



Substance Misuse and Young People in Scotland

A Practitioner Research Report

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A Practitioner Research Report by Claire Kelly, Includem

Introducing the Practitioner Research Placement

At CYCJ our vision is a Scotland where all individuals and communities are safe and flourish; and where Scottish youth and criminal justice is internationally renowned and respected. We aim to make progress towards this vision by improving understanding, strengthening the use of knowledge and evidence, supporting collaborative improvement endeavours, building skills and confidence in the workforce, and better supporting practitioners.

CYCJ's stakeholders are those who are affected by, or have an interest in, youth and criminal justice. We always work in partnership with a range of stakeholders, but practitioners are at the forefront of our activity to achieve our vision. Our three strands of work: practice development, research, and knowledge exchange most closely intersect within the professional workforce. Listening to practitioners to identify practice issues and needs; ensuring that practice and policy are informed by our best knowledge and evidence; ensuring that practitioners can acquire the necessary confidence and skills and working together to design, develop and implement improvements is at the heart of what we do.

What might surprise readers is that supporting practitioner research is an important element of this work. As much of our research is derived from practice, is written about practice and is conducted to inform practice, it naturally follows that practitioners are a crucial component in our research. While much research in the field has tended to simply rely on practitioners to access participants, provide data, or act as participants themselves, we increasingly want to involve practitioners in the 'doing' of research too. Practitioner inquiry often involves direct data collection or analysis of existing data and which focuses on professional practice issues with the aim of directly improving service provision or outcomes for service users and organisations. This type of activity therefore has the potential to develop capacity and skills in both the practice and research arenas, as well as deliver improvements in practice and outcomes.

This short report is the output from a pilot practitioner research placement, jointly embarked upon by CYCJ and Includem. Includem provide intensive, bespoke support to young people and families in challenging circumstances, including where there is harmful behaviour such as alcohol and drug misuse, or offending. Includem were keen to support workforce development in their own organisation, and CYCJ was keen to incorporate practitioner perspectives in its outputs, as well as start to test out our thinking around a practitioner research programme. A short project was identified that was of mutual benefit to both organisations, and a practitioner (Claire Kelly) selected through a brief application process. Includem committed to freeing up two days per week of practitioner time over a period of three months. CYCJ committed to providing weekly support and supervision, office space, access to University systems and advice and guidance during this period.

There was much learning gained from the pilot placement, both in terms of the placement itself and in relation to the new knowledge gained by both organisations. As Claire herself says: "By conducting this research paper I was able to use this knowledge and think about my current practice. The literature review provided me with more knowledge and theories that I am able to pass on to colleagues to adapt current ways of working to ensure that we are all supporting young people with substance misuse with the best resources."

CYCJ is now reflecting on how we can further take our practitioner research aims forward. If you have any ideas about your own practitioner research please do not hesitate to get in touch.

Introduction

Substance misuse is an issue that affects young people in many ways. This report aims to bring young people's voices to the forefront to assist CYCJ to understand perspectives on the relationship between substances and offending behaviours. It will also support Includem in understanding their working practices to ensure that young people are getting the best, most relevant and up-to-date support.

The Advisory Council on the Misuse of Drugs (ACMD) defines 'problem drug use' in [Hidden Harm \(2003\)](#) as *any drug use which has serious negative consequences of a physical, psychological, social and interpersonal, financial or legal nature for users and those around them.*

The [World Health Organisation](#) (WHO) describes substance abuse as *"...the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs. Psychoactive substance use can lead to dependence syndrome."*

Substance misuse is undoubtedly an issue in Scotland. A recent article by [The Guardian](#) highlighted that reported drug deaths in Scottish adults are among the highest in Europe. Other [studies](#) report that young people in Scotland drink more alcohol than their European counterparts. This elevated rate of consumption in Scotland will almost certainly have a negative effect on young people, their families, communities and future prospects.

The main reasons for carrying out this review were to enable the production of a summary of the research literature, consisting of the voices of young people to inform and update practitioners and to aim for an improvement in best practice. This report will conclude by making recommendations for Includem, CYCJ and the wider environment about the resources needed to support young people accordingly with substance misuse problems.

Method

This research was completed by carrying out a brief literature review of previous research reports on this topic. The focus is on presenting findings from reports, studies and research that have been predominately carried out in Scotland, and that include feedback from young people, either in terms of self-reported data or in documenting their lived experience. A total of 15 studies were included in this review, and each of these are summarised in Table 1. In addition there were informal discussions with practitioners from Includem on the "key themes" emerging from the literature review. This allowed practitioners to voice their current day-to-day interactions with the young people they work with and how they help them to manage situations where they have become involved in the misuse of substances. It was important to discuss how workers felt about the findings from the literature review and whether it reflected what they were dealing with on a daily basis. Further details of these discussions are reported in the Includem section of this document.

Background and context

There are many research studies that have indicated that there has been a significant decline in the number of young people that are using substances in Scotland. The Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) is part of an important and long established series of national surveys on smoking, drinking and drug use and is conducted on a biennial basis, targeting secondary school pupils in local authority and independent schools. These surveys collect information on the prevalence and patterns of smoking, drinking and drug use among secondary school children in Scotland and includes questions about the availability and sources of supply of cigarettes, alcohol and drugs. It also includes questions

on family circumstances, parental knowledge and monitoring of children's activities, and how much money children have to spend. The target population is all pupils in Secondary 2 (S2) and Secondary 4 (S4) in Scotland with a random, nationally representative sample of S2 and S4 pupils drawn, with classes as the primary sampling unit. Pupils are mainly 13 or 15 years of age at the time of the survey. This paper draws on the findings from the first SALSUS report in 2002 and compares them to the findings from the 2015 survey (the most recent publication) in order to identify key changes in adolescent substance use over time.

