



REACH

COMMUNITY HEALTH PROJECT

Substance Misuse

Project Report

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1. Introduction

REACH Community Health Project is a national third sector organisation with a key strategic role in improving the health, wellbeing and health care provision of Black and Minority Ethnic (BME) communities in Scotland. REACH has units engaged in culturally sensitive Service Provision, Policy and Research as well as Training and Development. These areas of expertise act to mutually reinforce one another and the Triangulated Formula makes REACH uniquely placed to tackle health inequalities and service barriers faced by BME communities (<http://www.reachhealth.org.uk>).

2. Background

A grant from the *Alcohol Initiative Fund*, through the Grand365 programme helped incorporate a piece of research into the substance misuse project entitled “Choices”.

“Choices” is a Substance Misuse project around Drugs, Alcohol and Tobacco Prevention, Education and Treatment Service’, which is funded by the Robertson Trust.

The aim of the project was to increase the uptake of mainstream addiction services by BME youths and adults in the South-East of Glasgow. Previous work by REACH on the subject of substance misuse indicated that BME groups are underrepresented in addiction treatment and preventive services due to the stigma attached to drugs and substance misuse.

3. The Research Aims

- Encapsulate the knowledge, understanding and the experience of young people about substance misuse and the impact it has on human health.
- To understand the kind of intervention methods best suited for young people.
- To understand the response and the effectiveness of educational workshops on young individual’s knowledge and understanding of substance misuse.

3. 1 Research Methods

In order to reach out to the young individuals and to encourage them to take part in the research, 20 Participative Educational Workshops about substance misuse were delivered in Holyrood Secondary School in the South-side of Glasgow.

Pre and post workshop questionnaires were provided to the students as part of the research programme. The form asked the following questions;

Before the Workshops

- Are you aware what substance misuse means?
Yes / No
- In your opinion / from experience, why would a young person take alcohol / drugs / tobacco?
- How would you rate your understanding of drugs, alcohol and tobacco and the effect it has on a person's health?
Very Good Good Average Little Very Little

Have you....

- Ever been offered drugs / alcohol / tobacco? Yes / No
- Ever taken drugs? Yes / No
- Ever taken alcohol? Yes / No
- Ever taken cigarettes? Yes / No
- Regretted taken any of the above? Yes / No
- If you have been offered drugs / alcohol / tobacco what did you say and do?
- Do you know someone among your peers who is abusing or misusing drugs? Yes / No.

After the Workshops

- How would you rate your understanding of drugs, alcohol and tobacco and the effect it has on a person's health?
Very Good Good Average Little Very Little
- I feel confident in speaking about drugs, alcohol and tobacco
Yes / No
- I feel confident in saying no to drugs / alcohol / tobacco
Yes / No
- What did you enjoy about the presentation?
- What did you least enjoy about the presentation?
- List 3 new things that you learned today?
- If we were to come back to deliver another session, what information would you like to have?

The method includes both qualitative and quantitative questions and similarly the data analysis involved both qualitative and quantitative methods.

Research Participants

Though the primary target group was BME young people it was decided to make the research applicable to all young people irrespective of their ethnicity. The participants of this research include pupils from the Holyrood Secondary School in Glasgow and they were aged between 14 & 19 years old.

Sample Size

522 students participated in the Substance Misuse Educational Workshops and filled in the research evaluation questionnaire. In total 20 workshops were delivered. From among the 522 students, 286 were in the age group of 14-16 years, and 236 were in the age group of 16-19 years old.

4. Evaluation & Findings

4.1 Quantitative Results

4.1.1. Before the Educational Workshops (14 – 19 year olds)

The analysis of the data collected **before** the Educational Workshops of 14-19 year old individuals are as follows:

- 70.8% of the respondents thought they were aware what substance misuse meant.
- 29.9% indicated that they have a 'very good' understanding of drugs, alcohol and tobacco and the effect it has on a person's health. The majority 40.4% thought their understanding was 'good'. 24.3% thought their understanding was 'average', and only 2.7% thought it was 'little'. Another 2.7% said their understanding of substance misuse in general was 'very little'.
- 61.9% answered that they had been offered drugs / alcohol / tobacco.
- 19.5% of them said they had taken drugs.
- 52.6% of them said they drank alcohol.
- 26.7% of them said they had smoked cigarettes
- 20% of them said they regretted taking any of the above substances.
- 43.2% of them answered that they knew someone who abused or misused drugs.

4.1.2 After the Educational Workshops

The analysis of the data collected **after** the Educational Workshops are as follows

- The majority, 49.1% indicated that they have a 'very good' understanding of drugs, alcohol and tobacco and the effect it has on a person's health. 36.7% thought their understanding was 'good'. 9.9% thought their understanding was 'average', and only 0.8% thought it was 'little', and 3.4% said their understanding of substance misuse in general was 'very little'.

- 84.5% of the respondents indicated that they felt confident in speaking about drugs, alcohol and tobacco.
- 88.6% said they felt confident in saying no to drugs / alcohol / tobacco.

