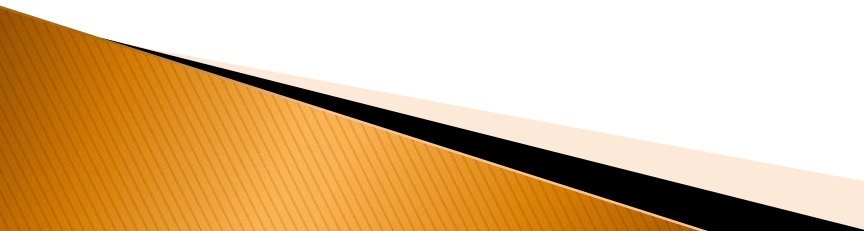


Steps to Cope:

Supporting Young People affected by
Parental Substance Use and/or Mental
Health Problems in Northern Ireland

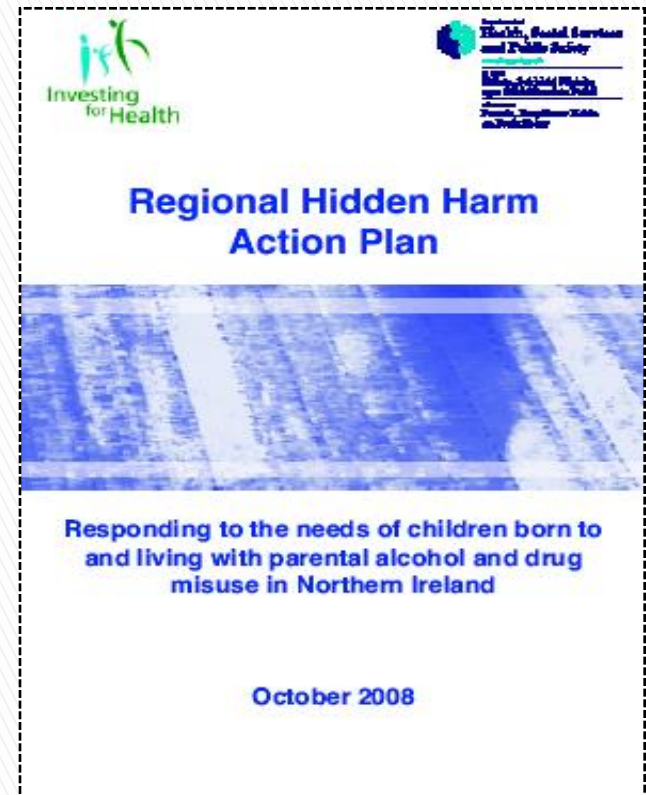
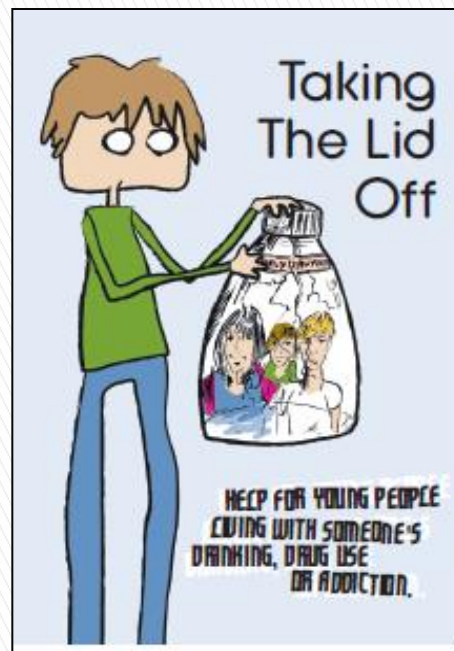
Ed Sipler and Lorna Templeton
SSA Annual Symposium, November 2011

Working in Northern Ireland (NI)

- ❑ Recognition of how children can be affected by parental substance misuse (PSM) and/or parental mental health problems (PMH).
 - ❑ Estimated 40,000 children in NI live with PSM - this is about 1 in 11 children.
 - ❑ Estimated that PSM a factor for 40% of children on the child protection register and 70% of looked after children.
 - ❑ Currently no estimates of how many young people might be affected by PMH.
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Strategic approach

- ❑ Hidden Harm Strategy (2008)
- ❑ Hidden Harm Action Plan (2009)
- ❑ Taking the Lid Off Partnership (ASCERT, South Eastern Health & Social Care Trust & Barnardos)



The 5-Step Method

- ▶ Developed by the UK ADF Group for adult family members living with a relative's alcohol or drug misuse.
- ▶ Drawn from family members own experiences and framed within models of coping with stress.
- ▶ Targets family members in their own right.
- ▶ Delivered largely through structured 1:1 sessions.
- ▶ Self-help, online and group formats have been tested.
- ▶ Good evidence that it reduces stress, changes coping behaviour, improves social support & gives family members hope.
- ▶ Recommended by e.g. NICE & NTA, and is being rolled out in treatment services & by others such as Adfam.

The 5-Steps

1. Hear the family member's story; understand their stresses.
2. Provide targeted and relevant information.
3. Explore coping dilemmas and responses.
4. Explore social support.
5. Consider continued or additional needs for family member (and others such as children or the user).

For more information see a special supplement of D:EPP (Drugs: Education, Prevention & Policy) which was published in December 2010.

The *Steps to Cope* pilot

1. Is it feasible to adapt the 5-Step Method for use with young people? (aged 14-18 years)
2. Is it possible to recruit & train a group of professionals to pilot *Steps to Cope* with young people?
3. Is it possible for these professionals to work with young people (1:1)?
4. How do the professionals find using the intervention?
5. How might *Steps to Cope* benefit the young people the professionals work with?
6. How might *Steps to Cope* benefit the professionals' work with young people?
7. Is it possible to adapt the 5-Step Method to support young people affected by parental mental health problems?

