Exploring resilience, diversity and family in drug and alcohol prevention
Foreword

It is increasingly recognised that a powerful way to help prevent drug and alcohol use among young people is to promote resilience in their families. The Adfam Bouncing Back! programme has taken resilience as its central theme and supported six pilot projects in different parts of the country, collaborating with local stakeholders and communities, to test approaches to developing resilience in vulnerable families. The pilot projects, with diverse target groups and activities, have given us valuable learning for drug and alcohol misuse prevention work. For Adfam, Bouncing Back! was an important departure, demonstrating the importance of the role of families in prevention, alongside our more established work with offenders’ families and families with drug users in treatment.

We hope that this report will add value to the developing field of experience and resources in this area.

Vivienne Evans
Chief Executive
Adfam

‘I want to be free of my past, better than my present and always ambitious for my future’

Care Matters: transforming the lives of children and young people in Care, 2006
Bouncing Back!

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February 2007
Drug and alcohol prevention and the role of families

Families have a significant role to play in reducing the impact of drugs and alcohol on young people, not only in conveying vital information to them, but in promoting the factors that protect young people from the risks of drug and alcohol misuse (Advisory Council on the Misuse of Drugs [ACMD], 2006; Velleman et al, 2000).

Good practice recommends that families become involved in drug and alcohol prevention programmes. There is a lack of research however, relating to the ways this should be done and the impact of diversity and vulnerability in families on drug and alcohol prevention (Velleman et al, 2000).

The Bouncing Back! pilot programme

The Bouncing Back! programme funded six projects across the country to address these issues, developing innovative practice for engaging diverse and vulnerable families in drug and alcohol prevention work. Six projects engaged fathers, families in prison, foster families, families affected by drug and alcohol use and black and minority ethnic families in a wide range of work related to drug and alcohol prevention, including programmes building family resilience, parenting skills and drug and alcohol awareness.

For a period of twelve months, these pilot projects effectively engaged a range of families in innovative, creative and sensitive approaches to parenting, drug education and resilience building work. Using a variety of approaches, family members in prison and foster care, rurally isolated settings, schools and community groups took part in creative and rewarding drug and alcohol prevention programmes.

The project work included workshops for parents, film making and drama with young people, group work with fathers and drug education for foster carers. The projects produced resources for working with families, including resources for practitioners, DVDs, magazines and toolkits.

All the projects illustrated that with good partnership working, innovation, significant resources and planning, vulnerable and diverse families can become involved in drug and alcohol prevention programmes.

Programme recommendation for engaging families in drug and alcohol prevention work

The experience of the Bouncing Back! pilot programme enables Adfam to make key recommendations for effective practice in involving families in drug and alcohol prevention work.

Programmes involving families in drug and alcohol prevention work should:

- develop programmes which promote protective factors that help to reduce the risk of young people becoming involved in drug and alcohol misuse
- be adequately resourced to develop quality programmes, enabling them to focus on the complex process of involving vulnerable and diverse families in projects
- focus on the needs and experiences of young people, particularly those vulnerable to harm caused by drugs and alcohol, by developing participative and creative programmes of interest to them
- find positive, empowering approaches to parenting, resilience work and drug and alcohol education, to encourage the most vulnerable and challenged families to engage and stay in programmes

Conclusions

The Bouncing Back! programme concluded that drug and alcohol prevention programmes can effectively engage the most vulnerable of adults and young people. However, these programmes need to be planned and developed according to diverse needs and interests.

To be effective, programmes should explore issues relating to parenting, drugs and alcohol and family diversity, employing innovative methods to fully engage, involve and empower the most vulnerable and diverse of families.
The Bouncing Back! programme was an initiative developed to explore the growing interest in the family’s role in drug and alcohol prevention.
Background

Prevention is ‘action that leads to planned change which creates conditions that give persons the best chance of success in their lives and community. It advocates actions, policies and procedures to shape our culture in support of healthier lives’ (Substance Abuse and Mental Health Services [SAMHSA],1998)

National policy and strategy from Every Child Matters, to the Updated Drugs Strategy highlight the importance of developing innovative family based initiatives to support young people’s health and wellbeing, particularly programmes to develop new ways of engaging diverse and vulnerable families in drug and alcohol prevention programmes (Home Office, 2002; Department for Education and Skills [DfES], 2004).

Bouncing Back! prioritises these issues, showcasing good practice and key learning in engaging diverse and vulnerable families in drug and alcohol prevention work.

Every Child Matters

The Government’s aim is for every child, whatever their background or circumstances, to have the support they need to:

- be healthy
- stay safe
- enjoy and achieve
- make a positive contribution
- achieve economic well-being (DfES, 2004)

Commissioned and funded by the National Drug Prevention Development Team and co-ordinated by Adfam, Bouncing Back! supported six pilot projects across England to develop innovative programmes engaging a range of diverse families in drug and alcohol prevention.

With support grants of £10,000 per project for a period of 12 months, pilot projects which demonstrated innovation and creativity in working with diverse communities and the skills, resources and partnerships to work with diverse and vulnerable groups were selected to:

- prioritise learning for engaging families in drug and alcohol prevention focussed projects
- develop innovation, learning, practical ideas and quality programmes, encouraging family participation in drug and alcohol prevention work
- encourage diversity, by engaging the interests of a wide range of families and communities

Using a broad definition of prevention, the programmes engaged families in a variety of initiatives designed to develop drug and alcohol awareness and promote family and young people’s resilience and parenting by working with fathers, foster families, rural families, families affected by substance misuse, families in prison and vulnerable parents.

This report highlights and develops the key learning from the literature review which informed the Bouncing Back! programme, together with the findings of the pilot sites in relation to engaging diverse families in drug and alcohol prevention work.

Drugs, alcohol, prevention – and families

It is estimated that:

- at some point, just under 3 million young people in England and Wales, have used illicit drugs
- alcohol and other drug use in the UK are, by the age of 15, one of the highest in Europe
- forty to fifty per cent of 15 year olds in the UK report drinking alcohol at least weekly, and a third of young people in the UK reporting having been drunk at least four times by the age of 15 (ACMD, 2006; Home Office, 2005; NCCDP, 2006)

Whilst not all drug use by young people is problematic, illicit drug and alcohol use impacts on individuals and communities. Excessive alcohol use is a major cause of violent crime in the UK and there is growing concern about the psychological, physical and social problems associated with commonly used drugs, like cannabis and alcohol (ACMD, 2006).

In addition to their own use, young people are increasingly affected by the drug and alcohol use of others. Over eight million family members, including children, live with the effects of someone’s drug or alcohol use - experiencing crime and violence, inconsistent and erratic behaviour and parenting and assuming additional roles of care and responsibility within the family (Alcohol Concern, 2006 i; ACMD, 2003; Velleman, R, Templeton, L, 2006 ii).
The role of parenting and family in influencing anti-social behaviour, including problematic use of drugs and alcohol, is high on the national agenda. Families are increasingly regarded as instrumental to and responsible for the behaviour and well being of their children (Home Office, 2006, i).

Given these issues, it is important to explore the role which families can play in influencing drug and alcohol prevention programmes and in enabling young people to develop their potential and wellbeing.

Resilience

‘Research shows that focusing on the strengths of young people is crucial to future outcomes. This means focusing on ‘resilience factors’, or things that help children and young people cope with adversity’ (Social Care Institute for Excellence [SCIE], 2004)

In significant ways research highlights a positive message, that ‘parenting is prevention’. Effective parenting and cohesive, loving families are significant to prevention, because in helping develop resilience in young people, they protect against potentially damaging influences, like drugs and alcohol (Velleman et al, 2000).

Families are important in other ways. In communicating clear and consistent messages about drugs and alcohol, families can positively reinforce preventative programmes developed in schools and the community. They clearly have a role to play in terms of helping young people avoid harm from drugs and alcohol.

Exploring issues of diversity and the engagement of vulnerable young people in programmes can help explain how families can contribute effectively.

Diversity

‘Diversity is about giving value to the differences between people and ensuring we work creatively with these differences to stimulate fresh ideas, broaden and empower every individual to contribute’ (Habinteg Housing Association, 2003)

Families in the 21st century differ widely in their experiences of family life, the values they bring to parenting and the way they are structured and organised. We live with a range of families in modern society, for example, foster families, one parent families and families experiencing a variety of norms, values and experiences. Experiences of parenting, childhood, society and family life influence how and whether families participate in programmes designed to help and support them.

Acknowledging this diversity, the values and experiences that parents and young people bring to parenting, family life and drugs and alcohol issues, and placing it at the centre of family prevention work, is essential to its effectiveness (Bashford et al, 2003; Home Office, 2006 ii).

Young and vulnerable

‘If I was in charge of social services, I’d listen to them (people in care) first, see what they’ve got to say. I can’t just make the rules on what I think is best for them’ (Young person in care, SCIE, 2005)

The link between vulnerability, youth, social exclusion and drug use is well documented (ACMD, 2006; LJMU, 2006). Young people in care, those who are homeless or excluded from school, young offenders and children of parents who misuse drugs, are more vulnerable to risk factors associated with drug and alcohol use than young people generally.

