Implementation and outcomes in four Early Intervention Substance Misuse Projects in South London - an evaluation.

Summary of key findings and messages for policy, planning and practice

A central focus of the government's ten year strategy for tackling drugs is on early intervention and prevention with high-risk groups. Four early intervention substance misuse projects were set up with funding from Lambeth, Southwark and Lewisham Health Authority in 1998, aimed at highly disadvantaged and high-risk young people. The first focussed on young offenders aged 10 to 17 years and was based within the local Youth Offending Team (Yot). The second, based within a statutory child and adolescent mental health team, focussed on children (aged 10 to 18 years) of substance misusing parents. The third targeted vulnerable young people aged 11 to 17 years who were excluded from school or at risk of exclusion. Work was carried out in the schools themselves, with the workers based in a local education resource centre. The fourth was an outreach project that focussed on socially excluded young people aged 13 to 19 years, and was run from an office shared with an adult drugs agency. Thus, the first two projects were set up as part of a host service, while the second two were more independent in nature, though sharing offices with other services. The POLICY RESEARCH BUREAU (PRB) was commissioned to evaluate the four projects. The evaluation's aims were (1) to explore the process of setting up and implementing all four projects, and (2) to assess outcomes for the young people (from two of the four projects). This summary highlights the main themes emerging from both parts of the evaluation, and makes evidence-based recommendations for policy makers, service planners and practitioners.

PART ONE: IMPLEMENTATION ISSUES

Project set-up: getting going

♦ All four projects had problems getting up and running, with only two services becoming operational by the end of the evaluation period, no doubt reflecting the extremely challenging nature of service provision in this area and the innovative nature of the projects themselves.

♦ Some projects in the group struggled to identify clear objectives and clarify their remit in the set-up stages.

♦ In some cases, the readiness of the host service was important in the timing of getting the new services up and running. Some of the interventions were impeded in their development by the host service itself being in a state of transition and on-going re-organisation.

For Policy: If possible, more established services should be used to host new interventions and if not, clear guidelines should be put in place to take account of the impact of the host services' situation on the intervention.

For Planning: Additional time may be required to negotiate roles and establish inter-disciplinary working practices if introducing new interventions into an embryonic or developing team.

For Practice: Discussion and review is required between workers and managers on a regular basis to clarify precisely what is and is not the project's remit. This is particularly important in the initial set up and planning stage to avoid wasting resources and the project developing in directions that are not part of its brief.

Establishing a client base

- Establishing a client base was challenging, despite evidence of considerable need in the local area.
- The outreach project was particularly dependent on self-referrals, and the level of referrals was limited. This may have been due to the fact that young people themselves may not necessarily perceive their substance misuse as problematic, and even if they do, may be unwilling to disclose such information for fear of consequences.
- Three of the projects were primarily dependent on referrals from other professionals. However, the level of referrals from this source was limited by differing perceptions of young peoples' needs within referring agencies. For example project staff felt that referring agencies did not recognise need in young people and had a limited knowledge of substance misuse and drugs.

Messages

For Policy: There needs to be a greater awareness of drugs issues generally and training on recognising substance misuse for professionals working with young people.

For Planning: Referral routes should be clearly identified at the outset, allowing assessment of potential problem areas and allowing a strategic approach to tackling difficulties arising at this stage.

For Practice: Extra time should be devoted to raising awareness of drugs issues with identified potential referrers.

Staffing and recruitment issues

♦ All four projects experienced difficulties recruiting and retaining staff.
♦ Problems recruiting staff included the long time scales involved in conducting police checks that are required for staff doing direct work with young people, and finding candidates with the appropriate knowledge and skills.
♦ Difficulties experienced with retaining staff included changes in staff at management level within the host services. For example there were gaps in coverage and delays in finding a suitable replacement, leaving new interventions without management input, putting strain on workers and leaving them feeling isolated.

Messages

For Policy: The process of criminal record checks for those wanting to work with young people should be reviewed and time scales improved.

For Planning and Practice: New interventions may be very vulnerable to staffing problems if they are strongly dependent on one key individual. Planning needs to take account of this in order to avoid discontinuity in staffing of new services.