Table 1: Comparison of The Scottish Schools Adolescent Lifestyle and Substance Use Surveys (SALSUS) between 2002 and 2015

SALSUS 2002	SALSUS 2015
Samples	
1135 classes in 314 schools	1182 classes in 264 schools
The overall response rate was 65%	The overall response rate was 53%
Smoking	
Among 13 years olds 8% report being regular smokers	Among 13 year olds 2% report being regular smokers
Among 15 year olds 20% report being regular smokers	Among 15 year olds 7% report being regular smokers
Use of e-cigarettes not recorded	24% of regular smokers and 1% of non-smokers report using e-cigarettes
Drinking	
Among 13 year olds: 23% report drinking alcohol in the last week	Among 13 year olds: 4% report drinking alcohol in the last week
Among 15 year olds: 46% report drinking alcohol in the last week	Among 15 year olds: 17% report drinking alcohol in the last week
Drug use	
Among 13 year olds 13% had ever used drugs	Among 13 year olds 5% had ever used drugs
Among 15 year olds 37% had ever used drugs	Among 15 year olds 19% had ever used drugs
Among 15 year olds, 21% used cannabis in the last month	Among 15 year olds: 17% have ever used cannabis with 10% using it in the last month
Not detailed	Among 15 year olds: 5% have ever used ecstasy with 3% using it in the last month
Not detailed	Among 15 year olds: 4% have ever used cocaine with 2% using it in the last month

In 2002 it was reported that among 13 year olds, 9% of girls and 6% of boys were regular smokers. Among 15 year olds, 24% of girls and 16% of boys were regular smokers. Regular smoking has shown little change among 13 year old boys and girls and 15 year old girls over the last twenty years. However, there has been a decline in the prevalence of regular smoking among 15 year old boys from 29% in 1982 to 16% in 2002. Most pupils reported that their families had a negative attitude towards smoking. Very few reported smoking with members of their family. In 2015 smoking in 15 year olds was lower again with 7% described as regular smokers and 5% as occasional smokers. Use of e-cigarettes while not recorded in 2002 had

increased markedly between 2013 and 2015 across both regular and non-smokers. However, regular use of e-cigarettes has only risen amongst smokers.

In 2002 almost a quarter (23%) of 13 year olds and almost half (46%) of 15 year olds reported that they had drunk alcohol in the week before the survey. There were no gender differences in the reported prevalence of drinking in the previous week. Drinking more than once a week was reported more often by 15 year olds (38%) than 13 year olds (17%). The types of drinks most commonly consumed were 'beer, lager or cider' for boys (66%) and 'spirits' or alcopops' for girls (69% and 67% respectively). Among 15 year olds, the average number of units of alcohol consumed by pupils who had drunk alcohol in the week before the survey was 14 for boys and 11 for girls. Having an argument or fight was reported by 20% of 13 year olds and 34% of 15 year olds who had drunk alcohol. In the 2015 report drinking in the last week was more common than smoking regularly or having used drugs in the last month. Among 13 year olds 4% drank alcohol within the last week. Among 15 year olds, 17 % reported drinking in the last week. The more money a pupil had per week to spend, the more likely they were to have used substances. The relationship in this respect was particularly strong for alcohol. Those with £30 a week to spend were almost three times as likely to have drunk in the last week as those with less than £5. Twenty percent of 15 year olds spent more than £20-£30 on alcohol and 26% spent more that £30.

In 2002, just over a third (37%) of 15 year olds and 13% of 13 year olds reported that they had ever used drugs. In both age groups boys were more likely to have used drugs than girls: 9% of 13 year old boys used drugs in the last month compared with 6% of 13 year old girls, and 24% of 15 year old boys reported using drugs in the last month compared with 21% of 15 year old girls. In 2002, cannabis was the most commonly reported drug used in the last month: 21% of 15 year olds and 6% of 13 year olds. Very few pupils reported using any other drug. Seven percent of 15 year olds and 2% of 13 year olds reported using drugs on a weekly or daily basis. There has been a decrease in the proportion of pupils reporting that they have ever used drugs, which in 2015 was 5% for 13 year olds and 19% for 15 year olds.

This report shows that young teenagers in Scotland are much more likely to drink alcohol than smoke cigarettes. [Alcohol Focus Scotland](#) describe that "Teenagers in the UK report some of the highest rates of alcohol use in Europe". Alcohol consumption is also far more prevalent than illegal drug use. However, in 2015, SALSUS added a review on **New Psychoactive Substances**. It described new psychoactive substances (NPS) as drugs which were designed to replicate the effects of illegal substances like cannabis, cocaine and ecstasy whilst remaining legal and are more known to young people as 'legal highs'. These drugs have increased in popularity over the last decade. This review provided key facts and messages as shown below:

1. New Psychoactive Substances (NPS), sometimes misleadingly known as 'legal highs', are drugs which are designed to replicate the effects of illegal substances (and some have become classed as illegal themselves). The 2015 SALSUS data shows the use of NPS among 15 year olds is low compared with cannabis use and is comparable with the use of ecstasy and cocaine.
2. 13% of 15 year olds reported that they had been offered some form of NPS. This compares with 37% who had been offered cannabis, 17% who had been offered ecstasy and 11% who had been offered cocaine.
3. Among those who had used NPS in the previous month, the most popular NPS were synthetic cannabis (72% of pupils who had used an NPS in the previous month had taken it)

and mephedrone (71% had taken it). But around half (48-54%) had taken each of the other categories of NPS.

4. As well as being more likely to have taken drugs overall, boys were also more likely than girls to have taken an NPS: 18% of 15 year old boys who had taken drugs in the past month had taken an NPS, compared with 9% of girls.

5. There was no clear pattern of NPS use in terms of area deprivation.

There are limits to the SALSUS surveys as they only target two age ranges and will not manage to record the experiences of those not attending school. The reports recognise the importance of targeting young people that are outwith education to ensure that they have their views heard. Those young people that are outwith school are meant to be given the opportunity to complete this survey but SALSUS acknowledge that this can be a difficult task to follow up. It is imperative to learn these views and to establish the reasons why they become involved in substance misuse, in order to be able to support the root cause of their problems. Alternative measures should be put in place to ensure that all young people are in a position to take part in such surveys.

