Placement portfolio

Choices West

Louisa Scannell

FIELDWORK PLACEMENT CONTRACT

Where possible please complete this information electronically, the text boxes will expand to contain the necessary information.

STUDENT INFORMATION		
Student Name	Louisa Scannell	
Student Address	7 Maes yr Efail, Penrhyncoch, Aberystwyth, SY233HE	
Student University e mail	2015826@student.uwtsd.ac.uk	
Student DBS Status and date	DBS certificate number which is 001583536223 which was issued o 09/08/2017	
Student and Learning Mentor to sign that a discussion has taken place regarding the student's DBS	**Student Signature:**	Louisa Scannell
	Learning Mentor's Signature:	Rachel Wilson
Additional requirements	NA	
Name of fieldwork supervisor	Thea Meek Wilson	
Fieldwork supervisor Tel.	07896249334	
Fieldwork supervisor e mail	Thea.meek-wilson@barod.cymru	

HOST ORGANISATION INFORMATION	
Name of Organisation	Choices West
Tel.	
Email	
Aims/ Purpose of the Organisation	To provide a harm reduction service for young people and support concerned others which are affected by anothers substance misuse.
Duration of placement	Level 7 Placement: 200 hours (100 or more face to face Youth Work).
Please detail the activities expected of the student (Use more space if necessary)	Shadow substance misuse workers during group work and 1:1 sessions. Engage in staff meetings and establish a link between PRU and Choices West.

Facilities/equipment available to student	Office base, access to the team, access to training
Please confirm that your organisation has in place the following and where the student can have access to them:	
a. Equal Opportunities Policy and procedures	Yes
b. Safeguarding policy and procedures including a designated child protection officer	Yes
c. Disability Policy (please state how you will meet any special requirements noted by the student)	Yes
d. Health and Safety Policy and procedures	Yes
e. Risk Assessments including significant risks identified? An example to be provided to the University.	Yes
f. **Appropriate measures, informed by up to date legal requirements and public health guidance to minimise health risks associated with COVID-19.**	Policy in place but restrictions are lifted so more flexible working now
During induction the student will be made fully aware of the organisation's rules of conduct (including boundary management), practices and policies, including Safeguarding and Health and Safety (e.g. accident reporting).	
The student will be covered by your employer's liability insurance whilst on your premises and undertaking any assigned tasks. Yes	
During the placement, the student will be responsible to: Name of Learning Mentor Rachel Wilson	

Position	Resilient Families Manager
Telephone No.	07896 249185
Email	Rachel.Wilson@barod.cymru

UNIVERSITY INFORMATION	
Name of visiting tutor	Darrel Williams
Telephone Number	01267 676808
Email address	D.G.Williams@uwtsd.ac.uk

Student, learning mentor, and visiting tutor to sign below:
I hereby agree to the terms and conditions outlined above Signed (student)……Louisa Scannell Date: 02/09/2022 Signed (learning mentor)……Rachel Wilson…… Date Signed (visiting tutor)……. Date: ……

PROFESSIONAL DEVELOPMENT PLAN

For completion by the student after consultation with the Learning Mentor and Fieldwork Supervisor at the outset of the Placement

Student	**Louisa Scannell**
Learning Mentor	**Thea Meek-Wilson**
Placement	**Choices**
Date	**02/09/2022**

Students will be expected to consider their placement experience to demonstrate competence in the key aspects of youth work outlined in the table below based on the National Occupational Standards for Youth Work (CLD Standards Council Scotland, 2019) and the Youth Work in Wales: Principles and Purposes Document (YWWRG, 2018).

Learning mentor's opening comments about the placement – exactly what type of work will the placement involve?
Choices is a young persons substance use service offering support to individuals and families around substance use. Placement will involve shadowing an experienced team in their daily workload which will include initial assessments, intervention appointments, care planning appointments and general holistic support sessions for yps. Student will also shadow school workshops and trainings to professionals and have the opportunity to access training themselves.
Student initial comments about the Placement.
I am looking forward to learning from the wealth of experience which the substance misuse workers at Choices have and the full range of services that Choices offer. I believe by establishing a link with the PRU it will be beneficial to the young people as the specialist support that Choices offer is something that we as mentors and teachers can't do.

PROFESSIONAL DEVELOPMENT PLAN

Please complete the form electronically to enable the boxes to expand, ensuring you provide adequate detail.

		Youth Work National Occupational Standards (CLD Standards Council Scotland, 2019)					
	1. Work in accordance with the 5 pillars of Principles and Purposes of Youth Work in Wales (YWWRG, 2018) (Educative, Expressive, Participative, Inclusive, Empowering).	2. Work with young people and others	3. Facilitate learning and development of young people through planning and implementing learning activities in youth work	4. Actively demonstrate commitment to inclusion, equity and young people's interests and health and wellbeing	5. Plan and implement strategy and youth work activities for young people	6. Develop, lead and manage self and others	7. Work with communities
What do you need to learn?	**Learn about how substances effect people to better support young people within the service.** **Learn interventions and on 1:1 sessions and solution based therapy.** **Realise that the service is for everyone regardless of situation and all cases are treated on an individual bases.**	**Learn about the flexibility which Choices have in working with substance users. Learn about the newer procedure for 18+ based on need.**	**Learning about how Choices can benefit the PRU in Ceredigion and setting up the links.**	**Louisa will attend outreach sessions including Nightowls session completed with DDAS and Coleg Ceredigion Freshers fair where Louisa will be required to talk to students regarding welfare and substances and self-referral to Choices.**	**From the initial meeting Louisa will be required to set up links between the PRU and Choices including staff training, group sessions and informing PRU staff about the services Choices can offer.**	**Develop link with PRU and Choices. Plan the sessions and lead on implementing sessions.**	**Attend outreach, shadow concerned other appointments and housing projects.**

	The goals are selfset by the young people and therefore Louisa will need to shadow sessions to see how different cases are managed depending on needs of the young people.						
Activities you will learn from (how will you learn, what will you learn from)	**Shadowing appointments and session. Seeing the process with sessions develop. Reading substance use and attending training.**	**Shadowing Choices appointments. Inclusion of Choices workers in the PRU setting which Louisa currently works.**	**Shadowing Choices workers, attending meetings where interventions are planned and attending training to see how Choices can benefit the young people attending the PRU and staff.**	**Shadowing Choices and DDAS workers during out of hours working.**	**Attending meetings. Planning and implementing with Choices staff to identify the appropriate interventions for PRU young people and staff training and organising.**	**Plan and implement training and group sessions for young people in the PRU. Discuss with Choices workers what they may be able to offer.**	**Shadowing outreach appointments with DDAS and Choices.**

Student Louisa Scannell

Supervisor Thea Meek Wilson

Date 2/09/22

Supervision Recording Format

SUPERVISION RECORDING
DATE: 04/11/2022
TIME: 15.00
PEOPLE PRESENT: Thea and Louisa
DURATION OF THE MEETING:
AGENDA/ DISCUSSION POINTS
1. Discuss how PRU link is going. **2. Discuss how shadowing has been of benefit.** **3. Discuss any learning points.** **4. Discuss further volunteering days.** **5.Any questions or concerns.** **6.**
NOTES/ ACTION OF EACH ITEM
1. Link is established immediately with sessions for young people and training for staff. Discussed and booked within a short space of time. Keep the link going. Interactive sessions were planned and booked by Louisa and were a success. **2. To learn how Choices works as a service has benefitted Louisa's practice and what Choices can offer the PRU. PRU staff gave positive feedback on recent session delivered for young people by Choices and have requested more. PRU staff have also requested additional training and have given positive feedback on training already delivered. Benefited Louisa's practice with the different approach which Choices offers with regards to flexibility and engagement i.e. making the goals self led.** **3. Louisa has learnt about the services which DDAS and Choices offers. The different approaches which they offer depending on the needs of the service users. Louisa has learnt about different techniques and approaches and how outreach can benefit the community.** **4. Louisa would like to attend RMAT, sesh den, more 1:1 appointments and initial meeting for this to end at the end of December. Ongoing if there are outreach or general volunteering opportunities where Choices need an extra pair of hands Louisa has agreed to be that person.** **5. Louisa has no concerns. There has been of mutual benefit to Choices and the PRU in Ceredigion. Louisa feels that she has had a great opportunity with regards to professional development.** **6.**
PROBLEMS ENCOUNTERED
NA
REFLECTION ANALYSIS AND LEARNING Links between theory and practice can be made here and referenced in the usual way. Also reflection on effectiveness of supervision.
The voluntary bases on which Choices operates allows the young people to engage off their own accord in harm reduction around their substance use. Louisa has seen on several occasions the benefit of this and the flexibility within Choices. Through

her own learning around substances and the service which Choices offers Louisa has been able to provide a better service to the young people in the PRU and giving them a platform to access support they may not have known about. The supervision was unstructured however the experience if Choices staff has allowed Louisa to ask questions following appointments and sessions which has added to her professional development.
QUESTIONS ARISING
NA
DATE OF NEXT MEETING:04/11/2022
SIGNED:
STUDENT Louisa Scannell
SUPERVISOR Thea Meek Wilson

FIELDWORK SUPERVISOR'S FINAL REPORT

Engagement with supervision is crucial to aid reflective practice and analysis; its importance cannot be overestimated. Supervision is integral to fieldwork and as a fieldwork supervisor you are invited to make an assessment of the extent to which the student has engaged with the process of supervision. The table below provides guidance on how to grade students according to how well they have engaged with you. Please use the table for guidance when completing the supervisor final report on the following page.

Key areas of competence

When considering the level of competence of a student please refer to the marking criteria outlined below:

Grade	Description	Equivalent % marks towards HE qualification
A	An exceptional trainee Youth worker who is a reflective practitioner; shows initiative and an ability to work independently for a sustained period; demonstrates thoroughness and commitment to all aspects of professional practice.	70%+
B	An effective trainee youth worker who displays a degree of independence and commitment to further professional development.	60-69%
C	A satisfactory trainee youth worker who has met the requirements appropriate for a professionally qualified Youth Worker and with	50-59%

	further experience should develop into an effective youth worker.	
D	A rather weak trainee youth worker with a basic level of knowledge or skill. May be very poorly organised with very limited understanding of important concepts.	40-49%
E Fail	A weak trainee youth worker who has been unable or unwilling to meet the required standard, may demonstrate inappropriate values or lack understanding or attention to detail.	Below 40%

This section of the report should be completed by the fieldwork supervisor. To complete the report we would like you to use the headings below giving specific examples to support your observations.

