healthy care briefing

national children's bureau making a difference March 2005

There is evidence that some looked after children and young people are using alcohol and other drugs more than their peers who are not in care, are starting at an earlier age and are more likely to continue into adulthood – thus affecting their future health and well-being. A small number of looked after young people will go on to have serious alcohol or drug problems in their adult lives. Looked after children also experience a range of risk factors and difficult life experiences commonly associated with drug misuse, such as family breakdown, poor parenting and disrupted education.

Healthy Care

This briefing is for all who are involved in Healthy Care Partnerships and:

- identifies what is known about alcohol and other drugs and looked after children and young people
- describes what alcohol and drug education is
- provides examples of how healthy care can support drug and alcohol education for looked after children and young people
- offers signposts to resources and further information.

The Healthy Care Programme, funded by the Department for Education and Skills, is a practical means of improving the health of looked after children and young people in line with the Department of Health guidance *Promoting the Health of Looked After Children* (2002). Through partnership working, policy development, and with the participation of looked after children and young people, it will ensure that services are child-focused, provide a healthy care environment and support the National Healthy Care Standard.

The National Healthy Care Standard is based on a child's entitlement to:

- appreciation, love, respect and consistency
- a safe, protective and healthy care environment
- opportunities to develop personal and social skills to care for their health and well-being now and in the future
- effective healthcare, assessment, treatment and support.

Substance misuse

Use of alcohol and other drugs

The misuse of alcohol and other drugs by children and young people is a major cause of concern nationally. Research tells us that the majority of all young people will use drugs for recreational or other purposes at some time as they move into adulthood. Most will 'grow out of it' and come to no long-term harm (Canning and others 2003). However parents, carers and professionals want to ensure that young people are equipped to deal with these potential risks to their health. Substance misuse is more likely to be problematic when there are a range of other risk factors experienced by the young person, such as family and school problems.

The evidence

Although the research is limited, some studies illustrate that looked after young people are four times more likely than those living in private households to smoke, drink and take drugs (Meltzer and others 2003, Williams and others 2001).

Looked after children and young people tend to start using drugs at an earlier age, at higher levels and more regularly than their peers who are not in care, leading to concerns that their drug use may become more established and dangerous (Big Step Social Inclusion Partnership 2002, Newburn and Pearson 2002, Ward 1998, Save the Children 1995).

Looked after children and young people who have experienced parental drug and alcohol misuse may view excessive drugs and/or alcohol use as 'normal' (Ward and others 2003, Newburn and Pearson 2002). Recent research from FRANK shows that a number of older children of drug-misusing parents regularly use cannabis, but don't regard it as a drug (FRANK 2004).

Many looked after children and young people use drugs for recreational reasons, just like other young people. But there is also evidence that looked after young people may use drugs 'to forget bad things' reflecting their – often traumatic – personal histories (Big Step Social Inclusion Partnership 2002, Newburn and Pearson 2002, Vernon 2000, Riddell 1996).

When children and young people are abused through prostitution, alcohol and other drugs are often involved in the grooming and enticement process (Palmer 2001, Barnardo's 1998). A recent study found that 78 per cent of sex

Terminology

In this briefing, the term 'substance' is used to refer to any psychotropic substance including illegal drugs, illicit use of prescription drugs and volatile substances, including tobacco. The term 'alcohol and other drugs' is used in this briefing because alcohol use and misuse is increasing among young people and is often linked to other drug use. 'Other drugs' include: tobacco; volatile substances such as solvents, gases, lighter and other fuel; illegal drugs including cannabis; some plants and fungi (magic mushrooms); and over-the-counter and prescribed medicines that are used for recreational rather than medical purposes.

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workers who were also problematic drug users had been in care (Cusick and others 2004).

There is some evidence that looked after young people may 'mature out' of their drug use earlier than young people not in care. This seems to be associated with well-managed and supported transitions to independence (Ward and others 2003, Biehal and others 1995).

Most studies suggest that drug taking is similar between boys and girls and across ethnic groups. One study found that alcohol and tobacco were used less by young black people (Save the Children 1995) and another found that young black people were less likely to have used drugs than young white people or young people of mixed parentage (Ward and others 2003).

There is emerging evidence of links between risk-taking behaviours involving alcohol, drugs and sex (Lynch and Blake 2004). Young people regularly using alcohol and drugs are more likely to start having sex at an early age, and to report engaging in sex they didn't really want because they or their partner were drunk (Ingham 2001).