In 2016, Aileen Campbell, the public health minister, [stated that the SALSUS](#) findings were *"encouraging" with teenage drug, alcohol and tobacco use "among the lowest levels recorded by the survey"*. She added: *"The drop in drinking, smoking and drug use in recent years is testament to the significant work being done around the country with young people to promote positive alternatives to substance use. Drug taking in the general population is falling and among young people the levels are stable and very low. The majority of pupils have never used drugs, 95 per cent of 13-year-olds and 81 per cent of 15-year-olds. We have an ambitious programme for substance misuse education to ensure that all young people in Scotland have credible and accessible information and advice on drugs, to help them make the right choices."*

David Liddell, director of the Scottish Drugs Forum, said in the same article that young people living in poverty were more likely to be vulnerable to substance abuse and expressed worry that a long-standing reduction in drug use among teenagers, seen over the last decade-and-a-half, seemed to have halted. There also appears to be a contradiction as although there has been a decline in the number of young people that are involved in substance misuse, the [latest figures](#) show that a record number of 934 people died in Scotland as a direct result of drug overdoses, more than double the number a decade ago and two and a half times the rate UK-wide. This is the largest number of drug-related deaths in Scotland since the series began in 1996, and more than double the figure for 2007. Also, although SALSUS 2015 reported that prevalence has declined considerably over the last couple of decades, they also observe that substance use prevalence has remained largely stable since 2013.

Furthermore, an international comparison of health and wellbeing in adolescence and early adulthood by [Shah, Hagell and Cheung \(2019\)](#) explored how key indicators of the health and wellbeing of young people in the UK compare to those of their counterparts in a selection of similar high-income countries both within and outside of Europe. The UK was among the top three countries where girls aged 15 to 16 years were most likely to have been drunk in the previous month. Additionally, the proportions of 15 year olds using cannabis in the past 30 days were relatively low for England and Wales, but higher for Scotland. The [2015 European School Survey Project on Alcohol and Other Drugs \(ESPAD\)](#) involved 36 European countries, the UK comparing poorly in terms of rates of being drunk when underage (Hibell et al, 2012).

It is therefore important to carry out this literature review to explore these issues and to further our understanding of young people's substance misuse, especially from their own perspective, in order that services can consider how best to provide support to young people.

Research Overview

Fifteen articles were identified for inclusion in the literature review and the description of what they examined is described in Table 2.

Table 2: Summary of included research studies in this review

1.	<p><u>Why do young people drink? A review of drinking motives.</u> Kuntsche, E., Knibbe, TR., Gmel, G. and Engels, R. (2005)</p> <p>This report consisted of a literature review which collated the literature from 1988 to review evidence of adolescent and young adult drinking motives and their relation to possible consequences. Results revealed that most young people reported drinking for social motives, some indicated enhancement motives, and only a few reported coping motives. Social motives appeared to be associated with moderate alcohol use, enhancement with heavy drinking, and coping motives with alcohol-related problems.</p>
2.	<p><u>Youth Crime and Justice: Key messages from the Edinburgh Study of Youth Transitions and Crime</u> McAra, L. and McVie, S. (2010)</p> <p>This study carried out a longitudinal study of around 4,300 participants who started secondary school in 1998, and which comprised of over ten years of fieldwork. The report highlighted that violent behaviour was strongly associated with other forms of problematic behaviour amongst boys and girls, including bullying others, frequent truancy from school and substance misuse.</p>
3.	<p><u>SALSUS - National reports (figures from 2002 and 2015)</u></p> <p>The Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) is conducted on a biennial basis, targeting secondary school pupils in local authority and independent schools and provides an insight into young peoples' smoking, drinking, and drug use behaviours within the context of other lifestyle, health and social factors.</p>
4.	<p><u>Hidden Harm: Responding to the needs of children of problem drug users (2003)</u></p> <p>Hidden Harm is the report of the Advisory Council on the Misuse of Drugs' Prevention Working Group about the impact of parental drug misuse on children. The Group had a total of 15 all-day meetings between July 2000 and January 2003 and carried out extensive reviews of published research and reports, commissioned analyses of existing data and national surveys and took evidence from a wide range of expert witnesses. The report is only concerned with problematic drug use and bases its estimates on those problem drug users who have accessed treatment, and as such may be an underestimate of the number of children affected by parental substance misuse more broadly.</p>
5.	<p><u>A longitudinal study of alcohol use and antisocial behaviour in young people</u> Young, R., Sweeting, H. and West, P. (2007)</p> <p>This paper examines the relationship between alcohol misuse, antisocial behaviour and alcohol-related trouble among young people in the west of Scotland in the mid-late 1990s. The school-based 'West of Scotland 11-16 Study' recruited children during their final year of primary schooling (age 11, in 1994–95), following up at ages 13 (1996) and 15 (1999). This report found the results strongly support that antisocial behaviour is a substantive cause of, or predisposing factor to, alcohol misuse, a pattern observed in most sub-groups.</p>

6.	<p><u>SPICe Briefing Drug misuse</u> Davies, D. (2017)</p> <p>In 2008, the Scottish Government published its National Drugs Strategy, The Road to Recovery. The strategy focusses on the concept of recovery and developing person centred approaches to treatment. This Scottish Parliament briefing outlines the Scottish Government's national drugs strategy. It then provides a summary of the prevalence and trends of drug use in Scotland, drawn from published data, before discussing approaches to drug treatment and services available in Scotland.</p>
7.	<p><u>The Children's Hearings System: Understood and Making a Difference: Young people's views</u> Whitehead, I., Hanson, L., Henderson, G. Scottish Children's Reporter Administration (2011)</p> <p>This research aimed to find out if being involved in the Children's Hearings System makes a difference to the lives of young people involved in it. Twenty one young people aged between 11 and 17 years took part in the research. Most of the young people in this research felt their lives had got better since being involved in the Hearings System. Young people whose parents had substance misuse problems felt that the Hearings System had not only kept them safe but that it had provided the motivation for their parents to address their behaviours.</p>
8.	<p><u>Adolescent substance use in the context of the family: a qualitative study of young people's views on parent-child attachments, parenting style and parental substance use.</u> McLaughlin A., Campbell A. and McColgan M. (2016)</p> <p>This paper aimed to explore the risk and protective factors for youth substance use within the context of the family with a view to informing family based interventions. Nine focus groups supplemented with participatory techniques were facilitated with a purposive sample of 62 young people (age 13-17 years) from schools across Northern Ireland.</p>
9.	<p><u>Young People in Drinking Societies? Norwegian, Scottish and Swedish adolescent's perception of alcohol use.</u> Kloep, M. (2001)</p> <p>This paper surveyed 4,000 teenagers of 11-16 year olds in Norway, Scotland and Sweden to identify similarities and difference in drinking behaviours. The study explored young people's drinking contexts, their motives for drinking, and their 'learning' experiences with alcohol. The results showed that Scottish teenagers drink the most, although it was not clear what factors explained this difference.</p>
10.	<p><u>'You can't go without a fag [...] you need it for your hash': A qualitative exploration of smoking, cannabis and young people.</u> Amos A., Wiltshire S., Bostock Y., Haw S. and McNeill A. (2004)</p> <p>The paper examines the relationship between smoking tobacco and cannabis use among smokers in their mid-to-late teens. There were two qualitative studies in Scotland. One study used semi structured paired interviews involving 99 16-19 year old smokers; the other comprised of eight focus groups involving 46 15-16 year old smokers. The interviews and focus groups explored the role and meaning of smoking in the participants' lives, smoking histories and future cessation intentions and how these related to other aspects of their lives, particularly cannabis use. This paper found that cannabis use was regarded as an important and enjoyable aspect of many of the participants' lives. Importantly, cannabis use and cigarette smoking were linked inextricably. Several reported how smoking joints had been a 'gateway' to smoking</p>