How did the student use supervision and respond to feedback?
Student was shadowing workers during supervision and all feedback was positive and lead to increased benefits to the service.
To what extent did the student seek challenging situations, and how were these worked with?
Louisa has looked for challenges and taken all the opportunities offered.
To what extent did the student show enthusiasm, commitment, creativity and innovation?
Louisa put things in place from the initial meeting to set up sessions and training for PRU staff and pupils. This showed enthusiasm and commitment and a passion for providing an alternative way of learning for the students.
How well was the student able to relate theory to practice and reflect on her/his own practice and that of others?
In regards to relating theory to practice Louisa brought her own skill set and was able to adapt the learning from each shadowing session to the theory.
How did the student articulate her/his own beliefs and values and relate them to the work?
All of Louisa's beliefs and values were absolutely in line with Barods value based policy.
How pro-active was the student in demonstrating anti oppressive beliefs, language, and behaviour?
Luckily this was not something that Louisa needed to address.
In your professional opinion has the student achieved the necessary standards to function as a professionally qualified Youth and Community Worker? (Please circle)
Yes
Please provide a grade and % mark reflecting your experience of the student
Grade: A *% Mark: 90%*

Signed Supervisor *Thea Meek Wilson*

Signed Student	*Louisa Scannell*
Date	*04/11/2022*

LEARNING MENTOR'S FINAL REPORT

The University would like to remind the learning mentor of the importance of their role in the assessment of the student. This role is fundamental in ensuring standards of practice of those working with young people in communities, and cannot be taken lightly.

To ensure the desired results are achieved, all those involved in the placement are required to understand and remain committed to the process of supervised practice. Issues of competence which might jeopardise a student's ability to complete workplace/work based practice successfully should be identified and communicated to the visiting tutor or fieldwork coordinator as soon as possible.

After the student's induction to the placement, the student will have drawn up a professional development plan balancing the needs of the student and the requirements of the programme. As learning mentor, you will have carried out managerial supervision and an interim review of the placement. This document is the final report, and will include your final assessment of the standards achieved by the student on placement and your assessment of the student's planned observation of practice.

Key areas of competence

When considering the level of competence of a student please refer to the marking criteria outlined below:

Grade	**Description**	**Equivalent % marks towards HE qualification**
A	An exceptional trainee Youth worker who is a reflective practitioner; shows initiative and an ability to work independently for a sustained period; demonstrates thoroughness and commitment to all aspects of professional practice.	70%+
B	An effective trainee youth worker who displays a degree of independence and commitment to further professional development.	60-69%
C	A satisfactory trainee youth worker who has met the requirements appropriate for a professionally qualified Youth Worker and with further experience should develop into an effective youth worker.	50-59%
D	A rather weak trainee youth worker with a basic level of knowledge or skill. May be very poorly organised with very limited understanding of important concepts.	40-49%

E Fail	A weak trainee youth worker who has been unable or unwilling to meet the required standard, may demonstrate inappropriate values or lack understanding or attention to detail.	Below 40%

LEARNING MENTOR'S FINAL REPORT (continued)

Work in accordance with the pillars of Youth Work in Wales: Principles and Purposes				
A Exceptional 70%+	B Effective 60-69%	C Satisfactory 50-59%	D Rather weak 40-49%	E Weak 0-39%
B – Louisa was able to engage YP well and give universally accepted Tier 1 information regarding substances where appropriate.				
Work with young people and others				
A Exceptional 70%+	B Effective 60-69%	C Satisfactory 50-59%	D Rather weak 40-49%	E Weak 0-39%
A – Louisa was always keen to participate in events and used initiative to seek opportunities				
Facilitate learning and development of young people through planning and implementing learning activities in youth work				
A Exceptional 70%+	B Effective 60-69%	C Satisfactory 50-59%	D Rather weak 40-49%	E Weak 0-39%
B – Louisas role with us was not to plan learning activities as substance use is complex however she participated in school lessons and workshops and helped the facilitator wherever she could				
Actively demonstrate commitment to inclusion, equity and young people's interests and health and wellbeing				
A Exceptional 70%+	B Effective 60-69%	C Satisfactory 50-59%	D Rather weak 40-49%	E Weak 0-39%
A – Louisa demonstrated active learning and information giving of a universal standard to YP experiencing substance use issues				
Plan and implement strategy and youth work activities for young people				
A Exceptional 70%+	B Effective 60-69%	C Satisfactory 50-59%	D Rather weak 40-49%	E Weak 0-39%
This was not Louisas role whilst on placement with us,				

Develop, lead and manage self and others				
A Exceptional 70%+	B Effective 60-69%	C Satisfactory 50-59%	D Rather weak 40-49%	E Weak 0-39%
A – Louisa always sought out opportunities to shadow others and become involved with the team whenever she could				
Work with communities				
A Exceptional 70%+	B Effective 60-69%	C Satisfactory 50-59%	D Rather weak 40-49%	E Weak 0-39%
A – Louisa participated in outreach activities with the Choices team where a locality need was identified,				

LEARNING MENTOR'S FINAL REPORT (continued)

How has the student developed during the placement?
Louisa has gained confidence in delivering universal messages to YP regarding substance use and is more aware of service within her locaility
What is your feedback on observing the student's planned piece of practice?
Louisa is keen and enthusiastic is her role and always ensures that she offers the best service eto YP that she can. She is dedicated and always commits 100%
What are your suggestions for further professional development?
No further suggestions however we would welcome and application into Choices should she ever chose to apply for a role within our service
Has the student passed the placement? Please take into account your view of the student's

performance in each of the Key Aspects of Youth Work (Please circle clearly).	
Yes, Pass	No, Fail
Please provide a grade and % mark reflecting your experience of the student	
Grade: A	*% Mark:*

Signed Learning Mentor *R Wilson*

Signed Student *Louisa Scannell*

Date *24/1/23*

Information sheet of work placement aims, objectives, vision and background of organization

According to the Barod (2022) website, the organization was set up in 1972 as SWAPA (South Wales Action to Prevent Addiction) as a volunteer service to respond to drug misuse in the Cardiff area. Since then, the organization has developed and grown and now has over 200 paid and voluntary staff working for them across most of South and West Wales working in a variety of roles. The organization has young people's service and an adult service based in different areas. They also have a training service called Cyfle Cymru which provides individuals who access Barod as an organization an opportunity to gain new skills.

The Barod (2022) website states their purpose as the following;

> To provide support, information and advocacy to those who are vulnerable and marginalised as the result of their own or someone else's drug and / or alcohol use, in order to improve their physical, social and emotional well–being.
>
> To improve individuals', communities', and society's understanding and awareness of the relationship between drug / alcohol use, vulnerability and exclusion, in order to overcome barriers which, perpetuate the cycle.

Barod is a registered charity, which aims to support individuals affected by alcohol and drugs. It uses the Welsh Governments *Substance misuse delivery* plan 2019-2022 and *Recovery Framework* to inform their practice, by providing harm-reduction advice and services to those who are using or seeking guidance around using substances. Barod also provides a service to support 'concerned others' which supports friends and family members of substances users (Barod [Barod], 2022). Barod has a young person service called Choices which works with young people up to the age of 18 and an adult service which is for individuals 18 years old or over. The name of the adult service depends on where the service is based for instance the service is Dyfed is called DDAS.

According to the Barod (2019) website their vision is; “To be recognised by its key stakeholders as the leading provider of innovative and quality services within the drug and alcohol field.”.

Community profile

A community profile of Choices West, October 2022

Aim

The aim of this document is to create a community profile for Choices West. In doing so it will give an idea of where the young people which access Choices West live, the facilities they have, the opportunities they have and what challenges they might face. As the placement mainly took place with Choices West, which caters for individuals up to 18 years old across Carmarthenshire, Ceredigion and Pembrokeshire, with some hours completed with Dyfed Drug and Alcohol Service (DDAS), which provides a service for individuals above 18 years old in Dyfed. The community profile will be completed across the three counties that Choices West operates.

Equality of opportunity and valuating diversity

Any young person up to the age of 18 can access Choices West. Following the pandemic, the *Build a better Barod,* plan states the following aims under Equality, inclusion and diversity;

- Identify an EDI Lead for the organisation.
- Sign the 'Zero Racism Wales' Pledge as an organisation and
- encourage staff to do this as individuals.
- Ensure we have an EDI policy that is fit for purpose
- Publicise our commitment to tackling racism and discrimination
- Comply with Welsh Government's new "Race Equality Action Plan"

(Barod, 2021)

Choices staff members show inclusivity by using preferred pronouns at the end of emails. They are also active in sharing events on their Instagram; choiceswest, to celebrate inclusivity and equality, such as Cardiff Pride, Mental Health Awareness, self-harm awareness and dyslexia awareness week.

Geography

Ceredigion, Carmarthenshire and Pembrokeshire are all coastal counties consisting of largely rural areas. There are a few large towns in each county namely Llanelli, Carmarthen and Aberystwyth. Public transport is limited and mainly consists of buses with a few train services in the urban areas and largely inaccessible in some of the most rural parts. The train services mainly run through the larger towns and but there is not direct link between some of the major towns in the area. Late night public transport services are also limited in many parts of the area and often do not opperate Sundays and bank holidays.

Choices West facilities and infrastructure

Choices West have two buildings that they share with DDAS; one in Haverfordwest, Pembrokeshire and one in Cardigan, Ceredigion. Additionally, DDAS has another building in Aberystwyth where they can run meetings and open access sessions. The buildings have secure locks to help ensure confidentiality, office space for staff, meetings rooms and acupuncture rooms which some staff, in both DDAS and Choices West, are trained to deliver. Although there are locks on the door there are doorbells that enable members of the public to gain access, should they require help or information between their opening hours; 9 am to 5 pm Monday to Thursday and 9 am to 4.30 pm Friday, where there is a specialised staff member who is on rota to work on the desk. If there is a DDAS worker present as opposed to a Choices substance misuse worker then a DDAS case worker would be able to refer or signpost should the individual require them to do so. Within these building there is also a needle exchange where users can dispose of their needles safely and DDAS have a campaign called 'spike on a bike', where individuals can inform DDAS or Choices of a needle and they will provide a service to pick it up and dispose of it.

