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TEES VALLEY



Background information to inform the development of the Middlesbrough 10 – 19 Alcohol Strategy

Executive Summary and Recommendations

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Middlesbrough 10-19 Alcohol Project Executive Summary and Recommendations

Summary

- Barnardo's Research and Development Team (North East) has been commissioned by Connexions Tees Valley to collate a range of data to support the development of a multi-agency Strategy to address alcohol use by 10 – 19 year old young people in Middlesbrough.
- The development of the Strategy is being financed through SRB (6) funding and contributions from a range of local agencies.
- This report represents a collation of a range of data gathered between June – December 2004.
- The key policy driver to the Middlesbrough 10-19 Alcohol Strategy is the government's Alcohol Harm Reduction Strategy (Strategy Unit, 2004).
- The data represents:
 - Quantitative data from agency data bases.
 - Qualitative data mainly from a consultation exercise with young people.
 - Data from recent Middlesbrough specific research and surveys.
 - Comments by a range of workers in Middlesbrough.
 - Existing alcohol related targets for young people.
- Alcohol use by young people tends to be restricted to weekends and is obtained mainly from corner shops via a variety of methods.
- This research highlights the normality of alcohol consumption by the young people with whom we have made contact. Even where (in a minority of instances) young people do not use alcohol it is a part of their lives in that it is a choice available to them and they are likely to observe their peers using alcohol.
- The main reason for using alcohol is pleasure and socialisation and in many respects alcohol use by young people mirrors an adult pattern of alcohol use (mainly Friday / Saturday nights).
- Another noteworthy reason for using alcohol is “to deal with problems.”
- Many young people commented on the lack of alternative activities to drinking at week-ends.

- The main place where alcohol is consumed (in the case of 13-17 year olds) is public spaces. For many young people using public spaces is a choice. The age group 13-17 are the ones mainly encountered by outreach/detached youth workers and it is amongst this age group that the most risky behaviour is likely to be evident (given that a large part of their drinking is in non supervised spaces). The problem of providing safe spaces for young people to engage in an illegal activity is recognised.
- Given the above, any aim to stop young people drinking would not appear to be realistic. A harm reduction / minimisation approach would emphasise the important role of effective education strategies and those that build on the “safety strategies” that young people already use.
- There are examples of strategies that young people use to stay safe (e.g. drinking in groups, individual members staying sober to keep an eye on the others, choosing to drink in certain locations where they feel safer etc).
- This research suggests a range of roles played by parents both in terms of access to alcohol, as role models, and as sources of information about alcohol. Some of the survey data presented here indicates that, for the younger end of the 10-19 age range, parents remain a key source of information, alcohol is introduced in the home and messages about its effects are conveyed there. This could be an area for future research.
- Discussion with a range of professionals suggests the need for a different approach by agencies to alcohol use by young people. At times it is not taken as seriously as other drugs because of its place in the social fabric of our society and the recent emphasis has been on Class A “hard drugs”.
- Any change process (including Strategy developments) should take account of current values and attitudes of those who will be involved in this process. This applies as much to practitioners as to young people. The information in this report gives some indication of the variety of attitudes and values of practitioners that should inform strategy development and implementation.
- It would appear that knowledge and information about the effects of alcohol have not been retained by young people (assuming it was there in the first place) and there are comments from some young people that give ideas as to how this could be improved (e.g. through more interactive, “starting from where we are at” approaches).
- This, in turn, implies that all who have some part in delivering the “message” agree and are clear about what it is and have some understanding of the most effective ways to transmit the message. This research suggests that professionals might not all be “singing from the same hymn sheet” both in terms of how alcohol use is perceived and responded to. Given the range of people who might come across an

alcohol related issue, it would be worth considering how the key messages might be agreed and conveyed.

- Lack of knowledge by some young people about where they could go to for help with an alcohol / substance use problem was also highlighted as an area for attention.
- The impact on young people of alcohol abuse by parents/carers is a further area that needs including in the future Middlesbrough Alcohol Strategy. Although this research collated very little information from young people themselves relating to this issue, other data (notably from the Domestic Violence Forum) reminds us of the nature and potential magnitude of this problem and the importance of including this in an Alcohol Strategy.
- Recent Middlesbrough focussed reports and surveys point to the need to tailor different approaches to minimising alcohol related harm to different groups (for example, by age, context or vulnerability).
- A range of alcohol related targets already exists in Middlesbrough. The D.A.T has developed targets mainly around Education/Communication and Identification and Treatment. The Safer Streets group's targets are mainly relevant to Crime and Disorder and the Alcohol Industry. The Domestic Violence Forum also has a related set of objectives.

Recommendations

Value Base

- It is suggested that the principles for working with young people outlined in *Implementing the 2001 Health Advisory Review: The Substance of young needs: implications for young peoples' services (2002)* should underpin Strategy Development.
- Services should be culturally sensitive and systems for monitoring this should be developed.
- All aspects of Strategy development should aim to involve young people in a meaningful way.

Data capture

- Information systems should be reviewed and changes agreed to ensure that robust data can be collected which can then be used to track changes against agreed targets. Sampling could help get this underway.

- The further development of the Multi Agency Drugs Data Base should be considered. This data base has a unique potential to track the links between alcohol / substance use and a range of other factors such as crime, employment/training and so forth at an individual level. When aggregated, such data would help understand the links between a range of factors and help inform the planning of future interventions to minimise the harmful effects of alcohol / substance use.
- It would be helpful to identify a system to collate relevant local data sources / surveys in the way that this project has done. The aim would be to maximise the usefulness of such data. It would also aim to avoid duplication of effort and guide decisions about where resources allocated to research could be targeted in the future.