	cigarettes. While most wanted to quit smoking cigarettes, cannabis use reinforced their cigarette smoking and few wanted to stop using cannabis.
11.	<p><u>The Road to Recovery: A New Approach to Tackling Scotland's Drug Problem</u> The Scottish Government (2008)</p> <p>This publication explains that an estimated 52,000 people are problem drug users. This meant that almost 1 in 50 of the population aged between 15 and 54 were experiencing or causing medical, social, psychological, physical or legal problems because of their use of opiates, such as heroin and benzodiazepines. The study found that, although the use of different methodologies and definitions makes exact comparisons difficult, Scotland's rate of problem drug use also seems to be much higher than in England or in other similar European countries such as Ireland, Finland or Denmark.</p>
12.	<p><u>Young People's Street Drinking Behaviour: Investigating the Influence of Marketing & Subculture</u>, Galloway, J., Forsyth, A. and Shewan, D. (2007)</p> <p>This qualitative study examined the street drinking behaviour of young adults (aged between 16 and 25). Twenty four focus groups were conducted with naturally-occurring groups of street drinkers recruited in outdoor locations. The study found that being detected by the police and the threat of violence were major concerns whilst drinking outdoors.</p>
14.	<p><u>The Scottish Prison Service Prisoner Survey</u> (2017)</p> <p>This report describes the key findings of the Scottish Prison Service's (SPS) biennial Prisoner Survey. The Survey, which is undertaken in each of the 15 Scottish prisons, is distributed to all Scottish prisoners, and 46% responded. The survey includes questions about prisoners' substance use in the community, at the time of the offence and while in prison.</p>
15	<p><u>Association between illegal drugs and weapon carrying in young people in Scotland: School Survey</u>, McKeganey N. and Norrie J. (2000)</p> <p>This research identified the type and extent of weapons being carried among young people in Scotland. The relationship between use of illegal drugs and weapon carrying was also explored. Twenty students across school in central Scotland, Lanarkshire and Perth and Kinross were included in the study. This report highlighted that there is a need to provide support at the earliest intervention to those young people that are getting involved in substance misuse as this is proven to have a higher impact on violence offences in Scotland.</p>

Key themes

Five main key themes arose from the brief review of the literature and can be identified as:

- Offending
- Family influences
- Community
- Education
- Sexualised behaviours

These key themes were reviewed and analysed throughout the paper. Each theme involves the young person's views and their personal experience with substance misuse in regards to offending, family influences, community, education and sexualised behaviours.

Offending

Offending has often been found to be associated with substance misuse. The Edinburgh study of Youth Transitions and Crime highlighted that there were important changes in the lives of cohort members who experienced criminal convictions in their teenage years; and these changes occurred primarily between the age of 13 and 15. Early onset convictions occurred against a backdrop of social deprivation, broken and turbulent family relationships, an early history of agency contact, and high levels of self-reported serious offending and substance misuse. The study reported that a deterioration in these factors in the early to mid-teenage years is a precursor to a later onset of conviction.

Violent behaviour was strongly associated with other forms of problematic behaviour amongst boys and girls, including bullying others, frequent truancy from school and substance misuse, as reported by SALSUS 2015. Frequently reported consequences of drinking, particularly among girls, was having an argument: reported by 29% of 13 year old girls and 47% of 15 year old girls compared with 22% of 13 year old boys and 32% of 15 year old boys. Boys were more likely than girls to report that drinking had led to fighting in the last year: reported by 19% of 13 year old boys and 20% of 15 year old boys compared with 14% of 13 year old girls and 17% of 13 year old boys. Boys that drink alcohol were most likely to get into a fight and be hospitalised, while girls that drink alcohol are more likely to get involved in verbal arguments and end up in situations where they feel unsafe. Around one in five pupils who had ever drunk alcohol reported that they had been in trouble with the police in the last year because of drinking, with just under one in ten having been taken home by the police. Substance use could also lead to further illegal substance use. One in five 15 year olds and around one in ten 13 year olds reported having tried drugs in the last year as a result of drinking.

In examining the association between illegal drugs and weapon carrying in young people in Scotland, McKeganey et al (2000) found that 34.1 % males reported carrying a weapon while 8.6% females reported carrying a weapon. Furthermore, it highlighted that both males and females who used drugs had significantly higher rates of carrying a weapon (63.5% of male drug users versus 20.5% of non-users and 22.8% of female drug users versus 3.7% of non-users). Males tended to become more heavily armed as the number of illegal drugs used increased, with the percentage carrying at least two weapons increasing from 3% for no drugs to 55% for five or more drugs. This report also described that among 14 to 15 year olds in the

United Kingdom, the proportion having friends who carried weapons was closely associated with the extent of illegal drug use.