Cannabis

- Cannabis is the most common drug used by looked after children and young people, followed by ecstasy, glue, gas and solvents (Meltzer and others 2003).
- Cannabis is also the most common drug used by the general population of young people (Boreham and McManus 2003).
- Young people in residential care are more likely to have used cannabis at some point than those in foster placements (Meltzer and others 2003).
- Looked after children and young people with a mental disorder are three times as likely to have used cannabis in the past month (Meltzer and others 2003).

Alcohol

 Alcohol use seems to be higher among looked after young people than the general population of young people (Meltzer and others 2003). However, another study among care leavers found alcohol use to be lower than among the general population (Ward and others 2003).

- Young people in the general population are drinking larger amounts of alcohol than they used to (Boreham and McManus 2003). Binge drinking is also becoming more common (Hibell and others 2000).
- Regular heavy drinking and binge drinking are associated with anti-social behaviour, violence, accidents, physical and mental health problems, and poor performance at school (British Medical Association 2003).

Tobacco

- Two-thirds of care leavers reported that they were daily smokers of cigarettes (Ward and others 2003). A national study found that a third of looked after young people aged 11 to 17 were current smokers (Meltzer and others 2003).
- One in ten young people in the general population aged 11 to 15 are current smokers (Boreham and McManus 2003), 22 per cent of all 15-year-olds are regular smokers and smoking is more prevalent among girls than boys (DH 2004).
- Half of all teenagers who continue to smoke will die from diseases caused by smoking (ASH 2004).

Volatile substances

- Childline has noted a significant number of calls from looked after children and young people who are using volatile substances (Blake, 2004).
- Glue, gas and solvents are the third most common drugs used by looked after children (Meltzer and others 2003).
- Deliberate inhalation of volatile substances is responsible for more deaths in young people aged 10 to 16 in England and Wales than illegal drugs (DH 2004).
- Volatile substance abuse tends to start at an earlier age than other substance abuse (Boreham and McManus 2003).

Alcohol and other drug education harm reduction and early prevention

Drug education is part of the role of all carers working with looked after children and young people. It also plays a part in meeting the National Healthy Care Standard. The Children Act 1989 says that: 'Staff should play an active role in promoting all aspects of a child's health. Health care should include education about alcohol and other substance abuse ...' Corporate parents have a statutory responsibility to promote the health of looked after children and young people.

Residential social workers and foster carers are well placed to provide drug education and support to looked after children and young people because they:

- know the child/young person's background, needs and what is happening for them now
- are in everyday contact with the child/young person
- are likely to have a good relationship with the child/young person
- can be concerned about the child/young person's whole life.

Some authorities have trained looked after children's nurses to undertake alcohol and drug education.

Some children and young people may come into care with alcohol or drug problems. They will need supportive relationships with carers as well as specialist help to overcome this. Other children or young people may come from families with alcohol and drug misuse problems. They will also need sensitive support from carers and staff, especially when drug and alcohol education is provided.

Effective alcohol and drug education According to the Department of Health (2002), 'All children and young people are entitled to drug education and support!'

The best available worldwide research identifies effective alcohol and drug education programmes as those that address knowledge, skills and attitudes and provide developmentally appropriate and culturally sensitive information.

The Department for Education and Skills (2004) says effective education programmes should focus on:

- Knowledge and understanding making sure children and young people know about alcohol and other drugs in a way that is appropriate for their needs, age and development.
- Skills for life helping them to learn how to manage their own lives, including making their own decisions, being assertive and keeping themselves safe and healthy.

 Attitudes – encouraging them to develop positive attitudes, values, self-esteem, and awareness of their rights and responsibilities, and those of others.

Policies on alcohol and drug use

Carers will need management support and training and, most importantly, a clear policy on alcohol and other drugs in order to undertake this work competently and confidently. Some areas have developed policies for all children and young people's services to enable a consistent approach by professionals and staff (Nottinghamshire County Council 2004). Other authorities have developed specific policies for looked after children and young people's services and have consulted carers, staff, and children and young people about what the policies should cover.

How Healthy Care can promote drug and alcohol education

A healthy care environment provides a sound base for alcohol and drug education to take place because, for children and young people, it:

- provides supportive personal relationships
- strengthens their sense of self
- stimulates their curiosity and desire to learn about the people and world around them
- provides opportunities to exercise choice and learn about responsibility
- is free from fear or violence
- offers a safe living environment
- promotes and protects their physical and mental health.

Healthy Care Partnerships can promote education about alcohol and other drugs by ensuring that it is addressed in Healthy Care audits and Healthy Care action plans. This will include training and professional development for carers and residential social workers to support them in providing a healthy care environment and understanding the importance of their role. Resources on drug education have been produced for carers, residential social workers and managers based on the work of the Drug Education for Children in Public Care project (see 'Useful Resources' at the end of this briefing)!