Every Child Matters points out that it is through innovation and radical change that outcomes for all young people will be improved and the potential of all young people can be recognised. This involves listening to young people, promoting creative partnerships with them and providing high quality services based around expressed needs and interests (DIES, 2004).

Translating these principles into prevention work with families, programmes must encourage real participation and innovation, engaging young people’s energies, experiences and interests.

Prevention work highlights the importance of early intervention and engaging young people from early years, and programmes must encourage active involvement of children, as well as young people, to achieve their outcomes.
The six pilot projects

**HMP Bullwood Hall**
*Drug awareness workshops for women in prison*

HMP Bullwood Hall created a new education programme for a prison setting, engaging women in their experiences of drugs, parenting and the family. The participants developed their own drug education resource for other prisoners and their families.

**Dudley Foster Care Association, (DFCA)**
*Lambeth Crime Prevention Trust (LCPT)*
*Drug education workshops for Portuguese speaking parents and their children*

Offering ‘after school’ drug awareness, youth, arts and parenting workshops to primary age children and their parents, LCPT worked creatively with a mix of Portuguese speaking parents and community partners.

**Barnardo’s South Lakeland Family Support Service**
*Therapeutic work with rural young people affected by drugs and alcohol in the family*

This project developed a therapeutic approach to build childhood resilience in families affected by drug and alcohol misuse. The project supported a group of children and young people and a practitioner’s forum. It is now helping young people produce a film on substance misuse and families.

**West Sussex Drug and Alcohol Action Team and partners**
*A process of change, developing resilience through parenting: the Bognor Regis research project*

Working in partnership with a local community based project and school, the programme developed positive, supportive parenting and drug education programmes to promote protective factors and engage local parents of secondary school age children.

**The Boys2Men Project**
*Peer led drug education workshops for fathers*

Based in the London boroughs of Brent, Camden and Barnet, Boys2Men engaged with fathers through action learning sets, developing a toolkit for working with fathers on drug awareness, parenting and education.

**Dudley Foster Care Association, (DFCA)**
*L’Lean on me’ project*
*Drama, art and drug education for foster families*

This project used art and drama to engage looked after children and young people and their carers in drug education training and workshops. Communication between birth children, fostered young people and carers has been at the centre of DFCA’s partnership programme.
This literature is summarised and presented under the following themes:

- families and the role of resilience
- the role of parenting education
- diversity and vulnerability – families, drugs, alcohol and parenting
- drug and alcohol prevention – approaches with families
- young people – drugs and alcohol
- talking and communication
- gaps in the evidence base – effective practice
‘Parents, family, and extended family are recognised by research to have a very significant impact on the adolescent’s intention to use and actual use of drugs. Young adolescents recognise the family as a very powerful influence on their lives. If family is this powerful an influence, then it follows that our messages directed to youth most certainly need to come from the source that they are most influenced by – their family. Many parents are unaware of how their parenting styles or their drug taking behaviours influence their youth’ (SAMHSA, 2001)

The themes and priorities influencing the Bouncing Back! programme arise from a narrative review of eighty original articles taken from the international literature relating to drug and alcohol prevention work with families and in particular literature relating to effective practice in involving families in drug and alcohol prevention.

Families and the role of resilience

‘Parents often under-estimate the extent of their own influence, wrongly believing peer influence to be the decisive factor in their child’s drug-related behaviour’ (London Drug Policy Forum, 2002)

The literature highlights that family plays a significant role in preventing harm from drugs and alcohol misuse (Drugs and Alcohol Findings, 2004; Velleman et al, 2000; SAMSHA, 2001; Velleman and Orford, 1999; NCCDP, 2006).

Resnick’s American study of the lives of 12,000 adolescents, signified in what way: ‘Family connectedness helped protect teens against every health risk behaviour measure that was studied, with the exception of pregnancy’ (Resnick, 1997).

Families are important because they build young people’s resilience, or capacity to overcome and adapt to adversity and life’s challenges.

It is significant protective factors in families that build resilience including:
- connectedness, love and attachment
- a sense of belonging
- quality family time
- supervision and monitoring
- the families’ ability to resolve problems
- shared belief systems (including expectations about drugs and alcohol)
- consistent and predictable family behaviour
- economic stability (Velleman et al, 2000; Alcohol Concern, 2006 ii)

Resilience: ‘The happy knack of being able to bungy jump through the pitfalls of life. Even when the hardships and adversity arise, it is as if the person has an elasticised rope around them that helps them to rebound when things get low, and to maintain their sense of who they are as a person’ (Jenkin and McGenniss, 2000)

Recent work conceptualises the qualities that embody resilience; ‘the ability of a child to draw from three sources of internal and external support. This is summarised as a child being able to state: I have, I am, I can... I have people who love me and who I can trust... I am a person people can like and love... I can talk to others about things that frighten or bother me, find ways to solve problems I face’.

Resilience is relevant because it enables young people to handle new and challenging situations. In essence;
- a sense of self efficacy or ‘mastery’ ‘I can do this’
- good self esteem ‘I am of value’
- sources of social support from friends and family ‘I have people around me to help and advise me’ (Alcohol Concern, 2006 ii)

Individual protective factors that build resilience
- High self esteem and a positive self-concept
- Ability to self reflect
- Being self reliant and acting independently
- Problem solving abilities
- Maintaining a positive outlook
- Having a high level of activity
- Comfortable with making mistakes
- Acting positively with others (Place M et al, 2002)

Professionals can help foster resilience and promote the protective factors that help to reduce the risk of young people becoming involved in drug and alcohol misuse, through supportive and innovative youth and family work. They can encourage approaches which enhance young people’s social networks, talents and interests, develop their values, skills and competencies and help families provide security, love and opportunity for young people (Newman, 2004).

Resilience is a process, of change, not simply a learnt skill. Resilience builds on positive life experiences, helping young people re-frame negative experiences and believe, through experience, they can effect change. Early intervention is important in building resilience therefore, ensuring protective work starts with young children, to ensure its effectiveness.

In addition to parents, extended family members play a significant role in building pathways to protective factors for young people, offering support, love and caring and access to key relationships outside the family (SAMHSA, 2001).

As well as positively influencing prevention, parenting and family can adversely affect it. The absence of
protective factors in families increases risk factors for drug and alcohol misuse (Newman, 2004; Velleman and Orford, 1999).

The role of parenting education

‘Support’ means that you are still in charge; the parent is still in charge and you are asking for help, advice and whatever – but you are the one in charge. You are not handing over your kids to someone else to take over’ (Ghate and Hazel, 2002)

Resilience implies that parents can clearly influence young people’s behaviour in relation to drugs and alcohol, not only in what they communicate about drugs and alcohol but in how they parent (Velleman et al, 2000). Supporting parenting through effective parenting education is therefore a pertinent issue to drug and alcohol prevention.

The review of the literature reveals that some parenting programmes are more effective than others in enabling parents to develop their parenting skills and qualities.

Effective programmes are those which:

- allow parents to set and achieve their own strategies and goals
- work holistically with models which involve a variety of methods, resources and materials to support learning
- are solution focussed, including approaches which build positive relationships through play and praise
- involve skill based components and parental support, in addition to information (Moran P et al, 2004, Velleman et al, 2000)

How parenting education is delivered is as important as what is delivered. Quality programmes should be delivered with clear aims, sound theory and effective facilitation.

Parenting education programmes should pay close attention to recruitment and retention issues; ‘getting’, ‘keeping’ and ‘engaging’ parents in parenting programmes, especially in work with vulnerable families. Ensuring programmes are run in comfortable venues, offering flexible child care, good hospitality and transport are all key to programme outcomes and effective parental engagement (Treen, 2005; Moran P et al, 2004; Velleman et al, 2000).

Sanders and Morawska’s work illustrates that, whilst some children and families may benefit from intensive parenting interventions, brief targeted methods can be effective for others. A range of parenting education approaches is necessary to meet the differing needs, interests and capabilities of families (Sanders and Morawska, 2006).
care services (Tunnard, 2002; Treen, 2005; Home Office 2006 ii).

Rural families may require particular interventions to meet local need and challenges, where there is ‘the strong culture of independence, self sufficiency coupled with pride which may inhibit rural families from seeking help & information’ (Mentor UK, 2003). Work with fathers is key to effective parenting and drug and alcohol prevention work. Fathers may have different motivations for attending parenting workshops than mothers and their specific needs, skills and interests should be addressed in parenting and drug education work (Velleman et al, 2000). Approaches which are particularly effective for working with vulnerable, excluded and diverse families are community approaches which:

- accept parents’ goals at face value
- are family focussed and holistic (tackle drug and alcohol use in the context of wider social and family issues)
- work with existing community networks and create new community networks where appropriate
- resource new and innovative resources which reflect not only language but values and experiences
- develop and sustain partnership work, working in local communities with ‘whole families’
- employ diversionary pursuits, in conjunction with ‘issue-based’ work
- allow parents to feel in control of their learning, using ‘supportive approaches which convey an attitude of hope and possibility without minimising the problem or pain that accompanies it’ (Henderson P, 1995; National Institute for Health and Clinical Excellence (NICE), 2006; Lloyd, 2001; NCCDP, 2006)

**Drug and alcohol prevention – effective practice**

Approaches for involving families in drug and alcohol prevention are many and varied, from one-off awareness sessions for parents, to intensive, long term therapeutic interventions involving whole families. Approaches should be tailored to the specific needs of families, taking account of family experiences and circumstances (NCCDP, 2006).

