

Discussing Drugs and Alcohol with Young People

Eve MacLeod, Health Improvement Specialist
(eve.macleod@nhs.net)



Background

Almost three quarters (72%) of young people in Highland have consumed alcohol by the age of 15¹. This persistent prevalence is above national average. Drug use among adolescents in Highland shows an increasing trend¹. Moreover, most research is conducted with young people that regularly attend school; therefore may not include vulnerable young peoples' experience.

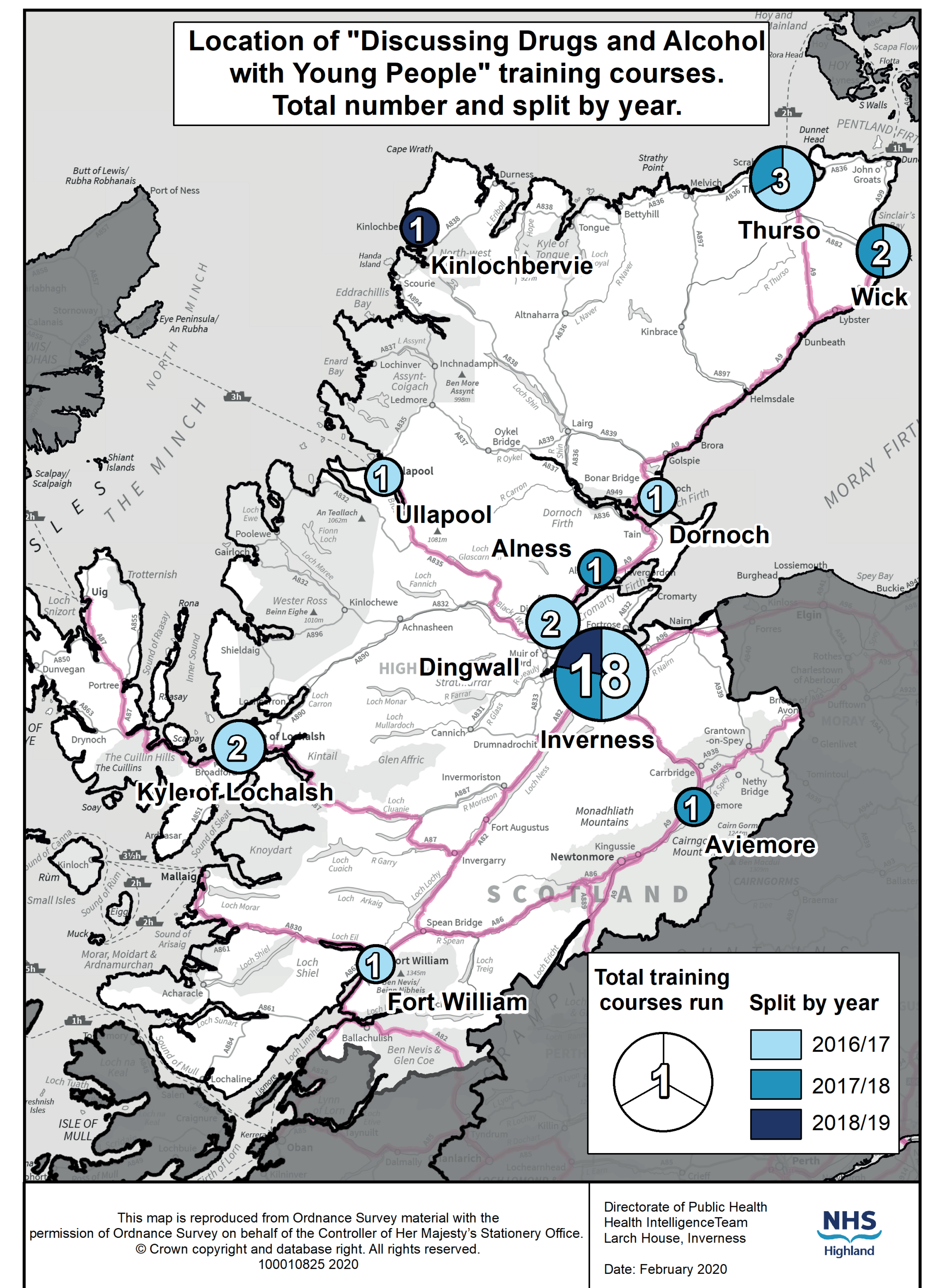
There is substantial evidence supporting brief interventions for alcohol^{2,3} and growing evidence of effectiveness for other substances^{4,5}. Additionally, evidence supports the feasibility of delivering alcohol brief interventions to young people^{6,7}.