There were not many significant correlations between the variables but there are a few worth mentioning:

- The strongest positive correlation was found between **drug and cigarette** use ($r=.64$, $p<.01$). If smoking leads to drug use or is associated with it, perhaps more emphasis on smoking prevention could yield better results in preventing drug use. The relationship of drug use and alcohol use was also found positive and significant ($r=.37$, $p<.01$) however much less strong.
- A small, but significant negative correlation was found between the **level of substance misuse understanding and drug use** ($r=-.16$, $p<.01$), with alcohol use ($r=-.16$, $p<.05$), and with smoking ($r=-1.4$, $p<.01$). This can suggest that the higher the level of understanding of substance misuse the less likely that the person uses drugs, alcohol or tobacco.
- A slightly stronger and still significant negative correlation was found between **feeling confident in saying no to drugs / alcohol / tobacco and previous drug use** ($r=-.33$, $p<.01$), alcohol use ($r=-.2$, $p<.01$), and tobacco use ($r=-.25$, $p<.01$). This suggests that those young individuals who have no experience of using harmful substances are more likely to say no. This could suggest it is more difficult to reduce or stop the on-going substance misuse of those who have already tried them.

4.1.3 Difference Between the two Age Groups - (14- 16 and 16-19yrs old)

Findings of the Data Analysis of the Two Age Groups (14-16 and 16-19)

Table 1.1

Question	14-16 year olds, n=286	16-19 Year Old, n=236
Are you aware what substance misuse means?	Yes 56.2%	Yes 88.3%
How would you rate your understanding of drugs, alcohol and tobacco and the effect it has on a person's health?	Very Good 25.8% Good 41% Average 26.2% Little 3.7% Very Little 3.3%	Very Good 34.6% Good 39.3% Average 22.2% Little 1.7% Very Little 2.1%
Have you ever been offered drugs / alcohol / tobacco?	Yes 47%	Yes 81%
Have you ever taken drugs?	Yes 12.4%	Yes 28.8%
Have you ever taken alcohol?	Yes 38.2%	Yes 70.6%
Have you ever taken cigarettes?	Yes 20.1%	Yes 35.7%

Regretted taken any of the above?	Yes 16%	Yes 25.6%
Do you know someone among your peers who is abusing or misusing drugs?	Yes 41.9%	Yes 45%
After workshop: How would you rate your understanding of drugs, alcohol and tobacco and the effect it has on a person's health?	Very Good 51.4% Good 32.5% Average 11.8% Little 1.6% Very Little 2.7%	Very Good 47.4% Good 40.4% Average 7.9% Little 0% Very Little 4.4%
After workshop: I feel confident in speaking about drugs, alcohol and tobacco.	Yes 83.4%	Yes 87.3%
After workshop: I feel confident in saying no to drugs / alcohol / tobacco.	Yes 88.6%	Yes 88.4%

The table 1.1 above summarises the differences that were found between the two age groups in terms of their response to the questions pre and post workshops.

Key points that can be summarised from the above table are that:

- The level of knowledge of substance misuse increase with age by 32.1% in the older age group.
- 34% more of the older group are offered drugs / alcohol / tobacco and drug experience appears to be more than double.
- Reported alcohol experience goes up to 70.6% in the older age groups as compared to 38.2% in the younger group, and
- The experience of smoking is increase with older age by about 15%.

It can be inferred from the findings of the above table 1.1 that interventions at early age is important but it may not in itself be entirely successful. Therefore, perhaps an ongoing intervention at different ages may be needed. Nevertheless, this inference needs further investigations in order to get a sense of the most effective age for interventions.

4.2 Qualitative Results

4.2.1 Younger Age Group

In the younger cohort (14 -16 years) 286 questionnaires were returned, however the number of questions answered slightly varies across the group. There were 6 qualitative type questions altogether.

Question 1:

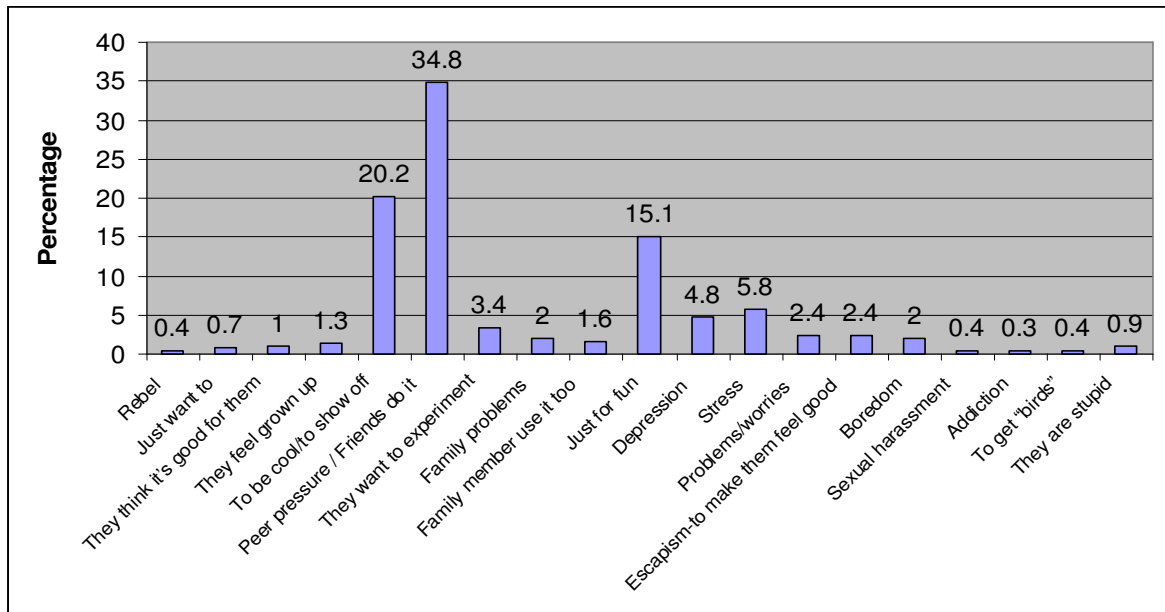
“In your opinion / from experience, why would a young person take alcohol / drugs / tobacco?”