Each member of staff has a work phone and a laptop which allows them to fill in any essential paperwork such as initial assessment forms or report writing. They can also contact service users or other professionals and access meetings via TEAMS. Choices West use Google calendar which allows

them to see when other staff are available if they need support in delivering sessions or to coordinate training with other organizations. There are some meetings which they may need to access on a 2:1 basis depending on the risk the young person possesses for instance if they are known to carry a weapon.

The current staffing setup of Choices West consists of a Resilient Families Manager, Choices Regional Team Leader, a Young Person's Substance Use Senior Caseworker, five young person's substance misuse workers and a recently employed transition worker to bridge the gap between child and adult services within Barod. The young person's substance misuse workers are assigned to one of the three counties within the Choices West region and are on a combination of full and part-time contracts; however, because of maternity leave and new starters on a consultation period some of the part-time members of staff have agreed to cover additional areas and return to work on additional days. Ordinarily, full-time young person substance misuse worker would have up to 25 young people on their caseload as well as concerned others and delivering training for professionals and young people and group, outreach sessions in schools and youth clubs. Some of the staff are trained in delivering acupuncture and do acupuncture sessions for individuals and drop- in sessions such as in sheltered accommodation.

Bilingualism and heritage

According to the 2021 Census 39.9% of Carmarthenshire's population speak Welsh, 19.2% of Pembrokeshire's population speak Welsh and 45.3% (ONS, 2021). Whilst the percentage of the population which speak Welsh in Carmarthenshire has increased it has fallen in Ceredigion and Pembrokeshire. The schools within the area are a combination of Welsh, English and bilingual medium schools. Choices West welcomes correspondence in Welsh and English and reply to emails in the language in which they are contacted. In the last couple of years Choices West have employed a Welsh speaking substance misuse worker who mainly works in the Carmarthenshire area. This has enabled sessions within the area to be delivered in both Welsh and English.

The wider community

The unemployment rate is lower in Wales compared with the rest of the United Kingdom (Bbc, 2021). Despite this in the three counties that Choices West operate the employment rate has recently risen in both Ceredigion and Carmarthenshire. Employment and the economy is an important marker when talking about a communities substance use as when the economy is in decline, substance misuse is more prevalent among adolescents (Sun et al., 2019). Additionally, there is a relationship between unemployment and problematic substance use; unemployment can result in substance misuse, but substance misuse can also result in unemployment (Henkel, 2011).

County lines activities are also prevalent in the area (Evans, 2020). County lines is where young people are exploited by drug gangs, often operating out of larger cities, and supplying drugs to other areas.

Previous youth work within the community

All three counties within the Choices West catchment area have a youth service run by the respective local authorities (LA). The provision which these youth services provide may look differently depending on the aims, vision and funding the LA has for their respective youth service.

Joined-up working

Choices West work with other services within Barod such as DDAS. One example of this which I witnessed on the placement was joined-up work on a stall at two collage Fresher's Fairs within Ceredigion which took place on the 16/09/2022. There were Choices and DDAS workers present who were able to provide the young people with basic harm reduction advice and provide information to the young people about what else the individual services could offer. Choices West staff also attended night time economy work during Aberystwyth University Freshers week which was run by DDAS.

Referrals for Choices West can come from other professionals such as school staff and youth workers. This relationship is critical as by informing professionals of the role Choices West can play it means that young people Choices West deliver training to other professionnals, including to the police, school staff and youth teams. The contact between Choices West and the police is important as the police will contact the team at Choices if there is a rise in a certain substance in a specific area and therefore Choices can provide targeted support to this area.

Due to concerns regarding an increase in substance misuse in Ceredigion, during the 2021-2022 year, Choices West collaborated with DDAS and Domestic Abuse Service (DAS) to set up a Ceredigion Multi Agency Working Group (MAWG). The aim being to promote the services which they offer such as 'spike on a bike', needle exchange, offer support and target area which may be at increased risk of substance misuse (Barod, 2022).

Choices West substance misuse workers also attend an RMAT meeting in their respective counties, 4 times a year which are attended by youth justice and members of the local health board team including a nurse and a clinical psychologist.

A critical examination of the roles and responsibilities of the trainee youth worker

During my previous placement in the Ceredigion Pupil Referral Unit I discussed the importance of the relationships which develop between the youth worker and the young people in order to get the young people to engage, and the difficulties this brings whilst establishing the youth worker's professional boundaries. Whilst I still believe this relationship to be vital to the role of the youth worker this role in particular required me to observe Choices West case workers because of the specialised service which Choices provide.

A large part of my placement with Barod included shadowing Young Persons substance misuse workers. Ryden (2015), defines shadowing as;

> "*Shadowing is usually an opportunity for a newcomer to a service or profession to follow an experienced practitioner as they engage in the day-to-day activities of the job, in this case social work. It can offer some insight into the demands of the job, the contexts in which the work is done and some of the issues that arise.*"

Scourfield (2019), says that whilst individuals on placement may view shadowing as an opportunity to purely observe it is also important to acknowledge that an individual is representing the organization and therefore individuals must take into account their own behaviour and actions may be perceived by outsiders and the effect that this has on the organization.

Feedback provides a valuable opportunity for students to develop their own professional practice. Feedback, which is rushed, personal and destructive in nature has been shown to have a negative impact on a student's learning, self-esteem and confidence whilst on the placement (Carrol, 2022). A student must understand that while on placement a supervisor or employee of the organization must continue with their usual workload as well as supporting a student on placement (Jack et al, 2018). In order to get the most out of the feedback and develop professionally it would be of benefit for the student to seek scheduled meetings with supervisors. In doing this the student can have the

opportunity to ask questions on feedback but ask questions following incidents. A student shadowing on placement must use their initiative and if the members of staff are busy view this as an opportunity to enhance their learning, in this case it may be to read around substance use.

During this particular placement, it was discussed during the initial meeting that I aid in establishing a link between the Ceredigion Pupil Referral Unit, where I currently work as a Child and Young Person Skills Mentor. The potential for the two organizations to work together would be beneficial to Choices West as an organization as they will have more access to potential service users, who require harm reduction advice as well as to provide a 'networking' opportunity and make more professionals aware of what Choices West can offer as a service. For the PRU it is an opportunity for the young people to receive up to date advice and from specialist workers, staff training and a link with a specialist service if they need to seek future advice.

According to the five pillars of youth work in Wales, youth work should be;

- Educative
- Expressive
- Participative
- Inclusive
- Empowering

(Youth work in Wales review group, 2018)

Arguably, a trainee youth worker on a placement with an organization delivering such a specific intervention as Choices West should observe as much as possible in order to provide young people which they come into contact with, the most effective outcome long-term. When discussing school-based programmes, Room (2012), found that the programmes with the best long-term outcomes are those which provide young people with biological and social science information to the young people and to encourage discussion around intellectual, practical, and ethical issues. Here we can

see how youth workers can use the pillars of youth work to educate and encourage open discussion around substance misuse to gain the most positive potential outcomes.

SWOT Analysis

Strengths

Referrals can be completed by professionals, family members or individuals can self-refer, however Choices will only work with the young person if they chose to engage. Following on from a referral a Barod case worker will complete an initial assessment with the individual. When providing individuals with harm reduction advice the difference between how harm reduction advice is delivered for adults and young people need to be considered (Winer et al., 2022).

Service users are given their case workers work mobile phone number which allows them to contact their caseworker directly via a phone call or text message. This form of contact to supplement a program between a professional and adolescents has provided improved outcomes for these individuals (Vyas et al., 2012).

Barod, have a live chat function on their website and are active on the social media platform, Instagram where they have pages for several of their services including Choices West. Delivering harm-reduction advice via social media has proven to be effective (Cornelius et al., 2019). According to the Barod Annual Report 2021-2022 (2022), 1,551 chats were responded too with approximately a 10% increase in chats on the previous year. Of the respondents, 63% of said it was the first time they had reached out for support and with 70 of the chats being self-referrals.

Weaknesses

Choices West covers an area which, apart from a few towns, is largely rural and sparsely populated. Whilst Choices does operate an interactive service where young people can access support via Microsoft Teams or through work phones, this means that Choices staff covering a county will often have to do a lot of travelling to get to an appointment, group session or training. Choices pays their staff mileage and therefore that's at an additional cost to the organisation, but it also means that the time the staff spend travelling could be spent on contact time with young people.

Opportunities

The recent Coronavirus pandemic has meant that organisations have had to change their ways of working to prevent the spread of the virus and adhere to lock down rules. This has included an increase in the use of digital software such as Microsoft Teams and Zoom by organisation (Lee and Han, 2021). Whilst it is unclear the effect that live distance learning has on an individual's education in a classroom setting (Kang, 2021) the increase in the use of digital technologies may mean that the case workers can access individuals more frequently, monitor their progress and offer support more regularly (Sebastiani, R. and Anzivino, A., 2021).

Choices West have recently employed a transition case worker to bridge the gap between young people and adult services. With poor transition between child and adult services proving to be a risk factor in disengagement across various services (Eke et al., 2020). Good transition between child services should be planned, coordinated and have continuality (Singh and Tuomainen, 2015). The employment of a transition worker by Choices West could mean that more individuals continue to gain support for substance use once they reach 18 as the transition between Choices West and DDAS becomes smoother, allows time for the individual to develop a new relationship with a DDAS substance misuse caseworker and an understanding of the adult service before they fully transition. As well as a transition worker, Choices West have recently employed Welsh speaking staff to deliver sessions. This has enabled Choices to deliver group sessions in Welsh-medium, mainstream schools (Barod Annual Report 2021-2022).

