therefore on their life chances.

The pandemic has increased the challenges for many of these young people and their families, with emerging evidence suggesting that COVID-19 has exacerbated many pre-existing inequalities (income, labour market participation, health, education and life chances) for those who are socio-economically disadvantaged.

The pandemic also reduced the protective factors for many young people (the routine of school or college, increased social isolation etc) further impacting on mental health.

WHAT DID PARTNERS TELL US?

We also consulted with partners who work with children and young people. The consultations focused on:

- trends in the issues that they are seeing among children and young people (around mental health, drug and alcohol use etc) in the post-Covid period, and
- the availability of services in the local area to address these challenges.

Partners identified some general trends in the post covid period:

- An increase in mental health challenges among young people and their families and the interplay of mental health and drug/ alcohol use.
    - an increase in adults seeking support from community based services during lockdown,
    - a spike in the number of young people self-harming with drugs/alcohol
    - reduction in resilience of parents (capacity to cope with young person's behaviours)• An increase in incidents of drug and alcohol use among young people.
    - Galashiels Academy reported a three-fold increase in the number of Vulnerable Person Reports (VPRs) for young people between 2018/19 (55) and 2021/22 (150), with nearly a quarter of those in relation to drugs and alcohol use by young people.
- Evidence of increasingly younger children and young people (e.g. in S1, S2 and S3) using drugs in school and exhibiting other behaviours which would previously have associated with young people in S4, S5 and S6.
- Greatly increased access to drugs (as a general trend rather than a post-covid trend)
    - Price and availability of drugs make it easier for young people to get drugs than alcohol.
    - Younger children/young people involved in buy/selling drugs.
    - Younger children/young people buying drugs on-line (via apps such as Telegram/ Snapchat).
- An 'epidemic' of vaping (and young people reporting that their parents are aware and condone vaping as 'less harmful that smoking')

WHAT DID PARTNERS TELL US?

SERVICES

Partners highlighted two key points around services for young people:

- There is a gap in services for young people using drugs and alcohol, especially for those who are at higher risk and most dis-engaged.
    - Quarriers Resilience for Wellbeing Service does work with young people who use drugs and alcohol but identified a gap in services for those young people who require specialist support to address drug and alcohol use.
    - We Are With You works with people from the age of 16 plus
- Young people with the most challenging issues/behaviours typically do not engage in services.

- **MENTAL HEALTH**

Scottish Borders has an established emotional health and wellbeing services for young people. Delivered by Quarriers, the Resilience for Wellbeing Service provides an emotional health and wellbeing service in all of the secondary schools in Scottish Borders Council. Quarriers also offers community-based support to young people out with education up to the age of 18.

The service offers guidance to children and young people who have been identified as requiring an additional level of emotional support above that provided by universal services. The focus of the service is on early intervention and prevention and aims to help young people become more resilient and confident, and to take ownership of their emotional health needs.

Young people self-refer or can be referred by pastoral-care/other staff. Young people engage on a voluntary basis.

With a clear focus on early intervention and prevention, the aim of the service is to build resilience in young people.

It is not primarily aimed at addressing risk-taking behaviours in young people.

The service reports that young people with the most challenging issues/behaviours typically do not engage in the service.

- **GAPS IN COMMUNITY-BASED SERVICES**

  Partners identified that that there were few services in the community that they could refer young people and their families to after time-limited interventions.

- **CHALLENGES IN ENGAGING YOUNG PEOPLE IN SERVICES**

  Partners reported that young people are difficult to engage in services in general, but that relationships with trusted organisations/ individuals can act as a bridge into services for young people.

RELATIONSHIPS ARE EVERYTHING

- Where young people do seek support/ access services, a critical factor is often that they have been introduced/encouraged/ supported by someone (an agency) that they trust.
- TD1 has a track record of engaging the hardest to reach young people
- Links with TD1 are critical to brokering relationships between these young people and services.

EARLY INTERVENTION NEEDED TO DEVELOP RELATIONSHIPS

There is a cohort of young people who do not engage well in education or in any other services

- we need earlier intervention to develop trust-based relationships with these young people to support them to engage in services.

