



**Bray Drugs
Awareness Forum**

BDAF

**&
Bray Youth and
Information
Services**



***A Survey of
Drug Issues
among
Young People
in Bray***

2013

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Winner of the Bray Drugs Awareness Month Art Competition 2013

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Foreword

This survey was conducted on behalf of the Bray Drugs Awareness Forum (BDAF) and was supported by Bray Youth & Information Services (BYS), and the Bray Local Drugs Task Force (BLDTF). The BDAF was established in 1992 and comprises of representatives from community groups, voluntary groups and statutory agencies with a shared interest in drug issues in Bray. The work of the forum is funded by the Bray Local Drugs Task Force. Bray Youth & Information Services (a regional office of Crosscare) administers the funding and provides a base for the two drugs education workers who are funded through the project. The aim of the forum is to provide a range of drug awareness and education initiatives for the Bray community that responds to local drug issues.

The need for this survey arose due to the lack of recent local data on drug use issues among young people in Bray. In addition, no data existed to approximately position young people in Bray within a national context in relation to drug use. Therefore the need to accumulate data on drug use (types, patterns of use and related issues) among young people in Bray is vital in ensuring relevant and effective service provision to address and respond to changing local drug issues.

Selected Glossary:

Drug – The word drug in this report has been used in reference to any substance that alters the way a person thinks, feels or acts; specifically illicit drugs, alcohol, tobacco, solvents and the use of medicines for non-medical use.

Life Time Use – in the context of this report ‘life-time use’ refers the use of a drug at least once over the course of a life-time.



Members of the Bray Drugs Awareness Forum include *(in no order)*;

Bray Local Drugs Task Force, Bray Youth & Information Services, Bray Lions Club, Bray Community Addiction Team, Bray Gardaí, Bray Travellers Community Development Group / DAISH Project, Bray & North Wicklow Youth Reach, Festina Lente Foundation, St. Fergal's and Little Bray Family Resource Centres, Bray Town Council, Living Life Centre, The Marian Centre, Ballywaltrim Community Centre and WH Five Loaves.

Acknowledgements

The Bray Drugs Awareness Forum would like to thank everyone who was involved in and contributed to this research project. In particular, we would like to extend our thanks to the schools and youth groups that took part in the research. Without the support and assistance of principals, teachers and youth workers / leaders this research would not have been possible.

Thank you to Clay Darcy who undertook the research and writing of this report, with the special assistance of Peter Hosey.

Finally, a very special thank you to the young people who participated in this project, their candidness and willingness to answer our questions provides necessary information to better meet the needs of young people in Bray.



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Executive Summary

Introduction:

This research project was undertaken on behalf of the Bray Drugs Awareness Forum in response to a need for relevant data on drug use issues among young people in Bray. Quantitative (drug survey) and qualitative (focus groups) research methods were utilised to accumulate necessary and relevant data. The findings from such investigations have been presented here in this report. The overall purpose of the research was to provide much needed localised data on youth drug use, patterns of youth drug use and broader drug related youth issues among young people in Bray.

It is important to note that the results obtained from the young people in this study should not be taken to be wholly representative of all young people in Bray, but rather as an indicative sample. Additionally, we do not make claims about the generalizability of these findings; however, the results do provided a number of compelling insights that may enable local service providers to more accurately and effectively respond to the needs of young people in Bray. Although this research does not allow for a complete statistical comparison or placement of young people in Bray within national and European data sets it does provide necessary data to make some assumptions, or act as a possible indicators.

Methodology:

The research was completed using a mixed methodological approach, utilizing quantitative (questionnaires) and qualitative (focus groups) research methods. The questionnaire was carefully devised and tested in order to obtain necessary data; a revised questionnaire with some minor amendments was used after initial testing. Focus groups were used to enrich and augment the data, by allowing young people to articulate in their own words presenting drug related issues.

Research Aims and Purpose:

Survey Aims:

- To ascertain reliable data on drug usage among young people in Bray over the age of 12 years;
- To identify emerging drug issues and patterns of drug use among young people in Bray;
- To learn about the broader needs of young people and other drug related issues they experience;
- To provide local data to inform better service provision for young people.

Executive Summary

Purpose of Research:

- To provide young people in Bray with the opportunity to express their views and needs in relation to drug issues;
- To provide a mechanism for generating discussion and debate at a local service level in relation to young people and related drugs issues;
- To inform local service provision.

Main Findings

Part One: Survey

Figures are taken from **196** completed questionnaires. **76%** of participants were male and **24%** female. **74%** of respondents indicated they live in Bray and **26%** indicated they live outside of Bray (however, these participants are attending school in Bray and live within the Bray catchment). All participants were 12 years or age and over; parental consent was sought for participation of any young person under the age of 18 years. Participation in the survey irrespective of the age of the young person was done so on a strictly voluntary basis, with participants informed assent.

Alcohol

- There was no gender difference in the number of young people who indicated they had drunk alcohol with 67% of both sexes stating they had consumed alcohol at least once.
- 42% of young people indicated they most commonly consumed alcohol on special occasions, 18% drank alcohol on a weekly basis and 12% monthly.
- The mean age at which young people first drink alcohol was between the ages of 13-14 years.
- Predominantly young people procured alcohol from their home (34%), friends (38%) or Off Licenses (30%), despite being under the legal age.
- A significant number of young people (33%) indicated they drank alcohol at home or at a friend's house (13%), however, we do not know whether this is with the consent or knowledge of parents / guardians who may have been present.
- A significant number of young people (27%) also drank in out of sight or out of way places.

Tobacco

- 17% of survey participants indicated they were smokers. Smoking tobacco appeared to be more common among females of whom 22% indicated they smoke compared to 15% of males.
- Of the 142 non-smokers 25% had tried a cigarette at some point, bringing the total life time use of tobacco to 42% of this sample.

Executive Summary – Main Findings

Other Drugs

- 27% of respondents have taken illegal drugs at least once, over a quarter of these young people (28%) take illegal drugs on special occasions, and 17% used illegal drugs on a weekly basis.
- Cannabis is the most commonly used illegal drug; followed by Ecstasy, Benzodiazepines and Mephedrone (*'Bubble'*).
- The mean age for first use of an illegal drug was 15 years of age and the most common supplier of these substances were friends.
- Similarly to alcohol consumption, illegal drugs are commonly consumed at home or in a friend's house (38%); fields (17%) and other un-named locations (25%)

Other Issues

- 81% of respondents indicated they would seek help if either they or a friend had a problem with alcohol or other drugs.
- Nearly half of all respondents felt that drugs were a serious issue among young people in Bray and 33% indicated they had been affected by someone else's substance use.
- Levels of worry about other people's substance use was high among respondents, with three out of ten worried about a family members drug or alcohol use; and four in ten sharing similar worries about friends.
- The majority of respondents (80%) were engaged in some form of after school / sports or other recreational activities.
- Most common method of passing free time was *'hanging out'* at home or in a friend's house.
- Young people indicated a need for more recreational activities / facilities and youth friendly spaces in Bray.

Part Two: Focus Groups

Focus groups were used to gather qualitative data for this research project. Five of such focus group sessions took place with young people who had not completed the drug survey. These participants were accessed through life-skills groups, where drug awareness and education formed part of their life-skills programme. In total 10 males and 42 females participated in the focus groups. All of these young people were between 13-17 years and reside in Bray. Participation was voluntary and made with informed assent. No personal details were collected and the sessions focused purely on participant's opinions and general observations.

Focus groups were between 40 – 60 minutes in duration and took place in various youth centres within Bray, with the consent and knowledge of relevant service managers.

Focus Group Findings:

Five re-occurring themes emerged through analysis of the focus group sessions.

1. Perception of and Exposure to Drugs

Mixed level of exposure to drug issues was evident from focus group discussions. Alcohol held unique status, in that young people simultaneously did and did not consider alcohol to be a drug, or considered it to be '*different*' to other drugs. There was high level of acceptance of young people drinking alcohol and young people expressed that this was normal behaviour. For many young people alcohol use was synonymous with enjoyment and featured heavily in their concept of having a good time. There was general consensus of the harms of tobacco use. However, high levels of misconception were evident in relation to cannabis, with common cannabis myths being prevalent.

2. Comparing Bray Youth with other Youth

Overall participants felt that young people from Bray were very similar to young people from other places. However, there was a common perception that young people from Bray drink more alcohol than in other places. In addition, for many participants there is a perception that young people are using more drugs and alcohol than they actually are.

3. Drug Debts and Homelessness

Drug debts emerged in the majority of the focus group discussion, with many young people knowing others who owe money for drugs (alcohol included). These debts ranged from small amounts to hundreds. Drug debts were linked to broader issues, notably youth homelessness. Although participants conceded this was rare, two narratives emerged of young people being made homeless due to drug debt. In these cases families had 'thrown' these young people out to protect the home. There were also reports of young people being thrown out of their family home because of their drug use. In such instances grandparents or friends were providing shelter for these young people.

4. Youth Violence & Fighting

Fighting was considered hugely prevalent among young people. Most participants knew of regular fighting and expressed concern for friends who had been impacted by such violence. Many of these fights were as a result of drug taking, failing to share drugs and not reciprocating friends who had bought others drugs.

Executive Summary – Main Findings: Focus Groups

5. Amenities and Resources

The availability of youth amenities in Bray was raised as a huge issue by participants. Young people highlighted the lack of shops, cinema, and other resources. It was highlighted that there was only one public swimming pool which is positioned in south Bray. Many young people felt that there was nothing for them to do. Participants expressed that many services were not open when they needed them, some services were considered inaccessible due to their location or type of programme/activity offered. Many participants expressed a lack of safe public places they could use in their locality, such places were often vandalised or frequented by other young people considered trouble makers.