Threats

Barod is a non-profit organisation and therefore is dependent on funding from bodies such as;

Local Health Boards, Area Planning Boards, Unitary Authorities, Welsh Government, Police and Crime Commissioner, Big Lottery, European Social Fund and charitable donations (Barod, 2022). Competition for funding between non-profit organizations is often tough and with the number of

non-profit organizations increasing the competition for grants, along with the amount of grant these organizations will receive may become more difficult (Ashley, 2014).

Funding cuts have been shown to reduce the positive outcomes of youth projects (McCullough, A. et al., 2018). Although, funding can be performance based it is ultimately dependent on the organization competing against other organizations for this funding and therefore not a guaranteed source of income.

Research has shown that various lockdowns and isolation has had a negative impact on people's mental health (Brooks et al., 2020). The recent pandemic has shown a change in substance use and the constant change in trends of substances can make it difficult for professionals to keep up to date with what substances are circulating in the area and trends (Jager and Keves, 2021).

Choices West and Ceredigion Pupil Referral Unit

The 2019 Coronavirus Pandemic has seen a disruption to services and organisations have had to adjust to these new ways of working (Kabadayi et al., 2020). Additionally, early research into substance use during the pandemic has shown that substance use appears to have increased during the lock down periods (Dodge et al., 2021) and therefore the need for services has increased.

Case and Haines (2009), documented the following 3 factors as risk factors for substance use in Wales;

- Anti-social behaviour.
- A lack of attachment to a school.
- Psychological problems.

Their research also found that substance use in adolescents is a risk factor for lifetime substance misuse. Young people attending PRU's have a range of social, emotion and behavioural needs (Michael and Frederickson, 2013). The young people, which often have poor mental health and behavioural difficulties, or possibly both, potentially also have other conditions such as ADHD, ASD abnormal sleeping patterns which means that the period of developmental stage of adolescents is prolonged (Allington-Smith, 2006).

Adolescence is a development stage, where young people are more prone to risk taking (Steinberg, 2007). A prolonged period of adolescence means that young people who experience this are more prone to risk taking behaviour and make poor decisions and are therefore more likely to engage in substance use. Steinberg (2004), suggests that there is very little adults can do to reduce the risk taking period of adolescence, as it is part of an individual's biological development. I would therefore argue that it is an essential part of youth work to support young people in making positive choices.

Research has found, that pupils attending PRU's have had poor experiences attending mainstream education with breakdowns in relationships between the mainstream providers and individual pupils having a negative impact on the pupils self-worth (Pirrie et al., 2011). Following exclusions from school, individuals are more likely to engage in substance misuse (McCrystal et al., 2007). This is one reason the individuals which attend PRUs are at increased vulnerability to substance misuse.

Following on from the initial placement meeting between myself, my university tutor and my fieldwork supervisor at Choices West, it was discussed that I establish a link between the Ceredigion PRU and Choices. Many of the young people attending the PRU have been there for a number of years and as Choices have not been attending the PRU it means that many of the young people are not aware of the service which they provide and how it could benefit them as individuals. PRU staff members have not received any training on substance misuse for a number of years meaning some staff members have never received any formal training.

Tiernan et al., (2020), identifies planning with the class teacher as good practice for identifying the needs of individuals with regards to their individualized education programmes (IEP). Research conducted by Schofield et al., (2021), recognised several themes in supporting young people with behavioural needs and from the themes developed strategies in supporting these young people. These themes including recognising and understanding their circumstances and previous trauma and understanding the needs of the young people. In understanding the needs of the young people and previous experiences we could plan the most suitable sessions for the young people, both units and the school as a whole.

One young person refused to engage on a one to one basis with Choices as; "*I told them something and then like 20 other people knew and I had social workers knocking on my door",* this was made in reference to a safeguarding a substance misuse worker had previously made with regards to an incident the young person had talked about with the substance misuse worker. Other young people in a group setting began asking about steroids and the effects they would have on the body during

an assembly. In identifying known drug experiences of individuals, it can help to identify how to target sessions and what substances should be included within these sessions. Some of the young people had experienced substance use in the homes and it is important in recognising the trauma that these young people had previously experienced. Additionally, in recognising the individuals with regards to their emotional age, special educational needs and mental health I could discuss with the Choices workers delivering the sessions on how to deliver the sessions.

To recognise the needs of individuals and school, I organised a meeting the teachers in charge for the two individual units. Within the meeting we discussed what Choices West could offer the PRU as an organisation, what was appropriate for each pupil with regards to their needs and what days it would be the most effective for Choices to come into the PRU to deliver these sessions as different pupils attend on different days. During the meeting basic staff training was also discussed. I then organised the following sessions with Choices West;

- Online solvent use training for staff
- A drugs box group session for Eos
- Two drugs box group sessions for Aeron
- A session on solvent use for the young people for each unit
- Substance 101 training for all staff
- '*Sesh Den'* session for Eos

Following on from each interaction between Choices and the PRU I sent an email to the PRU staff asking for feedback to forward onto Choices. This would allow Choices to gather evidence in order to write reports which could help inform funding. This was either done through an email feed or through a Microsoft Feedback form sent by the Choices member of staff.

Feedback from on the group drugs box sessions included;

Child and young person mentor 1 on session in Canolfan yr Eos

"I thought the session worked really well in Eos too. Wasn't sure how it would go with the mix of pupils involved and their varying experiences/knowledge of the topics but I thought it was really beneficial to them all and they remained engaged for the whole session.

Also thought drugs workers was great with our YP, really knowledgeable and spoke in a way they all seemed comfortable as they all asked questions."

Child and young person mentor 2 on session in Canolfan Aeron;

"after talking to the young people about the feedback from choice session yesterday, they thoroughly enjoyed the session. They found it very interesting.

Pupil enjoyed the beer goggles"

I have removed the pupils, PRU staff members and substance misuse workers names from the feedback above for confidentiality. Having observed two sessions, all pupils engaged well in the sessions as they asked questions about the drug boxes and substances. The sessions were pupil led and the drug workers did not tell the young people how to use specific substances when the young people came forward and asked questions about substances and experiences they had encountered previously, and they were able to give them harm reduction advice based on what the young people said. Additionally, it was explained to the young people what Choices can offer and how to seek advice on substance use.

In a systematic literature review by Georgie et al., (2016), the majority of studies showed that peer-led sessions were effective in reducing substance use including alcohol, however, two studies showed an increase in use among higher-risk users. The pupils attending the PRU may be classed as higher-risk young people due to their needs. The second thing that arose from the research was it wasn't clear what was the most effective. Contradicting this review, research by Deans et al., (2021),

showed the effectiveness of peer-led group interventions and can remove barriers to those who are marginalised in seeking help for drug dependency.

Young people need to be educated around substance use however professionals need to be careful about how this is delivered and who the individuals are they deliver too as educating young people and providing them with information that could potentially cause harm to them is a difficult balance to strike. An example of this is, young people learning about what they perceive to be a positive effect of using a substance if they are not already using may be appealing to individuals. Choices West substance misuse workers were careful in not showing or informing young people how to use substances that arose in conversation; however, this raises the question with different individuals who have different levels of experience around substances how difficult it is to have an open conversation in a group setting with young people asking questions. While professionals can correct false information, it is difficult for professionals to tell the individuals not to talk to protect others when they should be encouraging open conversations around substances. Therefore, as a youth worker who knows the young people relatively well it is important to try and group the young people together with their experiences of substance use.

At the beginning of the term, I sent the Choices referral form to PRU staff. During the term only one individual referral was made to Choices for a 1:1 session. This is despite concerns around several pupils being raised. The individual which was referred then refused to engage despite agreeing to see Choices and later refused to engage with the school so changed educational facility. As time goes on it is important that as a PRU we keep offering the service to the young people who access the PRU to provide the young people with the most suitable provision to meet their needs.

Conclusion

The link between Choices West and the PRU has largely been a success. PRU staff and pupils have provided positive feedback on the various sessions and training that Choices West have provided

have made requests for further group sessions for the pupils including. All individuals within the PRU have been made aware of what Choices can offer and how to seek advice on substance dependency if needed.

By integrating Choices West as a service into the PRU, it gives the young people opportunity to develop relationships with the substance misuse workers which in turn can break down barriers to seeking help. As well as that, PRU staff can seek advice regarding a young person's substance use. The training which Choices provided could allow staff to recognise the effects of substances on young people and following on from the training the staff can now provide young people with some information before a Choices substance misuse worker can get the opportunity to see them.

A future challenge may be to maintain this relationship as it has only been established over a short period of time. It is also important for PRU staff to recognise that they do not have the depth of knowledge which the Choices staff members have and therefore should not be providing substance misuse interventions but should act as a 'short term' source of information until Choices can complete the initial assessment.

Appendices

Journals

24/08/22

Today I had a whole team meeting with the Choices West team in Haverfordwest. During the meeting it was discussed that they had recently employed a transition worker which who will cover the transition between 16 to 25 years old. Choices West currently work up to 18 years and DDAS work from 18 upwards and therefore the new transition worker would be employed to bridge the gap.

Child and adult services are designed differently because of the needs of the individuals which access the different services (Singh and Tuomainen, 2015). A potential barrier in the transition between child and adult services is that adolescents often want a good short-term outcome rather than a long-term outcome (Oshri et al., 2018). In a conversation with an individual from DDAS I was told that the main difference between Choices and DDAS is if the individual does not engage with Choices they are more likely to keep persevering in order to get contact, rather than DDAS who are less tolerant of lack of engagement and may remove them from their caseload following a shorter period where the individual does not engage. If young people are used to the persistent engagement that Choices provide this could become problematic as they may expect the same from persistence from DDAS. This could be seen as the substance misuse workers at DDAS not caring or rejection which may act as a future barrier in seeking help.

Individuals develop emotionally at different rates. Outside influences such as trauma can impact on how an individual develops and this has an impact on their capacity for learning (Gillibrand, Lam and O'Donnell 2011). Cognitive development can also be impacted by things such as foetal alcohol syndrome. Individuals with foetal alcohol syndrome have been shown to have an increased likelihood of substance use compared with other individuals (McLachlan et al., 2020). This is an

example of when adolescents may be especially vulnerable as the combination of being more likely to be substance users and delayed cognitive development may mean that they are unable to access the most suitable support in adulthood.