Method

Discussing Drugs and Alcohol with Young People (DDAYP) training course was developed by NHS Highland Health Improvement and Highland Alcohol & Drugs Partnership. The training focuses on knowledge and skills of practitioners to raise the issue of drug and alcohol use, and have short, effective, opportunistic, brief conversations about behaviour change, including harm reduction.

A blended learning course was created, supported by various resources. A training network was established, recruiting members from partner agencies, including Action for Children, Highland Council and High Life Highland, to reach those working directly with young people, while covering the NHS Highland geography.

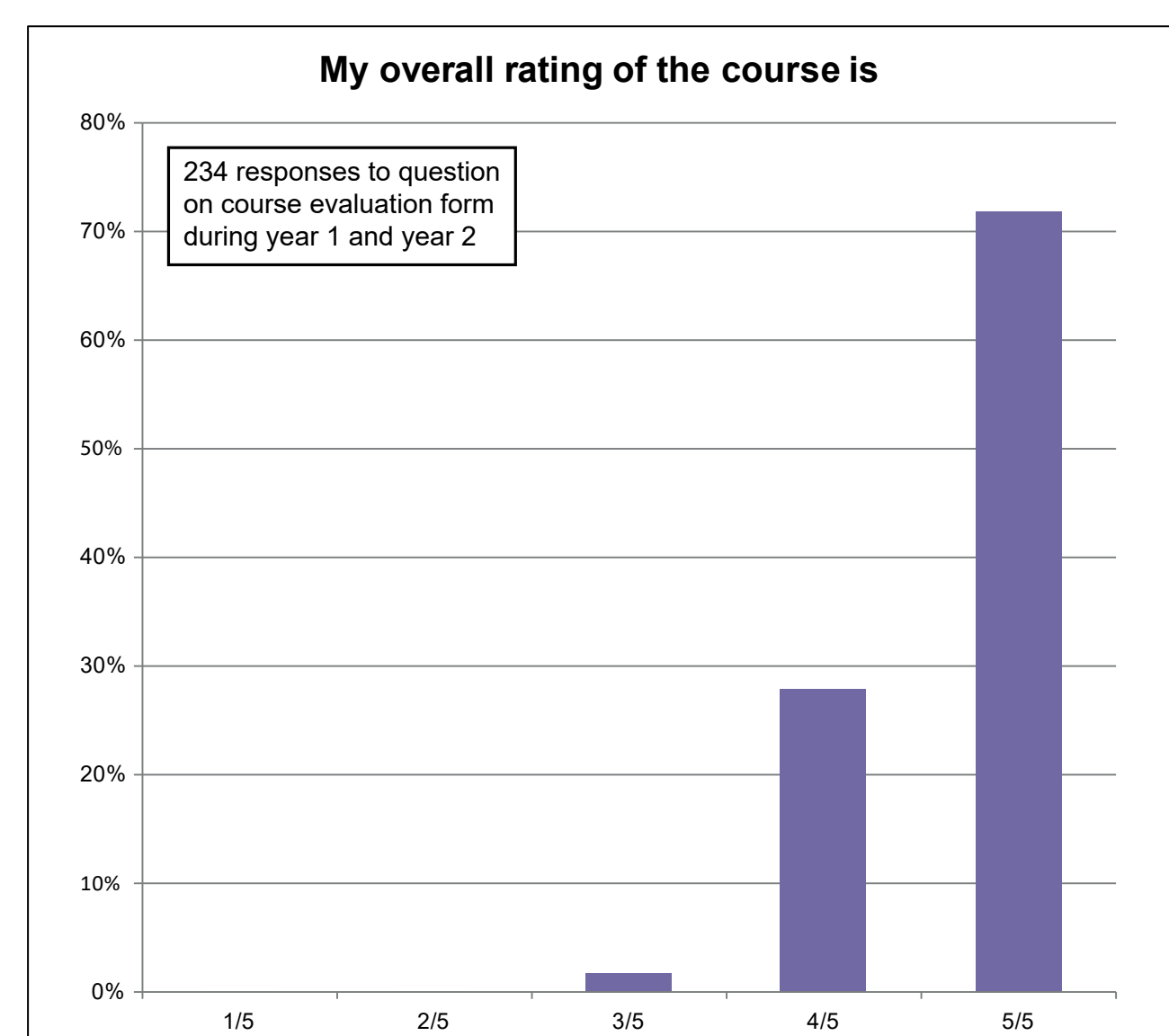
To measure the impact of the training course Kirkpatrick's model of evaluation⁸ has been applied. Evaluation addressing Levels 1 (Reaction to Training) and 2 (Learning and Meeting of Learning Outcomes) occurs immediately post course. Further evaluation to consider Level 3 (Behaviour Change) occurs in the following months, allowing time for skills to be embedded.