PATTERNS OF DRUG AND ALCOHOL USE AMONG YOUNG PEOPLE IN SCOTTISH BORDERS / GALASHIELS?

The research used two sources of information to understand drug and alcohol use among children and young people in Scottish Borders.

SALSUS DATA

The Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) provides the national and regional context for drug and alcohol use by young people.

PRIMARY RESEARCH BY TD1 YOUTH HUB

TD1 carried out primary research to explore drug and alcohol use by young people in Galashiels.

SALSUS DATA

The Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) is a bi-annual national survey of young people in schools across Scotland (pupils in S2 and S4) which identifies prevalence of smoking, drinking and drug use among those young people.

- The last survey was in 2018 so the data pre-dates the impact of the pandemic on the behaviours of young people

- SALSUS also produces 'regional data' which provides an overview of the rates of drug/alcohol use among young people in the Scottish Borders region.

The following data for Borders Council area[4] shows the percentage of young people (aged 13 and 15) who have used alcohol and drugs and compares these percentages with the Scottish average. (See appendix 2 for further information)

The headline data shows that the percentages of young people who have used drugs and alcohol in the Borders is broadly in line with the Scottish trends.

ALCOHOL USE:

- **38%** of **13-year-olds** reported they had had an **alcoholic drink** (2% above Scottish average)
    - **only 2%** had been drunk more that 10 times (7% below Scottish average
- **75%** of **15-year-olds** reported they had had an **alcoholic drink** (4% above the Scottish average)
    - **18%** had been drunk more than 10 times (7% below Scottish Average

The data on drug use showed:

- **96%** of **13-year-olds** had **never** tried drugs (3% above the Scottish average)
- **80%** of **15-year-olds** had **never** tried drugs (1% above the Scottish average)
    - **20%** of **15-year-olds** had used drugs in the last year (1% below the Scottish average)
    - **15%** of **15-year-olds** had used drugs in the last month (3% above the Scottish average

Availability of drugs in the Scottish Borders area is **above** the Scottish average:

- **25%** of **13-year-olds** and **54%** of **15-year-olds** reported that it would be 'very' or 'fairly' easy to get illegal drugs if they wanted to.

[4]Data on 13-year-olds based on a sample of 222 young people
Data on 15-year-olds based on a sample of 216 young people

PRIMARY RESEARCH BY TD1

TD1 carried out primary research with young people in Galashiels to better understand the patterns of drug and alcohol use among young people in the area, the drivers to drug and alcohol use, the impact of drugs and alcohol on their lives. It also explored young people's perceptions of the 'line' between recreational and problematic use and their attitudes to/awareness of services to address drug/alcohol issues.

TD1 carried out 3 stages of research:

- A street-based survey to get an overview of drug and alcohol use among young people (aged 13 -19) who 'hang out' on the streets of Galashiels during evenings in July 2022.
- Focus-groups with groups of young people who are known to TD1
    - The focus groups provided more in-depth exploration of patterns of drug use in different age-groups
- A two-day residential with a small group (7 young people) to explore attitudes to drug use, leisure and problematic drug use, and knowledge/attitudes towards services.

STREET SURVEY

TD1's Streetwork team carried out a street-based survey in July 2022. The purpose of the survey was to explore alcohol and drug use among young people.

The Streetwork team engaged with young people who were 'on the streets' in the evenings. The Streetwork team:

- mapped where young people 'hang out' around the town, and
- invited the young people to participate in the survey (participation was voluntary).

They engaged with 108 young people (52 male and 56 female) between the ages of 13 and 19.

Headline findings show a significantly higher use of alcohol and drugs among this group of young people than in the SALSUS data:

have used alcohol,

said they typically drank alcohol every weekend

had used drugs in the last month

PLEASE NOTE

The survey highlighted a much higher prevalence of drug and alcohol use than the SALSUS data but it should be recognised that:

- SALSUS is carried out in schools with young people in S2 and S4 aged 13 and 15
    - The last SALSUS survey predates the pandemic.
- The TD1 survey was street-based research. It engaged young people who are making use of, or choosing to, hang around the streets. Many of these young people are the most vulnerable, and most likely to experience the negative impacts of poverty, crime, substance use, and being Not in Education, Training or Employment.
- TD1 surveyed young people up to the age of 19
- The survey was carried out in 2022, post pandemic.