Arnaud and Thomasius (2022), argue that individuals should participate in their plan for treatment in substance misuse which falls in line with good youth work practice. The same researchers also suggest that young people should be fully aware of how adult services operate before making the transition. As a youth worker, I have always tried to make myself aware of what services can offer to young people and signposting individuals to the correct service however I have not considered how aware I need to be of adult services. Crone and van der Molen (2007), found that young people struggle to visualize future outcomes based on their decision-making until late into adolescents.

Consistency of staff has been shown to provide young people with better outcomes (Harper et al,. 2013) and therefore it would be expected that by providing a transition work and between services that there would be a higher rate of engagement in adult services, therefore increasing long-term positive outcome

In the later stages of their teenage years young people often experience changes such as educational facilities, if they are looked after young people they may be facing uncertainty around their next steps and changes in services. These changes and life events can cause an increase in mental health conditions such as depression and anxiety (Bustamante et al., 2020). The transition worker employed by Choices could not only provide the young people with a smoother transition within Barod but provide the young people with access and information about other services which may help and although not the sole aim of Choices as a service could provide the young people with someone non-judgemental who could help ease their anxieties around other transitions such as educational facilities.

As youth workers, we need to consider how we support young people into adult services or the next steps in their lives however that may look. Although we can inform young people of what may happen, they may not fully understand the consequences of their actions if they do not adhere to the boundaries adult services put in place. Young people with attachment issues have complex feeling around rejection which can have a negative impact on their mental health (Goldner et al., 2018). If young people have experienced rejection than the breakdown between young people and adult services may impact their mental health and act as a future barrier in seeking help.

In the future, policy makers need to consider how we use physical age of young people and instead use the emotional age to inform our practice and meet the needs of these individuals. As youth workers we could be letting young people down by using their physical age as they may not mentally or emotionally be ready for the transition into adult services. Transition work should be more consistently embedded in practice to lessen the likelihood of disengagement in adult services.

4/10/22

Choices West has a concerned other service that works with any individual who is affected by another's substance use.

> *A concerned other in substance misuse is anyone affected by someone else's drug/alcohol use, this could be a child/young person or an adult and inclusive of anyone who is at risk of being affected, e.g: Child, Parent, Sibling, Any other family member, Grandparent, aunt, uncle, cousin, niece, nephew, step-family member, Partner/spouse, Friend, Colleague/employee/employer, Neighbour.*

(Barod, 2021)

The Choices substance misuse workers work with young people and their concerned others. Today I had the opportunity to listen in on a phone call between the Choices substance misuse worker and a parent whose 14-year-old son was using substances. The young person was not engaging with Choices directly, but his mother was encouraging of son gaining access to Choices and it appeared as if the young person was increasingly more positive about the idea as he was supposed to speak to Choices worker after the phone call with his mother, however he stayed with a friend the previous evening so had slept in today. Although the young person was not willing to engage directly with Choices, the Choices worker was able to offer advice and suggestions through the parent.

His parent has said that there is a lot of autism spectrum disorder (ASD) in the family, although he did not have a formal diagnosis. It is known that individuals with ASD are more likely to develop mental health disorders such as anxiety and due to the co-occurrence of ASD and anxiety it can be difficult to tell what behaviours are driven by ASD and what are anxiety driven (Scahill and Evans, 2020). The young person has told mum that he uses substances as a 'way to cope'. The young person has had 'difficulties with behaviour' in school, has refused to attend class and now has detention until the end of year 11. Research has found that individuals with ASD are more likely to partake in risky behaviours (McClintock et al., 2003) and to misuse substances (Butwicka, 2017).

During the phone call the parent mentioned how he was not currently seeing his father, his ALN provision had stopped without warning and the school was not replying to attempts at contact made by the parent. Parents can feel excluded and helpless during recovery from mental health conditions and professionals need to rethink the attitudes towards parents to improve their support of the young people (Mohr, 2000).

It is important to recognise that during this phone call we are only hearing the parent's perspective and not the school, however, what is clear from the phone call is that the parent has a lack of understanding to what is going on with regards to school and why the young person's provision has changed. This would be considered poor practice as at best they should be empowering parents to

help with decision making and at worse they should be keeping parents informed with regards to options that the young person or professionals have and why those decisions have been made.

Coyne (2008), recognizes the importance of working with parents as well as young people to gain better outcomes with CAMHS. This could include empowering both parties in the decision-making and referral process. One suggestion is to offer opportunities to be seen separately or together.

The concept of greater parent involvement in recovery is interesting as not only does having a child who has poor mental health have its own worries and therefore the need for parents to have an outlet can decrease the stress in the home (Oruche et al., 2013) but they need to help implement the strategies at home so it provides the young people with a consistent approach. During this meeting the parent said that her child's substance use was having an effect on his sister and changing the family dynamics and having an outlet such as the Choices worker where the parent felt listened may lessen the extent of this.

The concerned other service which Choices offer have a range of benefits. Although some of the information which the parent provided the Choices worker only came from the parents perspective based on what they were told by the young person, the Choices worker provided an outlet for the parent, was able to offer professional advice on support which they did not appear to be getting elsewhere and provide a form of indirect contact for the son through mum as they were able to suggest things such as heart palpitations may be caused by substance use. I would suggest that, in order to provide the most effective treatment it is important to ensure that the young person is at the forefront of the decision making and if there was a 'power balance' that it would sway in the direction of the young person. By empowering parents, we need to ensure that we meet the young person's needs and consider their needs above the parents. The reason for this is that adolescent anxiety can increase with poor parent and adolescent relationships and can increase the likelihood of poor outcomes (Silverman et al., 2019).

5/10/22

Following on from yesterday's phone call with a concerned other I wondered if there was a way in which the service could be preventative rather than reactive. When young people begin using substances early it poses risk factors such as unplanned pregnancy, further drug abuse, suicide and depression (Grant and Dawson, 1998). Additionally, there is evidence to show that individuals with an earlier onset of puberty appear to be at higher risk of substance misuse and longer-term substance use compared with those individuals who begin puberty later in their development (Westling et al., 2008).

With the landscape of parenting constantly changing with regard to the challenges that young people face such as social media, trends in substance use, the internet, etc. is there a way in which all parents can receive information on how to speak to their children regarding substance use, to cause the least amount of harm to these individuals and how do parents values affect the way they talk to their children and should youth work play a part in aiding this role?

Following on from the phone call yesterday, one young person's substance misuse worker said that a large part of their work with parents was helping parents set clear boundaries. Wu et al., (2023), found that ineffective parenting practices which they define as poor monitoring, inconsistent discipline and corporal punishment resulted in young people feeling rejected by their parents. This form of parenting caused the young people to have a low sense of self-worth and poor mental health.

Hornberger and Smith (2011), highlighted how important family involvement can be in a young person recovering from alcohol and other substance abuse however they can also become part of the problem. The study found that parents often felt shocked when they found their young people were using substances, were underprepared and had limited knowledge about the recovery process. The study also found there appeared to be a lack of consistency in understanding best practices.

The Choices self-referral process means that young people can refer themselves without informing their parents unless they are believed to be at risk to themselves or others for instance if they say they are considering suicide. This means that when young people want access Choices they do it without fear from how their parents might react and it is therefore up to the young person to decide if and when they are ready to tell their parents about their substance use. By reducing the stigma around having a child who uses substances then it may mean that young people are able to have more open conversations with parents or other adults in their lives which could provide extra support in their recovery.

Research around parent's attitudes in substance misuse can influence a young person's substance use. Adolescents who did not believe marijuana use was problematic shared the views of their parents (Kandel et al., 2001). This is where specialised work is needed to provide parents with the correct information. Whilst they may not initially perceive it as problematic if the correct information may inform their views and parenting choices.

Additionally, the young person is at the forefront of what they would like out of the initial meeting with Choices for instance whether they want to reduce their substance use, stop their substance use or use substances safely the Choices workers empower the young people. If a parent is involved in the process, then it is important that the parent understands the young person's perspective, even if it differs from their own to find a compromise. For instance, a young person may feel they want to use more safely, and a parent might want them to stop.

Parents often underestimate their adolescent's substance misuse, and a barrier is to young people seeking help is parent belief that they do not require help (Hogue et al., 2021). Marketing that targets, educating parents on substance misuse can increase family awareness and by educating parents on substance use in adolescents, and what services are around to help, it may mean that young people get earlier interventions.

Parents who have positive relationships, which are categorized as open communication, limited conflict between parent and their child and closeness with their children, appear to have reduced substance use in adolescents (Rusby et al., 2018). However, we must be careful as parents engaged in substance use themselves can show a level of acceptance towards adolescents using substances which may increase substance use and the availability to adolescents in this case namely alcohol (Brook et al., 2008) although is generally considered socially acceptable and is a legal substance.

Youth workers have young people at the forefront of their practice but to best support the young people it may be beneficial to support the people and network around them. Youth workers talk to young people every day about the issues that affect them and have an understanding of young people's perspectives. There is an increasing focus on preventative youth work as opposed to reactive and this may save money as well as promote the mental wellbeing and social outcomes of vulnerable youth (Sonneveld et al., 2021). Perhaps preventative youth work could mean working with parents and educating them on what effects young people. Despite their best effort youth workers cannot always be available to young people and by providing a service such as the concerned others service in Choices it could benefit young people as parents will have a basic understanding of substances and how to support young people in the issues they face.

18/10/2022

Today I shadowed a young person's substance misuse in a Welsh-medium, mainstream school. Four large group sessions were delivered on alcohol. The sessions were conducted through the medium of Welsh to key stage 4 pupils and were held in an assembly hall. The sessions were all in the same format and consisted of a harm reduction PowerPoint presentation on alcohol followed by a young person using beer goggles to try and manoeuvre cones on the floor. At the end of the session the young people had the opportunity to ask questions and take some 'spikies' which are handed out, for free, to put in the top of bottles to try and reduce the instances of spiking. Following the session, the pupils had opportunities to ask questions to the young person's substance misuse workers.