Finally, the Scottish Prisoner Survey 2017 reported that nearly 40% of prisoners (including 54% of young offenders in Polmont YOI) were drunk at the time of their offence being committed. Similarly 38% of prisoners reported being under the influence of drugs at the time of their offence and around one eighth of prisoners reported that they committed their offence to get money for drugs (15%).

Family influences

The [Scottish Government](#) currently estimates that around 40,000-60,000 children in Scotland may be affected by parental problematic drug use and that, of these, 10,000-20,000 may be living with that parent. Children of substance misusing parents face particular problems. These children suffer chaotic domestic circumstances that often surround problem drug or alcohol use in the family, can be affected by poverty, poor housing conditions, low academic achievement and criminal activity. Parental problematic alcohol and drug use can also have a very detrimental impact on the health and wellbeing of some children. Children can be at increased risk of experiencing violence and maltreatment when living with parental problematic drug and/or alcohol use and can be vulnerable to not having their social, emotional or physical needs met, particularly if there is no other social support available to ameliorate the impact of drugs on family life. Many practitioners that work in the line of social care are aware of Bowlby's attachment theory that all young children need to have a "secure" stable base where there are routines, structure and rhythms to feel safe. Those under the influence of substances may not be able to meet these needs. One young person in the report from The Children's Hearings System 'Understood and Making a Difference' said:

"If I wisnae on supervision I'd probably still be living with my mum, eh? She was a drug user...So it's, like, better...I've have been in a bad environment if I hadn't been put on supervision, eh?" (Male, 16 years)

Hidden Harm reported the home life of the young people, which included: the uncertainty and chaos of family life dominated by drug use; children witnessing their parents' drug use, despite parental efforts to conceal it; exposure to criminal activity such as drug dealing, shoplifting and robbery; disruption of their education; having to act as carers for their parents and younger children; and living with the fear of public censure and separation. The children described feelings of hurt, rejection, shame, sadness and anger over their parents' drug problems. They often expressed a deep sense of absence and isolation which was conveyed in the often used phrase that their parents were not 'there for them'. Many young people with substance-misusing parents can become young carers, as one young person described in the report Hidden Harm (2003):

"I'd be left with Ian and all that and I had to like take care of him and all that but she [her mother] didnae really know. She'd come round for a wee while and wake up and all that but then she'd go and take more stuff and she'd be sort of out of it and she couldnae even bloomin' boil a kettle or something to make his milk or something"

Also of importance for families is the role that social learning processes play in modelling the behaviours and attitudes regarding substance use and in providing opportunities to gain access to substances (McLaughlin et al, 2016). Evidence suggests exposure to parental substance misuse can place adolescents at risk of involvement with drugs and alcohol. As one young person from the Road to Recovery (2008) report described growing up:

"I just think, growing up with that, I don't think it's actually the family that's encouraging it but it's just growing up seeing that. I mean if you're watching your own mother do that (take drugs), you're not 'gonna think it's wrong" (Female, 15 years)

However, families can be an important source of support and information for young people. [Drinkaware](#) highlight that it is important that parents and carers have open and honest discussion about substance misuse. One young person agreed with this by stating:

"Yeah because I think if you're clear with your parents about what you're doing, you're more likely to be given more freedom, and you'll probably be more safe as well. I know some of my friends, their parents don't like them drinking, so they go behind their parents back and probably drink more than I would, because I don't know, yeah I think it's good to have a good open relationship with your parents about that sort of thing... Yeah I think it's helped me make, become, be more responsible with it" (Young person aged 17)

A young person in the report 'The Road to Recovery' (2008) also comments:

"If you have a good relationship with your parents then you'll know what's right and wrong. But if you don't, then with friends, you don't know whether what they're doing is right or wrong" (Male, 14 years)

Community

Substance use is often a social activity for young people and adults alike. SALSUS, (2015) included questions on whether the young person's friends smoked, of those 13 year olds that answered 30% stated that "all or most of their friends" were regular smokers, among the 15 year olds, 35% were described as regular smokers.

The study 'Why Young People Drink' (2005) highlighted that most people drink for social reasons, stating that for 14-16 year olds in the UK the most likely reason to drink alcohol was to make a party more enjoyable (94.4% of male heavy drinkers reported this). This research also suggests that drinking habits can be established in adolescence. From this study a young person stated:

"... when I was younger I used to get drunk every weekend. Just doon the street. I don't see the point anymore. I prefer to go somewhere and have a few and something like that" (Male, 15 years)

Drinkaware is an organisation that talks to young people about substance misuse. In an [Ipsos MORI report](#) they published in 2015 they found that around one in three (32%) young people say they have felt encouraged to drink by others. Just under one in five (18%) have felt encouraged to drink by a friend their own age or younger, while around one in eight (12%) were encouraged by an older friend. Seven percent say they have been encouraged to drink by a parent or another adult relative. The key motivations behind drinking among 10-17 year-olds are social with nearly two thirds (65%) saying they drink to improve parties or social gatherings at least some of the time. A similar proportion (63%) drink for enhancement reasons, because it is fun, because they like the feeling or want to get a 'buzz'. However, almost three in five (57%) drink for conformity reasons and around two in five (44%) drink to cope with negative feelings, at least some of the time.

There are also community factors that influence substance use. SPICe 2007 highlights that problem drug use has strong links to poverty and deprivation. Individuals from deprived communities are more likely to have experienced psychological trauma and mental health

issues, leading to the use of high-risk drugs to escape psychological stress and trauma. According to SPICe 2017, the most frequently reported reasons for trying NPS were: ease of access, curiosity socially embedded reasons (e.g. because friends were using it) and price.