Working with professionals

- ❑ Booklet developed to guide use of 5-Step Method with young people (*Steps to Cope*).
- ❑ 21 professionals from a range of disciplines & organisations received 1 day training.
- ❑ Clear recruitment criteria.
- ❑ Training over-subscribed; trainees evaluated the course positively.
- ❑ 13 trainees have remained in the pilot, and all have worked with at least one young person.
- ❑ Reasons for drop-out – mainly change in jobs or health problems.



How is the project going?

1. Work and data collection ongoing.
2. Focus on qualitative data:
 - a) Interviews with workers & young people.
 - b) Log completed by the worker about each piece of work that they do.
 - c) Data which YP agree to share e.g. completed workbooks, drawing exercise, art work.
3. What follows are some emerging findings; more will be available in early 2012.

Young People (YP)

- ❑ 21 YP – aged 12-17 years; 16 female.
- ❑ 13 have worked 1:1 with a YP.
- ❑ 8 YP attended a group run by two workers.
- ❑ YP worked with individually more likely to be affected by parental (usually maternal) alcohol problems; PMH also present in some cases.
- ❑ All 8 YP who attended the group were living with (maternal) PMH.
- ❑ YP had been living with the problems for many years; in some cases all their lives.
- ❑ Some YP experiencing their own problems with alcohol/substances.

Using the intervention

- ❑ YP referred in a range of ways & known to workers for varying lengths of time.
- ❑ Overall, the workers were able to follow the steps in order – with flexibility in terms of the length, frequency and structure of sessions – as intended by 5-Step.
- ❑ Time needed to engage and get to know the YP.
- ❑ Time needed during the work to look at other issues.
- ❑ Some workers used other resources and activities to supplement the work they were doing.
- ❑ There was nothing that the workers or YP found unhelpful, although there have been some suggestions as to how the booklet and the model could be developed.

Can Steps to Cope support young people?

Indications of benefit in several ways, in line with 5 steps.

- ❑ Opportunity to think about and talk about their experiences – many had not done this before, or had ever been asked.
- ❑ Raising awareness that they are living with common problems and they are not alone.
- ❑ Asking questions, understanding & learning about PSM and PMH problems.
- ❑ Making connections between their health and coping, and the problems they are living with.
- ❑ Exploring how they cope & considering alternatives.
- ❑ Thinking about support and who is there for them.
- ❑ YP appreciated that there was a specific resource that had been developed for them.

Examples of how *Steps to Cope* has helped

- ❑ Realised it was helpful not to bottle things up but to talk about them.
- ❑ Understand links with sleeping problems.
- ❑ Understand that the PSM/PMH is not their fault.
- ❑ Understand their feelings.
- ❑ Understand how they cope. Some have made changes, e.g. listening to music rather than drinking.
- ❑ Talk to their friends more about what is going on.
- ❑ YP able to talk to mothers about how they feel – relationships have improved and at least one family spends more time together.
- ❑ YP thinks about the contact he wants with his father.
- ❑ YP who hasn't drunk alcohol for about 4 months.

Views of Workers

“I think actually breaking down at the start what it was actually like for him, I don't think anyone had ever asked him that before.....”

“....as we worked through the steps...she was able to see that it wasn't her fault, she had a better understanding”

“I think he feels a bit better from having been able to talk about it.....and be believed”

“I've seen a big change in her....she was able to see that her methods of coping weren't appropriate....she was able to look at what she was doing....and come up with alternatives.....”

In her own words - girl aged 14



In her own words - girl aged 14

“Before I started meeting with [Jane], I didn’t like talking about any problems I had and often bottled my issues up, this always ended up in the same result. I would end up breaking down and often didn’t realise why I was so upset as I was used to blocking things out. I found it hard trusting people, including friends which had quite a negative impact but I [saw] this as a way of protecting myself, as I was always used to people letting me down”

BEFORE

“Since I’ve started working with [Jane] I’ve become more open. I know that I have to learn to trust people because not everyone is going to let me down. I can talk about my problems more easily and this has had a very positive impact on my life. I have also learnt to sort out my problems because avoiding them does not help the situation. I think the booklet is the main reason I have progressed so much, in my own state of mind”

NOW

What do professionals think?

- ❑ Liked having a specific resource; raised awareness for them.
- ❑ Valued the structure, with room for flexibility & creativity, something they felt was essential for this type of work.
- ❑ *Steps to Cope* booklet used in a range of ways to support the work.

“you can use the book at whatever speed you need to....I do need to be very flexible with them”

“it gives you something to work from.....it’s very specific and straightforward.....it’s also made me a bit more aware of hidden harm and the issues that come from it”

Concluding thoughts

Preliminary findings suggest that:

- 5-Step can be adapted for this population (*Steps to Cope* booklet), though some revision needed.
 - Age range
- 5-Step can support YP living with PMH problems.
- Professionals can be recruited & trained, and can then go on to engage and work with YP.
 - Working 1:1 and in a group setting
- YP seem to benefit from the work in a range of ways – although evidence is short-term & qualitative.
 - Targets factors/processes linked to resilience?
 - Support YP who also have problems with alcohol etc.
- Professionals benefit from a structured resource which enhances their response to these specific issues.

Next steps

- ❑ Complete this phase of work.
- ❑ Considering next phase of work to extend availability of the intervention; focus on quantitative outcomes & longer-term follow-up.
- ❑ NI Big Lottery funding – Impact on Alcohol Programme.
- ❑ Adult 5-Step Method to be introduced in at least one Trust area in NI in 2012.
- ❑ Work fits with NI Hidden Harm agenda so consider how *Steps to Cope* work can be developed.

Further details

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Thank you

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