WHAT DID THE STREET-BASED SURVEY TELL US?

ALCOHOL

Number and % of young people using alcohol
Of the 108 young people surveyed on the street:

- 54 of 56 females (**96%**) said they used alcohol
- 50 of 52 males (**96%**) said they used alcohol

FREQUENCY OF USE

- **90%** said they drank alcohol every weekend (99 young people).
- **92%** said themselves or a friend in their group had been very drunk in the last year (100 young people)

AGE WHEN FIRST STARTED USING ALCOHOL

- **90%** said they first tried alcohol in S1 (98 young people).

WHERE DO YOUNG PEOPLE GET ALCOHOL?

Who buys the alcohol?	No. of Young People	%
Friend (18+) with ID	50	46%
Family member/got it from home.	60	56%
Someone on street	36	33%

WHERE DO YOUNG PEOPLE DRINK ALCOHOL?

	No. of Young People	%
At home	38	35%
Someone else's house	26	24%
Street/outside	62	57%

IMPACT OF ALCOHOL USE ON THEIR LIVES

Young people reported the following consequences of alcohol use.

	No of Young People	%
Getting distressed/crying	36	33%
Fighting/arguing	40	37%
Being sick/vomiting	24	22%
Passed out /unconscious	18	17%
Taken home by Police or Youth Workers	14	13%
Taken to hospital (A and E)	4	4%

DRUGS

Number and % of young people using drugs
Of the 108 young people surveyed

- 86 **(80%)** had taken drugs in the last month (43 male and 43 female)

Frequency of drug use
Of the 43 males:

- 4 (**10%**) were using daily
- 30 (**70%**) were using drugs weekly
- 9 (**20%**) were occasional users (used whenever they were given drugs)

Of the 43 females:

- none were using drugs daily,
- 13 (**30%**) were using drugs weekly, mainly at weekends
- 21 (**50%**) used drugs once or twice a month
- 9 (**20%**) used drugs only at parties

Age when started using drugs

- 42 of 43 (**98%**) males said they started using cannabis in S1
- **80%** of all females surveyed (45) said they had tried cocaine by S3

Impact of drugs

Young people reported having experienced the following negative consequences of drugs. (Some reported more than one)

Negative consequences of drug use	Number	%
Getting caught *	35	40%
Vomited	24	28%
Fear/paranoia	18	20%
Passing out / Unconscious	10	12%
Fighting	9	10%
Taken to hospital (A and E)	4	5%

*Young people perceived 'getting caught' by parents etc as a negative consequence

FOCUS GROUPS

The focus groups enabled TD1 to explore in more depth the patterns of drug use in different age-groups.

- Six focus groups involved 43 young people aged 15-19 years, of which 26 were male and 17 were females.
- All of the young people were known to TD1/had existing relationships with TD1.

Patterns of drug/alcohol use at different ages

Young people identified the following broad patterns in terms of when they started to use drugs and their progression from one drug to another.

The table below shows the age/stage for starting to use alcohol and different drugs.

	S1	S2	S3	S4
Male	Alcohol	Cannabis	Cocaine / MDMA /Ecstasy	Acid / Ketamine / LSD (Mushrooms)
Female	Alcohol	Alcohol	Cocaine/ Cannabis	MDMA / Ecstasy

The patterns of use of drugs and alcohol is different for males and females.

Females

- Females start using alcohol in S1 (similar to males) but start trying drugs later than males. (S2/S3)
- Females use alcohol more frequently than drugs
- Females tend not to use cannabis to the same extent as males. Cocaine was the drug most used by females
- Frequency of drug use is lower among females than males (30% of females using drugs weekly)

Males

- Drug use starts earlier than for females (S2), and predominantly starts with cannabis.
- Frequency of drug use is higher among males (70% using drugs weekly)
- While boys will progress onto other drugs, cannabis remains the 'drug of choice for 77% of them

Which drugs do young people use?