One young person in Hidden Harm described his reasons for smoking cannabis:

"When I was younger, where I stay there is a lot of trouble and fighting and things like that, I found if I was in having a smoke I wasn't going out and getting involved with that—relax, just get stoned"

Education

SALSUS (2015) reports that all of the school-related variables in the survey were associated with all forms of substance use. Overall, the more engaged a pupil is with school (e.g. if they like it or if they have not been excluded etc.) the less likely they are to use substances. Many young people disengage from school for varying reasons. However, those at most risk are those out with education and may not actually be in school to complete the survey. Many of the research papers make comments about the fact that if a child is out with education and has low levels of attainment this increases the chances of young people getting involved in smoking, drink and taking drugs. As another young person described in Addicted Britain: The State of the Nation Report (2006):

"I used to stay off tae make sure my Ma didnae get drugs and all that... 'cause I hate it... I'd follow her and not let her do it... like I would make sure she stayed in the house with me"

Young people that are out with an educational setting have less opportunities for learning and development opportunities and they suffer from poor overall health and wellbeing, self-esteem and confidence through lacking achievement and not having the support for reaching their potential. Even those that do attend school can miss reaching their full potential as they can be constantly thinking about their families who are using substances, as described by another young person from the same report:

"...when I went to school I thought right I'll not get shouted at, I'll no' get hit and I'll no' get the rest of it and I'll no' see them taking drugs and I thought at school, at the same time, kinda thing, what's gonnae happen the day when I'm not in the house? What's gonnae happen, what's ma Mum and Dad gonnae do the day kinda thing?"

Some young people spoke of the need for a change of school to support them to get on better, one young girl described in the report from the Children's Hearings System: Understood and Making a Difference (2008) :

"Aye, well happy...comin' intae a new school an' all that, that's made a change an' all that, from what I was... I never used tae gae tae school. I hated it, but I love it now... and movin' intae a new hoose..." (Female, 15 years).

In the SALSUS survey, pupils were asked how useful they had found the lessons on drugs. Pupils in 2015 reported that they recalled having lessons on drugs and also reported that they had found the lessons useful: 78% of these 13 year olds and 71% of these 15 year olds found the lessons 'very' or 'fairly' useful. Pupils who recalled having lessons were more likely to report that they would know where to go for information on drugs: 76% of 13 year olds and 81% of 15 year olds who recalled lessons, compared with 63% of 13 year olds and 70% of 15 year olds who did not recall having lessons.

Sexualised Behaviours

Young females reported that they often regret things that they do when they are under the influences of substance in terms of sexualised behaviours. Among 15 year olds who reported drinking alcohol, 14% reported having unprotected sex as a result (SALSUS 2015).

Hidden Harm (2003) describes those that get involved with substance misuse at an early age are much more likely to place themselves at risk of pregnancy or sexually transmitted diseases. There is potential that these young problem drug users, especially females, may resort to prostitution or sexual favours to pay for drugs or unpaid debts as drug use escalates, resulting to criminal behaviours to fund these addictions.

The report into Young People's Street Drinking Behaviour described that predatory behaviour of older males encountered whilst street drinking was commonly reported as a problem by female drinkers. Experiences of sexual harassment appeared in a number of accounts within the report, with females describing the sexual threat they felt they faced when out drinking. Though such risks were recognized, these dangers did not appear to be taken too seriously and many teenagers start to normalise these behaviours while under the influence of substances.

One young male commented in the report 'Young People's Street Drinking Behaviour' (2007):

"See her? I took her virginity in that bush there. She's not a virgin any mair [points to intoxicated girl]"

Other young people expressed that they drink for the reasons such as giving them the opportunity to meet other young people of similar sexuality. As another girl described in the same report:

"Yeah, pull and drink at the weekend. Coz there's other people like us there, who all hang about there, other lesbians"

This comment can be linked to what other young people voice. That when under the influence of drugs and alcohol they tend to get themselves into more harmful sexualised risky situation that they wouldn't normally get involved in if they were sober. This "normalising" of such sexualised behaviours can have detrimental impacts on the young person's wellbeing.

This literature review provided evidence that adolescent substance misuse is associated with a wide range of short and long-term adverse outcomes in terms of young people's needs and underpins the need for the development and implementation of programmes designed to reduce adolescent substance misuse. Monitoring these trends in adolescent substance misuse use is essential for understanding changes in behaviour over time to informing an appropriate policy response. It is important that the message should be clear that children should be protected from substance misuse to keep them safe, and that we should all work together to making it a priority that young people are supported through substance misuse.

What do young people say about practice?

Many young people often talk about the relationship that they have with their Key Worker as an important source of support and a massive catalyst to change. In 2006, the Centre for Drug Misuse Research evaluated drug projects working with young people, and within this one young person explained that:

“Ah really really did get on wi’ ma keyworker. Ah loved her, she was brilliant. She helped me get off the drugs, she was there for me whenever ah needed her. She was just brilliant. All the good things ah’ve been able tae dae ah put down tae (project worker). She was like that wi’ us all, she wasnae just yer keyworker, she was yer friend”
(Young person attending Perth Connect)

Young people need to be supported at a level that suits their needs in terms of their substance misuse and want to be feel in control of their support plans. Young people like to have an input into the supports that they need and want so that they feel accomplished in the changes that they make. Within the same report one parent described the support her son received at the drug project:

“Ah think the guy, the way he was with him, he dinnae lecture him or anything like that, he really had a nice way wi’ him and they’d have relaxing chats..... They had a laugh and things which wis good ‘cos ah think if he had been all....ye know, asking questions and stern and stuff it widnae have worked at all. Ah think (the project) is a great idea, ah really do. He wis really taken wi’ the guy”

Another other young person described their support as a positive:

“I can say ‘no’ to like smack, speed, I can say ‘no’ to all that. Cos, just like here we have talks, like talking about what the stuff actually does tae you, the side effects and things like that. We’ve had videos and everything that I’ve looked at with people on it, and it was like a reality check, like “Is that what people see me like?” I never want to go down there again” (Young person attending Perth Connect)

One young person explained that his drug project worker understood his needs and personality which he then respected in his work with him:

“[I liked] the sense a’ humour wi’ [project worker] ‘cos he’s funny so [...] that wis mare interesting instead of boring”

When young people were asked about their substance misuse and, more specifically cannabis use, within the Amos et al (2003) study, several young people reported how smoking joints had been a ‘gateway’ to smoking cigarettes. Cannabis use and cigarette smoking were linked inextricably. A comment made by a male boy that was interviewed:

“I’ve tried to stop smoking but like I say, the green [cannabis], you need just like. You cannae go without a fag for, well I can go without smoking it sometimes, but you need it for your hash”

This is a cause for concern as the health implications are not fully understood and it is important for practitioners to target those who smoke cigarettes as there is evidence to support that this can lead to smoking cannabis.