Contemporary approaches include:

Intensive family therapeutic and parenting approaches working with whole families, for example: the Strengthening Families programme, which originated in the United States and is now operating in the UK, and the USA Coping Power Programme (Jones et al, 2006, Kumpfer, 1999).

Community based ‘drug awareness’ for parents, for example, the UK based Drug Education for Hard to Reach Parents (DrugScope, 2005).

Approaches combining parenting skills and drug education programmes in the community, for example, Taking the Message Home and How to Drug Proof Your Kids, both UK programmes (Velleman et al, 2000, Care for the Family, 2006).

School based drug awareness for parents, eg the Home Office Blueprint Programme (Baker P, 2006).

**Summarising ‘what worked’ in various approaches, authors highlight:**

- the strength of holistic approaches, working with rather than for communities
- the need to involve children as well as parents in parallel, whole families work
- the importance of project workers’ skills, personality, persistence and empathy
- the centrality of building good relationships with parents
- the need to work with a range of materials, approaches and interactive media
- the importance of flexibility, adapting programmes to changing circumstances
- the advantages of using familiar and local environments and venues

**Examples of effective practice – family focussed drug and alcohol prevention programmes**

**Adolescent Transitions Programme (ATS)**

This is a multi-component skill based parenting programme, offering group work and resources for parents combined with professional support for at risk families

**Coping Power Programme**

A child focussed and parent training school-based programme, targeting mid to high risk families, offering one-to-one help and group work for children and parents (Jones et al, 2006)

**Young people – drugs and alcohol**

‘To ensure that young people get the education and support that they are entitled to, they need to participate in the development and delivery of alcohol and other drugs service provision and education’ (NCB, 2004)

The literature highlights the importance of involving young people in family-based drug and alcohol prevention work and of ensuring that their views and
experiences of drugs, alcohol and family life are valued and recognised. Contemporary data relating to young people’s experience of drugs and alcohol reveals that British young people are aware and ‘drug wise’, differentiating easily between a variety of drugs which are readily accessible in local communities.

Drug education should reflect this knowledge and the experiences young people have of drugs and alcohol, providing information they trust and value. Approaches should be non-didactic, encouraging them to ‘come forward and talk about their experiences without censure’ (Drink and Drugs News, 2005).

Although the majority of young people’s drug use is recreational, problematic drug use amongst young people relates strongly with poverty, exclusion and vulnerability. Illegal drug and alcohol use is more prevalent, and drugs more accessible amongst young people considered ‘vulnerable’ (NCCDP, 2005).

‘Young people’s participation involves a range of activities that lie along a continuum. It starts with consulting with young people. It ends with active participation, where young people and adults work together to negotiate and share power’ (NCB, 2004)

Approaches targeting vulnerable young people should:
- build on protective factors, social networks and life skills
- value early intervention and work with young people from an early stage
- target whole communities (not just young people)
- include multi-agency working (not tackling drugs in isolation)
- adopt open, non didactic approaches and messages
- include diversionary pursuits, as well as ‘issue-based’ work
- tailor interventions to age groups and knowledge levels (NICE, 2006; NCCDP, 2005 and 2006)

**Talking and communicating**

‘To listen well, you need to put on hold your own ideas and anxieties about solving problems, or your panic about where the conversation is heading. You don’t have to feel responsible for sorting out the other person’s problems. Concentrate on really hearing what someone is telling you and the feelings they are expressing’ (NFPI, 2000)

The literature demonstrates that enabling families to communicate effectively and relate well to one another is as important a focus for prevention work as is what to communicate. Parents and carers need up-to-date drugs and alcohol information to share with young people but just as importantly they need the skills and abilities to communicate this information effectively (Velleman et al, 2000).

**Prevention approaches should be encouraged with families, which:**
- encourage active communication– listening to what is being said and how it is being said
- ask children what they think and feel
- respect young people’s opinions and make space for young people to talk
- make family conversations fun and enjoyable
- use open questions, to encourage family discussions (Faber and Mazlish, 2001)

**Gaps in evidence**

The literature review also examined gaps in the research evidence relating to drug and alcohol prevention work with families and concluded:
- there is a clear lack of consensus in terms of models for working with marginalised and vulnerable groups, and little formal evaluation in this area
- there is a clear lack of evidence and literature relating to the needs of fathers and drug and alcohol prevention
- no definitive model for working with families/parents on drug and alcohol use prevention exists and there is little evaluation of what models work best overall, particularly in terms of programme content and outcomes (Velleman et al, 2000; NICE, 2006; NCCDP, 2005 & 2006)

**Key themes highlighted in the literature for developing effective practice with families – drug and alcohol prevention**
- the significance of promoting protective factors, resilience and positive parenting for effective drug and alcohol prevention
- the importance of creative, inclusive and participative approaches for working with families
- the centrality of valuing diversity in family life, norms and experiences
- the need to employ a range of preventative approaches to meet diverse family need
- the requirement to acknowledge vulnerability in families and its impact on drug and alcohol use
- the importance of focusing on family engagement and participation, in how to involve families in programmes
- the necessity to work with young people, valuing their drug and alcohol views and experiences
- the importance of supporting family communication and how family members relate to one another
- the significance of developing definitive models for drug and alcohol prevention work with families
The pilot projects
The themes and recommendations of the literature review formed the basis for the pilot project work, co-ordinated by Adfam. Six project sites received grants of £10,000 each for a period of twelve months, to pilot good practice for engaging diverse and marginalised families in drug and alcohol, parenting and resilience work.

The programme received over thirty five applications for potential pilot sites, choosing six sites based on a set of criteria devised by the programme co-ordinator and advisory group.

Projects selected for funding needed to demonstrate the following criteria:

- strong, effective local networks with potential target communities, and a previous track record of community development and innovative engagement with intended beneficiaries
- evidence of relevant partnership working to help develop and sustain projects
- strategic project plans linked to organisational plans/goals/objectives and ongoing work
- clear aims, outcomes and purpose (linked to programme outcomes) and a demonstrable ‘prevention/education’ focus to proposals
- evidence of good practice and innovative approaches in engaging and working with vulnerable and marginalised families, including one parent families, foster families and socially marginalised families
- an understanding of the need for quality standards in working with families on drug and alcohol education and prevention (including support for trainers and educators)
- an innovative, community based approach to working with families, focussing on engaging with families and parents in informal, community settings
- an understanding of the needs of young people
- robust planning processes and the skills/ability to plan and evaluate
- a track record of professional development/learning and of using an evidence base to inform practice

Here follows a summary of the six projects’ aims, outcomes, challenges, achievements and learning, in relation to engaging families in drug and alcohol prevention.
Project aim

At the commencement of this project, HMP Bullwood Hall was a female prison holding 140 women aged between 18 and 21 and 40 lifers of various ages. During the life of this project HMP Bullwood Hall has re-rolled to become an all male prison.

HMP Bullwood Hall’s project aimed to develop a new drug and alcohol awareness course for women prisoners, integrated into their current Family Learning programme. The aim of the course was to raise awareness of the effects of drug and alcohol misuse on families. The course encouraged students to gain accreditations from the Open College Network for drug and alcohol awareness, stimulating students to learn from their own insights and experiences.

Key objectives

- with the help of the CARATS team, to recruit ten women to the project, all with personal knowledge of drug and alcohol use/misuse
- to produce resources for other prisoners and their families, based around participants’ ideas, reflections and experiences of drugs and alcohol

Audience

‘By the age of 15 (student B) was regularly using LSD, magic mushrooms, cocaine, cannabis and alcohol... At 17 she took her second overdose and was again admitted into a Mental Health Hospital, where she received a limited amount of counselling... at 18 she took her third overdose. It was at this point that she realised she needed help and no one was going to get it for her apart from herself’ (courtesy of HMP Bullwood Hall project report)

Participants in the projects had both had personal experience of drug and alcohol misuse within their own families and of drug and alcohol misuse themselves.

Outcomes and achievements

‘The students at the end were very much in control of their learning and the destiny of the project. ... they started to build up trust with one another and the sheer fact that they were sharing the room with others that were not there to judge them but there to offer support and advice was very uplifting for them all’ (project co-ordinator, HMP Bullwood Hall)

- ten women attended the 12 week, three hour course, with an overall attendance rate at all sessions of 98%
- all the students obtained nationally recognised level 2 certificates in An Introduction To Alcohol
- the course participants produced a magazine – The Right Track – which has the potential to become a prison wide resource
- new partnerships were formed between different departments in the prison, including education, and psychology, together with the CARATS team and officers in the prison
- a new student learning centred course was piloted within the education department

Produced from pilot work
The Right Track magazine for prisoners and family members
Challenges faced

‘The biggest issue that the students faced was dealing with the guilt that they had due to the pain their substance misuse had brought upon their families and they needed a great deal of support to try and overcome this’ (HMP Bullwood Hall)

- working with the restrictions imposed by a prison regime; the prison checks, the changes in prison populations and the restricted times of student availability
- the prison announcing it was to re-roll to a male prison half way through the project, dispersing all the women. Plans had to be put in place to visit the women in their newly allocated prisons.