(Entries from the Bray Drug Awareness Month Art Competition 2013)

Executive Summary

Recommendations (For more detailed recommendations see pages 34-36)

Before making any recommendations, it would be remiss not to firstly acknowledge the huge amount of work that is carried out by service providers, groups and organisations working with young people in Bray. Despite significant budgetary cuts over the past number of years, those working with young people have struggled to maintain necessary delivery of services and programmes. Financial resources have reduced but where possible service delivery has been maintained, however, many services are on a knife's edge. Without the work of these various services, groups and organisations this survey may have uncovered some very altogether different results. The following recommendations are made with the view to further augment and develop the work that currently takes place in Bray, not in any way undermine it.

Recommendations based on the analysis of the data accumulated through this research, include; local strategic '*youth drug issues plan*', focused awareness raising, combating youth accessibility of alcohol, challenging drug myths, reclaiming public spaces, greater community dialog and cross agency work. Firstly it would seem beneficial at a local level to develop a '*youth drug issues plan*', involving relevant stakeholders in developing strategies to address and respond to current or emerging youth drug issues. These responses might include, community based initiatives that incorporate the skills and expertise of a multi-agency approach when dealing with youth drug issues.

Awareness-raising of home drinking among young people and their access to alcohol requires some innovative and strategic responses. These responses should include all stakeholders – young people themselves, parents and guardians, Gardaí, schools, youth clubs, local publicans and off-license owners, and other community / statutory organisations.

Greater community dialog between relevant stake holders to challenge problematic normative beliefs in relation to alcohol and other drugs might also prove useful. Localised and long term campaign to challenge normative beliefs about cannabis and raise awareness of the serious impact to user's health and mental wellbeing, might be just one of a variety of suitable responses.

Identification of local public spaces that have been taken over by vandalism and anti-social behaviour; followed by creative and innovate responses with the assistance of communities and local authority to reclaim such spaces, as safe places, for young people and the broader community to use.

Setting the Context - Youth & Drugs

Overview

This survey was not carried out with the intention of generating local data for direct comparison with national data on youth drug issue. As this survey is representative of a small sample of young people it does not allow for broad generalizations. Nonetheless it is necessary to provide some broader data on youth drug use to '*set the context*' for this study.

Drug use is becoming increasingly normalized among youth populations (Duff, 2005; Parker, 2005; Parker et al, 2002; Parker et al, 1998). This normalization is in part due to the increased availability and accessibility of illicit drugs (Parker, 2005). However, it may also be attributable to discourses and trends taking place within various youth subcultures (Duff, 2005). Within such youth subcultures risk taking and the use of illicit drugs is openly valorised (Duff, 2005). It may be argued that normalization of drug use is assisted by the commoditization of young people's leisure time, most notably with the huge growth in the commercialization of clubbing and the night time economy (Duff, 2005).

Normalization of drug use is as prevalent among young women as men, and across all socio-economic profiles (Parker et al, 2002). However, data suggests that drug use, as opposed to normalization of use, is hugely gendered; with young men being much more likely to engage in illicit drug use and problematic drinking (Nolen-Hoeksema, 2004; Wilsnack et al, 2000; Anderson, 2001; Dawson & Archer, 1992).

Discussion of illicit drug use and the normalization of such drug use among young people cannot take place without examining alcohol. Alcohol holds unique status within Irish society; no other drug maintains such cultural accommodation. In fact alcohol has obtained such a level of cultural accommodation many do not even consider it a drug. This common misconception has led to the necessary adoption of terms like '*Drugs & Alcohol*' or '*Alcohol and Other Drugs*' within policy and health promotion documents. The careful choice of words acts as a reminder; and reflects a policy response to address the omission of alcohol from many people's thoughts when they think about drugs.

Alcohol in many cases has become the precursor to recreational drug use among young people (Parker, 2005). Alcohol therefore is a significant drug gateway, which also contributes to the normalization of other drug use (Parker, 2005). According to Kimmel (2008) alcohol consumption among young people is epidemic. Young people today drink more than they know they can handle. However, young people seem to believe their alcohol consumption is innocuous (Kimmel, 2008). Alcohol consumption among young people tends to be a social occurrence, which is shared within a network of drinking peers.

Youth Drug Prevalence

In the most recent iteration of the European School Survey Project on Alcohol and other Drugs (ESPAD, 2011), in Europe on average 21% of boys and 15% of girls have tried illicit drugs at least once in their life time. In more than two thirds of European countries boys display significantly higher drug use patterns than girls (ESPAD, 2012). Of those surveyed cannabis use was reported by 17% of the students, while 6% had tried other illicit drugs (ESPAD, 2012). According to the ESPAD Survey (2012) Ireland is one of the few European countries that has demonstrated a reduction of lifetime illicit drug use between the periods from 1995 to 2011 among young people. In 1995, 37% of respondents reported lifetime illicit drug use compared to 19% in 2011 (ESPAD, 2012: 10).

Life time tobacco use remains high with 54% of participating students reporting they had smoked cigarettes at least once (ESPAD, 2012). However, 70% of students disclosed drinking alcohol at least once in their life (ESPAD, 2012). In Ireland, a national charity for alcohol related issues reports that 40% of Irish young people binge drink on a monthly basis and of those young people aged 16-17 years who drink spend in excess of €20.00 a week on alcohol (Alcohol Action Ireland, 2013). In a recent drug prevalence survey on cannabis in Ireland, it was noted that cannabis prevalence rates are much higher among the younger proportion of the population, particularly among those aged between 15-34 years (NACD, 2013). In addition, the median age of first ever cannabis use was 18 years for both men and women (NACD, 2013).

Young People and Drugs in Bray

Bray is a relatively large town with an approximate youth population of 5,800 young people between the ages of 5 to 18 years (CSO, 2011). This survey reflects a very small sample of this youth population. Although it is not possible to make direct comparisons between the results of this survey and national / European data, we can make some assumptions about drug use among young people in Bray. Based on the results of this survey it would appear that this sample of young people is similar to other groups.

However, use of illicit drugs among this sample is comparatively high with 27% indicating they had tried a drug other than alcohol or tobacco. Smoking among this survey sample was encouragingly low at 17% indicating they were smokers, however a further 25% of the sample indicated life time use of tobacco. Alcohol consumption among this sample cohort appears to be similar to consumption rates of other Irish young people, with 67% of this sample having indicated life time use of alcohol.

So upon the surface it would appear that this sample of young people is very similar to other groups of young people. However, this survey has provided a great wealth of information other than prevalence of drug use among this cohort. This survey provides data on a variety of other drug related issues, which will be discussed in the coming pages.

Presentation of Findings – Survey:

Finding 1: Male / Female

150 males (76%) and 46 females (24%) participated in the survey.



Finding 2: Age

Participants ranged from 12 to 18 years and over. The majority of participants were between the ages of 14 to 17 years.

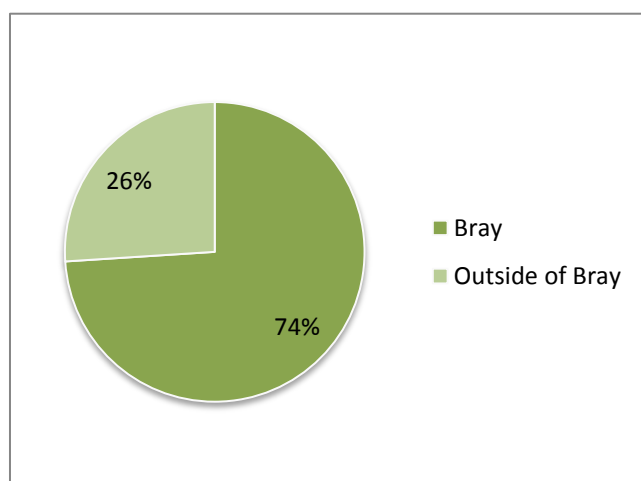
Table 1: Age breakdown of participants

Age Range	Number of Participants
12-13 Years	35 (18%)
14-15 Years	67 (34%)
16-17 Years	82 (42%)
18 + Years	12 (6%)
Total Number of Participants	196

Finding 3: Where do you live?

Three out of four survey participants reside in Bray. The large proportion of young people not residing in Bray may be due to the method of data collection which was via secondary schools. These young people although not Bray residents fall into the greater Bray catchment area.

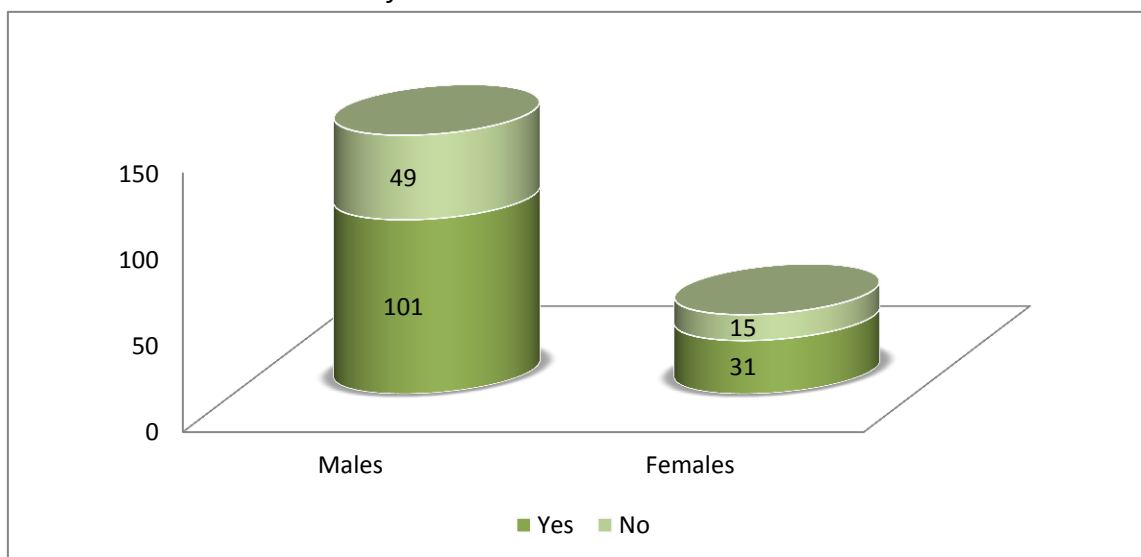
Table 2: Chart showing break down of residence



Finding 4: Have you ever drunk alcohol?