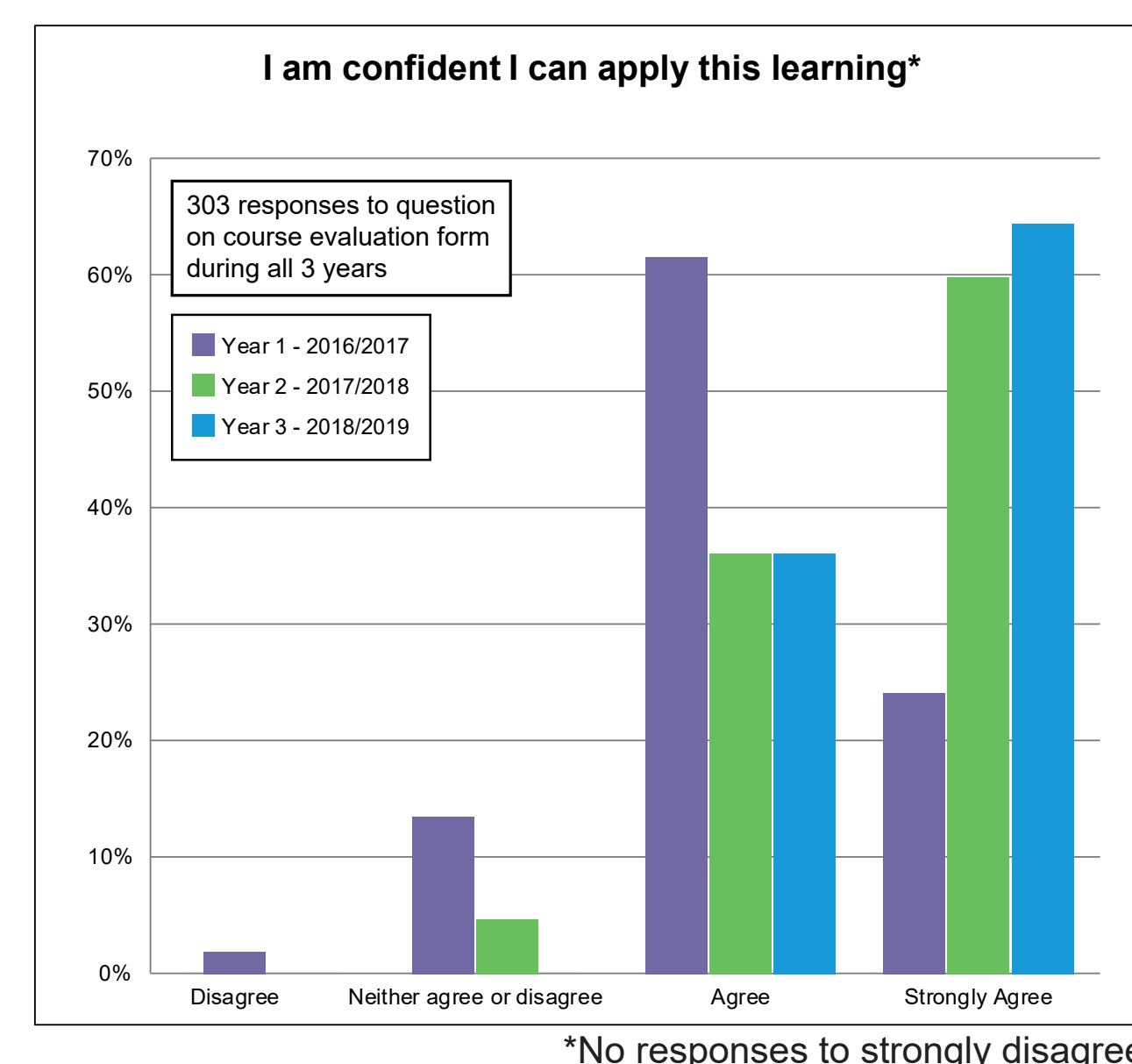