The students’ answers were organised into 19 subgroups according to their similarities in meaning. The percentages on **Graph 1** indicate the proportion of these answers.

Subgroup	%	Number of respondents
Rebel	0.4	3
Just want to	.7	5
They think it’s good for them	1.0	7
They feel grown up	1.3	9
To be cool / to show off	20.2	142
Peer pressure / Friends do it	34.8	244
They want to experiment	3.4	24
Family problems	2.0	14
Family member use it too	1.6	11
Just for fun	15.1	106
Depression	4.8	34
Stress	5.8	41
Problems/worries	2.4	17
Escapism-to make them feel good	2.4	17
Boredom	2.0	14
Sexual harassment	0.4	3
Addiction	0.3	2
To get “birds”	0.4	3
They are stupid	0.9	6

“Peer pressure / Friends do it”, “To be cool / to show off”, “Just for fun” subgroups seem to be dominating the reasons why a young person would use drugs / alcohol / tobacco.

Graph 1



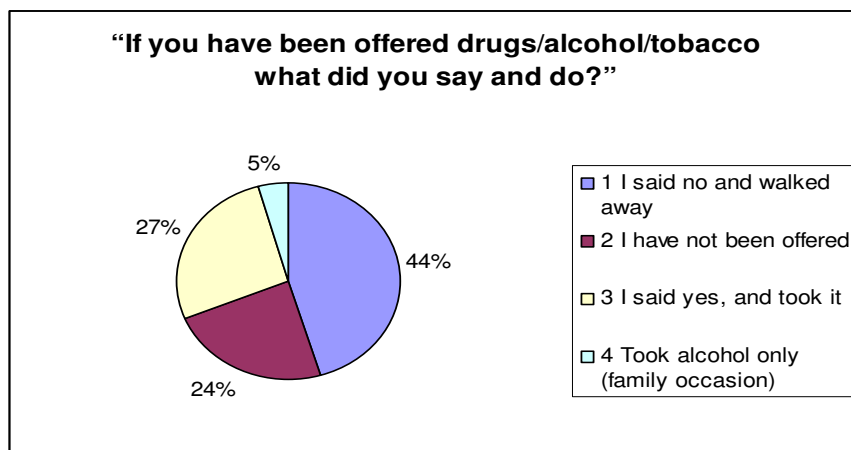
Question 2:

“If you have been offered drugs / alcohol / tobacco what did you say and do?”

Number on graph	Subgroup	%	Number of respondents
1	I said no and walked away	45.2	90
2	I have not been offered	23.6	47
3	I said yes and took it	26.6	53
4	Took alcohol only (family occasion)	4.5	9

It is shown here that the majority of the 14-16 year olds either refuse to take drugs / alcohol / tobacco or have not been offered at all. **Graph 2** below indicates the proportion of the answers.

Graph 2



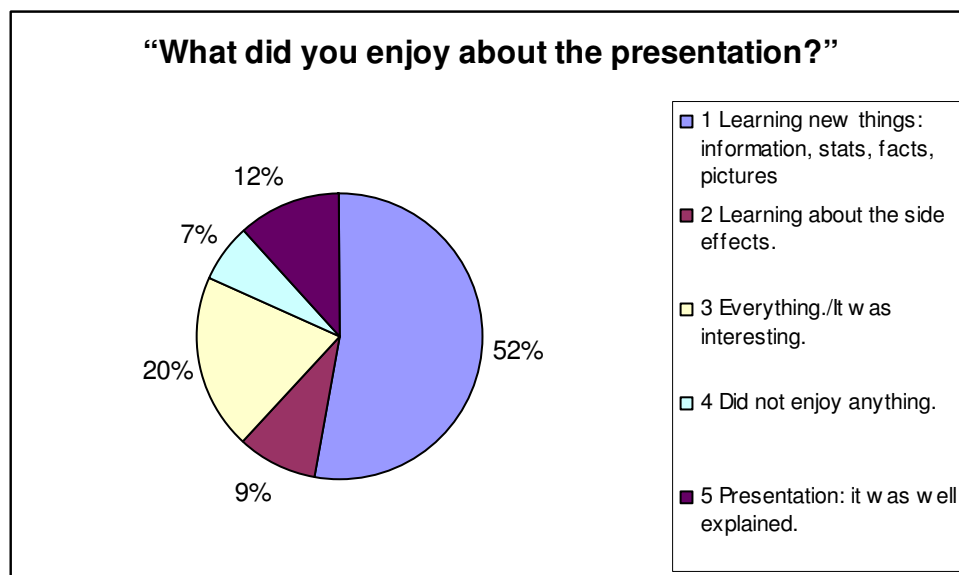
Question 3:

“What did you enjoy about the presentation?”