132 participants (67%) indicated they had drunk alcohol and 63 participants (33%) indicated they had not. Table 3 illustrates the male and female life-time use of alcohol within this sample. Comparatively there appears to be little gender difference in relation to life time use of alcohol.

Table 3: Gender breakdown of those who have drunk alcohol

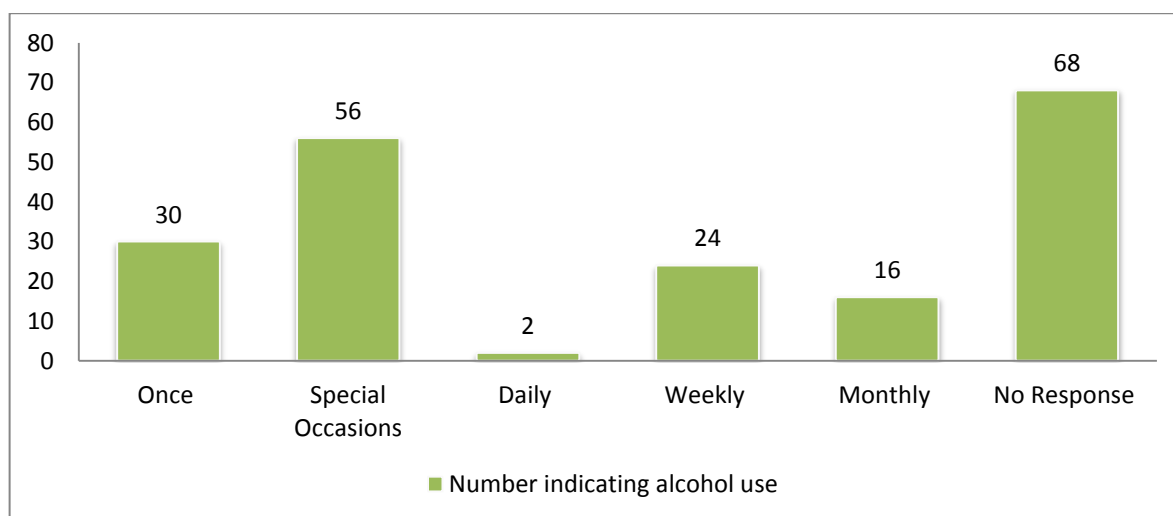


Finding 4.1: How often do you drink?

(Based on those who indicated they drink alcohol)

Majority of this sample appear to drink sporadically, with special occasions being the most frequent response. One participant indicated daily consumption of alcohol.

Table 4: Chart showing number who indicated frequency of alcohol use

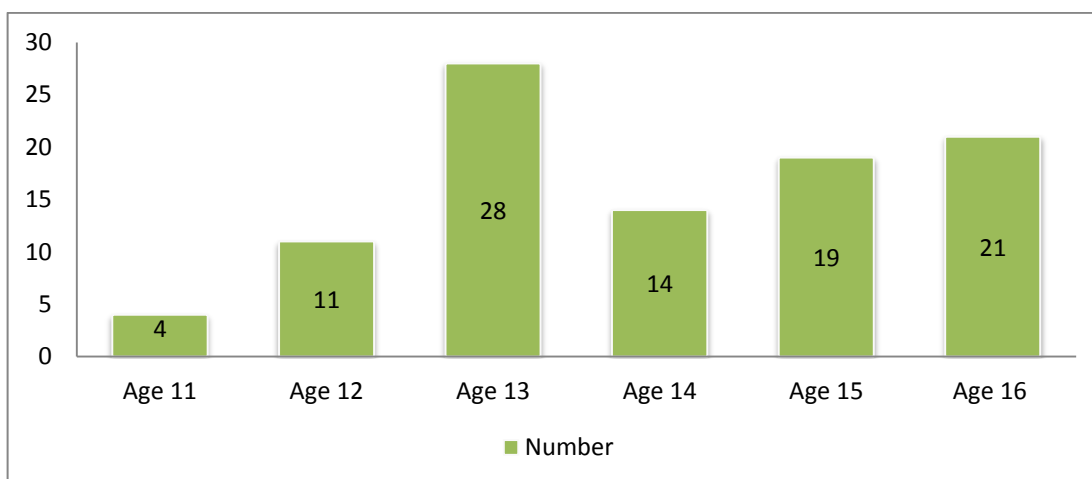


Finding 4.2: What age were you when you started to drink?

(Based on those who indicated they had drunk alcohol)

Significant number of participants (21%) indicated that they were 13 years of age when they first tried alcohol.

Table 5: Chart showing number of responses for age of first alcohol use

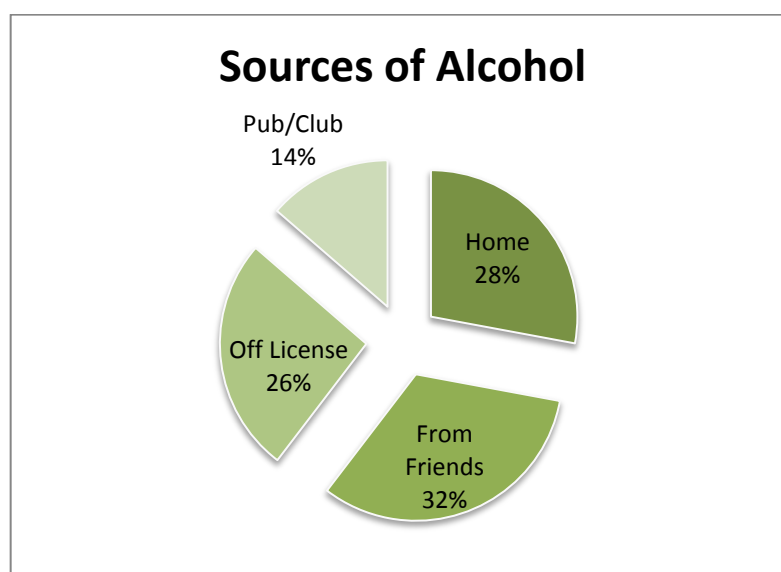


Finding 4.3: Where do you generally get your alcohol?

(Based on those who indicated they drank alcohol, in addition, participants may have indicated more than one location)

Three locations emerged as common places for sourcing alcohol, firstly from friends (32%), secondly from home (28%) and thirdly from off-licenses (26%). Participants did not indicate whether alcohol sourced from off-licenses was through 'fishing' [soliciting an adult to purchase on their behalf], direct purchases or purchases made with fake identification.

Table 6: Sources of Alcohol



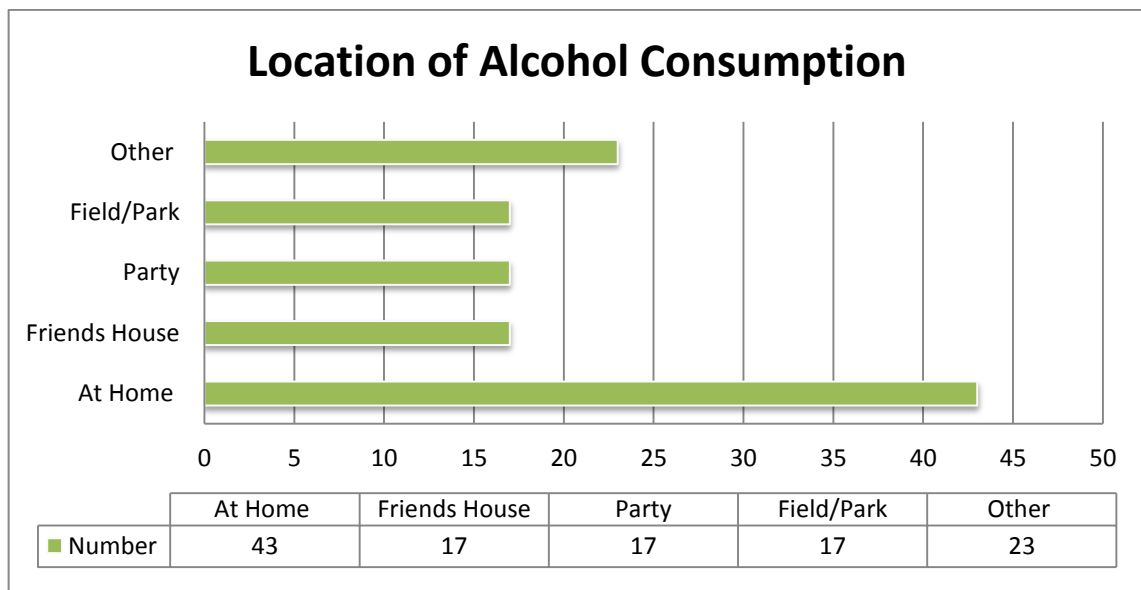
Finding 4.4: Where do you drink your alcohol?

(Based on those who indicated they drank alcohol, in addition, participants may have indicated more than one location)

A significant number of young people consume alcohol at home (33%); however, we do not know whether this is with the consent and/or knowledge of parents / guardians.

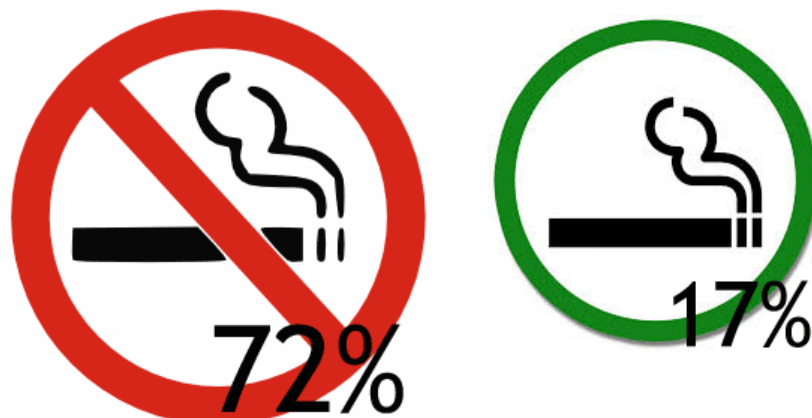
Additionally a large number (17%) indicated they drank in an 'other' location besides parks, fields, parties or friends houses, however, we cannot ascertain what this 'other' location is. It may be somewhere out of sight or inconspicuous.