Engaging participants in drug education in a prison setting: recommendations for good practice

‘Let the students guide the course. Allow them to develop and take control of their learning. This way you will get more from the students and the trust that is vital for a course like this will develop more quickly’ (project co-ordinator, HMP Bullwood Hall)

- use a student centred and experiential approach to learning
- undertake as much background research as possible, making sure this kind of project has the ability to work in partnership within the prison setting
- keep partners informed every step of the way
- recruit participants carefully, ensuring they are prepared for the emotional element of the course and to share things about themselves
- ensure there are good support systems in place within the prison for students when they return to the wing
- be flexible and creative, as situations inevitably change

‘A very successful lesson was for the students to compile a cost table of exactly how much they spent in a week, a month and year on their substance misuse. With the use of an Argos book and various other children’s catalogues, they then compared what they had spent with what they could have bought their children. Most of them were extremely shocked and it was this that made it hit home how their misuse, although mostly hidden from their children was actually affecting them’ (project co-ordinator, HMP Bullwood Hall).

HMP Bullwood Hall project partners
The education team; CARATS team; The prison psychology department; City College Norwich

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Project report available
Dudley Foster Care Association

‘Lean on me’ project

Project aims

- The project aimed to pilot creative activities to encourage looked after young people’s participation in drug education programmes and to set up drug education training opportunities for foster carers
- A vital part of the project was to encourage communication between fostered and birth children, recognising the influence they have on one another

‘The performances were designed to give young people a healthy distance from their own life, to enable communication through other characters, which would empower their considerations and offer an artistic distance from their own testimonies on stage. … this process encouraged birth and foster children to examine their relationships to each other and the wider community, which supports them’ (Dudley Performing Arts)

Key objectives

- to develop a 5 week training course to assist adult carers with the skills and information to communicate with young people on drug and alcohol issues
- to develop a residential week of ‘out of bounds’ activities and workshops for young people affected by foster care (fostered young people and birth children) to:
  - increase these young people’s confidence, skills and awareness about drug and alcohol education and social skills
  - develop a series of theatre, art and music workshops and performance for fostered children and birth children, with the aim of enhancing their coping and resilience strategies
- to develop a final event for carers, with a performance of young people’s drama, art and dance, with the aim of enhancing communication between carers and young people

‘It has been a very positive experience to work alongside other agencies and to hear their comments about working with looked after children. It has also been a joy to see the children and young people perform theatre, art and music and share their thoughts and feelings through those media’

Dudley Foster Team

‘Techniques used were specifically chosen to instil confidence and provide a positive platform for testimonies, which were at times extremely traumatic. Artists were careful to support performers throughout… and performers were encouraged to celebrate their lives and who they were’ (Dudley Performing Arts)
Bouncing Back!

The pilot projects

Drama, art and drug education for foster families

Audience

‘A foster child is just like you or me, who for lots of different reasons goes and lives with a different family for a while’ (Lean on Me Arts Project, 2006)

This project included level 2 and 3 foster carers, looked after young people from the ages of 8–15, and the birth children of carers.

Outcomes and achievements

‘Working with this group of people has challenged me professionally in a way I could never have imagined ... I have learned so much from them, about children who are looked after, their lives and the looked after system’ (Dudley Performing Arts)

‘I have gained knowledge about substances and now feel more confident to communicate with young people about substance misuse’ (foster carer)

- eighteen foster carers attended the training course on drugs and alcohol awareness, raising their own awareness of issues and forming new ‘bonds’ to carry on supporting other carers
- twenty one children and young people participated in a week long residential event, and art and drama summer workshops performed at the DFCA’s annual general meeting and awards evening
- a training manual was produced for use in further carer training on drugs and alcohol prevention
- four young people from the project moved onto further courses provided by Dudley Youth Service and courses funded by the New Opportunities Fund
- one young person trained as an assessor and member of the ‘Me Too’ Disability Panel, one young person now a member of the national Youth Parliament
- two young people considered taking drama as a GCSE option, as a result of doing the programme
- a new partnership has been formed with the youth service, to help secure continued funding for the project

Produced from pilot work

Drug and Alcohol Training Manual for Dudley Foster Carers

Challenges faced

Full time foster carers faced the challenge of organising a complex project for a vulnerable group of children and young people of mixed aged ranges, all on a voluntary basis

Engaging foster families in drug and alcohol prevention: recommendations for good practice

- work with other agencies to maximise the chances of the effective delivery of the project’s outcomes
- involve young people in the planning and delivery of programmes
- use diversionary activities and residential events to help young people form new bonds, build trust and talk openly about their experiences of foster care
- use art, drama and music to aid communication on emotive subjects like drugs and care
- offer parallel group working and approaches, to encourage carers, birth children and fostered children to work together

‘Lean On Me’ Partnership

Dudley Foster Care Association; Dudley Foster Team; Dudley Performing Arts; Dudley Youth Services; The Zone, Dudley; Dudley Community Safety Team

Project contact

Dudley Foster Care Association
Contact via
Dudley Foster Care Team
Email
Tony.Raybould@dudley.gov.uk

Project report available

‘Wasn’t it great; I was buzzing, and so was everyone else’
14 year old performer
Portuguese speaking parents and their children

Drug and Alcohol education work in Lambeth, South London

Project aims

‘Before each session, parents and young people met in the staff room, where they shared snacks and food and had a chance to relax and chat about their day. Young people and parents then broke into their groups and went into their classrooms which were very close to each other... At the end of the sessions the group got together for 10 minutes, when the children brought in their work/drawings to show their parents and sung a song. Once or twice the parents made up a song and sung it to their children’

(project co-ordinator)

The aim of this project was to run parallel drug and alcohol workshops, targeting parents and children from the South London Portuguese communities. Parents and young people attended separate workshops at the same time each week, meeting informally beforehand to spend time together.

Key objectives

- to develop culturally appropriate drug and alcohol awareness workshops for Portuguese speaking parents
- to run parallel running workshops and activities for Portuguese speaking pupils in Key Stage 2 at school
- to provide additional participatory, creative and fun activities to encourage families to join the programme and to enhance communication once involved

The local primary school was chosen as a venue for the workshops and a key contact was made with the ethnic minority co-ordinator, herself a Portuguese speaker. Topics for workshops were discussed and developed with the programme and the participating families, depending on their interests. All the sessions were delivered in Portuguese and English, with resources in English and Portuguese. The workshops included a range of topics, including drug and alcohol awareness, ‘talking’ skills, literacy and community safety.

The programme ran for 20 weeks, including activities as well as workshops: a ‘Dr Bike Surgery’, an Easter Mosaic workshop, an assembly and a leaving party for one of the project workers.

Audience

The majority of families represented the Portuguese speaking Madeira community of Brixton and Stockwell in South London. Participating parents were mothers, speaking Portuguese as their first language. Children ranged from 8–12 years old, with an after-school club and crèche for five year olds and under.

Outcomes and achievements

‘I felt very excited because now I can show off to my friend because I know a lot of new things’

(young participant)

- forty parallel workshops were run with 90% of parents and children attending each week of the programme
- ten parents and 20 young people were regularly engaged in drug and alcohol awareness programmes over a period of six months
- a new working partnership was formed with Stockwell primary school, the Domestic Violence Intervention Project and the police
Drug education workshops

- work with Portuguese parents and young people has been sustained, focussing on English for every day usage, activities for young people and possible project involvement in the Thames Festival

- Lambeth Crime Prevention Trust’s approach for working with Portuguese parents developed as a model of good practice in other parts of the borough

Produced from pilot work:
Drug and Alcohol Education materials for Portuguese speaking families

Challenges faced
- running bi-lingual workshops posed some challenges in terms of the time there was available for each session
- incorporating the different delivery styles of facilitators proved difficult at times
- combining sessions with adults and children of varying ages, often in venues with confined spaces
- the necessity to develop a rapid understanding of culturally different experiences and attitudes to drugs and alcohol and the education system

Engaging Portuguese speaking families in drug and alcohol prevention: recommendations for good practice
- plan well and in some detail, but also be flexible, to deal with the unexpected
- use creative events to enable parents and young people to enjoy each others company and spend informal time together. For example, craft, cooking or sports events
- make sure discussions are approached in a relaxed and open fashion, and provide ‘hands on’ activities which families can participate in
- provide practical ways of making parents feel ‘at home’, offering food and allowing time for them to be with their children
- take care of child care needs, providing a crèche at all workshops
- work in partnership with the school, police and local community and drugs projects
- accept that there will be cultural differences and life experiences which can be used positively
- ensure there is a budget for the translation of materials

Lambeth Crime Prevention Trust (LCPT) project partners
Stockwell Primary School; Health Education Links; Metropolitan Police; Intermediate Technology Project; Domestic Violence Intervention Project; Stockwell Resource Centre; Lambeth DAAT

Project contact
Jean Carpenter, Flipside (formerly Lambeth Crime Prevention Trust)
Tel. 0207 733 0101
Email jeanc@lcpt.org.uk

Project report available
The resilience model provided a forum for discussing individual child’s needs in the context of all children’s needs rather than in the context of parental substance misuse... this way of working offered a useful starting point because it connected with every parent’s wish for their child to be resilient in the face of adversity’ (project co-ordinator, South Lakeland)