Different mainstream school staff attended each session, however, in each session the pupils were told to be quiet and listen to the Choices staff member by different school staff members. Whilst it is important for the young people to receive the correct information on alcohol, its effects on an individual and harm reduction advice to make informed choices about their own safety, research has shown stigma around substance misuse (O'Shay-Wallace, 2020) and addiction (Glass, 2014) and group sessions may be an opportunity to have open conversations with young people around a subject that some may find difficult to discuss.

Additionally, it has been documented that reducing stigma around substance use, can provide individuals misusing substances with improved outcomes (Anvari et al., 2022). A study by Whitt et al., (2022), showed that by shifting blame from individuals who are using it reduced the incidences of relapse in adolescents misusing substances. Whilst there appears to be no specific terminology to improve outcomes of people misusing substances, it appears that terminology used that reduces blame, such as using the "problem" when referring to substance misuse, on the individual using substances reduces stigma and can reduce the need for continuing care (Kelly et al., 2021).

A survey in the United States, found that stigma around substance use can lead to fear of seeking help because of discrimination and negative repercussions (Substance Abuse and Mental Health Services Administration Key Substance Use and Mental Health Indicators in the United States, 2019). Brohan (2010), categorized three different sorts of stigma: perceived stigma, experienced stigma and self-stigma. All three categories appear in individuals seeking help and all three of which can be barriers to seeking help and successful recovery. Grant et al., (2008), found that anxiety was the main mental health cause of prolonged substance use and the stigma around the substance use could prevent people from seeking help for the root cause of substance use.

Interestingly, there appears to be evidence to support the acceptance around substances which appear to be 'socially normal' such as alcohol and tobacco and to a lesser extent cannabis compared with other substances such as heroin and crystal methamphetamine (Deans, 2021). This acceptance

means there is less stigma around these substances. This contradicts substance trends in the United Kingdom as in 2020 there were 8,974 alcohol related death compared with 4,393 all other drug related deaths (ONS, 2020)

Another problem with delivering to such a large group is the lack individualisation to meet the needs of the young person. Although much of Choices work is done on a 1:1 basis, where the young people are able to discuss what they want their outcomes to be, delivering on a one size fits all approach to such a large group can have a negative impact on young people (Zucker and Wong, 2005). Research has shown differences in gender when they consume alcohol. Males generally start alcohol consumption earlier but the increase in consumption of alcohol increases more quickly in females than males (Erol and Karpyak, 2015). Females appear to access support more quickly for alcohol dependence compared with males and have better long-term outcomes (Bravo et al., 2013). In understanding the differences in alcohol consumption and treatment between males and females it raises the question that when young people access a group-sessions, such as, this whether they should be split into female and male groups. This raises further questions around individuals who do not identify as male or female.

The fact that there may also be young people within the session with additional needs such as ASD does mean that this sort of session may not be the most effective way of communicating with these individuals. Gulsrud et al., (2018) found young people with ASD and self-injurious behaviour have lower cognitive, language and adaptive ability than those without. These individuals are also more likely to engage in a range of substance misuse. The reduction in adaptability and the increased risk in of these individuals engaging in substance use it might have been more beneficial to these individuals to have a session in a small group in a lesson that was timetabled such as PSE which would reduce disruption to their day.

Arguably, Choices are playing catch up in Welsh medium schools as they are only just able to deliver sessions in Welsh due to the appointment of the new staff member and therefore to promote their

message it is beneficial to deliver to large groups rather than individuals. It is also important to recognise that the schools request the session and therefore Choices West need to develop the relationships with the school to access more young people at an individual level. Whilst these types of sessions are important to inform young people and other professionals of what Choices moving forward it may be of benefit to ask the school to identify the higher risk groups to deliver sessions so everyone would get the message but perhaps the higher risk groups could be smaller and provide a slightly different message. It may also be of benefit to split the young people to gender groups or provide earlier interventions for males rather than females.

25/10/2022

I had previously organised a solvent use training session for the PRU staff, and the session was held today as an online twilight session. The solvent use training was organised because of the concerns around the easy accessibility of solvents and the dangers around using solvents. Legally, solvents fall under the Psychoactive Substances Act 2016. The act means that it is illegal to supply or possess them with intent to supply. A Choices worker told me that to tackle the issue regarding the sales of solvents to young people they went around shops in the Pembrokeshire area following a spike in cases, to inform them that if they suspected anyone of misusing solvents, they could refuse to sell them aerosols such as deodorants. One shop worker told the Choices staff member that they had a young person come in regularly which they called “sniffy” because of the large quantities of deodorant they bought. The difficulty occurs when solvents such as aerosols are so easily accessible to young people and falls under the same law as illegal substances such as ‘legal highs’ which have been banned in the UK since April, 2010).

Additionally, the law around psychoactive substances is vague as for an individual to be convicted under the Psychoactive Substances Act 2016, the person must know that the substance is psychoactive making it difficult to convict an individual supplying. More confusing is the fact that some substances which produce psychoactive effects are not included under the psychoactive

substances act as the psychoactive effects they produce are not great enough and therefore are included under different legislation (CPS, 2021). The law around solvent use is undoubtedly difficult to interpret for professionals working with young people and young people. From the small-scale education programme that retailers had in Pembrokeshire it is also clear that retailers do not appear to understand their rights regarding the sale of solvents. Following on from this programme the Choices staff member said that solvent use in the area had reduced, shown by a decline in referrals from solvents in the area, and although I do not have the numbers on this, research into this sort of educative, indirect intervention needs to be conducted in order to prove or discount the effectiveness of it.

Following the training staff members feedback that they found some of the information shocking. One child and young person skills mentor from the PRU said;

> *"I can't believe it's so easily accessible when it's so dangerous. It scares me".*

As part of the training the Choices staff member mentioned how to approach a young person which someone suspects to be high on solvents and the importance of being calm as it can cause erratic behaviour or can cause an individual to have a cardiac arrest. Many the PRU staff were unaware of this and could potentially have caused unintentional harm to the young people had they have broached them.

With the confusion surrounding the laws around solvents and grouping solvents with legal highs school staff and youth workers need to be aware of the risks to young people and how the effects of solvents present. Furthermore, policy makers need to consider the laws around solvents and legal highs as the inconsistency is confusing and putting young people potentially at risk. I believe there is also a place for specialized substance training included in first aid. Although some of the first aid applies to substance use, for instance vomiting or passing out, the effects and how we react to individuals who we believe to be under the influence of a substance use could cause harm.

20/12/2022

Today is the last day of the placement, and following on from conversations with different professionals within Choices West I wondered what the is the best way to tackle substance misuse within the United Kingdom. The concept of 'harm-reduction', in addressing substance use has been around for decades following on from failures in 'anti-drug' policies (Alexander and Van De Wijngaart, 1997). Netherland et al., (2022) discuss how drug policy is categorized

The words 'war on drugs', are familiar words to many of us however this type of language has been used as far back as the cold war to maintain the United States national identity and supress minority subcultures (Campbell et al., 1992). These words are designed to generate fear and reinforce boundaries and are compared with that of the Vietnam war effort (Beare and Grayson, 2017). The 'war on drugs' has since been adopted globally. Not only has this approach been proven to be largely ineffective, but I wonder if using this terminology is marginalizing young people who are already at risk.

Zigon (2019), discusses how in New York's drug were seen as, "less then human" and were described as "subhuman" by authoritarian figures. There is a direct relationship between adolescents engaging in substances such as alcohol, marijuana and cocaine with low self-esteem (Lee et al., 2018). I would argue that negative language such as this towards drug users gives these individuals a lower self-worth and intensifies the issue instead of addressing why these individuals have low self-esteem.

By looking at provinces in Canada, the policies around alcohol consumption in Quebec have been more liberal than other Canadian provinces, despite this Quebec has the lowest rate of alcohol consumption (Beauchesne, 2011).

Decriminalizing drugs would mean that it could potentially save long-prison terms for individuals and criminal records which could potentially cause them to struggle to find future employment

(Justifications for Decriminalizing Drugs, 2020). It may also reduce the prevalence of blood borne diseases such as HIV (Vogel, 2020).

Currently the policies on drugs are outdated. They marginalize people who already marginalized and potentially criminalize young people who are in a risk-taking period of their development and could influence their future self-worth and employment. Although the quantities of drugs that people carry need to be considered, carrying small amount could be treated as a public health emergency where people are offered a service like Choices West or DDAS to help them rather than hindering them with potential fines and criminal records.

A screenshot of the Choices West Instagram page which was delivered in the Ceredigion PRU.

Chat function on the Barod website

References

Alexander, B. and Van De Wijngaart, C. (1997). 5 Readiness for Harm Reduction: Coming to Grips with the 'Temperance Mentality'. In: Erickson, P., Riley, D., Cheung, Y. and O'Hare, P. ed. Harm Reduction: A New Direction for Drug Policies and Programs. Toronto: University of Toronto Press, pp. 80-98. https://doi.org/10.3138/9781442657533-008

Allington-Smith. (2006). Mental health of children with learning disabilities. Advances in Psychiatric Treatment : the Royal College of Psychiatrists' Journal of Continuing Professional Development, 12(2), 130–138. https://doi.org/10.1192/apt.12.2.130

Anvari, M.S. et al. (2022) '"In their mind, they always felt less than": The role of peers in shifting stigma as a barrier to opioid use disorder treatment retention', Journal of substance abuse treatment, 138, pp. 108721–108721. Available at: https://doi.org/10.1016/j.jsat.2022.108721.

Ashley, S. (2014) 'The Impact of Government Funding on Competition in the Nonprofit Sector: An Integrative Model and Review of Empirical Research', Nonprofit policy forum, 5(2), pp. 289–305. Available at: https://doi.org/10.1515/npf-2014-0011.