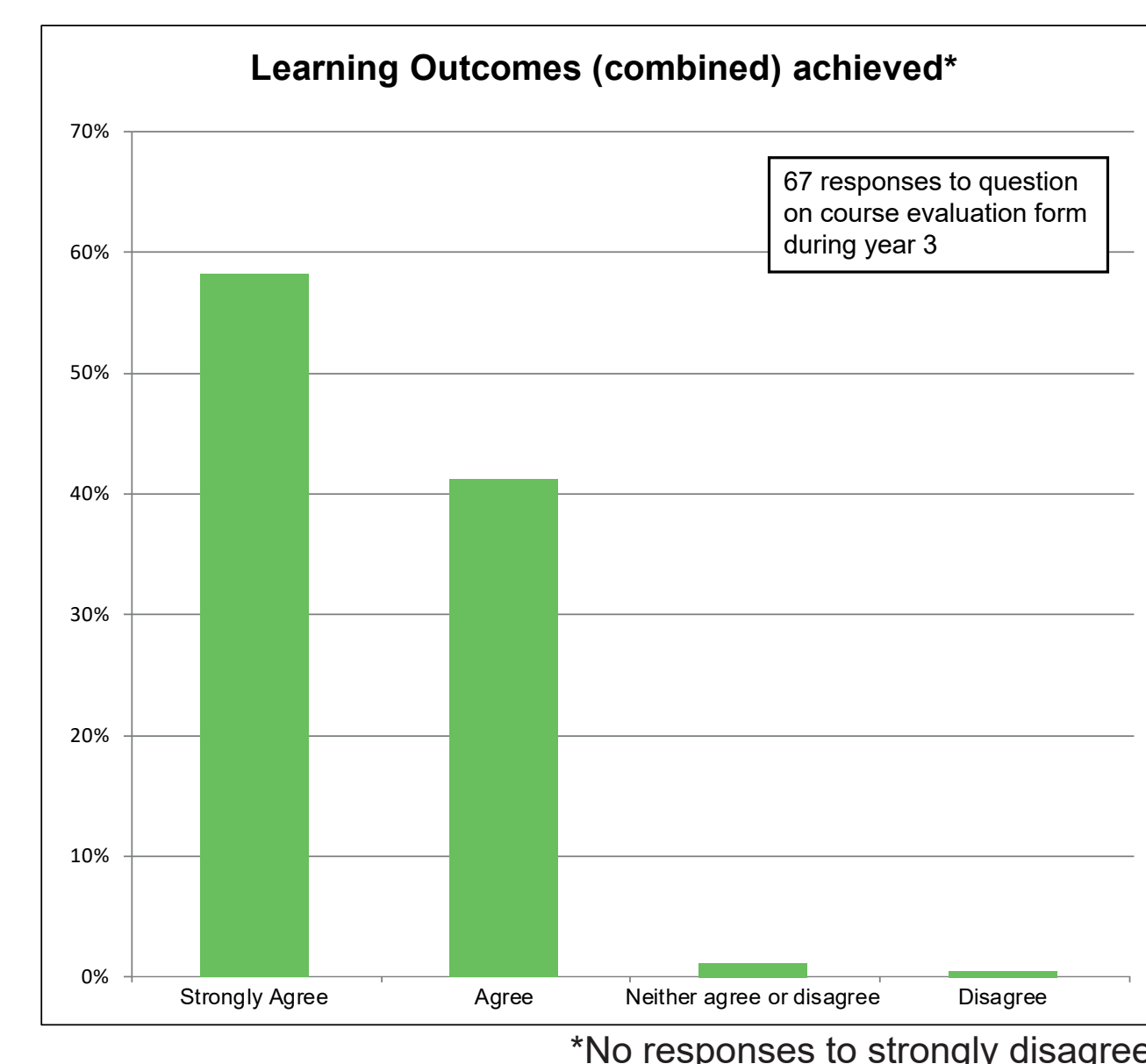
Results