The National Healthy Care Standard

A child or young person living in a healthy care environment is entitled to:

- 1. feel safe, protected and valued in a strong, sustained and committed relationship with at least one carer;
- 2. live in a caring, healthy and learning environment;
- 3. feel respected and supported in his/her cultural beliefs and personal identity;
- 4. have access to effective healthcare, assessment, treatment and support;
- 5. have opportunities to develop personal and social skills, talents and abilities and to spend time in freely chosen play, cultural and leisure activities; and
- 6. be prepared for leaving care by being supported to care and provide for him/herself in the future.

Examples from Healthy Care Partnerships of action to promote substance misuse education

Policy

- A drug education and support policy was developed for the looked after children's service. Carers and children contributed to its development and dissemination. A young people's version was also produced and distributed.
- Alcohol and drug education for looked after children and young people is specifically included in the local young people's substance misuse plans.
- Local protocols are in place to introduce screening tools to assess looked after young people's vulnerability and substance misuse.

Partnership

- Drug and alcohol action teams are part of Healthy Care Partnerships.
- Youth workers and care staff work together to provide alcohol and drug education in residential children's homes.
- A substance use policy for all children and young people was produced by a partnership of all agencies delivering children's services. Training about the policy was provided for staff across all services.

Practice

- Training in alcohol and drug education is provided for foster carers, residential care staff, social workers, looked after children's nurses and mentors.
- A drug education and support worker has been appointed to work with looked after young people with problematic substance use.
- Health assessments for some young people are carried out by the looked after children's nurse and include sensitive discussions of alcohol, smoking and other drugs and whether there is a need for informal education or other support.

Participation

- A survey into volatile substance abuse was carried out by looked after young people and identified levels of knowledge and ideas about improving education and support.
- Looked after young people took part in drama workshops and devised a play about what can happen to young people leaving home and included problems with alcohol and drugs for young people.
- A music recording and training project worked with looked after young people and produced a CD for young people that used music to educate about alcohol and substance misuse. The young people gained professional recording skills and knowledge about drugs.

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National Policy

The National Healthy Care Standard contributes to the achievement of:

• The five outcomes for children and young people described in Every Child Matters The outcomes are to: be healthy; stay safe; enjoy and achieve; make a positive contribution; and achieve economic well-being. Choosing not to take illegal drugs is a key aim of the 'be healthy' outcome.

• The National Service Framework for Children, Young People and Maternity Services

Standard 1 of the framework notes the need for information and services to prevent risk taking and promote healthy lifestyles, and to prevent or reduce the use of tobacco, alcohol, volatile substances and other drugs. Standard 4 refers to health promotion on substance misuse for young people.

• Choosing Health: Making healthy choices easier

The public health White Paper outlines a range of measures to improve public health and identifies alcohol and drug misuse and smoking as key issues to be tackled. Children and young people must be supported to develop healthy lifestyles, to understand and manage risks and to build up self-esteem and other coping strategies.

Useful websites

www.ncb.org.uk/healthycare The National Healthy Care Standard, resources and briefings on key topics.

www.alcoholconcern.org.uk

Information, training and resources on alcohol misuse for professionals and young people.

www.ash.org.uk

Information and resources about smoking.

www.drugs.gov.uk

National Drug Strategy website.

www.drugscope.org.uk

Information and resources to reduce drug-related risk.

www.drugeducation.org.uk

Aims to encourage appropriate drug education for all children and young people.

www.talktofrank.com

Information, advice on drugs, a local service finder and email answers (24-hour helpline: 0800 776 600).

www.hda-online.org.uk

Information about effective interventions on smoking, alcohol and drug use.

www.nhs.uk

NHS services across the country, health advice and campaigns.

www.nta.nhs.uk

National Treatment Agency, publications, guidance, links to drug action teams and regional services.

www.resolv.org.uk

Helpline, information, leaflets, resources and training on volatile substance abuse.

www.rhrn.thewhocarestrust.org.uk

Resources and information for looked after children and young people.

www.tacade.com

Publications and training on alcohol and drug education for young people.

www.teenagehealthfreak.org

Information and advice on health issues for young people including alcohol and other drugs, plus answers to common questions.

www.wiredforhealth.gov.uk

Health information for teachers and websites for children and young people on keeping healthy.

www.wrecked.co.uk

Alcohol-education website for young people.

Useful resources

Young People's Drinking, Factsheet 1 Alcohol Concern (2004)

Young People and Smoking, Factsheet 3 Ash (2004)

Taking Notice: resources for carers, residential social workers, managers and trainers on talking with looked after young people about alcohol and other drugs (forthcoming 2005) National Children's Bureau.

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