Number on graph	Subgroup	%	Number of respondents
1	Learning new things: information, stats, facts, pictures	52.8	123
2	Learning about the side effects.	9.0	21
3	Everything. /It was interesting.	19.7	46
4	Did not enjoy anything.	6.9	16
5	Presentation: it was well explained.	11.6	27

Graph 3 below indicates the proportion of answers on Question 3. The data shows that the vast majority of the students were happy with the workshop.

Graph 3



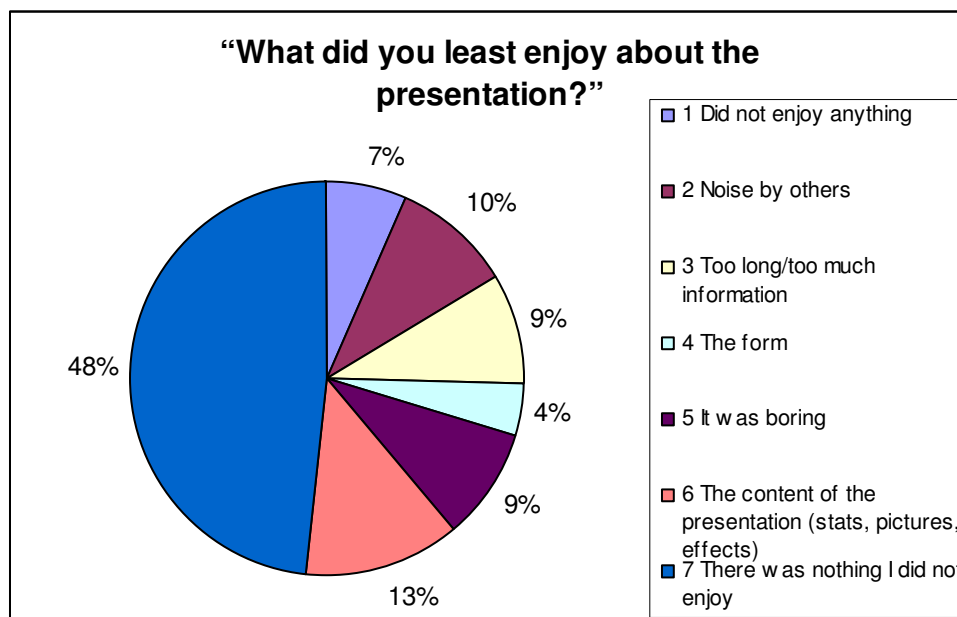
Question 4:

“What did you least enjoy about the presentation?”

Number on graph	Subgroup	%	Number of respondents
1	Did not enjoy anything	6.8	13
2	Noise by others	9.9	19
3	Too long/too much information	9.4	18
4	The form	4.2	8
5	It was boring	7.3	14
6	The content of the presentation (stats, pictures, effects)	12.6	24
7	There was nothing I did not enjoy	49.7	95

Graph 4 below shows the proportion of the answers. It looks like there was a small minority who did not enjoy the workshop at all. Some of the students were disturbed by the noise by others, or found the information too much.

Graph 4



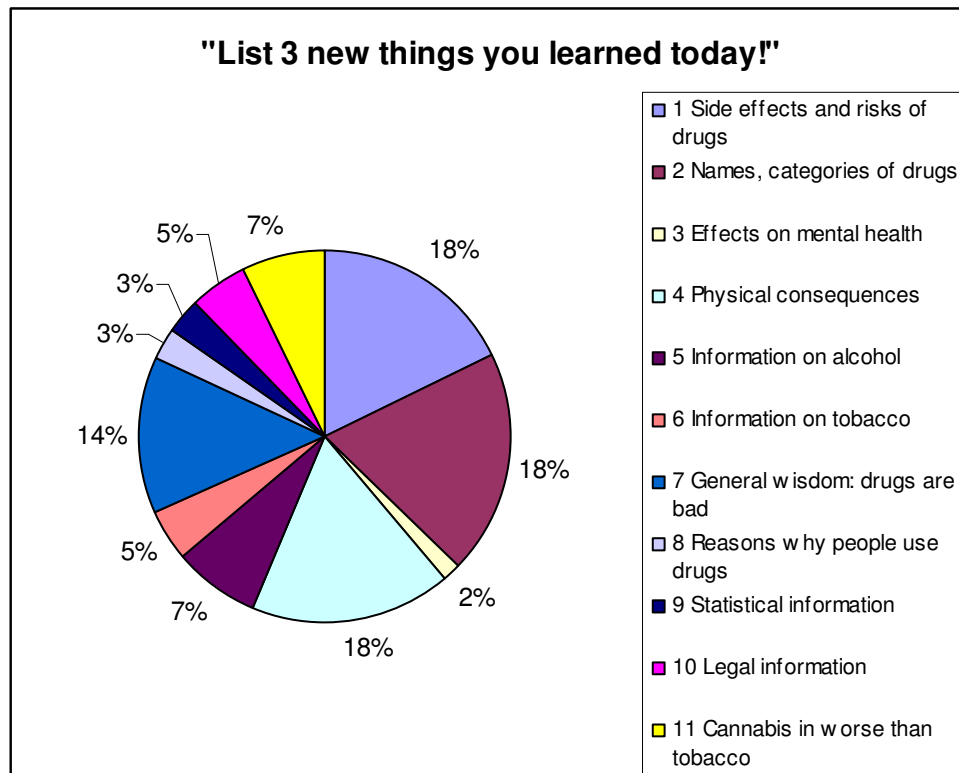
Question 5:

“List 3 new things you learned today!”