Linking to youth culture, societal values and socio-structural issues

- Alcohol use by young people should be seen in the context of the use of alcohol / substance use in society in general, youth culture and the local Middlesbrough specific context (for example poverty / regeneration / “town branding” strategies etc).

Existing targets

- There is a need for all relevant targets to be brought together, developed and progressed through one multi-agency group which would be responsible for driving the Strategy forward. This group could facilitate the “joining up” of a range of local initiatives and help to avoid overlap and duplication of effort.
- Such targets could be related to the Every Child Matters Outcomes Framework to give them coherence.
- This project has recognised the need to engage more closely with the PCT and to ensure that PCT targets are integrated into the Strategy.
- Clearer links between tiers 1-3 and tier 4 (CAMHS) should be developed.
- In particular the needs of young people affected by alcohol / substance use by their parents / carers should be included in Strategy development. This could be done through links with the Domestic Violence Forum.

Education and communication

- The need for a re-evaluation of education/communication strategies is highlighted. This could involve bringing together a range of agencies to share good practice and co-ordinate their interventions in developing a “whole system’s approach” to education / communication.

- Education/ communication strategies should build on the attitudes and values that underpin alcohol use by different groups of young people in a variety of settings. For example “drinking to socialise” is motivated by a completely different set of attitudes and values to “drinking to deal with life problems”.
- What the “alcohol message” to young people is, who and how it will be delivered should be agreed to ensure consistency of approach across the range of agencies and professions who may have contact with young people. The aim would be to encourage a consistency of approach in schools, colleges, community settings, the home and so forth i.e. a holistic, community wide approach to alcohol education.
- It has not been possible to engage with schools during the project period. Given the importance of schools in young people’s lives and the potential for schools to engage with young people to reduce harms associated with alcohol use, it will be important to consider how to share the findings of this Project with key people in the education sector and explore the whole issue of how we best convey messages about alcohol to young people.
- How best to engage and work effectively with parents to support them in delivering effective alcohol related health education messages to their children and to support them where they have children who have an alcohol related problem, is an issue raised by a number of professionals and should be explored within the local context.

Crime and disorder

- The issue of access to alcohol (mainly corner shops) needs some attention as does that of where young people do their drinking (in this research over 900 contacts have been made with young people in open, public spaces such as parks, streets etc). The question of safer drinking places is being pursued (through the provision of PODS). Such places could be ways into providing knowledge and skills about the effects of alcohol. However, given the role of alcohol in socialisation it is unlikely that young people would use such places if they were perceived as mini schools / youth clubs or were supervised to the point that the aim of socialisation with peers and having a non-adult space was not achievable.
- The need to review the current range of diversionary activities is also highlighted through this research. Not all areas of Middlesbrough are served by outreach/detached youth workers in Middlesbrough over the week-end (the main drinking period). It would be useful to consider what the possibilities are for the development of diversionary activities in particular at week-ends. This research would suggest that the age group 13-17 should be the main focus of these developments. There is experience to build on from within the existing provision. Such deliberations should also incorporate young people to build on their expertise in this area.

The Alcohol Industry

- How alcohol is marketed, how young people see it “packaged”, how adults talk about it, how it is presented, the part that it is playing in the regeneration of Middlesbrough and so forth all need consideration. What alternatives are there to an alcohol based night out for young people that will achieve the objectives of socialisation, achieving a “buzz” and having their own “non-adult” space?

Consultation with young people

- The consultation process that has taken place between adults (outreach/detached youth workers) and young people is a good example of engaging with young people in their own space, from the basis of the attitudes and values that are currently driving behaviour and in a way that offers the opportunity for two way learning and influencing. Given the likelihood of greater risk taking behaviour in unsupervised settings such a model of engagement should be developed. Creative ways to give information and influence young people in such settings without invading their chosen space would repay consideration. For example, useful feedback on current health education strategies has been received through this process and illustrates the benefit of continued dialogue about such issues. There is good potential for adults and young people to learn from and influence each other in a meaningful way.
- Young people have given useful advice on the types of service provision that they would find more or less attractive. Youth focussed settings informal and non-judgemental in nature were preferred. This should inform future service developments.

Conclusions

This project has offered a unique opportunity to combine data from:

- an extensive consultation exercise with young people
- a range of agencies and professions
- several local surveys and research data.

It is worth noting that a recent study involving in-depth interviews with 64 young people aged 14-17 exploring “risky drinking” mirrors many of the findings of this research. The authors suggest:

The findings from this research implicate wider policy issues by supporting a reduction in the advertising of alcohol, the inclusion of appropriate alcohol education in schools and the provision of more activities for young people in the community. These wider policy issues are a necessary prerequisite to change the popular culture of binge drinking among young people (Coleman, et al, 2005).

To conclude with a reference from a research study conducted by Honess et al (2000).

A persistent feature of the accounts from young people emphasised their need to discover and decide for themselves how to deal with alcohol. Health interventions and other policy changes need to be seen as supporting and informing, but not dictating these decisions. Indeed, a key argument is that any initiative would most usefully build on these pre-existing ideas. This position is reinforced by our central finding that drinking is as much “young people” behaviour as “adult” behaviour, and that any interventions need to operate within that context. (Honess et al, 2000, p.vii).

This project has offered an opportunity to adopt such an approach.

References

Coleman, L & Cater, S, (2005), Underage ‘risky’ drinking, motivations and outcomes, JRF.

Honess, T, Seymour L, Webster, R, (2000), The social contexts of underage drinking, Home Office.