Arnaud, N. and Thomasius, R. (2022) 'Substance-related disorders and transition psychiatry', Nervenarzt, 93(4), pp. 341–350. Available at: https://doi.org/10.1007/s00115-022-01266-6

Barod (2022), Barod Annual Report 2021-2022. Barod. (2022). About Barod. https://barod.cymru/about-us/about-barod/

Barod (2021), Build a better Barod, Available at: [https://barod.cymru/wp-content/uploads/2021/09/Building-a-Better-Barod.pdf]

Barod (2021). Concerned other information for professionals. Available at: [https://barod.cymru/wp-content/uploads/2021/06/Concerned-Others-Information-for-Professionals.pdf]

BBC (2021). Wales' unemployment rate falls further to 3.1%. Available at: [https://www.bbc.co.uk/news/uk-wales-60386193]

Beare, M.E. and Grayson, K., (2017) Critical Reflections on Transnational Organized Crime, Money Laundering, and Corruption. Edited by M.E. Beare. Toronto: University of Toronto Press,. Available at: https://doi.org/10.3138/9781442670242. pp: 145-170

Beauchesne, L. (2011). Setting Public Policy on Drugs: A Choice of Social Values. In E.-A. MONTIGNY (Ed.), The Real Dope: Social, Legal, and Historical Perspectives on the Regulation of Drugs in Canada (pp. 25–58). University of Toronto Press. http://www.jstor.org/stable/10.3138/9781442661851.5

Bravo, F., Gual, A., Lligoña, A. and Colom, J., (2013). Gender differences in the long-term outcome of alcohol dependence treatments: An analysis of twenty-year prospective follow up. Drug and Alcohol Review, 32(4), pp.381-388.

Brohan E, Slade M, Clement S, Thornicroft G (2010) Experiences of mental illness stigma, prejudice and discrimination: a review of measures. BMC Health Serv Res 10:80.

Brook, J. S., Balka, E. B., Crossman, A. M., Dermatis, H., Galanter, M., & Brook, D. W. (2010). The relationship between parental alcohol use, early and late adolescent alcohol use, and young adult psychological symptoms: A longitudinal study. The American Journal on Addictions, 19, 534 –542. http://dx.doi.org/10.1111/j.1521-0391.2010.00083.x

Brooks, S.K., Webster, R.K., Smith, L.E., Woodland, L., Wessely, S., Greenberg, N. and Rubin, G.J., 2020. The psychological impact of quarantine and how to reduce it: rapid review of the evidence. The lancet, 395(10227), pp.912-920.

Butwicka, Långström, N., Larsson, H., Lundström, S., Serlachius, E., Almqvist, C., Frisén, L., & Lichtenstein, P. (2017). Increased Risk for Substance Use-Related Problems in Autism Spectrum

Disorders: A Population-Based Cohort Study. Journal of Autism and Developmental Disorders, 47(1), 80–89. https://doi.org/10.1007/s10803-016-2914-2

Bustamante, Rodman, A. M., Dennison, M. J., Flournoy, J. C., Mair, P., & McLaughlin, K. A. (2020). Within-person fluctuations in stressful life events, sleep, and anxiety and depression symptoms during adolescence: a multiwave prospective study. Journal of Child Psychology and Psychiatry, 61(10), 1116–1125. https://doi.org/10.1111/jcpp.13234

Campbell, D. (1992). Writing security: United States foreign policy and the politics of identity. U of Minnesota Press.

Carroll, A.G., Peddle, M.R. and Malik, G. (2022) 'Undergraduate paramedicine students' experiences of feedback during clinical placement on-road: A scoping review', Nursing & health sciences [Preprint]. Available at: https://doi.org/10.1111/nhs.12995.

Case, S. and Haines, K.R., 2008. Factors shaping substance use by young people in Wales. Journal of substance use, 13(1), pp.1-15.

Cornelius, J.B. et al. (2019) 'Mobile phone, social media usage, and perceptions of delivering a social media safer sex intervention for adolescents: results from two countries', Adolescent health, medicine and therapeutics, 10, pp. 29–37. Available at: https://doi.org/10.2147/AHMT.S185041.

Crone, & van der Molen, M. W. (2007). Development of Decision Making in School-Aged Children and Adolescents: Evidence From Heart Rate and Skin Conductance Analysis. Child Development, 78(4), 1288–1301. https://doi.org/10.1111/j.1467-8624.2007.01066.x

Coyne I.T. (2008) Children's participation in consultations and decision-making at health service level: a critical review of the literature. International Journal of Nursing Studies 45, 1682–1689.

Deans, E. et al. (2021) 'Understanding the needs of local youth to inform drug and alcohol prevention and harm reduction services: A qualitative study', Health promotion journal of Australia, 32(3), pp. 416–424. Available at: https://doi.org/10.1002/hpja.393.

Dodge, K.A., Skinner, A.T., Godwin, J., Bai, Y., Lansford, J.E., Copeland, W.E., Goodman, W.B., McMahon, R.J., Goulter, N., Bornstein, M.H. and Pettit, G.S., 2021. Impact of the COVID-19 pandemic on substance use among adults without children, parents, and adolescents. Addictive Behaviors Reports, 14, p.100388.

Ekw, H., Ford, T., Newlove-Delgado T., Price, A., Young, S., Ani, C., Sayal, K., Lynn, R.M., Moli, P. and Janssens, A., (2020). Transition between child and adult services for young people with attention-deficit hyperactivity disorder (ADHD): findings from a British national surveillance study. The British Journal of Psychiatry, 217(5), pp. 616-622.

Erol, A. and Karpyak, V.M. (2015) 'Sex and gender-related differences in alcohol use and its consequences: Contemporary knowledge and future research considerations', Drug and alcohol dependence, 156, pp. 1–13. Available at: https://doi.org/10.1016/j.drugalcdep.2015.08.023.

Evans J., (2020). Exactly how the notorious county lines drugs gangs operate in Wales. Available at: https://www.walesonline.co.uk/news/county-lines-wales-drugs-swansea-17294959.

Georgie J., M. et al. (2016) 'Peer-led interventions to prevent tobacco, alcohol and/or drug use among young people aged 11-21 years: a systematic review and meta-analysis', Addiction (Abingdon, England). Georgie J., M., Sean, H., Deborah M., C., Matthew, H., and Rona, C. (2016) Peer-led interventions to prevent tobacco, alcohol and/or drug use among young people aged 11-21 years: a systematic review and meta-analysis. Addiction, 111: 391-407. doi: 10.1111/add.13224., 111(3), pp. 391–407. Available at: https://doi.org/10.1111/add.13224.

Gillibrand, R., Lam, V. and O'Donnell, V.L. (2011) Developmental psychology. 1st ed. Harlow: Prentice Hall.

Glass, J.E., Williams, E.C. and Bucholz, K.K. (2014) 'Psychiatric Comorbidity and Perceived Alcohol Stigma in a Nationally Representative Sample of Individuals with DSM-5 Alcohol Use Disorder', Alcoholism, clinical and experimental research, 38(6), pp. 1697–1705. Available at: https://doi.org/10.1111/acer.12422.

Goldner, Sachar, S. C., & Abir, A. (2018). Adolescents' Rejection Sensitivity as Manifested in Their Self-Drawings. Art Therapy, 35(1), 25–34. https://doi.org/10.1080/07421656.2018.1459103

Grant, B. F., and Dawson, D. A. (1998). Age of onset of drug use and its association with DSM-IV drug abuse and dependence: results from the National Longitudinal Alcohol Epidemiologic Survey. Journal of substance abuse, 10(2), 163-173.

Grant, B.F., Goldstein, R.B., Chou, S.P., Huang, B., Stinson, F.S., Dawson, D.A., … & Compton, W.M. (2008). Sociodemographic and psychopathologic predictors of first incidence of DSM-IV substance use, mood and anxiety disorders: Results from the Wave 2 National Epidemiologic Survey on Alcohol and Related Conditions. Molecular Psychiatry, 14, 1051–1066

Harper B., Dickson J.M. & Bramwell R. (2013) Experiences of young people in a 16–18 Mental Health Service. Child and Adolescent Mental Health 19, 90–96.

Henkel, D., (2011). Unemployment and substance use: a review of the literature (1990-2010). Current drug abuse reviews, 4(1), pp.4-27.

Hornberger, & Smith, S. L. (2011). Family involvement in adolescent substance abuse treatment and recovery: What do we know? What lies ahead? Children and Youth Services Review, 33(1), S70–S76. https://doi.org/10.1016/j.childyouth.2011.06.016

Hogue, Becker, S. J., Wenzel, K., Henderson, C. E., Bobek, M., Levy, S., & Fishman, M. (2021). Family involvement in treatment and recovery for substance use disorders among transition-age youth:

Research bedrocks and opportunities. Journal of Substance Abuse Treatment, 129, 108402–108402. https://doi.org/10.1016/j.jsat.2021.108402

Jack, K. et al. (2018) '"My mentor didn't speak to me for the first four weeks': Perceived Unfairness experienced by nursing students in clinical practice settings', Journal of clinical nursing, 27(5-6), pp. 929–938. Available at: https://doi.org/10.1111/jocn.14015.

Jager, J. and Keyes, K.M. (2021) 'Is substance use changing because of the COVID-19 pandemic? Conceptual and methodological considerations to delineating the impact of the COVID-19 pandemic on substance use and disorder', Addiction (Abingdon, England), 116(6), pp. 1301–1303. Available at: https://doi.org/10.1111/add.15414.

Justifications for Decriminalizing Drugs. (2020). International Journal of Social Science Research and Review, 3(1), 15–26. https://doi.org/10.47814/ijssrr.v3i1.30

CPS, (2021),. Available at: [https://www.cps.gov.uk/legal-guidance/psychoactive-substances]

Kabadayi, S., O'Connor, G.E. and Tuzovic, S., (2020). The impact of coronavirus on service ecosystems as service mega-disruptions. Journal of Services Marketing, 34(6), pp.809-817.

Kandel, D. B., Griesler, P. C., Lee, G., Davies, M., & Shaffsan, C. (2001). Parental influences on adolescent marijuana use and the baby boom generation: Findings from the 1979 –1996 National Household Surveys on Drug Abuse (Report No. SAMHSA-Ser-A-13; SMA-01–3531). Rockville, MD: Office of Applied Studies, Substance Abuse and Mental Health Services Administration (DHHS/PHS).

Kang, B., 2021. How the COVID-19 pandemic is reshaping the education service. The Future of Service Post-COVID-19 Pandemic, Volume 1, pp.15-36.

Kelly, J.F., Greene, M.C. and Abry, A. (2021) 'A US national randomized study to guide how best to reduce stigma when describing drug-related impairment in practice and policy', Addiction (Abingdon, England), 116(7), pp. 1757–1767. Available at: https://doi.org/10.1111/add.15333.