Table 7: Location of alcohol consumption



Finding 5: Do you smoke cigarettes?

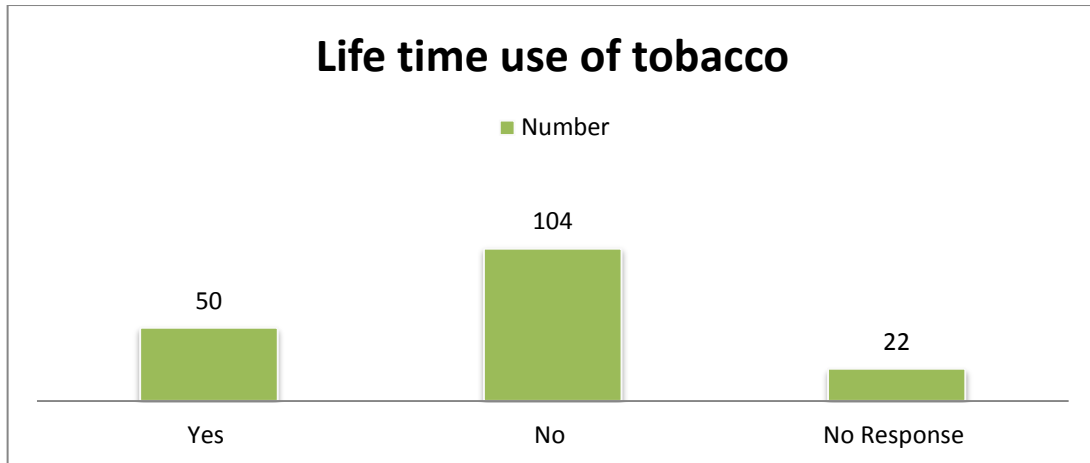
The total number of participants who indicated they were smokers was 32 (17%) with the vast majority 142 (72%) indicating they did not smoke. 22 participants (11%) did not indicate either way.



Finding 5.1: Have you ever tried a cigarette?

50 young people from this survey (25% of the sample) indicated they had tried a cigarette at least once.

Table 8: Showing life time use of tobacco

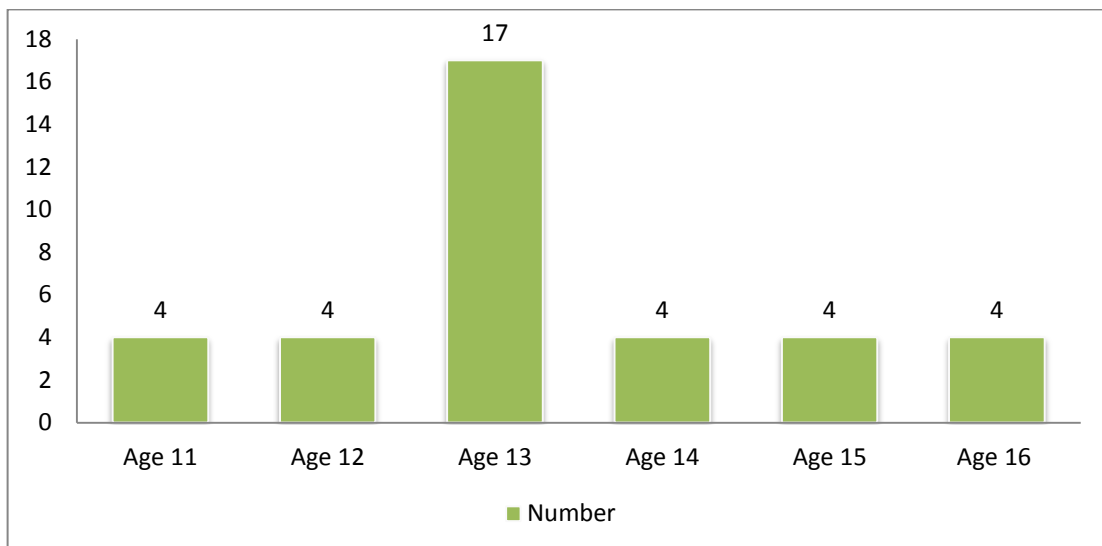


Finding 5.2: What age did you start to smoke?

(Based on those who indicated life time use of tobacco)

The mean age of tobacco use of those who responded to this question was 13 years of age.

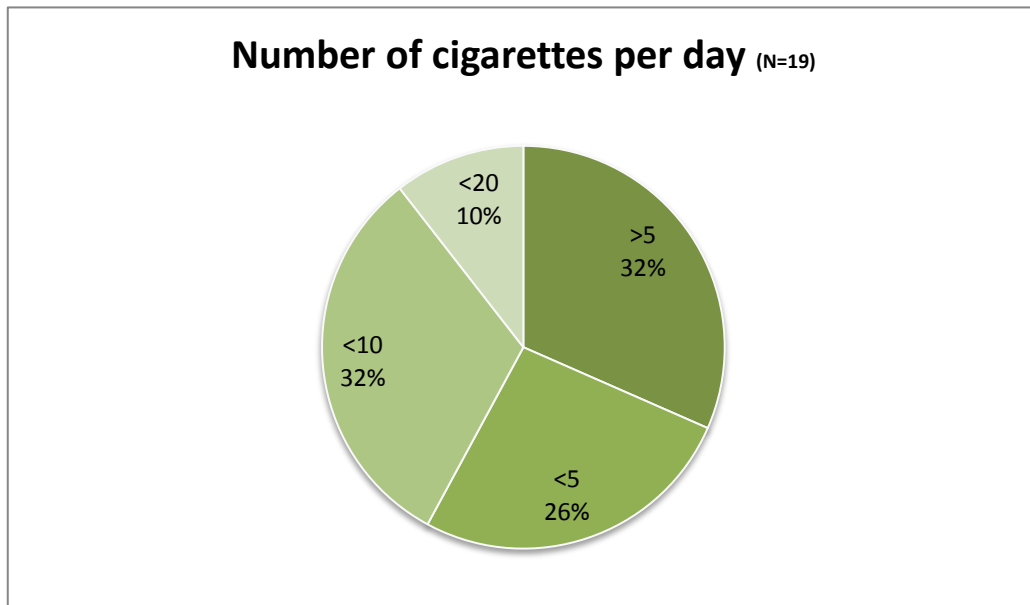
Table 9: Showing age of first tobacco use



Finding 5.3: How many cigarettes do you smoke a day?

This question had a significantly low response rate, with only 19 responses out of 32 participants who indicated they were smokers.

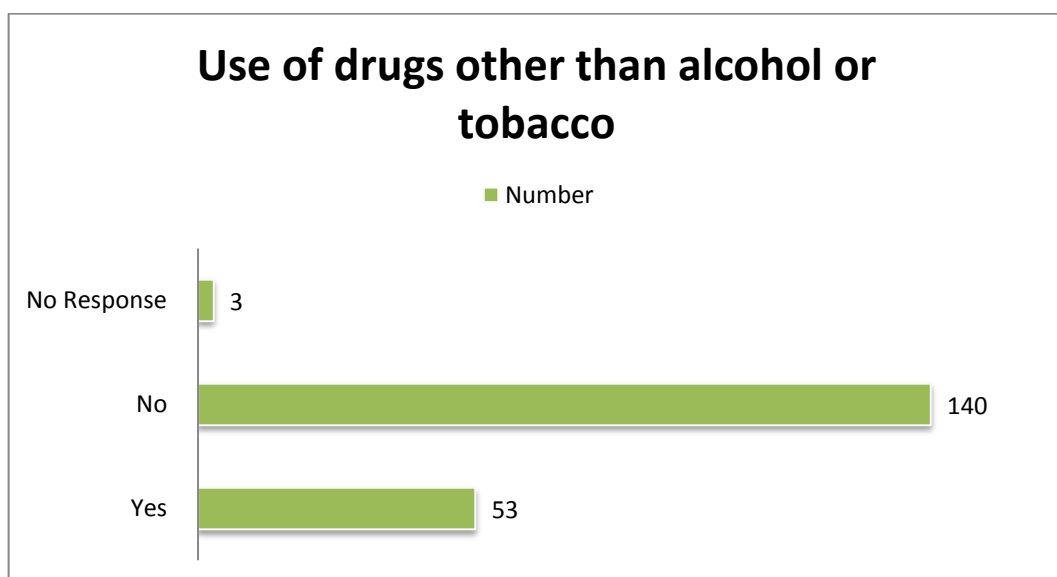
Table 10: Showing amount of cigarettes smoked per day



Finding 6: Have you ever tried a drug other than alcohol or tobacco?

53 participants from the sample (27%) indicated they had tried a drug other than alcohol and tobacco. 140 participants (71%) indicated they have not tried illicit drugs.

Table 11: Showing life-time use of drugs other than alcohol or tobacco



Finding 6.1: What drugs have you tried?