Project aims

- to develop a child friendly, family focussed response to the needs of children affected by parental problematic drug and alcohol use
- to increase awareness, resources and capacity to build protective factors in children and families affected by drug and alcohol use
- to develop supportive and effective means of engaging vulnerable families in talking about sensitive issues like drugs and alcohol, and children’s safety and wellbeing

Key objectives

Funding was provided to buy additional time for the family worker within South Lakeland Family Support service to:

- set up an advisory group to support the project
- deliver outreach to families affected by drug and alcohol use
- devise therapeutic and educational resources and models to engage vulnerable children in resilience work
- provide individual one-to-one and group work to children and young people affected by parental problematic drug and alcohol use
- develop family friendly information related to prevention topics

Audience

‘She’s the best mum/he’s the best dad, when they’re not drinking, but they say things that hurt me a lot when they are drunk, like ‘I hate you’ (young participant)

Alcohol and heroin use featured primarily in the lives of the parents participating in the Cumbrian project. As a result, many children and young people involved in the programme became informal carers, experiencing the multiple challenges associated with drug and alcohol misuse.
Outcomes and achievements

- twenty children and young people engaged in individual therapeutic, group work and consultation (aged 9–15)
- a participative, child friendly methodology for working with children, young people and parents affected by family drug and alcohol misuse was developed
- the programme’s approach was adopted as a ‘model of good practice’ for working with families affected by drug and alcohol use, by Cumbria DAAT
- four young participants were linked into the local young carers scheme
- a ‘Top Tips’ leaflet for practitioners working with children was produced by young people
- twenty one parents were engaged in the programme, and new contacts were established with families
- the ‘Behind the Smiles’ DVD was produced by young people to raise awareness and to be used as a training tool for practitioners
- a ‘Community of Practice’ has been established for taking forward the recommendations of Hidden Harm in the South Lakeland area of Cumbria, and short term funding has been secured to continue the work

Produced from pilot work
‘Behind the Smiles’ DVD for families and practitioners

Challenges faced

- the chaotic nature of parental drug and alcohol use, making consistent contact with children difficult
- the patchy provision and additional cost of providing support and services for young people in rural areas, in particular support to families with teenagers
- working with issues of confidentiality in a small rural community, for example young people wanting to be acknowledged and credited for their work yet not wishing their parents’ drug misuse to become public knowledge
- the demanding emotional content of the work and the stamina required to sustain progress

Engaging young people affected by family drug and alcohol misuse: recommendations for good practice

- work with children’s experiences to help other children who have a parent with a drug or alcohol problem
- establish closer links and partnership working between agencies, to allow for a shared understanding of ‘what works’ for children in these circumstances
- use a positive framework of resilience for involving both parents and children and young people in prevention and recovery work
- plan a ‘lead in time’ to enable children and young people to feel confident about the purpose of the work being undertaken, ensuring that they can trust the people they are working with
- utilise a range of resources for engaging with children, including games, books, workbooks, craft, play and therapeutic story telling

South Lakeland Family Support Service
project partners
Cumbria DAAT; Community Drug and Alcohol Team; Children’s Social Care; CADAS; Child and Adolescent Mental Health Services; Addaction; Straightline; Cumbria Children’s Fund; Brewery Arts Centre; Cumbria Users Group; South Lakeland Young Carers; Cumbria PCT Health Visiting & School Health; Cumbria Education Welfare; Connexions Cumbria; Primary and Secondary Schools in South Lakeland; University College of St Martin’s, Carlisle

Project contact
Angie Fordham or Roger Aitken at South Lakeland Family Support Service
Email Roger.aitken@barnardos.org.uk
Tel: 015394 43500

Project report available
Bognor Regis research project

A process of change: developing resilience through parenting

‘We all need a little oasis where we have time to reflect, confess, thrash out issues and become better equipped to make positive changes for our families in the future’ (On Track parenting course participant)

Project aims

The aim of this project was to develop family focussed approaches for engaging vulnerable families in drug and alcohol education and parenting education, in school settings, based on West Sussex’s DAAT previous ‘Why Wait’ programme. It targeted parents of children in the ‘transitional’ years between primary and secondary education and aimed to develop positive, solution focussed approaches to encourage parents attending the ‘Why Wait’ drug education programme into more intensive parenting work.

Key objectives

‘Putting changes into practice is totally different to someone telling you ‘the best thing to do’ (workshop participant, W Sussex)

- to pilot the ‘Why Wait’ drug education programme for parents in Bognor Regis Community School
- to develop a reflective, solution focussed approach to parenting work with vulnerable parents and parents attending ‘Why Wait’, based on the concepts of resilience and positive parenting
- to develop a new approach for directing parents interested in drug education into parenting education
- to develop new ways of evaluating parenting work by measuring changes in parental behaviour and confidence at four months follow up

Audience

Bognor Regis has a population of 62,000, encompassing ‘pockets’ of high deprivation, along the coastal strip of West Sussex. Bognor Regis Community College is a specialist Sports College, with 1612 pupils. It has recently moved out of Special Measures, six months ahead of target, improving GCSE results by 7%.

Outcomes and achievements

- two staff were trained in ‘solution focussed’ parenting
- a new ‘three tiered’ model for channelling vulnerable parents from school based awareness workshops into intensive parenting courses was developed
- the evidenced based, parenting programme ‘On Track’ was piloted with 11 parents. Parents reported significant improvements at four month follow up, in terms of levels of confidence in managing their teenager’s behaviour and the quality of their relationship with their child
- the ‘Why Wait’ course was run in Bognor Regis Community College with 20 parents attending five workshop evenings. Parents reported an increase in both knowledge and confidence in relation to drug and alcohol education, sexual health and bullying
- a working partnership was established between the local DAAT, school and community to develop further school and community drug education workshops for parents
- a child and parent friendly evaluation tool was developed for parenting work

Produced from pilot work

Materials for ‘solution focussed’ parenting workshops

Challenges faced

- reaching marginalised parents and conveying the innovative aspect of the course, given limited lead in time for the project and resources
- finding facilitators with the particular solution focussed techniques and approaches, required to deliver the course
- sourcing suitable, comfortable and accessible venues to help parents relax and enjoy the course

Parent

‘I am more in control and have the knowledge now to diffuse situations and can spot early warning signs. I don’t get pulled into confrontations or awkward situations.’
Engaging vulnerable parents in parenting and drug education: recommendations for good practice

‘Engagement is often dependent upon the extent to which families feel empowered by the intervention’ (NCCDP, 2006)

- use personal recommendations and ‘word of mouth’ as a key method for encouraging vulnerable parents into courses
- find familiar and friendly local environments and venues for workshops, and don’t compromise on hospitality
- include a high quality delivery, with a variety of methods. For example: ‘real life’ approaches which help parents set and achieve their own targets and goals, home assignments, role play and reflection, along with information giving
- ensure programmes are properly resourced for the long term, paying attention to detail and with relevant partnerships in place to develop and sustain complex work
- form partnerships with others, for example, schools, community groups and volunteers
- keep to positive, solution focussed approaches, allowing parents to develop their own ideas and find their own solutions to problems

West Sussex DAAT project partners
BASE Community Project, Bognor Regis;
Bognor Regis Community College;
West Sussex Educational Psychology Service;
The Children’s Fund;
West Sussex Youth Offending Team

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Project report available

‘We are talking more, laughing, enjoying each other’s company’
Parent
The Boys2Men Project

Action learning, drug education and parenting with fathers

‘The comments and feelings about drug prevention from the individual fathers, evidenced by their openness and honesty, highlighted how successful action learning sets can be’ (project worker)

Project aims

The aim of this project was to engage local culturally diverse fathers in discussions and group work, relating to their drug and alcohol education needs and those of their children, using the methodology of ‘action learning sets’, and to develop new resources for working with fathers on drug and alcohol education.

‘Action learning, as its name suggests, is about both learning from action and taking action from learning. It is essentially a reflective process. It takes place with no more than five others in a specifically created time and space which is dedicated to this process and designated as an action learning set. Set members use the set to share their uncertainty, to explore their problems, and to engage in a process which has the potential to generate greater self-understanding’ (National College for School Leadership, 2005)

Key objectives

- to provide four action learning sets for between 10–15 fathers, based on their views and experiences of drugs, alcohol and parenting
- to report back on the action learning set findings
- to produce a drug education tool kit based on the needs and interests of local fathers participating in the project

‘All the fathers who participated felt more confident to discuss the issues of drug and alcohol use with their children as a result of the workshops’

Some of the participants from the Boys2Men project
Audience

'The philosophy of the project is to enable boys and young men to realise their full potential by making safe transitions through childhood and adolescence on responsible adulthood and committed fatherhood. Most programmes are delivered using a M.A.L.E.S, friendly approach: Music, Arts, Life-Experience, Education, Sports’ (Boys2Men co-ordinator)

Boys2Men is based in Kilburn, London, working with young men and boys from Black and Minority Ethnic communities, some of whom have experienced turbulent transition from childhood to adulthood and young fatherhood. The fathers from this project also participate in Boys2Men’s fathers’ engagement work in Sure Start areas of North London.