Lee, J. and Han, S.H. (2021) The future of service post-COVID-19 pandemic. Volume 1, Rapid adoption of digital service technology. Singapore: Springer Singapore Pte. Limited.

Lee, Seo, D., Torabi, M. R., Lohrmann, D. K., & Song, T. M. (2018). Longitudinal Trajectory of the Relationship Between Self-Esteem and Substance Use From Adolescence to Young Adulthood. The Journal of School Health, 88(1), 9–14. https://doi.org/10.1111/josh.12574

McClintock K., Hall S. & Oliver C. (2003) Risk markers associated with challenging behaviours in people with intellectual disabilities: a meta-analytic study. Journal of Intellectual Disability Research 47, 405–16.

McCrystal, Percy, A., & Higgins, K. (2007). Exclusion and Marginalisation in Adolescence: The Experience of School Exclusion on Drug Use and Antisocial Behaviour. Journal of Youth Studies, 10(1), 35–54. https://doi.org/10.1080/13676260701196103

McCullough, A. et al. (2018) '"The Job Has Become Advocating for the Job": Threats to Funding Dramatically Influence Program Outcomes', American journal of health promotion, 32(4), pp. 861–864. Available at: https://doi.org/10.1177/0890117116674534.

McLachlan, Flannigan, K., Temple, V., Unsworth, K., & Cook, J. L. (2020). Difficulties in Daily Living Experienced by Adolescents, Transition-Aged Youth, and Adults With Fetal Alcohol Spectrum Disorder. Alcoholism, Clinical and Experimental Research, 44(8), 1609–1624. https://doi.org/10.1111/acer.14385

Netherland J, Kral AH, Ompad DC, Davis CS, Bluthenthal RN, Dasgupta N, Gilbert M, Morgan R, Wheelock H. (2022). Principles and Metrics for Evaluating Oregon's Innovative Drug Decriminalization Measure. J Urban Health. 2022 Apr;99(2):328-331.

Mohr W. K. (2000). Rethinking professional attitudes in mental health settings. Qualitative Health Research, 10, 595–611.

Morgan, R., & Wheelock, H. (2022). Principles and Metrics for Evaluating Oregon's Innovative Drug Decriminalization Measure. Journal of Urban Health, 99(2), 328–331. https://doi.org/10.1007/s11524-022-00606-w

O'Shay-Wallace, S. (2020) '"We Weren't Raised that Way": Using Stigma Management Communication Theory to Understand How Families Manage the Stigma of Substance Abuse', Health communication, 35(4), pp. 465–474. Available at: https://doi.org/10.1080/10410236.2019.1567443.

Ons.gov.uk (2016). Deaths from 'legal highs'. Available at: https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/articles/deathsfromlegalhighs/2016-04-28#:~:text=Sometimes%20called%20%27Meow%20meow%27%20or,fall%20after%20it%20was%20banned.

Ons.gov.uk (2020). Deaths related to drug poisoning in England and Wales: 2020 registrations https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deathsrelatedtodrugpoisoninginenglandandwales/2020

Ons.gov.uk. (2021). How your area has changed in 10 years: Census 2021. [online] Available at: https://www.ons.gov.uk/visualisations/censusareachanges/W06000008/ [Accessed 10 October 2022].

Oruche U.M., Gerkensmeyer J., Stephan L., et al. (2012) The described experience of primary caregivers of children with mental health needs. Archives of Psychiatric Nursing 26, 382–391.

Pirrie, A., Macleod, G., Cullen, M.A. and McCluskey, G., 2011. What happens to pupils permanently excluded from special schools and pupil referral units in England?. British Educational Research Journal, 37(3), pp.519-538.

Rappaport, J., 1987. Terms of empowerment/exemplars of prevention: Toward a theory for community psychology. American journal of community psychology, 15(2), pp.121-148.

Room, R., 2012. Preventing youthful substance use and harm—Between effectiveness and political wishfulness. Substance use & misuse, 47(8-9), pp.936-943.

Rusby, Light, J. M., Crowley, R., & Westling, E. (2018). Influence of Parent-Youth Relationship, Parental Monitoring, and Parent Substance Use on Adolescent Substance Use Onset. Journal of Family Psychology, 32(3), 310–320. https://doi.org/10.1037/fam0000350

Ryden, N. (2015) 'Using observation in training and development' in O'Loughlin, M. and O'Loughlin, S. (Eds., Effective Observation in Social Work Practice. London: Sage (pp. 56-69)

Scahill, Lawrence, and Andrea N. Evans, (2020)., 'Anxiety in Autism Spectrum Disorder: A Case of Blurred Boundaries', in Susan W. White, Brenna B. Maddox, and Carla A. Mazefsky (eds), The Oxford Handbook of Autism and Co-Occurring Psychiatric Conditions, Oxford Library of Psychology (2020; online edn, Oxford Academic, 8 June 2020).

Schofield, C. et al. (2021) 'Using a trauma informed practice framework to enhance understanding of and identify support strategies for behavioural difficulties in young people with Prader-Willi syndrome', Research in developmental disabilities, 110, pp. 103839–103839. Available at: https://doi.org/10.1016/j.ridd.2020.103839.

Scourfield, P. (2019) 'Bring shadowing out of the shadows: an examination of shadowing as a learning activity in social work practice placements', The journal of practice teaching & learning, 16(3), pp. 59–77. Available at: https://doi.org/10.1921/jpts.v16i3.1242.

Sebastiani, R. and Anzivino, A., 2021. Transformative value Co-creation in healthcare services in the COVID-19 era: the case of Centro cardiologico monzino. In The Future of Service Post-COVID-19 Pandemic, Volume 1 (pp. 55-73). Springer, Singapore.

Silverman, Marin, C. E., Rey, Y., Kurtines, W. M., Jaccard, J., & Pettit, J. W. (2019). Group- Versus Parent-Involvement CBT for Childhood Anxiety Disorders: Treatment Specificity and Long-Term Recovery Mediation. Clinical Psychological Science, 7(4), 840–855. https://doi.org/10.1177/2167702619830404

Singh, S.P. and Tuomainen, H. (2015) 'Transition from child to adult mental health services: needs, barriers, experiences and new models of care', World psychiatry, 14(3), pp. 358–361. Available at: https://doi.org/10.1002/wps.20266.

Sonneveld, Metz, J., Schalk, R., & Van Regenmortel, T. (2021). Professional youth work as a preventive service: towards an integrated conceptual framework. International Journal of Adolescence and Youth, 26(1), 340–355. https://doi.org/10.1080/02673843.2021.1942088

Steinberg. (2004). Risk Taking in Adolescence: What Changes, and Why? Annals of the New York Academy of Sciences, 1021(1), 51–58. https://doi.org/10.1196/annals.1308.005

Steinberg. (2007). Risk Taking in Adolescence: New Perspectives from Brain and Behavioral Science. Current Directions in Psychological Science : a Journal of the American Psychological Society, 16(2), 55–59. https://doi.org/10.1111/j.1467-8721.2007.00475.x

Substance Abuse and Mental Health Services Administration Key Substance Use and Mental Health Indicators in the United States: Results from the 2018 National Survey on Drug Use and Health (2019). (HHS Publication no. PEP19–5068, NSDUH Series H-54). Rockville, MD: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration.

Sun, Yao, Y., Bao, Y., Sun, Y., Shi, L., Shi, J., & Lu, L. (2019). The effect of changes in society, economy and public health on the disease burden of neurological, mental and substance use disorders: a global longitudinal study. The Lancet (British Edition), 394, S54–S54. https://doi.org/10.1016/S0140-6736(19)32390-6

Tiernan, B., Casserly, A.M. and Maguire, G. (2020) 'Towards inclusive education: instructional practices to meet the needs of pupils with special educational needs in multi-grade settings', International Journal of Inclusive Education, 24(7), pp. 787–807. Available at: https://doi.org/10.1080/13603116.2018.1483438.

Vogel. (2010). Decriminalizing drug use will curb the spread of HIV/AIDS, say health policy groups. Canadian Medical Association Journal (CMAJ), 182(12), E583–. https://doi.org/10.1503/cmaj.109-3333

Vyas, A.N. et al. (2012) 'Public health interventions: reaching Latino adolescents via short message service and social media', Journal of medical Internet research, 14(4), pp. e99–e99. Available at: https://doi.org/10.2196/jmir.2178.

Westling, E. et al. (2008) 'Pubertal Timing and Substance Use: The Effects of Gender, Parental Monitoring and Deviant Peers', Journal of adolescent health, 42(6), pp. 555–563. Available at: https://doi.org/10.1016/j.jadohealth.2007.11.002.

Whitt, Z.T. et al. (2022) 'Mapping recovery: A qualitative node map approach to understanding factors proximal to relapse among adolescents in a recovery high school', Journal of substance abuse treatment, 138, pp. 108750–108750. Available at: https://doi.org/10.1016/j.jsat.2022.108750.

Winer, J.M. et al. (2022) 'Addressing adolescent substance use with a public health prevention framework: the case for harm reduction', Annals of medicine (Helsinki), 54(1), pp. 2123–2136. Available at: https://doi.org/10.1080/07853890.2022.2104922.

Wu, Woo, P. J., Yap, C. C., & Lim, G. J. R. Y. (2023). Parenting Practices and Adolescents' Mental Health: The Mediating Role of Perceived Maternal and Paternal Acceptance-Rejection and Adolescents' Self-Efficacy. International Journal of Environmental Research and Public Health, 20(2), 1052–. https://doi.org/10.3390/ijerph20021052

Youth work in Wales review group (2018). Youth work in Wales; Principles and Purposes. Education Workforce Council, p.4.

Zigon, J. (2019). “Addicts” and the Disruptive Politics of Showing. In A War on People: Drug User Politics and a New Ethics of Community (1st ed., pp. 52–74). University of California Press. https://doi.org/10.2307/j.ctv62hh5d.5

Zucker R. A., Wong M. M. (2005) Prevention for children of alcoholics and other high risk groups. Recent Dev Alcohol 17: 299–320