Number on graph	Subgroup	%	Number of respondents
1	Side effects and risks of drugs	17.8	66
2	Names, categories of drugs	19.5	72
3	Effects on mental health	1.6	6
4	Physical consequences	17.6	65
5	Information on alcohol	7.3	27
6	Information on tobacco	4.6	17
7	General wisdom: drugs are bad	13.5	50
8	Reasons why people use drugs	2.7	10
9	Statistical information	3.2	12
10	Legal information	4.9	18
11	Cannabis in worse than tobacco	7.3	27

It looks like the students remembered the most on categories of drugs, then side effects, physical consequences. **Graph 5** below demonstrates the proportion of answers.

Graph 5



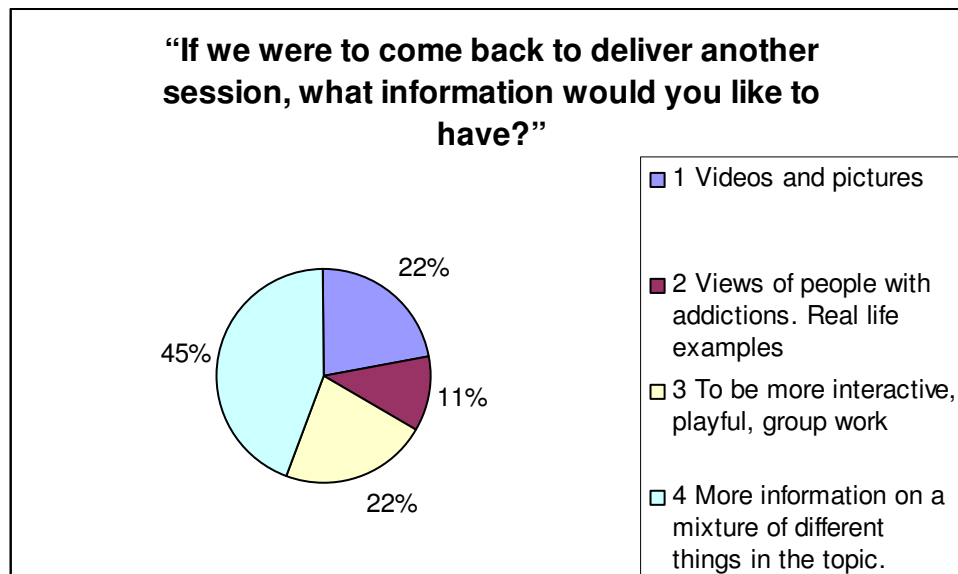
Question 6:

“If we were to come back to deliver another session, what information would you like to have?”

Number on graph	Subgroup	%	Number of respondents
1	Videos and pictures	22.2	14
2	Views of people with addictions. Real life examples	11.1	7
3	To be more interactive, playful, group work	22.2	14
4	More information on a mixture of different things in the topic.	44.4	28

It is seen from the data that the younger age group wish to have more information, possibly with more realistic demonstrations of addictions and in a more interactive form. **Graph 6** below shows the proportion answers.

Graph 6



4.2.2 Older Age Group – 16 – 19 years

The older age group contained 236 age 16-19 students. However, the response rate slightly varies in this group.

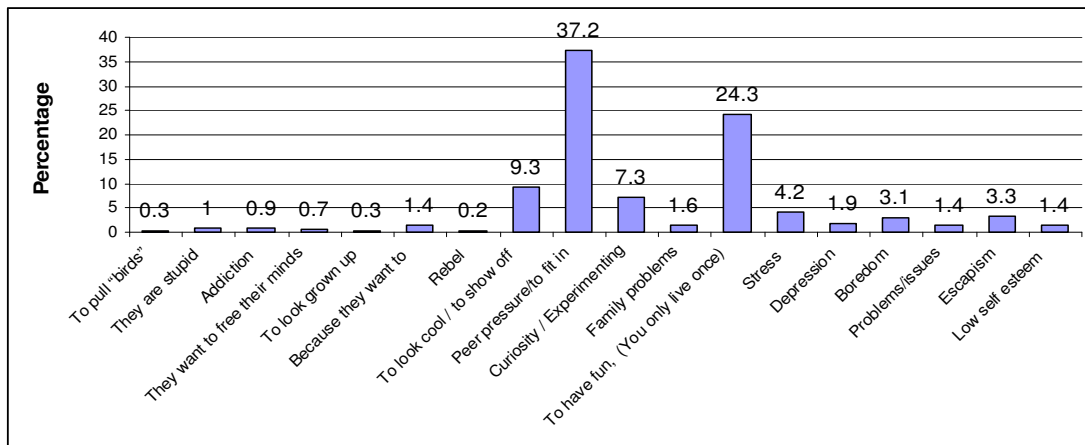
Question 1:

“In your opinion / from experience, why would a young person take alcohol / drugs / tobacco?”