Content of the intervention

♦ There was a lack of clarity in many cases about the content of the intervention.
♦ The precise nature of interventions, including which problems were to be addressed with young people, what methods would be used to address the problems, and what sort of outcomes would be expected, were difficult to define and slow in developing.
♦ Documentation describing the content of the interventions was sparse.
♦ It was difficult for the projects to produce publicity material when the precise nature of the intervention had yet to be determined and recorded.

Messages

For Policy and Planning: The precise nature of interventions such as what sort of issues are to be addressed with young people, how they will be addressed and what sort of impact can be expected, should be decided at the outset. This is important for the consistent delivery of an intervention and for clear communication with external agencies about what and whom the project is for.

For Practice: Written records should be kept to monitor the work being carried out, and to provide details of clients that are using the service. Such information is vital in understanding the needs of the clients, and in assessing the progress of the project, and for developing ways of taking the project forward.

Practical and logistical issues

♦ Location (where to site the service and where to do direct work with young people) was both vital to, and problematic for, the projects' development. Most of the group reported difficulties with finding suitable spaces, with particular problems for the schools-based project. 'Bolting on' young peoples' services onto adult ones by using their premises was not a solution – adult services were found to be disliked by young people, who found them intimidating and stigmatising. On the other hand, some projects used a flexible approach very successfully, seeing young people in their homes, in cafes and on site depending on the case circumstances.

♦ Transport was also highlighted as an issue – young people could rarely depend on parents to transport them to services, and workers themselves needed to arrange suitable transport for young people in order to encourage them to attend.

♦ Young people's attendance at the services was generally erratic, leading to group work being abandoned in one service for lack of numbers. Workers could waste a lot of resources setting up sessions for which young people did not turn up.

Messages

For Policy: Many services could be helped in their development by greater access to 'local' safe spaces to do work with young people. The lack of spaces in schools seems especially problematic – all schools should have a quiet, private room at their disposal.

For Planning: Because of their tendency to erratic attendance, vulnerable young people may need extra encouragement to persuade them to engage with helping services. Providing transport, regular reminders before sessions, going to fetch clients, and perhaps also other benefits (food, vouchers etc) might all act as incentives to encourage young people to use services to the full.

For Practice: Work with young people needs to be carried out in hours that suit them – after schools, evenings and weekends. Staff therefore need to be able to work non-office hours, which may require additional resources, such as back-up cover (for personal safety reasons) during these times.

Management issues

♦ All projects experienced a lack of management guidance and support that seems to have slowed their development. There were frequent changes of line management, sometimes because management posts were vacant and not re-filled quickly, and sometimes because projects were not seen as priorities for senior management input.

- Though project workers and leaders appreciated the autonomy that 'hands off' management style gives, most would have preferred more guidance and support. In particular, they needed help clarifying the remit and objectives of the project in the early stages of set-up.
- Because of lack of availability of senior managers, some project workers were supervised by staff who were not part of the senior management team. This led to a sense that workers' channels of communication to senior management were 'blocked'.

Messages

For Policy: This is a very challenging area of service provision, and managers need to 'own' the services, not just watch from a distance.

For Planning: New services especially require serious input of time from senior managers, both to support staff, and help them clarify their role and remit. Management needs to be pro-active, and consistently available.

For Practice: Managers and workers need regular and frequent meetings, especially whilst a service gets established, to troubleshoot together and clarify a way forward.

Interagency and multi-disciplinary working

- All four projects were examples of innovative multi-agency and multi-disciplinary working, combining youth justice, social work, education, youth services and child and adolescent mental health services and in some cases working across statutory and voluntary boundaries and across the boundaries of adult and youth services. A major success of the projects as a group was the wide networks they established.
- However, there were ongoing tensions, especially where support/therapeutic and enforcement/monitoring roles had to co-exist. Specialist substance misuse workers located within 'host' organisations reported that it could be isolating and also hard to maintain a sense of where their professional boundaries lay under these circumstances, especially if they were expected to take on other work within the host agency, outside their specialist area. They felt young people, too, could be confused about where a worker 'was coming from' under these circumstances: were they there to help, or to monitor?
- Some projects reported ingrained cynicism and resistance to working across agencies, especially amongst longer-established staff in external agencies, that could be problematic. Some workers were also especially reluctant to work with enforcement agencies such as the police, and to share information gained in a therapeutic context with co-workers in enforcement positions.

