The Government strategy document *Tackling Drugs Together* highlighted the pivotal role of youth services in helping young people resist initiation into drug use. Youth workers are well placed to deliver drugs prevention interventions because of their privileged access to young people. Also, youth workers have appropriate skills and are generally considered credible and non-authoritarian by young people. Traditionally, statutory youth services have been charged with developing young people to help them reach their full potential through informal education and, through life-skills training, to build their confidence, self-motivation and skills such as decision making. However, because of the elective nature of youth work undertaken in young people’s leisure time, it is critical that interventions are not only attractive to the target audience but appropriate to their level of knowledge and need. This means they need to be very carefully targeted and designed.

The statutory youth service and the voluntary sector are key partners in the delivery of the Connexions service. In the future both the voluntary and statutory youth sectors will play a key role in working with Connexions Partnerships in delivering a range of support to young people. All Connexions Partnerships have also been asked to set local targets for the reduction of drug use. This briefing will, therefore, be of interest to the Connexions service, youth services and voluntary youth organisations.

**THE STUDY AT A GLANCE**

- This research explored the delivery of drugs prevention through youth work. It focused on projects utilising two main approaches to drugs prevention. These were drugs prevention delivered through either (a) structured education programmes, or (b) direct interaction with the community through street-based outreach and detached work.

- The research took place between October 1996 and October 1998. A total of nine centre-based and non centre-based youth projects were included, of which five were detailed case studies.

- A variety of research methods were used. Evaluation of the five case study projects involved interviews with 17 project managers, 19 project staff, and 20 young people. In addition, there were three focus group discussions with young people, and observations of 16 sessions in which drug prevention education was delivered.

- The study addressed two key questions:
  - whether and how interventions in direct contact with young people outside schools can have an impact on their knowledge, attitudes and behaviour; and
  - how to attract and retain young people’s interest in such projects.
RETAINING YOUNG PEOPLE’S INTEREST

- Drop-out rates from structured programmes were high. Running shorter programmes, consulting young people over the design of programmes, and offering attractive incentives were all effective in maintaining young people’s interest.
- The high drop-out rates highlight a delicate balance to be struck between creating centre-based programmes long enough to provide education and intervention and have an impact, and short enough to retain the interest of young people.
- ‘Holistic’ programmes, using an interactive approach and combining health and lifestyle elements with drugs issues, emerged as the most appropriate method of drugs prevention education. It was essential for workers to be skilled in teaching drugs issues.

DRUGS PREVENTION THROUGH DETACHED OUTREACH WORK

- A dominant theme from the non centre-based projects was the difficulty of making contact and establishing trust with young people at street level. Many contacts made at street level were short-lived and amounted to handing over an information leaflet. Repeat contact with a core group of individuals already known to project workers was common. Having fixed-site facilities where young people could drop in helped develop relationships in which drugs and their use could comfortably be discussed.
- Detached youth workers functioned as an important support mechanism for young people, offering advice and providing practical help on a wide range of issues, such as employment, court appearances, school exclusions and relationships with parents. Such help and support has the potential to prevent the development or escalation of a young person’s drug use.
- It was often easier to engage those with specific needs, such as dependent drug users (who may need help with housing, welfare or other issues), than other young people.

DRUGS PREVENTION THROUGH YOUTH WORK

- Although youth centres easily attracted young people, drug use was not a significant concern for many. Projects found there was a limit to how much drugs education could be delivered. There is a danger of creating ‘learning fatigue’ from programmes that operate in what is essentially young people’s leisure time. It also led project workers to warn that it is inappropriate to place too much emphasis on drug use or to attempt to isolate it from the range of issues of personal significance.
- It was difficult to carry out drugs prevention with younger children (8–12 years). It appeared that school was a more appropriate setting for drugs prevention education for these groups.
- The greater freedom youth workers had in deciding working approaches, the more successful they were in working with young problem drug users. Although traditional drug agencies expect to begin with an immediate admission of a drug problem, youth workers generally found they needed to deal first with other life problems that directly influence drug-using behaviour.
The monitoring data reported here are drawn from the five case study projects. These were:

- Hyson Green Youth Action Project, Nottingham
- The Higher Risk Intervention Project, implemented with young people living in residential care in Liverpool
- Saffron Lane Young People’s Project, Leicester
- Visions for Youth Project, Merseyside
- Taunton Detached Youth Project, Somerset

Two projects implemented structured drugs education programmes (Hyson Green Project and the Higher Risk Intervention Project). The other three projects delivered drugs prevention through street-based outreach and detached work. The work of the projects is summarised in Table 1.

For many young people contacted, substance use was limited to alcohol and cannabis. The low level of substance use among the sample was possibly explained by their young age. Also, many were living with their parents, a factor known to be a restricting force on young people’s substance use. Due to the already relatively low levels of substance use among the group participants, very little change to drug use behaviour was observed, although a few reported viewing drug use less favourably following the intervention.

In contrast, the Taunton project recorded 98% of the contacts made during the research period with young people who were not previously known to the project as ‘current’ illicit drug users. Just over a third of these contacts were travellers, of no fixed abode or living in a hostel. Heroin was a commonly used substance with nearly a quarter recorded as current users. Amphetamine and ecstasy were used by over 10% of respondents. The Higher Risk Intervention Project was implemented with young people living in care – a group identified as being vulnerable to drug-related harm. A high proportion of young people in the programme (a third or more) had used cocaine and amphetamine. Although quantitative data was not available on the extent to which drug use behaviour altered among young people in these projects, positive changes were reported. Some young people attended regular project appointments with the intention of working on decreasing or ceasing drug use. Others said the intervention had changed the way they viewed drugs or that the intervention had instigated a reduction in their substance use.

Table 1: the five case study projects

<table>
<thead>
<tr>
<th>Project</th>
<th>Mode of recruitment</th>
<th>Age of contacts</th>
<th>Contact rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hyson Green</td>
<td>Entry to programme</td>
<td>13 – 18</td>
<td>34 programme entrees</td>
</tr>
<tr>
<td>Higher Risk</td>
<td>Entry to programme</td>
<td>14 – 19</td>
<td>15 programme entrees</td>
</tr>
<tr>
<td>Saffron Lane</td>
<td>Street-based outreach</td>
<td>13 – 18</td>
<td>22 per month</td>
</tr>
<tr>
<td>Visions for Youth</td>
<td>Mostly street-based outreach</td>
<td>14 – 18</td>
<td>8 per month</td>
</tr>
<tr>
<td>Taunton</td>
<td>Street-based outreach; attendance at</td>
<td>16 – 25</td>
<td>12 per month</td>
</tr>
<tr>
<td></td>
<td>project/youth centre, mobile bus</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The report concludes that:

- Youth workers are ideally placed to target high-risk youth. Drugs strategies that are over-reliant on school-based approaches and overly broad in their targeting approach may fail to exploit opportunities for tackling the greatest harms associated with youth drug use.

- Detached outreach projects may experience difficulty in making contact and establishing trust with young people if they rely solely on the street as a point for contact. All such projects need to make use of venues such as schools, pubs and nightclubs.

- Youth workers need training, support and resources to develop the skills to deliver drugs education to young people. In particular, they need training to advise on issues of key interest to young people – the effect of drugs and drug use, and the law.

- Both centre-based and non centre-based projects are likely to be most efficient when delivering drugs prevention as one component of youth work, with drugs-specific projects targeted to young people at high risk of problematic drug use. Outreach is most efficient when targeted to high-risk groups rather than as a means of primary drugs prevention among young people in general.