Young people identified their current 'go-to' drug. Again, male and female usage differs.

	Cannabis	Cocaine	MDMA	Total
Male	20 (77%)	6 (23%)		26
Female		13 (76%)	4 (24%)	17

Where do young people get drugs?

	Percentage
From family members (including siblings)	30%
Bought from older peers	60%
From friendship group	40%
Bought online – through social media/apps	20%

Percentages add to more than 100. Young people identified more than one source of drugs

IMPACTS ON HEALTH AND WELLBEING

Young people were asked if they felt drugs have had a negative impact upon their health or wellbeing.

- **80%** said yes
- **20%** said no

The impacts they identified were:

- **40%** experienced moods swings /anger
- **30%** experienced lack of motivation
- **20%** experienced fear
- **10%** experienced loneliness

NEED FOR ADVICE /SUPPORT AROUND DRUG USE?

TD1 asked young people if they felt that they need support and/or advice about their drug use?

- **60%** said yes
- **40%** said no

It is interesting to note that less than a third wanted advice/support on how to stop using drugs, whereas nearly two-thirds wanted advice on the effect of drugs.

The advice or support they identified were:

- **60%** wanted advice on what a specific drug does (to the body)
- **30%** wanted advice on what was in drugs
- **30%** wanted advice /support on how to stop using (mostly a specific drug)
- **20%** wanted advice on how it was affecting their health

IN-DEPTH WORK WITH A SMALL GROUP OF YOUNG PEOPLE

Having identified the patterns of drug and alcohol use among young people, TD1 invited a small group (7 young people aged 16-19 who are known to TD1) to explore the issues around:

- the drivers – why do young people use drugs and alcohol?
- the 'line' between recreational use and problematic use
    - what are the drivers and barriers to stopping or managing drug and alcohol use?
    - what are the issues that influence some people to stop using drugs and alcohol and others to develop problematic use?
- young people's awareness and attitude to use of services to address drug and alcohol use.

All of the young people have long-term relationships with TD1 and all valued their relationship with TD1.

- All the young people are regular users of drugs and alcohol.
- 5 out of 7 live in SIMD lowest 20% areas.
- 4 out of 7 have/had social work involvement in their family.
- 2 out of 7 have current social work involvement, due to criminal behaviour.

DRIVERS FOR DRUG AND ALCOHOL USE

Young people identified 'recreational' drivers for their drug and alcohol use:

- boredom/nothing to do
- Something they did with mates for fun

- ‘It’s the weekend’ attitude

However, they also acknowledged the impact of trauma and mental health challenges on their drug / alcohol use.

- They talked about their sense of self (fitting in, relationship issues etc), challenges in their home life and at school, and things that had happened to their families which affected their mental health and well-being.

- They acknowledged that at times they would take alcohol and/or drugs ‘get through a hard time’, ‘to forget’ or to ‘be happier’

> ***I was quite young when we first moved to Gala, never really knew anyone, was quite lonely, never fitted in... Used to get drunk and smoke loads of weed at weekends, but it just got more often and regular, until it was every other day during lockdown... no-one really understood me or cared, it was a dark time for me.***
>
> Female 16.

> ***When I was younger my parents split up and I was going through a really hard time, I was using drugs daily and getting really drunk at weekends with my pals.***
>
> Female 17

RECOGNISING PROBLEMATIC DRUG/ALCOHOL USE

All the young people recognised the harms to themselves as a result of their drug/alcohol use (over-use of drugs/alcohol, putting themselves in vulnerable situations), and all admitted that they had experienced negative consequences which had made them consider the need to manage and control their drug/alcohol use. However, none of the young people identified their drug/alcohol use as problematic.

WHAT ARE THE DRIVERS TO STOP/MANAGE THEIR DRUG/ALCOHOL USE?