Outcomes and achievements

‘One father reported back about the ‘homework’ that they had been set. He had asked his 11 and 12 year old sons what drugs they knew about. They named a few. He went on to say how difficult it is to ‘engineer’ conversations, because television or computers always draws them away. Several fathers spoke for 15–20 minutes, whilst the other fathers listened intently’ (project co-ordinator)

- twenty fathers became actively involved in action learning sets and group work
- action learning was piloted as an effective means of enabling fathers to ‘open up’, and discuss sensitive issues like drugs, alcohol and parenting
- resources produced for engaging fathers in drug education
- learning was developed in terms of the complex parenting and drug and alcohol education needs of culturally diverse fathers

Produced from pilot work
Resources for engaging Black and Minority Ethnic fathers in drug and alcohol education

Challenges faced

- action learning set methodology is time intensive, requiring fathers to give many hours to the programme. Many fathers found this difficult, dipping in and out of workshops and not attending as many sessions as the sets required
- fathers’ perceptions of drugs as either a sin or something to abstain from. This made debates about safe levels of use contentious and challenging for some
- finding the time to write programme reports, given budget constraints and competing priorities

Engaging fathers in drug and alcohol education: recommendations for good practice

- recognise that fathers have a great deal of influence where their children are concerned and in most cases are the main enforcers of discipline and boundaries
- value the very influential position many fathers from Black and Minority Ethnic communities have in families
- be aware that many fathers are unaware of how prevalent and easily accessible drugs are, and at what ages their children become exposed to drugs
- ensure fathers with drug and alcohol problems are incorporated into programmes, so they can support their children and help them avoid similar difficulties
- develop participative, information sharing workshops that provide fathers with the confidence to discuss issues with their children and also sound credible

Boys2Men project partners
Boys2Men advisory group; Brent Drug Action Team; Mui Li – Facilitators and consultants; Surestart Roundwood Fathers Project; Surestart South Kilburn Fathers Project

Project contact
Coram Family
Tel: 020 7520 0300
Key findings
‘Meaningful participation is a process not simply the application of isolated participation activities or events’ (Drug Education Forum, 2006)

Seven key areas of significant learning, relevant to developing good practice and effective working with diverse families on drug and alcohol prevention, emerge from the pilot work.

These can be understood in terms of the following:
1. engagement and the use of participative approaches to working with families
2. ensuring participation, enjoyment and creativity
3. working in partnerships
4. listening to children and young people’s voices
5. developing positive and empowering approaches to family, parenting and change (the role of resilience)
6. ‘It’s the little things that matter’ – resource intensive approaches to family work
7. project worker flexibility

**Engagement and the use of participative approaches for working with families**

‘On the first day both groups made their own personal mosaic mirror, on the second day the parents with the help of their children made two large mosaics... the manager of the centre said that he had never seen a group of children so engrossed for such a long time in a project before’ (project co-ordinator, Portuguese project)

It was significant from the pilot project outcomes, that the majority of projects were very successful in engaging young people and adults from a variety of families, in projects and organised events and capturing participants’ enthusiasm and commitment to activities and projects.

Participants attended workshops and events regularly, fed in ideas and participated in discussions and became involved and committed to projects. Many were genuinely saddened when projects had to end. Young people played an active part in workshops and projects, contributing ideas, developing their own resources and participating in events and planning meetings.

It is important to assess what the key project qualities were, enabling engagement on this level to happen.

**Participation, enjoyment and creativity**

‘The performances were designed to give young people a healthy distance from their own life, to enable communication through other characters, which would offer an artistic distance from their own testimonies on stage’ (Dudley Performing Arts)

The participative and creative process pilots developed in delivering programmes, helped ensure engagement and participation. For example, by ensuring that projects:

- devoted time and resources to help families contribute ideas towards programme development
- prioritised informality, fun and creativity, focussing on important topics but also diversionary activities to enable families to bond, feel relaxed and enjoy themselves, to help share sensitive issues
- developed learning through informal educational methods, discussions, artwork, drama and writing. In this way a shared understanding of the participants’ needs and experiences developed, as projects developed

‘Several fathers spoke for 15–20 minutes, whilst the other fathers listened intently. They valued each other’s contributions, and challenged certain comments in a very considered and supportive manner’ (project co-ordinator, The Boys2Men Project)

The Boys2Men fathers’ project piloted ‘action learning sets’, as a participative means of engaging fathers from Muslim and African-Caribbean backgrounds in parenting, drug and alcohol issues. Workshops focussed on activities and discussions pertinent to the lives of fathers and their children, creating a trusting environment within which fathers felt comfortable to talk.
Working in partnership
‘A further strength of the project has been the opportunity to draw on the knowledge and expertise of other agencies which has enriched our own understanding of the local and national perspective on the needs of parents around the area of drug and alcohol prevention’ (Dudley Youth Offending Team, YOT)

All the projects highlighted the benefits that wide and ongoing local partnership working made to their project outcomes.

The projects established a range of partnerships, including project advisory and working groups, linking with schools, GPs, the police, community and family groups, and arts projects.

These partnerships helped pilots to widen their networks, developing new ways of working on familiar issues, enhancing understanding of the complex cultural and social issues affecting parenting, substance use and family life.

**South Lakeland Family Support Project** formed an advisory group of local partners, to ensure a wide range of people and organisations contributed towards their work with families affected by substance misuse, including child and adult services, GP practices, schools and youth groups. This informal group became a ‘community of practice’ for developing family based drug and alcohol misuse work in Lakeland.

Partnership working also helped pilots sustain work, once pilot funding ended. Partners helped source new funding and support projects in developing funding applications. Dudley Foster Care Association’s project partnership with the Youth Service provided a resource to help search for further funding to continue the project, once pilot funding ended.

Listening to the voices of children and young people – working with children
‘The process of producing games, stories, leaflets for others enabled the children to share and process troubling and traumatic events in their lives in a safe environment ... this way of working seemed to offer validation to the children’s experiences and to give them a voice in a way that was less threatening than if they had been asked directly about their experiences’ (Barnardo’s project worker)

The sensitive ways in which all the projects engaged and included children and young people in family prevention work was impressive and important in terms of project outcomes.

Young people and children’s ideas and opinions fed into family work and project developments, ensuring activities engaged with young people’s interests, skills and ideas. Participatory activities such as art and music workshops, filmmaking, storytelling, cycling, mosaic workshops and outward bound residential weeks, encouraged young people to work together, build up trust and safely contribute ideas and learning.

**Dudley Foster Care Association** co-opted fostered young people onto their project advisory group, ensuring their ideas and interests were woven into plans and activities. The young people named the project ‘Lean on Me’, contributed to the planning of the residential week and devised a final drama show for carers, based on their experiences of care, drugs and alcohol.
Positive and empowering approaches to family, parenting and wellbeing (the role of resilience)

‘Using the framework of a model of resilience proved to be a successful way of working with parents as well, in that it focussed primarily on their children’s needs rather than on the adults drug or alcohol use ... the model enabled discussions to take place within a positive and forward thinking framework. This way of working proved to offer a useful starting point because it connected with every parent’s wish for their child to be resilient in the face of adversity’ (Barnardo’s project worker)

Projects developed positive approaches to parenting in order to engage families struggling with complex parenting and family issues. These included approaches which encouraged parents and young people to manage change, build self confidence and find solutions to every day problems.

‘It makes you realise you aren’t the only parent with problems and YOU CAN SOLVE THEM!’ (parent on ‘On Track’ course)

West Sussex’s project developed a solution focussed approach to their parenting work with families, recognising that even in times of adversity, young people and adults could be encouraged and supported in taking small steps to make changes.

They built on the concept of ‘sparkling moments’, encouraging parents to celebrate small things they had accomplished week by week.

In this way, projects valued the concept of resilience, its implicit ‘optimism’, potential for ‘moving on’, making changes and enhancing feelings of wellbeing.

‘It’s the little things that matter’ – resource intensive approaches to family work

‘Our experience confirmed much of the prevailing national experience and research, that engaging parents, particularly hard to reach parents, in parenting skills courses can be complex and resource intensive’ (Base Project, West Sussex)

To reach those families disengaged from parenting and drug and alcohol work, projects valued how families experienced events, as well as what was conveyed within them. This meant valuing process as well as content, recognising that well planned, resource intensive programmes would attract the ‘hardest to reach’ participants.

Projects focussed on finer project details; ensuring that venues were family friendly and hospitable, refreshments were plentiful and appropriate, travel and child care needs were met and materials and resources translated appropriately.

Lambeth Crime Prevention’s projects with Portuguese speaking families, greeted parents and young people each week with Portuguese food and drinks in the staff room. Encouraging children and parents to relax, talk, eat and spend time together before they started their separate activities, was an important part of the programme

Project worker flexibility

Projects recognised that to meet the complex needs of families and the unexpected challenges they threw up, flexible approaches were needed, to encourage workers to ‘think on their feet’ and find new solutions to problems and challenges that came their way.

The personal skills and abilities of workers to adapt, be creative and problem solve were vital to project success.

