

# Young Peoples' Experience of Drug and Alcohol Use in Dun Laoghaire and Rathdown

## Background

Drug and alcohol problems in young people are a cause for significant concern. Not only do they impact young people's physical and mental health, they also lead to wider negative consequences across occupational, social and financial domains. This ripple effect onto other services leads to significant costs to society. The Drug and Alcohol task force in Dun Laoghaire Rathdown have identified drug and alcohol problems in young people as one of their priorities. Initial research with service providers has indicated that although the scale of the problem might not be changing much the nature of the problem is. Research is needed that focuses on the experiences of the young people themselves in order to determine how these young people are best supported.

### Design.

The study is a qualitative study using individual interviews and focus groups with young people who have problematic drug and alcohol use.

### Participants.

The aim of the study is to recruit up to 40 young people between the ages of 16 and 24.

### Recruitment.

Recruitment of participants will be completed in collaboration with organisations supporting young people with problematic drug and alcohol use in the DLR area. These organisations will facilitate informal meetings between the PI, the RAs, and potential participants following verbal consent/assent from potential participants for this to occur. This will allow the RAs to introduce themselves to the young people and to give them information sheets and consent forms. Potential participants will be given at least a week to think about their participation. If the young person is under 18 they will get their parent's written consent prior to taking part, if they are 18-24 they will be asked to provide consent themselves. Once consent forms have been received by the research team the participant will be contacted via their preferred method, email or phone, and a time arranged for the interview or focus group to take part.

### Inclusion criteria.

In order to take part in the study participants must

- Have problematic drug or alcohol use (see definition below)
  - Be able to give full consent/assent
- Give written consent, or get written parental consent
- Be willing to take part in a one hour interview or focus group
  - Have a good level of spoken English
- Be sober for the duration of the interview/focus group

### Definition of problematic drug/alcohol use

*Alcohol use only:*

Daily alcohol use plus evidence of impact, or less than daily use with significant evidence of impact

*Drug use:*

Weekly use of any drug, or less than weekly with evidence of impact

*Impact can be demonstrated through urge to use, consequences of use, others expressing concern about use, or failed attempts to cut down or stop.*

### Measures.

Participants will take part in a semi-structured interview. This will be structured round the ASSIST and MAP.

Participants will be asked about the drugs they currently use and have used in the past including the frequency of this. They will be asked about the impact it has on their life, including impact on health, relationships, money and school or jobs. They will be asked about the urge to use drugs

and any attempts to cut down or stop. They will be asked if they have had interactions with Garda or other officials as a result of their drug use.

They will also be asked about how they feel about their drug use, what they think of drug and alcohol use in the DLR area, and what kinds of support is available for young people in the DLR area.

### Analysis.

Thematic analysis (Braun & Clarke 2013) will be used to analyse the data. Following transcription the transcripts will be coded line by line. This line by line coding will then be grouped to develop initial themes. These themes will be further developed by going back through all the transcripts, through research group discussions, and by using productive writing techniques. The aim of the analysis will be to produce helpful manifest themes, although if latent themes are obvious these will also be developed and written up.

## Procedure.

- Recruitment through organisations
- Arrange interview time and place
- Conduct interview including checking consent, interview questions and debrief conversation
  - Transcribe and analyse data
- Member checking of analysis where possible
  - Write up of final report

### Ethics

#### ***Confidentiality and anonymity.***

Participants will be guaranteed confidentiality and anonymity as per usual for a research study.

No-one will be told about a participant's inclusion in the study nor what they said. The only exceptions to this are around risk (see below). Once data is collected it will be transcribed and in the process of transcription, will be anonymised. Participants will be told that they will not be able to withdraw their data once they have left the interview/focus group because after this time there will be no link between their personal data on the consent form, and their data given in the interview/focus group.

#### ***Risk.***

There are a number of risks that need to be considered in this research. Primarily as the research is about drug and alcohol use there are inherent risks in the topic participants are talking about. If the research team are concerned about significant risks coming to participants due to their drug and alcohol use then these will be communicated to the relevant person in the collaborating service in liaison with the young person. If the risk is so high that further individuals need to be notified, such as TUSLA, then this will be done by the research team in collaboration with the service.

If other risks are present, such as physical, sexual or emotional abuse, either in the present, or the past, then the research team will break confidentiality and make a referral to TUSLA according to Children's First guidelines. The participant will be told that this is going to happen.

If other risks are present, such as trauma, additional drug/alcohol use that services are not aware of (and do not present a significant risk), then after the interview (see debrief below) the participant will be encouraged to engage with the relevant services. If they would like help with this the research team will facilitate this engagement.

#### ***Data protection.***

Under data protection legislation participants have the right to have access to their data. However, in the current study once data is collected it will be anonymised; verbal recordings will be separated from consent forms, and on transcription will be anonymised. Therefore the only data participants can have access to is their consent forms. This will be made clear to participants.

All data will be protected according to GDPR guidelines. Consent forms will be kept in a locked cabinet in the TCD office of the PI. As they have no other data apart from names and signatures on them, this is considered to be sufficiently secure. Recordings will be done on an encrypted voice recorder, and when transcribed will be fully anonymised. Electronic transcripts will be kept on the PIs desk top computer in TCD and if needed by the research team outside of this will be transferred using an encrypted USB.

#### ***Consent, information, and debrief.***

All participants will be fully informed about the study. There will be no deception and the aim is to provide full information prior to consent being sought.

If the participant is 18 years or over they will be asked to provide written consent themselves, and if they are under 18, they will be asked to get a parent to provide written consent, and to provide verbal assent for their own participation.

Information sheets have been written to be accessible to participants of all abilities and they detail in full the aims of the study and the ethical considerations involved. As participants will be involved in an interview or focus group the debrief will be embedded into the end of this process and will be verbal. Participants will be asked if they have anything else to add; they will then be asked if they have any questions for the researcher. Finally, participants will be thanked for their participation, the aims of the study reiterated, and if needed, will be encouraged to talk to their service providers further if they feel the need to. All participants will be given a list of possible services to take away with them should they feel the need to engage with further services.