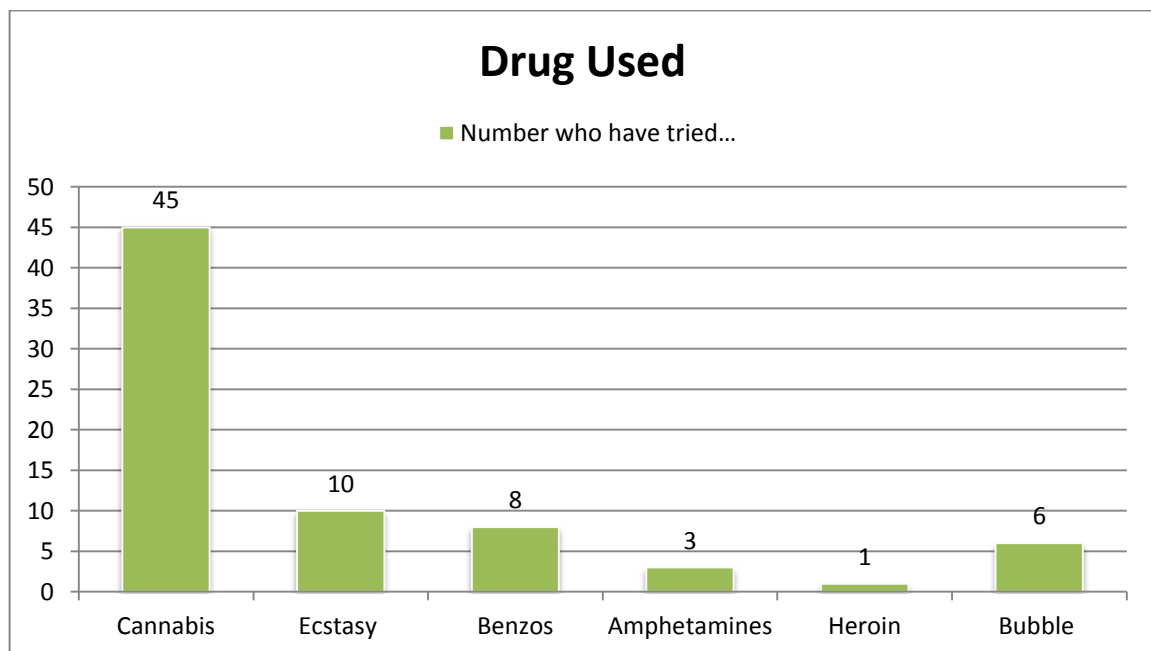
(Based on those who indicated lifetime use of a drug other than alcohol or tobacco)

23% of this sample has tried cannabis at least once in their life. This represents 85% of participants who indicated drug use other than alcohol or tobacco.



Following cannabis the most commonly used drug indicated by participants was ecstasy (19%), prescription medications (such as 'Benzos' 15%), Mephedrone ('Bubble' 11%) and amphetamines (6%). One respondent indicated having tried heroin.

Table 12: Showing number of participants and drugs used



Finding 6.2: What age were you when you when you first used a drug (other than alcohol or tobacco)? *(Based on those who indicated life time use of drugs other than alcohol or tobacco)*

Of those who have used a drug other than tobacco or alcohol the mean age for having tried such a substance was 15 years of age (34% of those who indicated life time use of other drugs). One participant indicated they were 11 years of age when they tried a drug other than tobacco or alcohol.

Table 13: Chart showing number who indicated age at which they tried other drugs

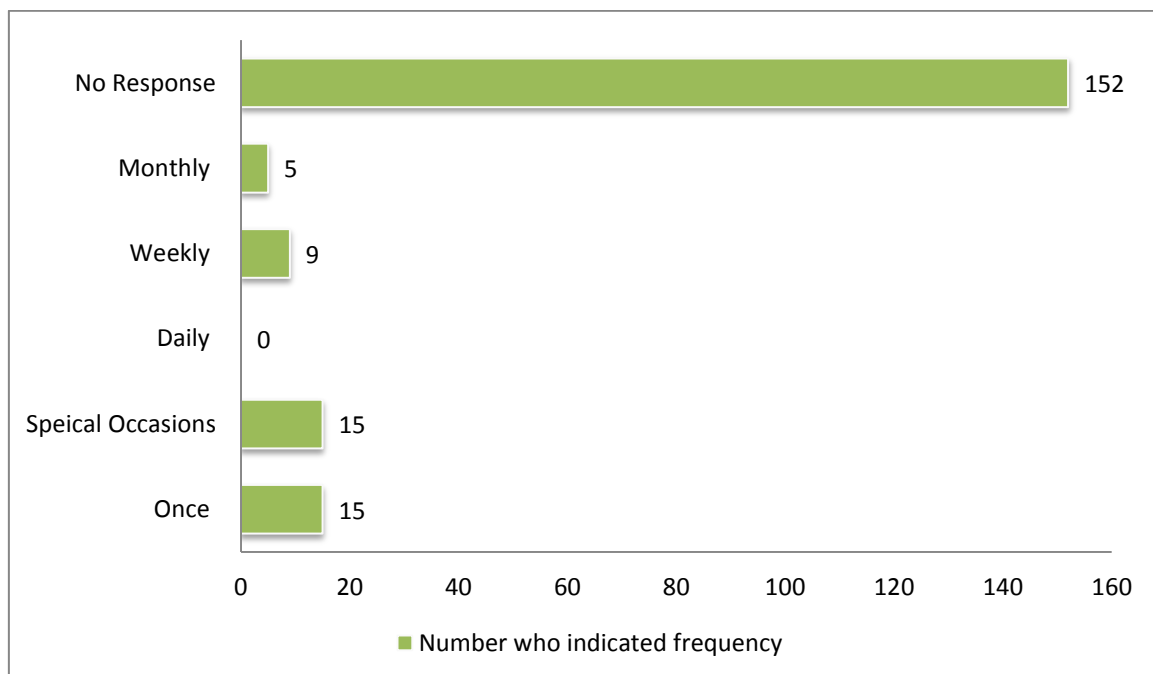


Finding 6.3: How often do you use drugs?

(Based on those who indicated life time use of drugs other than alcohol or tobacco)

In keeping with finding 4.1 young people in this sample indicated sporadic use of other drugs with once off and special occasions being the most frequent time of use.

Table 14: Showing frequency of other drug use

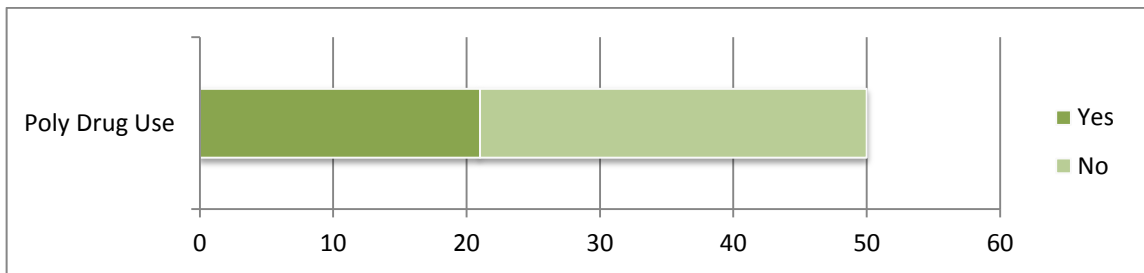


Finding 6.4: Do you use more than one drug at a time?

(Based on those who indicated life time use of drugs other than alcohol or tobacco)

21 participants engage in poly drug use (approx. 40% of those who indicated other drug use).

Table 15: Showing poly drug use

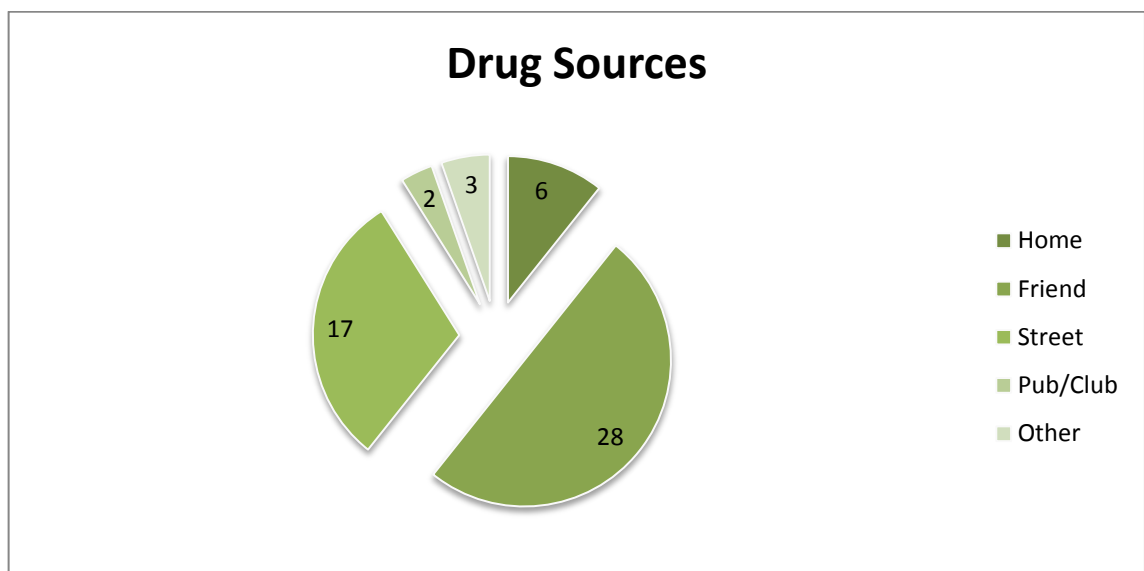


Finding 6.5: Where do you get your drugs?

(Based on those who indicated life time use of drugs other than alcohol or tobacco)

The primary source of drugs for participants in this sample were friends (53%), followed by street dealers (32%), Home (11%), Pub/Club 4% and other (6%).

Table 16: Showing drug sources.