Subgroup	%	Number of respondents
To pull “birds”	.3	2
They are stupid	1.0	6
Addiction	.9	5
They want to free their minds	.7	4
To look grown up	.3	2
Because they want to	1.4	8
Rebel	.2	1
To look cool / to show off	9.3	53
Peer pressure/to fit in	37.2	213
Curiosity / Experimenting	7.3	42
Family problems	1.6	9
To have fun, (You only live once)	24.3	139
Stress	4.2	24
Depression	1.9	11
Boredom	3.1	18
Problems/issues	1.4	8
Escapism	3.3	19
Low self esteem	1.4	8

In the older age group “peer pressure / to fit in” is the dominant reason, in their opinion, why somebody uses drugs /tobacco /alcohol. The desire to “look cool” by using substances drops back in this age cohort and the reason just “to have fun” increases in proportion. **Graph 7** following gives a visual picture of the results.

Graph 7



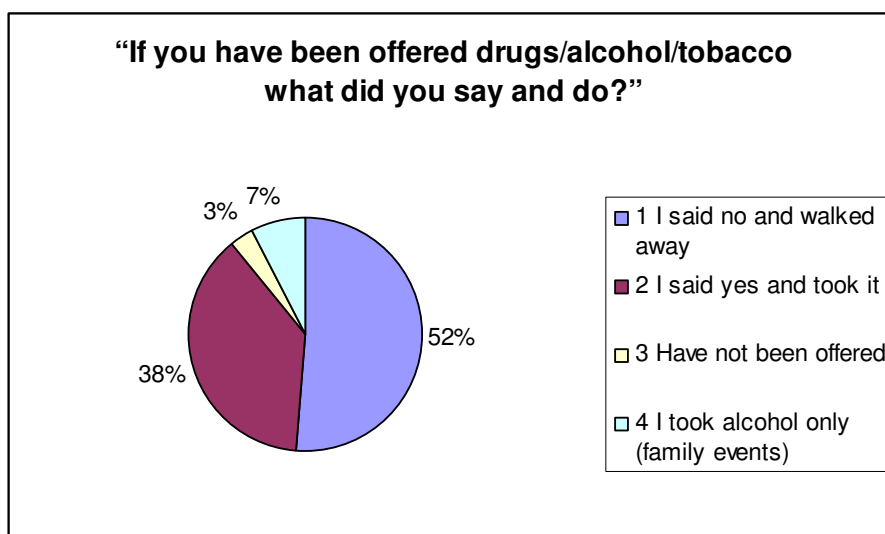
Question 2:

“If you have been offered drugs / alcohol / tobacco what did you say and do?”

Number on graph	Subgroup	%	Number of respondents
1	I said no and walked away	51.4	90
2	I said yes and took it	37.7	66
3	Have not been offered	3.4	6
4	I took alcohol only (family events)	7.4	13

In the older age group the number of those who have not been offered drugs / alcohol / tobacco falls back and the number of those who actually tried substances rise. **Graph 8** following indicates the ratio of the answers.

Graph 8



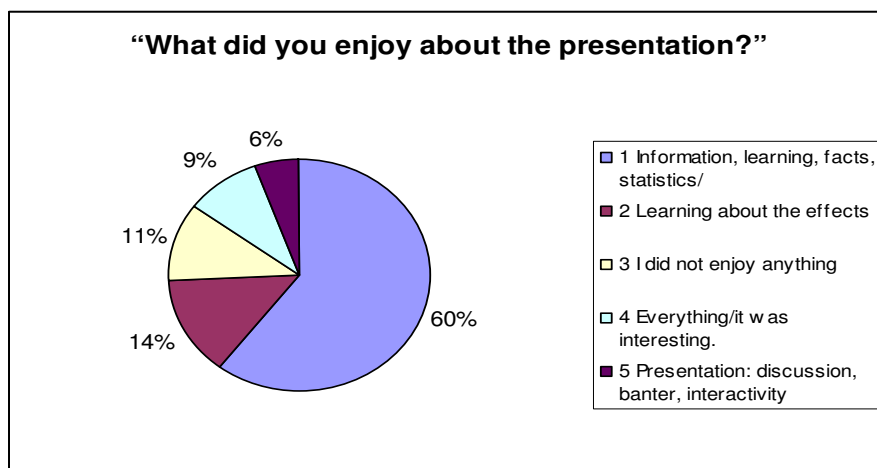
Question 3:

“What did you enjoy about the presentation?”

Number on graph	Subgroup	%	Number of respondents
1	Information, learning, facts, statistics/	60.2	109
2	Learning about the effects	13.8	25
3	I did not enjoy anything	11.0	20
4	Everything / it was interesting.	9.4	17
5	Presentation: discussion, banter, interactivity	5.5	10

Similarly to the younger age group, the vast majority of the students enjoyed learning about substance misuse and its side effects. **Graph 9** shows the ration of the answers.