Young people also wanted to be recognised for their own achievements to galvanise change. Their commitment to change is something that young people feel should be more widely

recognised. In the 2011 report by the Children's Hearings System sharing young people's voices, one boy pointed out:

"it's up to yersel' what you dae, isn't it? You can either change things or just leave it the way they are..." (Male, 16 years)

Another agreed, saying:

"I think it was down to me, to be honest...I had help obviously but I don't think the Panel Members made any difference, to be honest..." (Female, 15 years).

From the literature review it could be suggested that more research is needed to allow young people's views to be heard as it was difficult to find many examples of what young people think and feel on this topic. The views represented are mainly those of young people who have experienced parental substance misuse or the professional viewpoint through which the views of young people are reflected.

Reflecting on the literature from Includem's perspective

This part of the paper will focus on the implications for practice following informal discussion with Includem practitioners who are directly involved in supporting young people affected by substance misuse.

About Includem

Includem provides an intensive support service which is individually tailored to young people's needs and learning styles. Sessions with young people, or "contacts", are individually tailored and deliver a high frequency level of support and include access to the 24 hour, seven day a week Helpline. This intervention is supplemented with 'A Better Life', Includem's dynamic, research-based series of practitioner modules, which aid a young person to address certain problematic behaviours and move towards a more pro-social life.

Includem workers spend the first 12 weeks of support completing 'This is my life', the first module from "A Better Life". This first unit consists of getting to know the young person's interest, hobbies, and any enjoyable activities that can be used as a "hook" to form positive relationships with the young person. This first 12 week of assessment period allows the young person to think about "what is working well and not so well" (another exercise that is used). This enables the young person to think about what it is specifically that they would like to work on and what goals that they would like to be supported by Includem to achieve. These goals range from wanting increased attendance in school, having better relationships with family, reducing their drug use, having less police involvement, and so on.

There is previous research conducted by Dartington Social Research Unit from 2013-2016, evaluating the outcomes of Includem's IMPACT project. The IMPACT project is a specialist support service for young persistent and violent offenders aged 14-21, who are known to the police. Includem work in partnership with Police Scotland to identify young people that could benefit from the project.

Support varied with the average length of support being 36 weeks, with four contacts over a seven day week. These contacts consisted of 1:1 focused work to support the young person to have open and honest discussions about substance misuse and reflect on the behaviours which can lead to substance misuse. Workers offer alternative solutions and introduce young

people to other experiences to enable them to lessen their substance misuse. Includem works alongside families and carers on substance misuse so that they are also being educated on the risks associated. Includem believes that it is important to embed a culture where there are no hidden secrets and to have an open forum to tackling the roots of the problem.

The outcome of this project was a reduction in violent offending. The findings from the Dartington report showed that prior to the intervention there were 55 drinking offences and 17 drug offences in the sample. At the end of Includem's intervention there was a reduction of drinking offences to 30 in the sample, and in 2016 there were only 25 drinking offences. Drug offences were sitting at 16 in 2016. Notably, 61% of the young people felt that their use of drugs and alcohol got better after completing the support.

A key element of Includem's service is supporting young people to engage with their local communities and linking them in with other local agencies, services, and third sector organisations. However, one practitioner's view is that there is currently a lack of readily available and easy to access, non-stigmatising environments in local communities where young people are given the opportunity to ask for help for themselves, or as a group of young people. It was suggested that this can be done out with education settings, such as local community centres, to ensure that the young person feels like a valued member of the community. Many young people that Includem support talk about the lack of positive places for them to go with their peers and this can lead to an increase in gang fights and risk taking behaviours, including drinking alcohol and experimenting with drugs. Workers agree that there should be a holistic approach and more working across the board with partner agencies to be able to provide these young people with a positive place to go with their peers. For example, Includem recently partnered with Musicplus+ in Glasgow and Dundee. Musicplus+ and Includem provided a 12 week evening music group which has been a massive positive for young people that take part. This group can be used as a benchmark to look at carrying out similar groups.

Conversations with Includem staff

There were conversations about how workers' experiences of young people's substance misuse, how they feel about supporting young people with these issues and how this makes them feel.

Interestingly workers did not feel that there has been a decline in the number of young people using substances and that they believe that many young people are using substances for recreational use while at parties with their peers. One explained that the number of young people using the drug "Spice" was high and was more widely spread across areas that they worked in. This was reiterated by others in Includem, that it was felt the statistics from national surveys do not match up to their experience and that Includem continues to receive increasing numbers of referrals where there are substance misuse issues. As such, workers felt that it is difficult to keep up to date with the current trends and that relevant information is not always available or easily accessible. Others voiced that further training on the topic could be beneficial.

Workers that have been at Includem for a long period of time have noticed that the point of referral and reasons for young people needing support remain similar to that of ten years ago but have noted there is a difference in the age range of these referrals, with referrals being made more often for younger age groups. This is a worrying observation and one that needs to be monitored and highlighted so that Includem, and the children and young people's service sector at large, can adapt to supporting young people of all ages and needs.

All workers were in agreement that support needs to be tailored to individual needs to get to the root cause of why the young person is using substances. This is something that Includem aims to achieve with every young person, but this is, of course, dependent on how ready the young person is to open up, engage and discuss some of the reasons why they became involved in using substances and why they continue to use them. A potential solution offered by workers was to look at more 'attachment theory' based training, and further embedding this in current practice. Workers should to be mindful of the theory and how this links to day to day practice.

Workers also spoke of the seriousness of "drug debts" that young people can get themselves involved in and how this can start by "owing" their peers money, leading to criminal activity to make payments for drugs. This is again something that does not appear to be overly emphasised within the literature reviews and something that appears to be lacking in public knowledge. Worker with many years expertise can recognise the signs and this is something that can be used to empower their colleagues to have a better understanding on this topic.