The only drivers to stop or control their drug/alcohol use identified by young people were 'negative' drivers:

- fear of being caught
- being caught by parents or the police
- fear of being 'thrown out' of their parents' homes.

ATTITUDES TO SERVICES

Young people had very limited knowledge of services to address substance use.

It is likely that this is linked to the finding that young people did not perceive their substance use as problematic (until a crisis), and therefore they did not seek services.

However, in general, they held services in low regard, and expressed reluctance to use services.

Young people were reluctant to use services because of the fear of 'having to explain ourselves to people', 'telling them personal stuff' and 'telling them we had taken drugs'.
They were also concerned about information 'getting back to their parents'.

Even in the case of medical emergencies, young people would seek medical help only as a last resort, due to fear of their parents finding out about their drug use or 'involving the police'.

However, other barriers to using services:

- the stigma associated with using drug/alcohol services,
- waiting lists.

WHO WOULD THEY TURN TO IF THEY HAD A PROBLEM/IN CASE OF EMERGENCIES?

The young people all said they wouldn't go to their parents if they had a drug/alcohol related problem or emergency.

They expressed dread at their parents' reaction, saying that their parents would 'go mental at them' 'shout at them' and they were apprehensive about being 'thrown out of the house.'

They also expressed concern about changing their relationships with their parents saying that their parents would be disappointed in them.

All the young people said that contacting TD1 was their fall-back position in the case of problems or an emergency.

When asked why they would contact TD1, they said that:

- TD1 doesn't judge them
- TD1 workers don't get angry or 'lose the head' with them (when they have done something 'wrong')
- They know that TD1 will give them help to sort things out but will give the help 'in the way we want, our way'.

> ***TD1 supported and encouraged me, and they got me help.***
>
> Female 17.

SUMMARY OF FINDINGS

The primary research carried out by TD1, supported by the information provided by partners highlights:

- The impact of environmental factors (poverty and related issues) and adverse childhood experiences (ACEs) on mental health and problematic use of drugs and alcohol
- An increase in the availability and access to drugs (over alcohol), leading to increasing use of drugs, especially in young males
- That young people are starting to use drugs and alcohol at a younger age and that problematic use/behaviours are more evident at a younger age than previously seen
- There is a gap in services for young people who use drugs and alcohol
- Many of the young people with problematic use/behaviours are the hardest to reach (they do not engage in services).
- Even although young people identified the negative consequences of their drug and alcohol use, very few identify their drug/ alcohol use as problematic
    - less than a third (of focus group attendees) said that they wanted advice/ suport to stop
- Even when something goes wrong and young people identify a need for 'help' they are reluctant to use services for fear of 'having to explain themselves' 'involving the police' and 'information getting back to their parents'. They also have little belief that services will help them.
- In these circumstances, young people said they would go to TD1 for help.
- They felt they could rely on TD1 to give them help to sort things out 'in the way we want help' (i.e. young people still felt in control of the process) and that TD1 did not judge them.

SO WHAT?

What are the implications of these findings?

EARLIER INTERVENTION BASED ON BUILDING RELATIONSHIPS

We know from young people themselves and from other partners that 'relationships' are the 'gateway' to support and help for young people.

The research demonstrates that:

- young people frequently do not recognise their own drug/alcohol use as problematic, and only look for suport 'when something goes wrong'
- these are often young people who do not engage in services, but the opportunity to intervene in the build- up to the 'crisis' can be missed if partners are not sharing information with each other,
- when they do need help or support, they are reluctant to use services.

Young people who had existing relationships with TD1 said that their first port of call when they were 'in trouble' would be TD1.

Partners /other agencies that work with young people identified challenges in getting young people to engage in services and highlighted 'relationships with an intermediary' (i.e. TD1) as the critical factor in getting young people to engage in services.

The evidence from the partners also highlighted that children and young people are starting to use drugs/alcohol at an earlier age.

Trust based relationships take time to build. The evidence suggests that there is a need to invest in relationship building with children/young people at an earlier stage (before they transition to secondary school) so that these young people have positive relationships with trusted adults (youth workers) that will support them through the challenges they face.