Graph 9

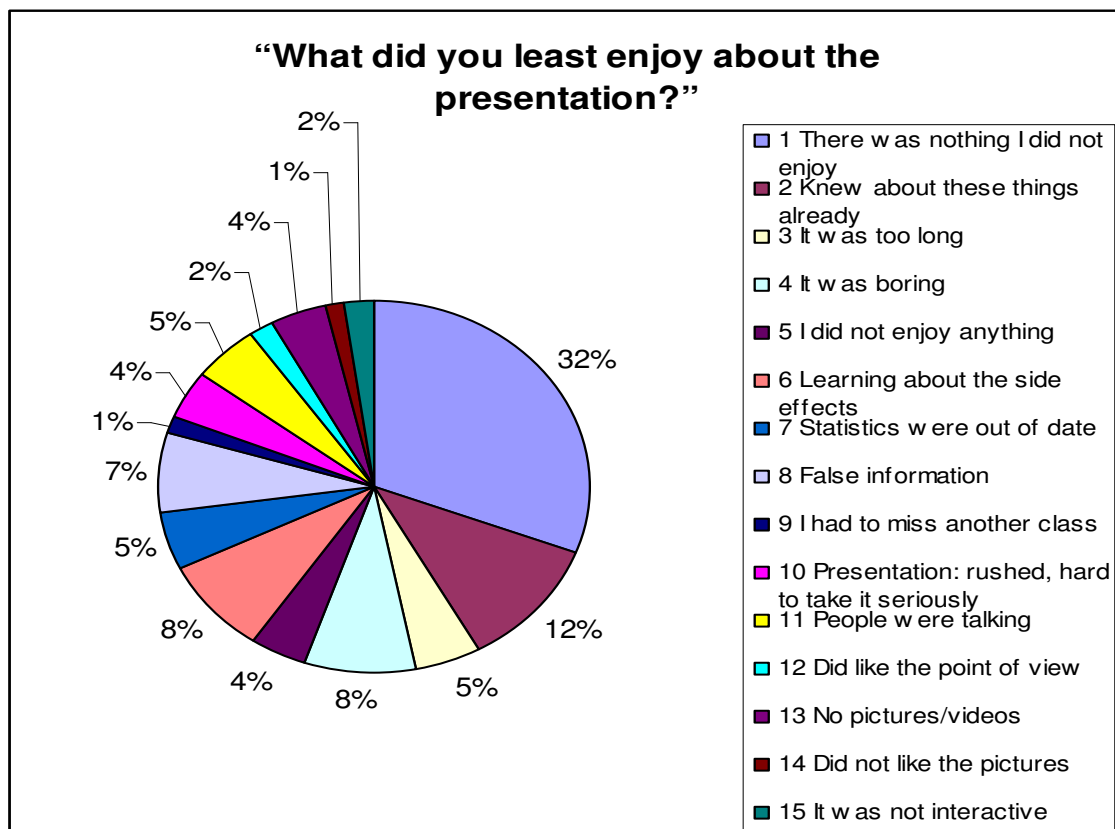


Question 4:**“What did you least enjoy about the presentation?”**

Number on graph	Subgroup	%	Number of respondents
1	There was nothing I did not enjoy	30.8	44
2	Knew about these things already	11.2	16
3	It was too long	4.9	7
4	It was boring	8.4	12
5	I did not enjoy anything	4.2	6
6	Learning about the side effects	8.4	12
7	Statistics were out of date	4.9	7
8	False information	7.0	10
9	I had to miss another class	1.4	2
10	Presentation: rushed, hard to take it seriously	4.2	6
11	People were talking	4.9	7
12	Did like the point of view	2.1	3
13	No pictures/videos	4.2	6
14	Did not like the pictures	1.4	2
15	It was not interactive	2.1	3

The older age group provides a more detailed list of what they did not enjoy than the younger group. For many of them the content was not new and they questioned the information given to them. **Graph 10** following shows the ratio of these answers.

Graph 10



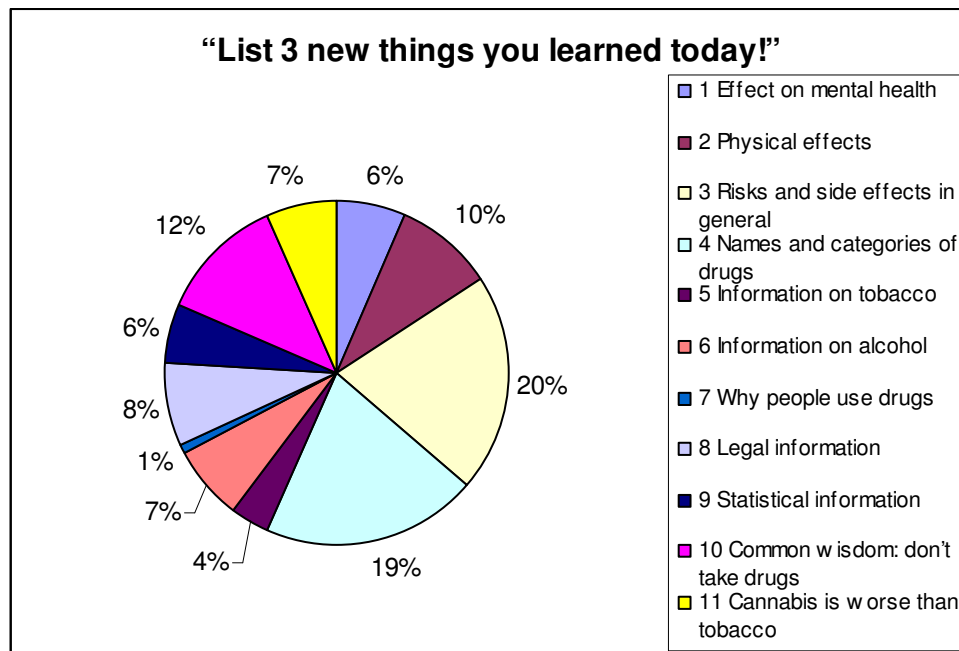
Question 5:

“List 3 new things you learned today!”