In the first three years of DDAYP, 310 participants attended across the Highlands.

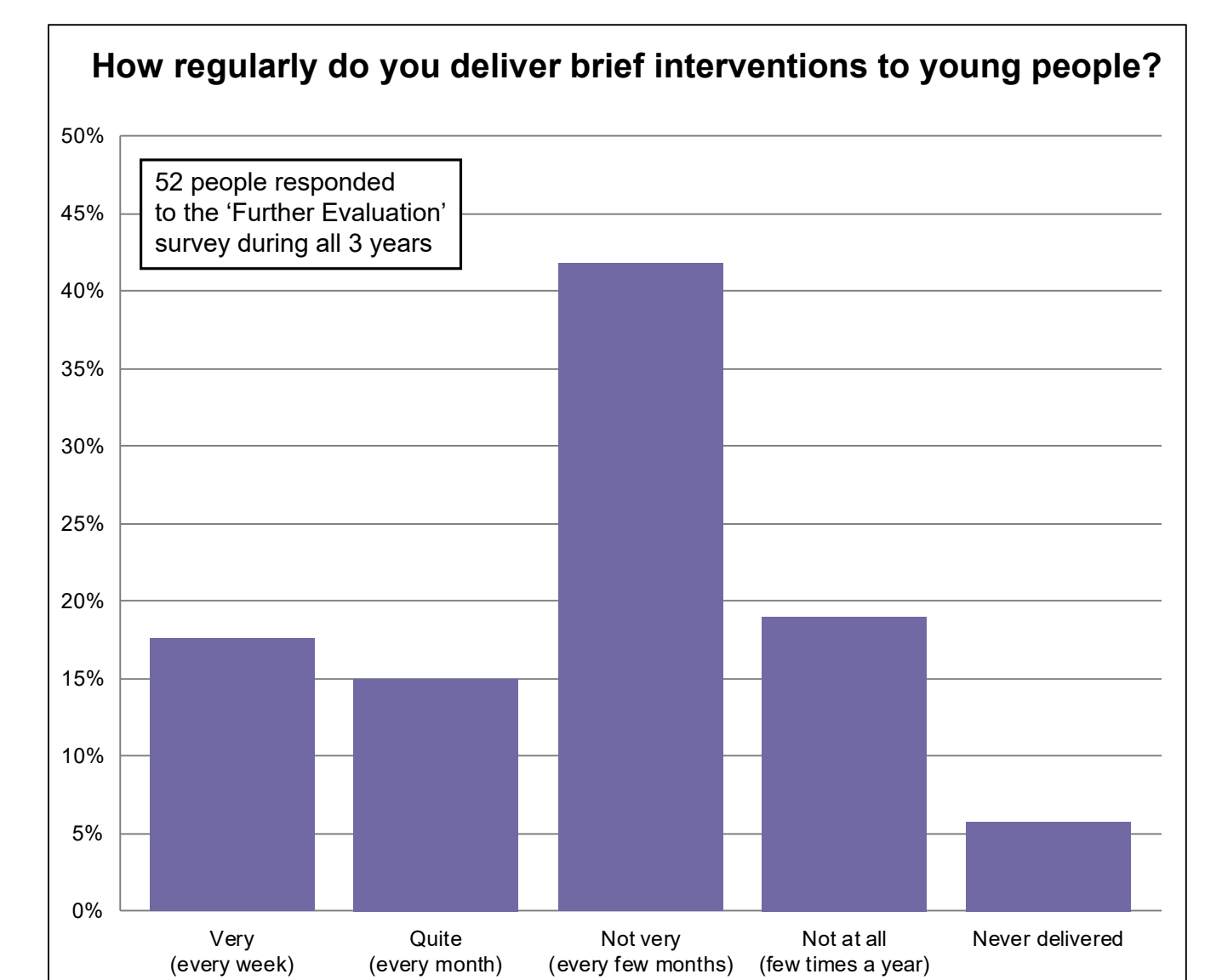
Level 1 Reaction to Training



Level 2 Learning and Meeting of Learning Outcomes



Level 3 Behaviour Change



"I have a lot more appropriate information to give to our young people now"

"Very good course, trainer led well, allowed comments and responded to these, incorporating them in our learning".

Level 1

"It has taken the "taboo" out of having these conversations and has really helped to build and develop trust. This has really benefitted the young people I have engaged with round this topic as they now feel they have someone they can go to for support with these issues without being judged"

Level 3

"I have supported a young person who was using high amounts of cannabis and in some cases, Valium [...]
I approached the subject with her and at first she denied it but then later spoke with me and over a number of weeks of this happening the young person now feels comfortable around this subject and will tell me honestly when she has had a smoke and more importantly when she wants one or when she feels like taking Valium. This is a massive step forward and has enabled me to support her to make better choices and to discuss the effects of using these substances and she is managing to reduce her use."

Conclusions

- DDAYP continues to evaluate positively, achieves learning outcomes and increasingly results in participants feeling confident to apply learning in practice, as highlighted by Level 3 evaluation.