There are potentially extremely serious consequences for young people that are involved in substance misuse and it can lead to a life of criminality. Includem works with many young people that are extremely vulnerable and who may not recognise the potential negative impact of becoming involved in "gangs", and how having a "gang mentality" can cause many ongoing issues for the young people. Workers aim to provide advice and guidance throughout the support plan for the young person, but the young person needs to want to hear this advice and take it on board in order to have a positive outcome.

Includem have a specific unit in "A Better Life" called "Working with Families". This enables the worker to support the family through difficult conversations where there is substance misuse involved with either the young person or the parent/carer. Even though these discussions can be difficult, there are many positive outcomes from a family becoming more honest about the actual issues. Includem encourage the young person to disclose their drink and drug use to a responsible adult in their life as this will ensure that the correct support is put in place at an early stage. Many families take great steps forward once these difficult discussions have taken place, but there are a number of families that don't feel comfortable in talking so openly about substance misuse, possibly through fear of any negative measures that might be taken by local authorities or the police. This anxiety presents a challenge for workers as they try to manage the unavoidable power imbalance with families and attempt to become more relatable to them. There is perhaps an opportunity to do more work in this area and look into developing new approaches to overcome this barrier.

One worker highlighted another area where there is currently a lack of information. This was in relation to young people with Autism Spectrum Disorder (ASD). The worker highlighted that there is a lack of resources on how to support a young person with additional needs and how that can lead to a lack of knowledge in how best to support the young person when using substances. This is reflected in the academic research, which concurs that there is a lack of knowledge in this specific area of how best to support a young people on the ASD spectrum who is using substances, which is a hugely complex area. In certain substance misuse services, it is a requirement to be 'dry', i.e. not using any substances at that time, before you can be accepted for treatment. In the case of some autistic people, alcohol can be their coping strategy against the extreme anxiety caused by being autistic and living in a non-autistic, social, flexible world. It may therefore be the case that some (possibly undiagnosed) autistic people cannot access support at all as the removal of the alcohol may make them incapable of leaving the house. More awareness of the potential of autism resulting in problem drinking is required within alcohol support services, and there needs to be recognition of the signs as

it may be that this type of client has no autism diagnosis yet. An Includem worker explained that the number of referrals of young people with ASD are on the increase and he felt that additional training on this specific topic will need to be developed and delivered in order to best support those on the ASD spectrum.

Wider Implications beyond Includem's Practice

The literature highlights the impact that substance misuse can have on young people, whether this is their own substance use or that of their parents. In order to support young people and families it is important that all agencies work in partnership, for each to understand their key responsibilities and to take accountability for their role in supporting a young person. This echoes the report Hidden Harm (2004), with the ethos "Helping our children realise their potential is the key to giving them a sense of self-fulfilment and equipping them for their future".

There needs to be a recognition of the strengths of local public services and the third sector. These are the organisations that are at the forefront of support and play an extremely important role in terms of linking with all involved in the young persons support plan to ensure that there is partnership working collectively that enables the young person the best support possible.

It is important that practitioners recognise that young people will experiment with substances and this can be a normal part of teenage life. However, it is equally important that the practitioner has an overview from all other agencies involved with the young person and an understanding of the family circumstances to be able to adopt a whole system approach to support potential issues caused by substance misuse. All steps possible should be taken to ensure that services offered to young people are separate from adult-focused alcohol and drug services. There needs to be person centred support. We should not confuse the needs of the adult to that of the child's, it needs to be integral for services to recognise the different ages and stages of development in of each child, adolescent and adult. It is also important to ensure that organisations are proactively taking young people's views into account.

Scotland has concentrated areas of intense deprivation where inequalities in health, employment, education and access to services persist. Figures reported by SPICe indicate that individuals from deprived communities are more likely to suffer health problems from drug use. For example, in the most deprived quintile drug-related hospital admissions in 2015/16 were 14 times higher than in the least deprived quintile. This is an important factor that the practitioner needs to have an awareness to ensure that the support is appropriate to the needs of the young person and this might include increased health problems.

In the leaflet 'Fags and Hash' produced by ASH Scotland the physical, psychological and social effects of tobacco and cannabis are highlighted, within the materials the legal position is also made clear, but the leaflet does not address issues around cessation (ASH Scotland 2002). Indeed, most health promotion programmes treat smoking and drugs separately, and do not address smoking cessation and cannabis use. By having these programmes interlink these addictions, there is the potential for an increased reduction rate.

A letter written by a prisoner that completed the Scottish Prisoner Survey (2017) described in real terms that there is a need for further research on young people and substance misuse. This letter included words such as "reoffending, labelling, system, negative interaction, lack of quality support" arguing that immediate change is imperative to decrease the number of young people in Scotland that misuse substances, causing them neglect into their adulthood.

Recommendations for Practice

Over the decades, health researchers have found that Scotland's health has been improving but at a much slower rate compared to other European countries and even though there is a decline in substance misuse in Scotland it **still has the highest level of deaths** in Europe reported. Further in depth research with young people is needed **to get to the root of the problem** and to ensure that there continues to be a decline in the number of young people that use substances.

Further in-depth surveys and interviews with young people that are currently using substances to discuss their support and the resources available to them. As Hidden Harm concluded, work is required to develop means of enabling the children of problem drug users to safely express their thoughts and feelings about their circumstances. Includem should consider carrying out similar survey to that of SALSUS but target the young people that are most affected by substance misuse. There should also be interviews with young people and practitioners, this would provide an **accurate account of substance misuse among young people in Scotland from those most affected**. This study should consider linking the SALSUS survey alongside the Adverse Childhood Experiences (ACEs) research. ACE's are stressful or traumatic experiences that can have a huge impact on children and young people throughout their lives. Therefore this report would be able to use a collaborative approach and increase workers' knowledge and upskill individual practice on supporting young people involved in substance misuse.

There needs to be **further support through the curriculum for excellence** to ensure that all young people from an early age are aware of the harm and effects of substance misuse. These issues should be adapted into early years education to enable those from a young age the risk and harms around substance misuse.

[A review of drug projects](#) observed that while there are a growing number of projects throughout the UK to assist young people, few of them have been subjected to any form of systematic evaluation. We therefore know very little about how effective they are and what works best and under what circumstances **it is important that we get information of what support is working and continue to seek the best ways** to support young people that are affected by substance misuse.