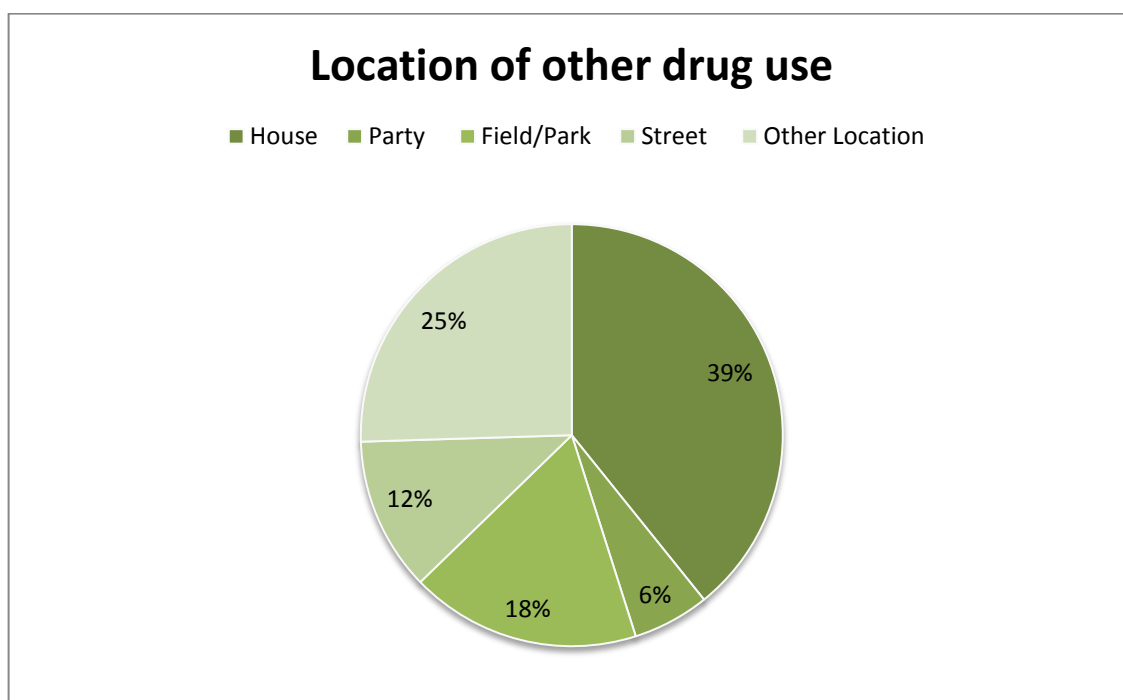


Finding 6.6: Where do you take your drugs (general location)?

(Based on those who indicated life time use of drugs other than alcohol or tobacco)

Significantly the majority who indicated life time use of a drug other than alcohol or tobacco most commonly used this substance in their own or someone else's home (39%). As with finding 4.4, we do not know whether the consumption of these substances takes place with the knowledge or consent of the home owner. Nor do we know whether the home owner is present when the drug use takes place. Other common sites for drug use include locations indicated as 'other' (25%), fields or parks (18%), on the street (12%) or at a party (6%).

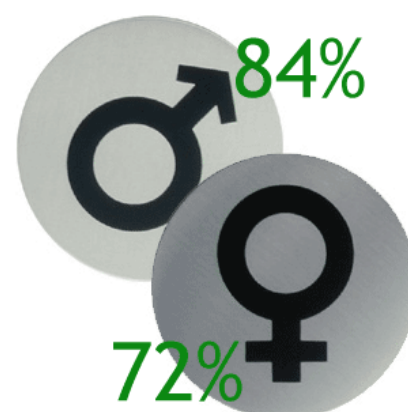
Table 17: Showing breakdown of locations used for other drug use.



Finding 7: Help seeking as a result of a problem with drugs or alcohol.

159 participants (81%) indicated they would seek help and 32 (16%) stated they would not. A small number of participants (5) did not indicate a response.

Interestingly there was a gender difference among this sample in relation to help seeking, which is contrary to existing knowledge within the field. This gender difference may be an anomaly or may be due to other factors not determinable from this data. 84% of males in this sample would seek help in contrast to 72% of females. This gender difference is not replicated in relation to worry about family or friends drug use, as will be illustrated under findings 10 and 11.

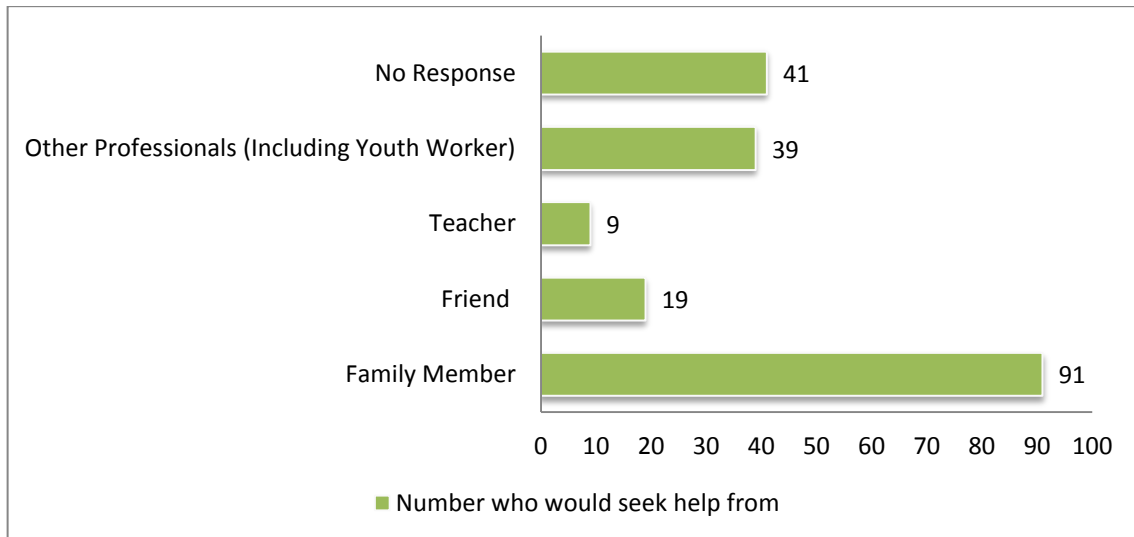


Finding 7.1: Most likely person to seek help from.

(Participants may have indicated more than one person)

The most common person this sample would seek help from is a family member, with 91 participants (46%) indicating a close relative as the most likely the person whom they would turn to.

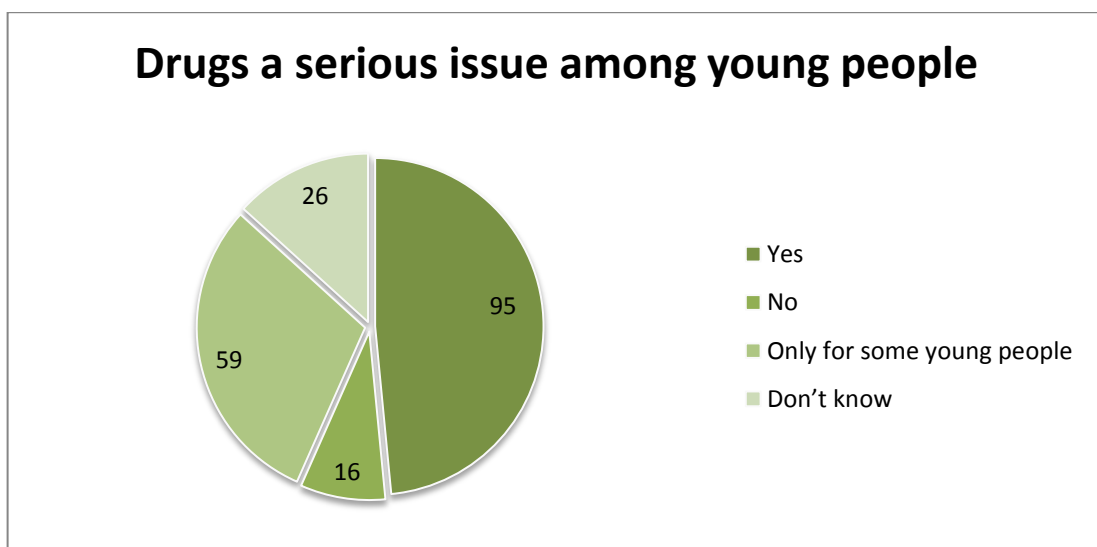
Table 18: Showing number of those who would seek help from



Finding 8: Do you think drugs are a serious issue among young people in Bray?

A significant portion (49%) of this sample believed that drugs are a serious issue among young people in Bray. Many believed that drugs were only a problem for some young people (30%).

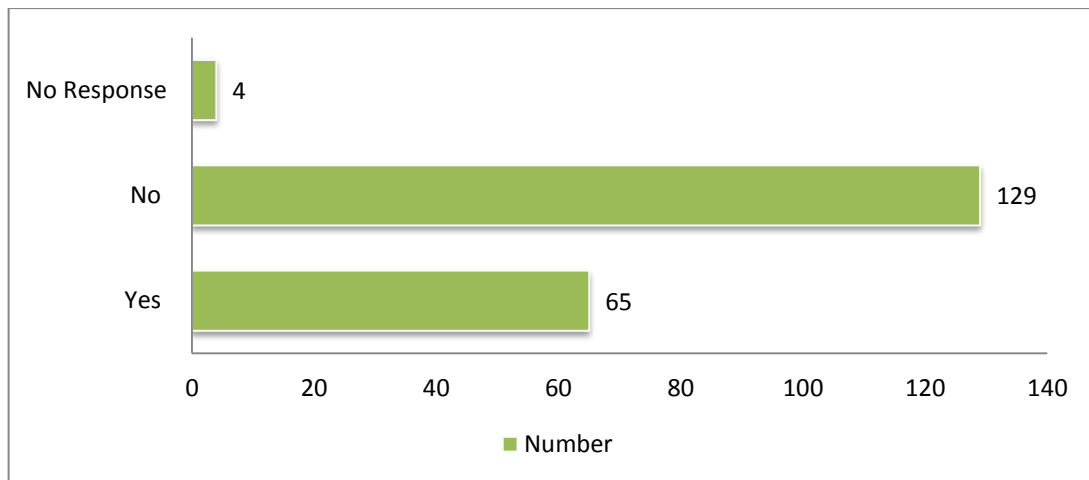
Table 19: Showing the number who consider drugs to be a serious issue among young people in Bray



Finding 9: Have you ever been affected by someone else’s drug or alcohol use?