- Continued Level 3 evaluation, including young people and line managers, will provide additional insight into behaviour change.

References

- 1 National Statistics and Scottish Government. SALUS 2018. Summary findings for Highland Council. 2019: 11,14.
- 2 Raistrick, D., et al. Review of the effectiveness of treatment for alcohol problems. National Treatment Agency for Substance Misuse. 2006: 79-92.
- 3 Parkes, T., et al. An evaluation to assess the implementation of NHS delivered Alcohol Brief Interventions: Final Report. Health Scotland, 2011: 3-4.
- 4 WHO Department of Mental Health and Substances Dependence. Brief Intervention for Substance Use: A Manual for Use in Primary Care. 2003: 4-5.
- 5 RCGP Alcohol Concern, Drug Scope and Royal College of Psychiatrists. Practice standards for young people with substance misuse problems. London: 2012: 13.
- 6 Stead, M., et al. Process evaluation of Alcohol Brief Interventions in wider settings (Young People and Social Work) (2012/13 RE007). NHS Health Scotland: 2014: 76.
- 7 Stead, M., et al. Delivery of alcohol brief interventions in community-based youth work settings: exploring feasibility and acceptability in a qualitative study. BMC Public Health. 2017: 17-357.
- 8 Kirkpatrick, D. L., and Kirkpatrick, J. D. Implementing the Four Levels. A Practical Guide for Effective Evaluation of Training Programs. San Francisco: Berrett-Koehler Publishers, Inc. 2007.