EARLIER IDENTIFICATION OF YOUNG PEOPLE AT RISK

We need to identify young people who are at risk of harm through alcohol /drug use and engage with them at an earlier stage to the develop these relationships.
How do we know who is at risk?

- We know that very many young people experiment with drugs and alcohol, but do not go on to develop problematic alcohol or drug use .
- The tendency to develop problematic use, and to experience harms, is associated with several risk factors and vulnerabilities. These have been identified through research.

WHAT DOES RESEARCH TELL US ABOUT RISK FACTORS?

The recent study published by the Scottish Government[5] identifies the factors that put young people at risk of problematic drug and alcohol use.

These are:

INDIVIDUAL-LEVEL RISK FACTORS

MENTAL HEALTH

Mental health is both a cause and a consequence of problematic alcohol and drug use. Research provides relatively consistent evidence that drug use during adolescence predicts anxiety, depression and behavioural problems in early adult life.

[5]A review of the existing literature and evidence on young people experiencing harms from alcohol and drugs in Scotland, Scottish Government, Oct 2021

Research shows that:

- externalising disorders in early or middle childhood[6] (including conduct disorder, oppositional defiant disorder, and attention-deficit and hyperactivity disorder) predict problematic alcohol and drug use and dependence in adolescence and young adulthood.
- the evidence is less clear for internalising disorders (including depression and anxiety.

STARTING YOUNG /EARLY USE

- Early alcohol and drug use (prior to the age of 15 years) increases the risk of problematic use in later life.

MOTIVATIONS/REASONS FOR USE

The **motives** for using alcohol and drugs predicts the likelihood of younger people developing problem use.

- Research shows that **coping motives** – the use of substances to cope with negative experiences or emotions (particularly when coupled with poor emotional control or regulation) – is associated with the development of problematic alcohol and drug use

SOCIOECONOMIC DEPRIVATION AND POVERTY

- Poverty itself is not the primary driver of harmful alcohol or problematic drug use, but it increases the risk of exposure to a **range of associated risk factors.**

- The study also highlights links between deprivation and problematic (but not recreational) use, where **harmful drinking and problem drug use is a mechanism of escape or coping mechanism** for those most excluded from society.

ADVERSE CHILDHOOD EXPERIENCES (ACES)

- Research demonstrates strong associations between ACEs and future problematic alcohol and drug use.

INTERPERSONAL RELATIONSHIPS

FAMILY STRUCTURE

- Research demonstrates greater alcohol and drug use, both in adolescence and lifetime, among those from single-parent or step-parent families.

FAMILY RELATIONSHIPS

- Adolescents who have strong bonds with their parents are less likely to engage in problem substance use.

PARENTAL AWARENESS

- Young people who thought that their parents knew a below average amount about what they do and who they are with were more like to use drugs.

FAMILY SUBSTANCE USE

- Higher prevalence of illegal drug use among young people where someone within their family was also using illegal drugs.

CARING RESPONSIBILITIES

- Those with caring responsibilities were more likely to have used drugs in the last month than those who did not.

The SALSUS study also highlighted:

SCHOOL

The more engaged a pupil was with school the less likely they were to have used drugs in the last month. The main factors were:

- enjoying school;
- feeling pressured by schoolwork;
- exclusion from school;
- truanting
- post school expectations (those expecting to go to university were less likely to have used drugs in the last month)

[6]Externalizing disorders are characterized by problematic behaviour related to poor impulse-control, including rule breaking, aggression, impulsivity, and inattention.

RECOMMENDATIONS

EARLY INTERVENTION TO BUILD RELATIONSHIPS WITH YOUNG PEOPLE

We have seen that young people are engaging at an earlier age in risk-taking behaviours, but also that those most vulnerable young people are the ones who do not engage with services.

Community-based youthwork organisations like TD1 Youth Hub have a track record in engaging the most vulnerable and hard to reach young people, and building trust-based relationships which have proved invaluable supporting young people in times of need and in brokering access to other services.