Monitoring and Evaluation

♦ None of the four projects had strong systems of monitoring, and some had virtually none. The outreach service, in particular, struggled to get workers to document what they were doing, as keeping written records was not part of the professional (youth service) culture from which they came. This made it hard, for example, to extract information necessary to quantify basic throughput and input indicators like the number of clients seen and the frequency of sessions with individual clients.

♦ Projects and evaluators struggled to find a way to work together, especially in relation to the outcome element of the study. Only two projects were sufficiently well advanced by the end of the evaluation period to provide outcome data. Most staff felt too over-stretched to engage in the extra burden of helping facilitate data collection, but on the other hand, were often reluctant to allow researchers direct access to young people to collect data directly. Gaining access to staff was also problematic in some projects, reflecting the 'in progress' situation of the services.

PART TWO: OUTCOMES

Measuring outcomes for young people attending the interventions was a secondary focus of the evaluation. Two of the four projects were not fully operational within the evaluation time scale, hence outcome data were collected from only two projects, the Youth Offending Team ('Yot-based') project, and the intervention for children of substance-misusing parents ('therapy-based' project). Workers completed structured questionnaires about the young people at the point of referral to the intervention, and post intervention. As no data were collected directly from the young people themselves, the findings represent the workers' impressions of the young people and impact of the intervention. Assessment of the impact of the interventions was also limited by the small numbers of young people who completed the intervention.

The Yot-based intervention

Characteristics of the young people, drug use and areas of need
♦ We collected data on 110 referrals, the majority of whom (81%) were referred by a Yot Officer. Ninety six young people went on to be formally assessed by the substance misuse worker.
♦ The average age of the young people was 15 years (ranging from 12 to 18 years) and the majority (90%) were boys. Sixty four per cent were white, just over a quarter (29%) were black and just under 8% were of mixed heritage.
♦ Workers reported that 71% of young offenders used cannabis in the last year, and 59% were thought to have used tobacco or alcohol. One in ten were reported as having used cocaine in the last year, with slightly lower rates reported for crack (8%), ecstasy (8%) and amphetamines (7%). As far as workers could ascertain, around a third of young offenders had not used or tried any substances in the last year.
• At the point of referral, workers identified the key areas of concern about the young people as: offending, in around a third of cases (32%); drug use, in around a fifth of cases (21%); difficulties in education, training or employment (17%); and also coping with family difficulties (17%).

The young people's service uptake, and impact of the intervention
♦ Of the 21 young people who went on to receive the intervention, around two-thirds (65%) were judged to be very willing or fairly willing to take part in the intervention. In terms of attendance patterns, on average young people actually attended four sessions out of the six that were typically planned.
♦ Workers estimated that most young people had benefited from the intervention to some degree, although there was judged to be no benefit at all in 10% of cases. Areas in which young people were thought to have benefited most were their actual drug use (76%) and attitude towards drug use (57%), followed by their offending behaviour (48%) and physical health (48%).

The therapy-based intervention for children of substance misusing parents

Characteristics of the young people, drug use and areas of need
- We collected data on 40 young people referred to the intervention. Just over half of these (52%) were referred from social services, 20% from the health service, and the remainder were self referred or by a Yot officer.
- Just over half of referrals were male (57%), and the average age of the young people was 12 years (ranging from 6 to 18 years). The majority (73%) were white, with 20% described as black, and 7% described as being of mixed ethnicity.
- Twenty of the referrals went on to receive a full assessment. Among the parents/carers of these young people, alcohol was the substance most frequently misused (by 55% of female carers and 30% of male carers), followed by heroin (misused by 30% of female carers and 5% of male carers).
- Workers reported that in the last year alcohol was the most popular substance used by the young people (in 15% of cases), followed by tobacco (12%) and cannabis (5%).
- According to workers' assessments, the most significant area of concern for all twenty of the young people assessed was coping with family problems, closely followed by emotional and psychological problems (95%), coping with relationship problems (90%) and problems with accommodation or living arrangements (80%).