‘Due to the move of the women, links have also been forged with other prisons, allowing us to swap ideas and support each other in various ways’ (Project co-ordinator, Bullwood Hall)

HMP Bullwood Hall adopted a flexible and positive approach when their project was affected by wider prison policy. Half way through the programme, all the women participants were transferred at short notice, to other prisons. The project worker took a pragmatic and positive approach, travelling from one prison to another, to keep the project together and ensure the women could complete the programme they had started.
To enable good practice in engaging families in drug and alcohol prevention, programmes should:

- develop local partnerships to encourage holistic approaches to working with families
- encourage positive, solution focussed approaches to parenting and family work, enabling families to act on manageable changes
- adopt approaches which encourage active learning and meaningful participation by participants
- incorporate creative, fun and informal activities to help family members bond, develop trust and relationships
- focus on the finer details and project processes – ensuring venues are comfortable, food is plentiful and child care is provided
- ensure young people’s voices, views and experiences on parenting, family life, drugs and alcohol are incorporated creatively and sensitively into programmes
- learn as you go from project mistakes and participants’ issues – be flexible in adapting and making changes as projects develop
- outreach to organisations and individuals working with vulnerable and culturally diverse families, ensuring programmes work from families’ understanding and experiences of drugs and alcohol
Drugs, alcohol, parenting and prevention

In addition to developing insight and learning into how to engage families in drug and alcohol prevention, pilot project work highlighted families’ varied and often complex experiences of parenting, drugs and alcohol.
Young people’s experiences of living with family drug and alcohol misuse

‘Not knowing what you were coming home to was a frequently verbalised source of anxiety for children and made it difficult to invite other children to the house’ (South Lakeland Project report)

The South Lakeland Barnardo’s project vividly highlighted young people’s experiences of parental drug and alcohol use. Young people described the distress and isolation they felt when parents were using drugs or alcohol, becoming informal carers of parents and younger siblings, witnessing crime and violence associated with drugs and alcohol, coping often without help or support.

In their ‘top tips’ for workers, young people identified the significant factors that would help them cope with the many challenges faced, including:

- having someone who was ‘there for them’, in times of difficulty – another member of the family, neighbour or teacher
- being good at something and having things they enjoyed doing for themselves
- parents being in control of themselves and being able to cope
- having support from school and friends

Gender and parenting: fathers’ experiences of parenting and substance misuse

The Boys2Men project action learning sets identified valuable learning about the drug education and prevention issues facing modern fathers.

Fathers expressed their desire to develop closer, more communicative relationships with their children, whilst recognising the barriers that made this difficult. Competing priorities, differing perspectives and experiences of drugs and alcohol from their children and challenges in ‘engineering’ conversations with children hampered communication.

Fathers fixed views on drugs and alcohol made the concept of safer drug use contentious and challenging at times. Drugs were viewed either as a sin or something to be totally avoided. Facing up to their own drug use, either in the present or the past, and the effect this might have on their children was a challenge for many fathers, particularly in the presence of peers.

Despite these challenges, fathers recognised their important influence on the lives of their children and the value of providing children with love, boundaries and quality time.

Women in prison and drugs

‘I was 14 when I decided to run away from home. I was partly kicked out and I partly ran out. I was living on the streets, stealing food, didn’t care about my schooling’ (participant HMP Bullwood Hall project)

‘From as early as I can remember, drugs and alcohol have always been a part of my life. My earliest memories are of my mum and dad. My mum was a drug user and my dad was a drinker’ (participant, HMP Bullwood Hall project)

Group work with women in HMP Bullwood Hall powerfully highlighted the complex reasons for women’s involvement in drugs, alcohol and crime.

‘If I had someone outside of the family and the home to listen to me maybe some child therapy sessions or something like that from early on in my childhood, I may have got the guidance that I so badly needed’ (participant HMP Bullwood Hall project)

Reflecting on prison life and what had led them there, women shared valuable insight into early family experiences of drugs and alcohol and the effect this had had on their own life events. From an early age, the women involved in this project had experienced the problematic end of drug use, witnessing parental use, violence and crime. In the absence of help and support, all had become involved in drug use themselves, and had become exposed to its associated crime.

When asked what would have stopped this cycle, women highlighted the significance of resilience; the importance of ‘having something you like doing’ and being supported, with help from outside the family.

Young people, foster care and drug and alcohol misuse

‘When I first came into care I didn’t trust anyone. My levels of trust were on the floor, I didn’t know how to trust any one else’ (Lean on Me drama performance)

The Dudley Foster Care project highlighted pertinent issues faced by young people in foster care and the
challenges for drug education facing carers and birth children.

Drama work produced by looked after young people vividly described the impact of a life in care. Young people wrote of constant change and transition and the impact this can have on feelings of identity, trust and belonging. Moving to a new foster family brought mixed emotions, fear and anxiety but also the prospect of opportunities and support.

‘Two years ago I spent most of my time off my head ... now I’m using my head for something and I’m going somewhere ... I’ve got space and support here and that really seems to help everything’ (Lean on Me drama performance)

Training for foster carers and the involvement of birth children in the project illustrated the challenges faced by carers and families. Carers reported that at times they felt ill-equipped to deal with the drugs experiences of looked after children and were aware of the impact these experiences may have had on their own birth children. Birth children were identified as having their own drug education needs, based on their interactions with fostered children living with their families and the relationships they formed with them.

Culturally diverse views and experiences: drugs and alcohol

‘It is important to start from the communities’ own perceptions and experiences of drugs’ (project worker, Lambeth Crime Prevention Trust)

The Portuguese project highlighted the importance of recognising individual communities’ unique experience of drugs and alcohol.

Discussions with the mothers participating in workshops highlighted the importance of normalised drug education for families, approaches which would acknowledge the realities of drug use and the levels of knowledge of difference substances within communities. Although mothers acknowledged that drug use did take place in their communities, drugs were viewed as ‘something out there’ and separate from their lives and those of their children. Mothers did not differentiate between different drugs, and their effects and uses.

Helping parents understand the differences between drugs, what young people’s experiences of them were and how these might differ from their views and experiences developed as important themes for the parents and the project.

Attitudes to parenting and parenting education

‘We really talk without shouting and we laugh together. I listen to what they say. It works.’

(workshop participant, West Sussex)

Feedback from parents attending West Sussex’s parenting workshops highlighted family experiences of parenting and parenting education needs.

From participant feedback of views about what helped improve relationships with their children as a result of attending the workshops, parents highlighted the importance of improving communication and their relationships with their children. Learning to listen to what children were saying, talking about topics important to their children and speaking calming and quietly were cited as important. As one parent quoted, ‘having fun together’, anticipating problems before they occur and prioritising quality time with children were all important factors in improving relationships at home and family life.

Developing relationships based on equality, involving discussion and negotiation and valuing their child’s right to independence and privacy also contributed. One parent stated, ‘I know when to leave the situation – instead of ‘shouting off’ – having time to think about it and knowing that I am able to make boundaries which we both agree to and keep to’.

Parents’ feedback illustrated the challenges they faced, in dealing with unanticipated situations, whilst coping with busy, often stressful lives. Summarised neatly by one parent; ‘there are situations I’m not prepared for. I know some principles but it’s harder to put them into practice when I’m tired or vulnerable. It’s hard not to react to their reaction.’

Examples of participants’ issues, experiences and views on drug and alcohol education and prevention and parenting are found in the appendix.
Have you got anyone to talk to?

- Friends
- Relatives
- Parents
Families and young people can ‘bounce back’ from adversity and engage with challenging issues and programmes, related to parenting and drugs and alcohol.

The following conclusions are drawn from the Bouncing Back! pilot project work and literature review:

- prevention work with families is complex and should encompass parenting and resilience work, building protective factors as well as focusing on drug and alcohol issues
- diversity within families must be recognised and valued, if families are to be effectively engaged in programmes
- creative, participative and innovative approaches towards working with families are needed, involving those families most at risk and vulnerable to drug and alcohol misuse (including young people)
- local partnerships are crucial to ensuring a holistic approach to prevention, one which acknowledges the complex needs of all families
- to effectively engage a range of families in drug and alcohol prevention, resource intensive approaches are needed, which value process, the quality of intervention, practitioner skills and robust project planning

In summary, the programme highlighted the significance of families to drug and alcohol prevention work and importantly that families, even in times of crisis and vulnerability, can and will engage in parenting and drug education programmes to help build resilience and protective factors. Families did ‘bounce back’ from adversity and challenging situations, and took part enthusiastically in parenting and drug education programmes. However, for this engagement to be effective, programmes had to be creative and participative, and relevant and sensitive to both parenting needs and families’ need to learn more about drugs and alcohol.

Engagement of families depended on the quality of interventions offered and on the process involved in the setting up of projects.

Thought through interventions, with planning, thinking and resources put into how to sensitively engage vulnerable families, were successful in enabling families to participate fully in programmes.

All the projects faced many challenges, including working to short deadlines, dealing with complex issues relating to vulnerability, drug and alcohol use and the challenges posed by partnership working and short term funding. Despite this, they highlighted that with effective skills, partnerships and adequate resources, prevention work can involve diverse families in creative programmes.