Three out of ten young people in this sample have been affected by someone else’s drug use.

Table 20: Showing number of young people affected by other peoples drug use

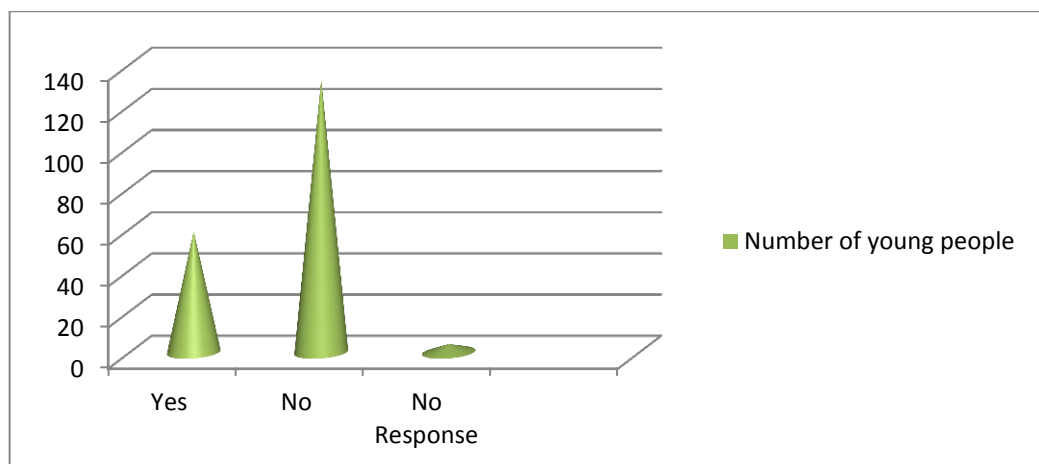


Finding 10: Have you ever been worried about a family member’s drug use?

Three out of ten young people in this sample have been worried about a family members drug use. However, worry appears to be more common among females within this sample. 55% of females indicated worry about a family members drug use and 23% of males indicated a similar response.



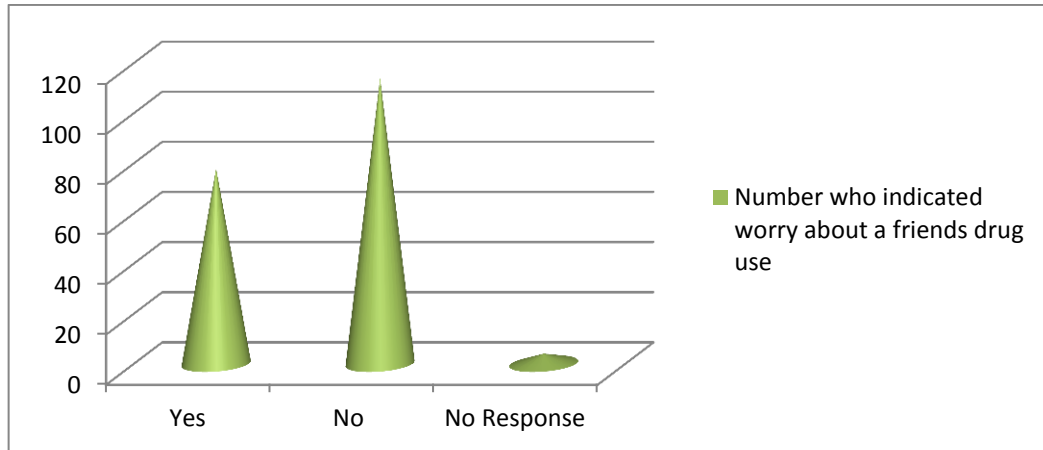
Table 21: Showing the number of young people worried about a family members drug use



Finding 11: Have you ever been worried about a friend's drug use?

Worry about a friend's drug use was more common among this sample, with four out of ten indicating experiencing such worry. Similarly to finding 10, females worry more. In this case 59% of females in this sample indicated worry about a friend's drug use, compared to 34% of males.

Table 22: Showing number who have experienced worry about a friend's drug use

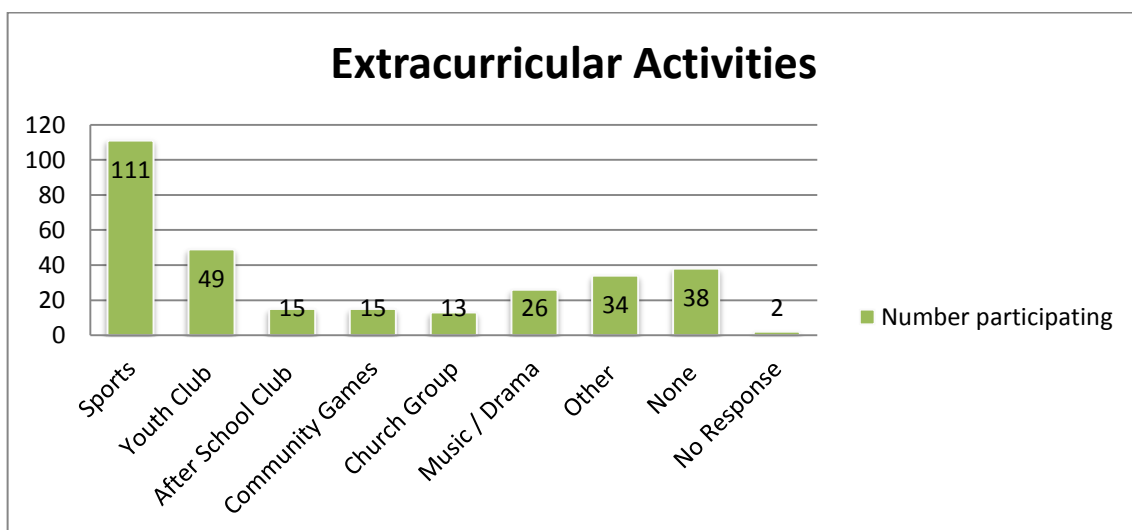


Finding 12: Extracurricular activities

(Participants may have indicated more than one activity)

Sports were by far the most common extracurricular activity that participants (57%) engaged in. This was followed by youth club (25%), music or drama (13%), after school club (8%) and church group (7%). However, a significant number (19%) were not engaged in any extracurricular activity.

Table 23: Showing number participating in various extracurricular activities

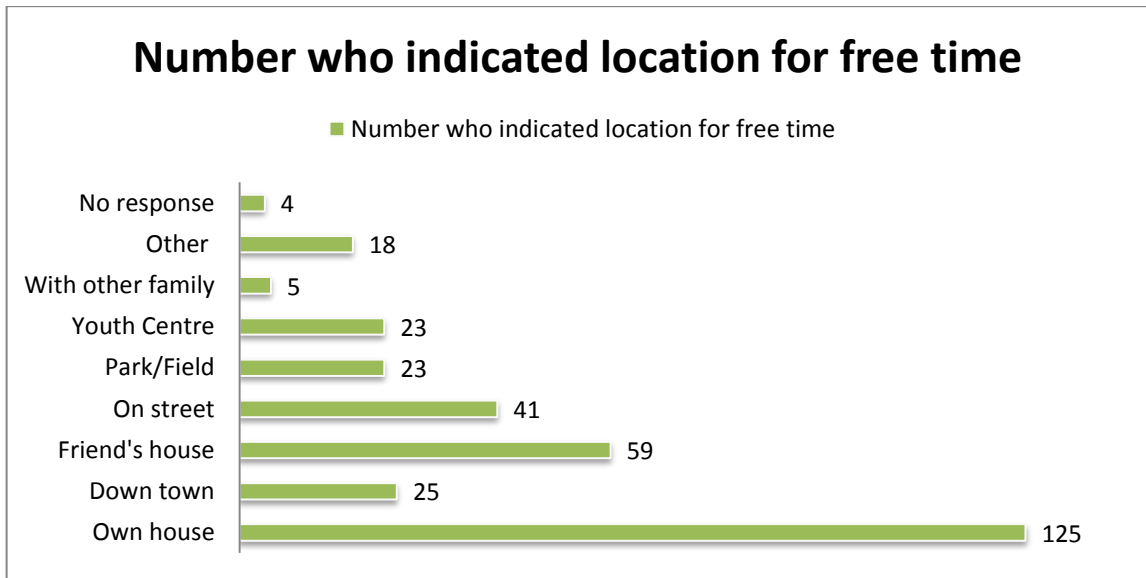


Finding 13: Use of participant’s free time

(Participants may have indicated more than one response)

Free time for the vast majority of this sample was regularly spent at home (64%). Many participants indicated they also spent free time in a friend’s house (50%) and one in five indicated they spent time on the street on the street (21%).