The young people's service uptake and impact of the intervention
- Seventy per cent of the young people were either very willing or fairly willing to take part in the intervention. On average young people actually attended five of the sessions out of the average nine planned.
- Of the twenty young people who were assessed, fifteen went on to receive the intervention. The areas the intervention addressed with these young people were most often (in four out of five cases) emotional/psychological problems, coping with family problems and problems with relationships.
- Whilst most young people were thought to have received at least some benefit from the intervention, 40% were perceived as not benefiting, according to workers' assessments.
- Workers reported that in almost half of cases (47%) the areas in which the young people were thought to have benefited most from the intervention were emotional and psychological problems and also in relation to problems with accommodation or living arrangements. Benefit in relation to coping with family problems was believed to have occurred in 40% of cases.

Messages for policy, planning and practice

1. Both the Yot-based project and the therapy-based project succeeded in reaching their target groups, namely young people identified by the government as being at high risk for substance misuse. Although identified as high risk, the groups differed in terms of their areas of need. Drug misuse was much more prevalent among referrals to the Yot-based intervention, whilst family problems were pervasive among referrals to the therapy-based service. Early intervention services therefore need to be closely tailored to the characteristics of particular high-risk groups, whose 'priority' areas of need may differ depending on personal context.

2. Although **absolute levels** of substance misuse were higher in the Yot than in general population samples, the **pattern** of drug misuse was similar in that cannabis remains the 'drug of choice' for young people. Use of opiates and stimulants such as cocaine, ecstasy and amphetamines were relatively low in the Yot sample, as they are in general population samples. Interestingly, rates of substance use reported amongst the young people attending the therapy-based service were lower than general population samples, although the sample size was too small to attach weight to this finding. Both projects clearly fulfilled their remit of being 'early' intervention services, with the Yot service tackling substance misuse by young people before its potential escalation into use of class 'A' drugs.

3. There are considerable challenges to working with high risk young people, not least the difficulty of facilitating their engagement with services, as reflected in the erratic attendance levels in the two projects. Challenges also arise from the array of difficulties that young people present with. For the Yot-based sample, benefits included changes in use of and attitudes towards drugs, whilst for the therapy –based service, the primary area of benefit was improvement in emotional and psychological problems. Whilst workers were able to identify within each high risk group key areas for intervention, they were modest in their description of the **overall** benefit to the young people. With such high risk groups, interventions may need to be of greater intensity and duration to make a more significant impact on their multiple areas of need.

4. Without underplaying the significance of the problem of substance misuse, the evaluation showed that this nevertheless forms only one part of the interconnected web of problems in the lives of the high risk young people targeted by these types of intervention. Though 'substance misuse prevention' may be the route by which young people are reached, the work of the projects evaluated here exemplifies the vital importance of designing and developing services for young people within an holistic, multi-disciplinary model that can take on board multiple risk factors in young people's lives, and is not constrained by one-dimensional thinking about any given 'presenting' problem.

Deborah Ghate, Laura Brazier and Patricia Moran

About the study

The evaluation was reported in two parts, and assessed four early intervention projects over a period of 18 months. The first part of the evaluation examined the process of setting up and implementing of all four of the projects. This involved the use of semi-structured and substantive depth interviews with project workers, their managers, external agencies external and service users (providing 33 interviews in total). The second part of the evaluation aimed to provide a profile of the young people referred to the services and the impact of the intervention. Due to delays in establishing a client base, only two of the four projects took part in this stage of the evaluation: the substance misuse intervention in the local Youth Offending Team (Yot) and the service for children of substance misusing parents. Data about the young people were collected pre- and post-intervention from project workers rather than the young people directly. This provided a description of the young people referred to the service, their areas of need, and the ways in which the projects were of benefit to them.

How to get further information

Other outputs from this study include:
- *Briefing Paper for Policy Makers, Service Planners and Practitioners: Four Early Intervention Substance Misuse Projects in South London* is available from The Policy Research Bureau (Quote Ref P147 Briefing Paper)
- The full research reports *The Evaluation of Four Early Intervention Substance Misuse Projects Part 1: The Process Evaluation* by Patricia Moran and *Part 2: Baseline and Intervention Data* by Laura Brazier and Deborah Ghate, are available in the publications section at www.prb.org.uk

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