There is a need to invest in community-based youth work services that can build relationships with young people at risk.

This is not a project – it is a way of working to ensure that all vulnerable young people in the area have a trusted adult/organisation who they can rely on to support them 'when things go wrong' in their lives.

EARLIER IDENTIFICATION OF YOUNG PEOPLE AT RISK

How can partners work together to identify young people at risk and start to build relationships at an earlier age?

There is now a body of research which identifies the key risk factors and most vulnerable groups, but many partners already know who these young people are!

There is a need to set up a system for partners to work together to identify young people at risk before they get to secondary school and start to develop community-based youth work interventions to engage them and build those key relationships which will be a 'protective' factor as they move through their teenage years.

A PARTNERSHIP APPROACH TO ADDRESSING THE POVERTY AND TRAUMA THAT DRIVES ALCOHOL AND SUBSTANCE USE AMONG YOUNG PEOPLE.

Young people most at risk of using alcohol and substances are not accessing services. Those who have accessed services have little faith in those services to meet their needs.

While we are acutely aware of the resource constraints which limit partners' capacity to respond, young people who participated in the research wanted it noted that they felt that local services did not meet their needs and that they felt down by local services.

HOW CAN PARTNERS BETTER MEET THE NEEDS OF YOUNG PEOPLE AFFECTED BY DRUG AND ALCOHOL USE?

The challenge of addressing the drivers of alcohol and drug use among young people is enormous, but the human and financial cost of 'doing nothing' is devastating. In the context of limited resources, we need to make best use of partners resources to address the challenges. We need to ensure that partners are identifying young people at risk, and that partners are using their information and resources collaboratively to meet the needs of those young people.

- **IDENTIFICATION**
  Partners often know the young people who are at risk. These young people who are experiencing the effects of poverty, trauma and adversity are known to schools, social work, criminal justice, and wider voluntary organisations and networks.

- **PARTNERSHIP WORKING**
  We need partners to work together to address the needs of these young people.
  We propose the implementation of a collaborative partnership network which would:
  - identify young people at risk,
  - develop collaborative approaches, driven by an understanding and methodology around ACEs to improve the mental health, well-being and life chances of the most vulnerable young people.

HOW DO WE KNOW IT WORKS?

TD1 Youth Hub has a successful track record in supporting young people affected by alcohol use.

In 2014 TD1 Youth Hub received funding support from the Thinking Differently Partnership which funded organisations to trial innovative, preventative interventions designed to reduce alcohol-related harm in young people in Scotland.

The evaluation of the project[7] highlighted the critical success factors in TD1's approach to supporting young people to reduce the harms of alcohol. The critical success factors in the approach were:

- **BUILDING RELATIONSHIPS WITH YOUNG PEOPLE**

TD1's approach recognised that 'education' has a limited impact on young people's drinking behaviour.

- TD1 gained the trust of young people by demonstrating through practical action that they were there to help them to stay safe, not to tell them what to do or not to do.
- A critical success factor was that young people did not feel that they are being told what to do or judged for their behaviour.
- As a result, TD1 made it safe for young people to talk about the reality of alcohol (and other issues) in their lives.

> ***they sit you down, they tell you what the dangers are, but they don't tell you what to do***
>
> Male, 14

- **WORKING WITH THE YOUNG PERSON NOT WITH ISSUE**

The approach was not focused on solely on 'addressing alcohol issues' but supported young people to increase awareness of the issues influencing their lives and develop alternative coping mechanisms so that young people were better able to manage their life circumstances (and reduce reliance on alcohol as a coping mechanism).

- The project demonstrated that it is impossible to address 'alcohol issues' in isolation from the other issues which affect young people lives.

- **TD1 AS A TRUSTED LOCAL ORGANISATION**

TD1 is well known in the community and is a trusted by stakeholders and by young people.

- The bespoke approach to targeting young people at risk (the preventative approach) relied on TD1's knowledge and understanding of 'what's happening' in the community, their relationships with other stakeholders and their knowledge of the needs of particular young people.