In light of these conclusions, this report recommends the promotion of positive, holistic and solution orientated approaches to drug and alcohol prevention work. Resource intensive, tailored approaches, which are critical in attracting and engaging children, young people and adults from diverse backgrounds into parenting, family support and drug and alcohol awareness work, essential for prevention programmes.
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Resources
for drug prevention, parenting and resilience work

Organisations

Action for Prisoners Families
www.prisonersfamilies.org.uk

Adfam
www.adfam.org.uk

American Council for Drug Education
www.acde.org

Alcohol Concern
www.alcoholconcern.org.uk

Alcohol and Families
(Alcohol Concern programme)
www.alcoholandfamilies.org.uk/parenting

Barnardo's
www.barnardos.org.uk

Care for the Family
www.careforthefamily.org.uk

The Centre for Ethnicity and Health
(University of Central Lancashire) www.uclan.ac.uk

Drug Education Forum
www.drugeducationforum

Drugscope
www.drugscope.org.uk

Fathers Direct
www.fathersdirect.com

FRANK
www.talktofrank.com

Hope UK
www.hopeuk.org

Mentor UK
www.mentorfoundation.org

National Collaborating Centre for Drug Prevention (UK)
www.cph.org.uk

The National Literacy Trust
www.literacytrust.org.uk

The National Pyramid Trust
www.nptrust.org.uk

The National Youth Agency
www.nya.org.uk

NSPCC
www.nspcc.org.uk

Ormiston Trust
www.ormiston.org


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Materials for families

A parents’ treasure chest: exploring the path to resilience (book)
Jenkins and McGennis, Australia www.jss.org.au

Alcohol and other drugs – the parents’ action plan (leaflet)
Hope UK www.hopeuk.org

Cannabis facts for parents, carers and professionals (booklet)
Hit publications www.hit.org.uk

Dad Magazine (magazine for new fathers)
Fathers Direct www.fathersdirect.com

Dad Pack – information for fathers (leaflet series)
Fathers Direct www.fathersdirect.com

Do your children know more about drugs than you do? (leaflet, multi-lingual)
London Drugs Policy Forum www.cityoflondon.gov.uk

D-Rom (CD-Rom)
An interactive multi-media CD-Rom drug encyclopaedia
Drugscope www.hit.org.uk

Drunk – an adults guide to young people and alcohol (leaflet)
Hit publications www.hit.org.uk

Family and Parent Guides
(web-based information for parents)
Family and Parenting Institute www.familyandparenting.org

Fifteen Timeless Tips from Families First Parents
(web-based information)
Families First Parenting Programs www.families-first.org

How to talk so kids will listen and listen so kids will talk (book)
Faber and Mazlish www.Picadillypress.co.uk

Journey’s booklets for families affected by drugs and alcohol (booklet series)
Adfam www.adfam.org.uk

Lets Talk Drugs – Talking to your children about drugs (booklet)
Action on Addiction www.aona.co.uk

Listening to Children: a guide for parents and carers (leaflet)
NSPCC www.nspcc.org.uk

My mum/dads’ in prison (web-based leaflets)
Ormiston www.ormiston.org/timeforfamilies

Parenting Tips and Parenting Tools
(web-based information)
Parentline Plus www.parentlineplus.org.uk

Parents Using Drugs (web-based for children affected by parental drug and alcohol misuse and for professionals working with them)
Stars National Initiative www.parentsusingdrugs.org.uk

The A to Z of Drugs (web-based information)
Frank National Website www.talktofrank.com

The Stuff on – Drugs (illustrated booklets for young people)
HIT Stuff@hit.org.uk www.hit.org.uk

Thinking about Discipline? (leaflet)
Parentline Plus www.parentlineplus.org.uk

Time to Talk – parents and teenagers (booklet)
Parentline Plus www.parentlineplus.org.uk

Tips for Talking with your child about drugs (web-based information)
American Council for Drug Education www.acde.org/parent/tips.htm

Tommy’s Dad Danny’s Mum
/story books for children with a parent in prison
Action for Prisoners Families www.prisonersfamilies.org.uk

What’s the Deal on Grass? (booklet)
HIT www.hit.org.uk

Young Carers – booklet for children or young people caring for someone in the family with a drug or alcohol problem
Lifeline publications www.lifelinepublications.org

Your Family (parenting magazine)
NSPCC www.nspcc.org.uk

Please note: these listings are not a definitive guide to organisations and materials to enable work with families on drug and alcohol prevention but reflect resources collected as part of the Adfam programme.
Top Tips for workers

- Be respectful and listen to us and remember what we say. Don’t be patronising
- Talk to us on our own
- Ask us what we want
- Don’t twist the things we say or put words into our mouths. When you write reports – try to use our own words. Tape recorders are not a good idea.
- Don’t get edgy and don’t argue, because it makes it awkward
- If you are shocked at what we tell you, we won’t tell you things
- If you’re nervous it makes us nervous
- When you push us to tell you about things we don’t want to tell you about we’ll probably shut up
- Talk to us about things so we can understand what you’re doing, like what you’re going to tell other people about us. Don’t just refer us on to someone else without saying
- More people isn’t necessarily more helpful
- Don’t just concentrate on our behaviour – look at what’s causing it, look at what the adults are doing
- Don’t assume things are how they seem. Ask what happens at night and on Saturday and Sunday
- Parents sometimes tell the wrong truth. Ask who looks after who in the family and how this affects them
- If we say we don’t want someone in the house then ask why, because there’s always a reason
- If you’re seeing us and our parents at different times, then connect the two up and don’t just remember what the adults say
- Find out what helps us to escape and cope and work from that. Encourage the things that help
- It helps to cope with one day at a time
- Everyone’s different so it won’t be the same for everyone

And finally
- Be serious when it’s needed but know when a laugh is needed as well!

What could have stopped me using drugs?

What could have stopped me from using drugs and alcohol seems to be quite obvious now but it was not so clear back then.

If I had had someone outside of family and the home to listen to me maybe some child therapy sessions or something like that from early on in my childhood, I may have got the guidance that I so badly needed and found an honest purpose in life. I may have even begun to enjoy life. Yes, my family home was broken down and I did not clearly fit in but there was so much out there for me that I just did not know about.

I wish I had spoken to my Mum and told her how I was feeling but I do not think it would have made a lot of difference. It may not have worked for me but that does not mean it will not work for you or anybody else. Try anything that is in your power to steer yourself clear of drugs. Please take it from someone who knows drugs ruin lives and are not the road you should be travelling on or down. If I had someone to talk to, someone to listen and I found somewhere to go, I know I would not have started to take drugs.

I am now 20 years old and it has taken me almost nine years to find out who I really am and I beg you please do not leave it this long to get help yourself.

Do whatever you need to do, just do not let drugs ruin or dictate your life.
iii) From their discussions in the action learning sets, fathers from The Boys2Men pilot project produced their own recommendations for working with fathers on drug and alcohol education and parenting

**Key issues raised by fathers from the Boys2Men meetings**

- Fathers are not friends – children require love and boundaries
- Fathers can learn from other fathers about what they do, and how they do it
- Sharing feelings and fears is very important for fathers to do in a safe and secure environment, where they are not judges for their beliefs
- Find opportunities to talk regularly to your children – start young – leaving it later might be too late
- Fathers can learn a lot from their children, if they take the time to listen and hear and engage in conversations which are non-threatening to the children
- Because your religion forbids taking drugs, including alcohol and smoking, doesn’t mean your children will not take them
- How you talk about drugs is important – scaring children and telling them they are forbidden will not necessarily work – provide examples of people who are or have used drugs and the consequences
- Talk to your children when you are going out shopping – don’t make talking a chore – it makes some children irritated, if they have to sit down at set times to talk
- Engage with children, asking them about their feelings and what they know, on a regular basis
- Ask them about what they think about you as a father – what are the good things – what are the bad things – by doing this you can learn together
- Showing you are a father who listens and learns from what is said might ensure that children turn to the father for advice and support rather than someone else
- Peer influence is very great, as is the effect older children can have on children who might be ‘easily influenced’ – therefore providing opportunities to be successful (i.e. education) and other activities might help children to be stronger and therefore not easily led
- Fathers and mothers need to make sure that they discuss how to discipline children together so that there is a constant approach
Glossary

CAMHS
Child and Adolescent Mental Health Services

CARATS
Counselling Assessment Referral Advice and Throughcare Service

DAT
Drug Action Team

DAAT
Drug and Alcohol Action Team

DfES
Department for Education and Skills

Drugs and Alcohol
substances people take to change the way they feel, think or behave. This includes all legal drugs (including prescription drugs and tobacco), illegal drugs, volatile substances and alcohol

Drugs and Alcohol Misuse
problematic or harmful use of legal and illegal drugs, volatile substances and alcohol

Families
a generic term including foster families, one parent families and extended families

HMP
Her Majesty’s Prison

Prevention
initiatives to develop skills, capacity and awareness in relation to:
- delaying or avoiding the onset of illegal, prescription drugs and alcohol
- avoiding problematic use associated with the use of illegal, prescription drugs or alcohol
- developing young people’s potential and wellbeing

YOI
Young Offenders Institution

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Bognor Regis Community School
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Dudley Foster Care Team
Flipside (formerly Lambeth Crime Prevention Trust)
HMP Bullwood Hall Education Team
Stockwell Primary School
West Sussex Drug and Alcohol Team (DAAT)

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Parenting UK
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