

# FWD

A free drug and alcohol  
service for under 25s



## BRIEF OVERVIEW OF SERVICE PROVISION

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## **2. SERVICE CONTEXT**

FWD is a specialist young person's substance misuse service within the Integrated Youth Support Service (IYSS), aligned with the Youth Early Help strand of the service as a whole. Youth Early Help offers tailor-made support packages for vulnerable and at risk young people so they can stay safe and healthy, succeed in education, training and employment, and play a positive role in their communities. Work in this part of the IYSS has a focus on preventing the escalation of young people's issues and behaviours from requiring a higher level of intervention later on.

The team offers preventative, targeted and treatment services to raise awareness, increase knowledge and reduce harm caused by substance misuse. FWD staff are strategically located within the three locality youth hubs, the youth offending service, LAC pathways.

The team offers training programmes to build capacity and confidence amongst staff, so that they are better able to make appropriate referrals to FWD.

FWD Young person's Substance Misuse Service works with children and young people from the age of 8 to up to 25 years old who are either registered with a Camden GP, a resident in Camden and/or attend school in Camden, and also work with looked after young people placed with carers outside of the borough.

FWD provide voluntary, specialist, multi-disciplinary support and interventions targeted at children and young people who are vulnerable to substance misuse or who may be affected by parental drug use. Generally, services are provided on a voluntary basis, with statutory intervention only where:

- The young person has been referred to the service by the criminal courts via the Youth Offending Service because they are subject to a Drug Intervention Programme or
- Any young person who is looked after by Camden is assessed as requiring a drug and alcohol service

## **3. INTERVENTION – METHODOLOGY OF INTERVENTION AND TREATMENT:**

The team uses a number of theoretical approaches in their work, including cognitive-behavioural approach, solution focussed approach and motivational interviewing techniques. Interventions may be brief or longer-term, and are designed to help young people to change, reduce or abstain from drug or alcohol use.

The two main approaches to the FWD work are set out below.

### **Prevention and Harm-Minimisation (Harm-Reduction)**

The team's main philosophy for intervention is based on prevention and harm minimisation.

Prevention involves trying to prevent young people from starting to use drugs and alcohol and by supporting them to choose not to use drugs and alcohol through education, advice and information.

Harm-minimisation (harm-reduction) involves accepting that as it may not be possible to stop all young people from using drugs and alcohol, they need information on how to minimise the dangers. The aim is not to condone their drug or alcohol use, but to make sure that they come to no harm if they do continue.

Interventions are based on implementing harm reduction strategies and/or devising relapse prevention plans to help young people understand and address their issues and providing drugs awareness and prevention group work sessions for young people at risk of substance misuse.

### **The Cycle of Change**

Prochaska and Di Clemente's *Cycle of Change* model is used to inform the interventions used with young people and to structure their care programme

The Cycle of Change model can be described as:

- Pre-Contemplation: the young person does not believe they have a problem or does not want to change
- Contemplation: the young person is beginning to evaluate their use and starts to think about changing their pattern of use
- Decision: the young person decides that they do want to change their pattern of use
- Action: the young person changes their use by cutting down or quitting
- Maintenance: the young person tries to keep to their reduced level or abstinence
- Relapse: the young person returns to increased use

Children and young people referred to FWD may be at different stages in the cycle of change, so apart from some compulsory activities (e.g.; assessments) FWD maintains a degree of flexibility within the structure of intervention. This enables the team to develop an individually tailored plan for the young person, based on their personal situation and what stage of the cycle they have reached. Sessions are planned around these six stages and intervention plans can begin at any stage of the *Cycle of Change*.

Some young people may only experience one or two stages of the cycle while others may experience the entire cycle more than once. It is common for young people to move between stages, as they may be ambivalent about their drug use and their perception and motivation may change over time.

All young people engaging on tier two onwards provision with FWD have an intervention plan setting out the work to be completed, with milestones and actions reviewed every six weeks. Work with young person start within 10 days of receiving the referrals. Initial sessions are based around gathering information, establishing relationship, which involves meeting with the young person and the referrer where this is useful. Following assessment, details plans are develop with young person and their carer where feasible where they have direct say on the goals they are hoping to achieve.

Interventions are based around the cycle of change, using a range of tools according to which stage in the cycle the young person has reached. The last sessions are used to plan for the termination of the service and agree appropriate after-care. The plan may involve diversionary activities and an opportunity for the young person to reflect on their drug use. Plans contains agreed actions to be taken in order to educate the young person about their drug use, help them deal with cravings and withdrawal, and explore what services and support the young person needs to reach and maintain their goals.

### **Work with Children of Parental Substance Misuse**

This work involve Tier 2 services concentrating on the impact of parental substance on the young person, prevention and education on substance misuse issues. The impact of parental drug use would be assessed as part of the substance misuse assessment, and could result in the young person being referred to SSC for further services.

## **4. FWD SERVICE PROVISION**

FWD have offered services across Tier 1 to 3 as described below.

### **Tier 1- Universal Services**

Tier 1 FWD services are aimed at raising awareness of substance misuse issues and educating children, young people and their parents on the potential risks and possible harm posed by drug and alcohol use. Also, to raise awareness amongst professionals to identify young people who are at risk of or are misusing substances.

FWD Interventions in this tier included:

- Providing information and educating children and young people on substance misuse within the national curriculum and in other youth settings
- Advice and information on health risks and routine health screening
- Advice on parental support
- Delivering training for professionals, so that they have a better understanding of the trending substances used amongst Camden young people.
- Providing information referral pathways to FWD and on to other services.

FWD also provides training and support in order to improve professionals' knowledge and skills on addressing and identifying substance misuse issues.

## **Tier 2 – Prevention and Early Intervention**

FWD tier 2 interventions are open access and targeted at engaging those children and young people who are particularly vulnerable to substance misuse. For example, those in the care system, homeless young people, those affected by parental substance misuse, those at risk of sexual exploitation, those known to Camden Youth Offending service, Youth Early Help, Camden Children services, PRU's Children in need/ subject to a child protection plan or those who have been excluded/ persistently truanting from education.

Interventions include:

- Assessment, Risk management for short-term intervention
- Access to diversionary activities
- Information and advice
- Targeted group work with vulnerable young people.
- Educational workshops

### **Targeted workshops**

FWD also deliver targeted drug awareness workshops to youth groups/ parents/schools.

## **Tier 3 – Intervention and Treatment**

FWD Tier 3 is specialist, non-medical intervention targeted at children and young people who have substance misuse problems and may have other related issues such as housing, education and health problems. The aims are to reduce the harm to the young person through a programme of intervention and care management.

FWD provides Tier 3 treatment services such as:

- Assessment and care and intervention programmes
- Review of programmes and care plans
- Psychosocial intervention
- Referral to needle exchange and substitute medication services
- Referral to Tier 4 services.