> ***I was a nightmare when I was younger, not going to school, getting thrown out of school, smoking weed during the day... drinking Buckfast at weekends, bringing the Police to the door and fighting on the streets... I was off the rails.***
>
> ***But Friday nights with TD1 helped me say no to my mates and talk to people about what was going on for me... this helped me get my life back together. [I'm] now at college, working and looking to get my own place with my girlfriend.***
>
> Male 18

[7]Evaluation of TD1 Youth Hub: Thinking Differently Project, Arrivo Consulting Ltd, 2017 td1_evaluation_2017.pdf

REFERENCES

A key reference document for this report has been 'A review of the existing literature and evidence on young people experiencing harms from alcohol and drugs in Scotland' published by the Scottish Government, Oct 2021

We have provided a brief summary of the findings and the recommendations to provide a context for this local research.

The review provides:

- an overview of the latest data on prevalence and harms related to alcohol and drug use among children and younger people.
- a review of the risk factors contributing to harms among this population and identifies a number of groups particularly vulnerable to these harms.
- a review of the treatment and recovery services available to younger people in Scotland, and explores the wider evidence base on effective alcohol and drug services for younger people.

The key findings are:

- there are signs of increasing harms from alcohol and drugs among younger people, with the emergence of a particularly strong trend for drug-related hospitalisations and deaths;
- the profile of drugs causing harms, particularly hospital admissions, among younger people are markedly different to those among older age-groups
- a range of risk factors can be identified which increase the likelihood of developing harms from alcohol and drug use, rooted foremost in socioeconomic determinants, and;
- there is wide geographic variation in provision of treatment and recovery services for younger people experiencing harms from alcohol and drugs in Scotland, and little evidence of tier 3 and 4 services addressing the specific needs of younger people.

From these key findings a number of recommendations are made, which relate to;

- addressing the (primarily structural) social determinants of alcohol and drug use;
- improving access to alcohol and drug treatment services for younger people, and;
- improving the provision of such services in light of the different developmental needs and different drug-profile causing harms in younger people.

APPENDIX 1: LIST OF CONSULTEES

Name	Organisation
Tracy Hall	Aberlour, Sustain
Angela Freeman	Quarriers, Resilience for Wellbeing Service
Lynsey Laird,	We Are With You
Malcolm Changleng	Depute Head, Galashiels High School

APPENDIX 2: EXTRACT OF SALSUS DATA FOR SCOTTISH BORDERS COUNCIL AREA

ALCOHOL

	Difference from Scottish Average
38% of 13-year-olds reported they had had an alcoholic drink (a 'proper alcoholic drink – a whole drink, not just a sip')	+2%
• **50%** had been drunk	-3%
• **2%** had been drunk more that 10 times	-7%
75% of 15-year-olds reported they had had an alcoholic drink (a 'proper alcoholic drink – a whole drink, not just a sip')	+4%
• **73%** had been drunk	+3%
• **18%** had been drunk more than 10 times	-7%

DRUGS

	Difference from Scottish Average
96% of 13-year-olds had never tried drugs	+3%
• 4% reported trying drugs	-3%
• 4% had used drugs in last year	-3%
80% of 15-year-olds reported they had never tried drugs	+1%
• 20% had tried drugs	-1%
• 20% had used drugs in the last year	+1%
• 15% had used drugs in the last month	-3%
• 3% reported using drugs at least once a week	-

AVAILABILITY OF DRUGS

	Difference from Scottish Average
25% of 13-year-olds reported that it would be 'very' or 'fairly' easy to get illegal drugs if they wanted to	+3%
54% of 15-year-olds reported that it would be 'very' or 'fairly' easy to get illegal drugs if they wanted to	+5%

Obtaining help with drug use

Pupils who had used drugs were asked if they felt that they needed to get help because of their drug use or if they would like to stop taking drugs

	Difference from Scottish Average
14% of 15-year-olds felt they needed to get help because of their drug use	-7%
31% of 15-year-olds would like to stop taking drugs	+13%