Number on graph	Subgroup	%	Number of respondents
1	Effect on mental health	6.3	21
2	Physical effects	9.6	32
3	Risks and side effects in general	20.6	69
4	Names and categories of drugs	20.3	68
5	Information on tobacco	3.6	12
6	Information on alcohol	6.9	23
7	Why people use drugs	.9	3
8	Legal information	7.8	26
9	Statistical information	5.7	19
10	Common wisdom: don't take drugs	11.9	40
11	Cannabis is worse than tobacco	6.6	22

From Question 5, it seems like they remembered the various effects, risks and categories of drugs. Interestingly, it captured both groups' attention, the fact that cannabis is more harmful than tobacco. **Graph 11** demonstrates the proportion of these answers.

Graph 11



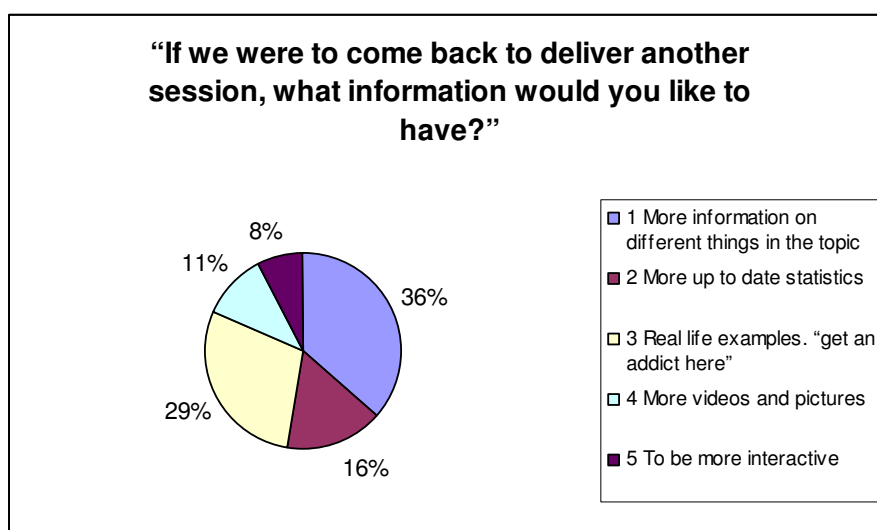
Question 6:

“If we were to come back to deliver another session, what information would you like to have?”

Number on graph	Subgroup	%	Number of respondents
1	More information on different things on the topic	36.3	29
2	More up to date statistics	16.3	13
3	Real life examples. “get an addict here”	28.7	23
4	More videos and pictures	11.3	9
5	To be more interactive	7.5	6

In the future, this group would also like to have more on the topic, with real life demonstrations and up to date statistics and possibly have it in a more interactive form. **Graph 12** following shows the ratio of answers.

Graph 12



5. Conclusion

This finding from the research demonstrates that there is a strong need among the youth population to know more about drugs / alcohol / tobacco and about the physical, mental and legal consequences of their use.

In terms of the relationship between drugs/alcohol/tobacco uptake and the age of the individual.

- The findings show that as students become older, more of them start to 'experiment with drugs / alcohol / tobacco.
- The reason and the motivation for experimenting with drugs/alcohol/tobacco among both the age groups seems to be due to "peer pressure", and pressure to fit in within the peers. .
- In the older group the number of those who just want to try it and have fun is much higher than in the younger group.
- While in the younger group "to be cool" is a more important factor if it comes to drug / alcohol / tobacco use.

In terms of interventions, it seems there are a few correlations, which suggests

- That intervention on smoking and alcohol may also help with prevention of drug use.
- It also shows from the findings that the higher the level of understanding of substance misuse the less likely that the person uses drugs, alcohol or tobacco.
- That young individuals who have no experience of using harmful substances are more likely to say no to drugs / alcohol / tobacco and
- This can suggest that perhaps it is more difficult to reduce or stop ongoing substance misuse among those who have already tried them.

Effectiveness of Participative Educational Workshops

For the majority of the participants the workshop was a positive experience and for some of them an “alarm”. They highly valued the information that was given to them. However, in future workshops they would appreciate incorporating real life examples in the sessions and making the workshops more interactive with visuals.

6. Recommendations

- i) To be innovative and ready to take initiatives to **help build the confidence and self esteem of young individuals** so that they can overcome the issues around peer pressure, which seems to be the major motivation to try and experiment with drugs / alcohol / tobacco.
- ii) Health promotion methods and materials used for young people should incorporate **real life examples, more visuals and apply interactive** methods.
- iii) **Better coordination** between those working in the areas of Drugs, Alcohol and Tobacco for joined preventative actions.
- iv) **An online method** to engage and interact with young individuals to help tackle the issues of substance misuse, improve the update of support services by those in need and improve on early prevention.



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