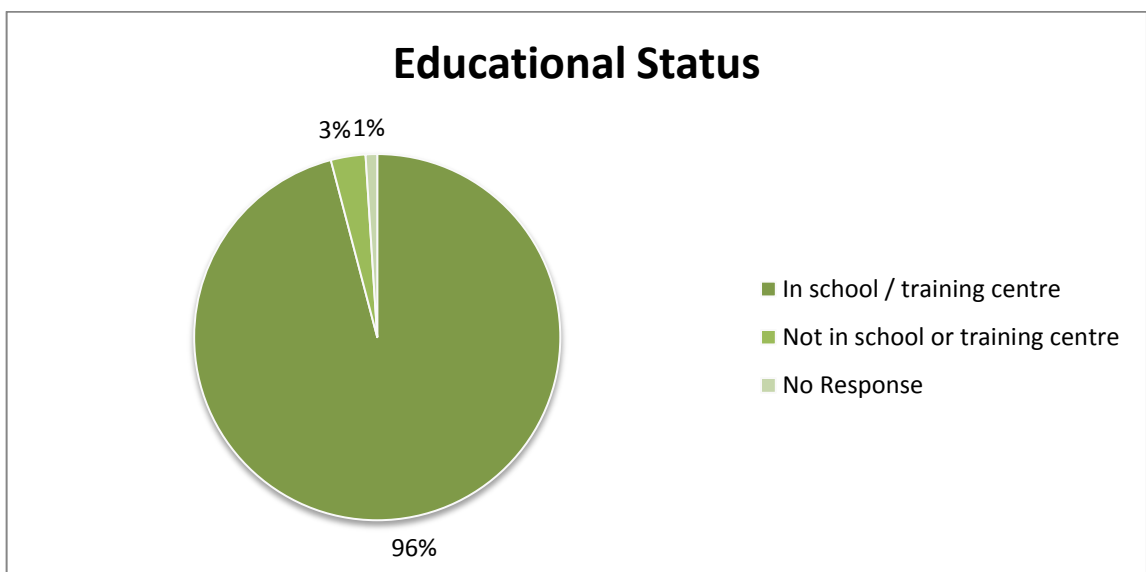
Table 24: Showing number who spent free time in various locations



Finding 14: Educational status of participants

The majority of participants (96%) in this survey indicated they are currently in school or a training centre.

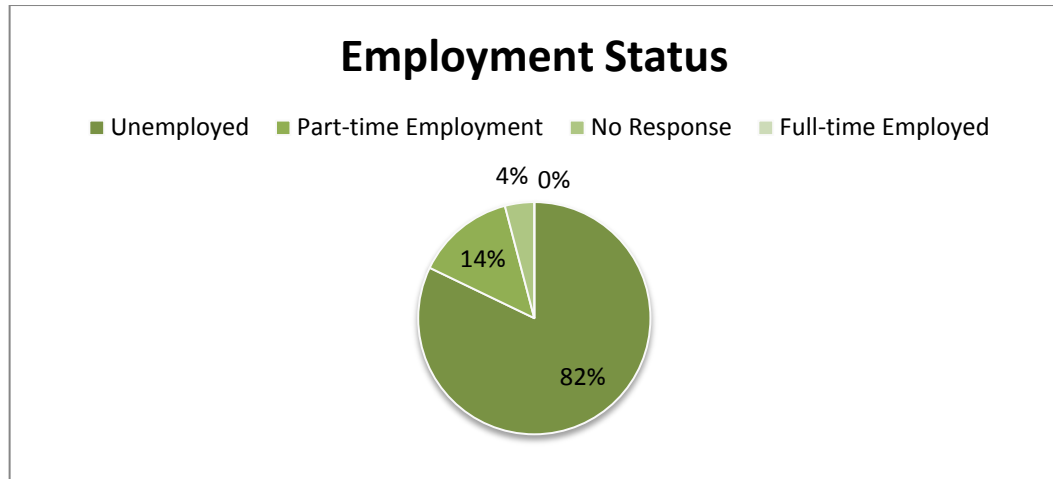
Table 25: Showing educational status of survey participants



Finding 15: Employment status of participants

82% of participants indicated they are not employed. 14% of participants indicated they are engaged in part-time work and no participants indicated full-time employment.

Table 26: Showing percentage of participants in employment

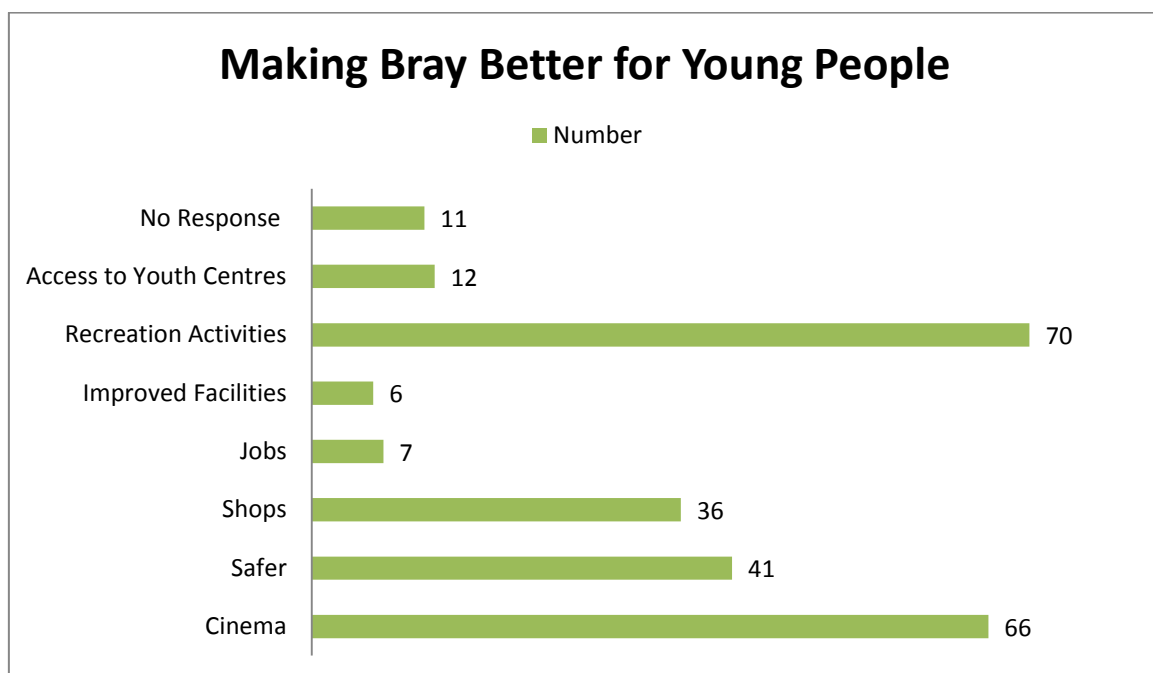


Finding 16: Making Bray better for young people

(Participants were asked to name three things)

When asked what might make Bray better for young people, a significant number of participants (36%) indicated a greater need for more recreational activities for young people in Bray. A cinema was commonly highlighted (by 33% of participants) as an amenity that would make Bray better for young people. One in five (21%) indicated that they wished Bray was a safer place for young people.

Table 27: Showing suggestions for making Bray better for young people



Focus Group Discussions - Introduction

Focus groups were used to gather qualitative data for this research project, representing the subjective views and opinions of the participants in relation to drug issues in Bray. Five of such informal focus group sessions took place with young people who had not completed the drug survey. This informal youth work setting was conducive in encouraging active participation from participants. A total of 52 young people took part in the focus group discussions, 10 males and 42 females. These young people were aged between 13-17 years and all resided in Bray. Participation in focus group discussions was voluntary and participants were given the opportunity to opt-out at any point or skip questions during discussions. Each focus groups session lasted approximately 40 – 60 minutes and took place in venues where they would normally have had their life-skills programme. Drug awareness and education were part of each of the groups life-skills programme and these focus group discussions formed part of their programme plan.

Focus group sessions were recorded for the purposes of transcription and analysis of data. Session notes were made during and after focus groups, to record interactions and observations made. All data was anonymised. Data was analysed through a process of axial coding and formation of coding lists, which allowed for the identification of thematic material and interpretation of data. Throughout the process of coding and analysing data, a combination of re-examining recordings, session notes and relevant literature was employed. Verbatim quotes have been used in this report, in order to remain as close to the intended meaning of participant's responses.

Presentation of Findings:

(P = Participant, FG = Focus Group)

1. Perception of and Exposure to Drugs

'Some places are easier to fish than other places' (P – FG4)

Mixed level of exposure to drugs and drug issues was evident from focus group discussions. Some participants were ofay with a variety of drug types, names and had some knowledge of their effects. The extent of other participant's drug knowledge appeared quite limited. The drugs that were most commonly mentioned in discussions were; alcohol, tobacco, cannabis, tablets (non-specified), ecstasy, D5's & D10's [Valium], ketamine and bubble [Mephedrone]. Common perception of drugs that were considered 'good', included; prescription drugs, pain killers and other medicines. 'Bad' drugs were heroin, cocaine and cannabis.

Alcohol appeared to hold unique status among participants, in that young people simultaneously did and did not consider alcohol to be a drug; or considered it to be

'different' to other drugs such as cannabis or tobacco. Alcohol was considered a good drug 'when you are just socialising' (P – FG3) and bad 'when you drink too much' (P – FG3). A number of participants when asked 'when is too much?' or 'how do young people prevent themselves from drinking too much?' replied 'we know how to stop ourselves' (P – FG3).

There was high level of acceptance of other young people drinking alcohol and young people expressed that to some degree this was 'normal' behaviour. For many young people alcohol use was synonymous with enjoyment and featured heavily in their concept of having a good time. There was general consensus from all of the focus groups that alcohol was easily accessible. *Fishing* [the soliciting of an adult to purchase alcohol on their behalf] was a common practice among young people they knew and participants mentioned places that they knew were better *fishing* grounds than others.

There was general consensus of the harms of tobacco use. However, high levels of misconception were evident in relation to cannabis, with common cannabis myths being prevalent, for example 'but you get that [cannabis] if you have sore joints...well only in America' (P – FG3). Many also believed cannabis can help 'clear out your lungs' (P – FG5), reasons for this included that it was organically grown or didn't contain 'all chemicals that were in tobacco' (P – FG5).

2. Comparing Bray Youth with other Youth

Overall participants felt that young people from Bray were very similar to young people from other places, and shared similar issues. However, there was a common perception that young people from Bray drink more alcohol than in other places. In addition, for many participants there is a perception that young people are using more drugs and alcohol than they actually are. Participants commonly used 'everyone' or 'everybody' when discussing drug use among young people. Some participants did think that young people in Bray drink more alcohol than other places 'cause you see them in fields...woods...anywhere' (P – FG3) and 'they leave cans all around them' (P – FG3).

There appeared to be a common perception of young people using more drugs than they actually are 'every young person you see out there today are smoking' (P – FG4) and 'some of our friends just drink whenever they feel like it' (P – FG3). Overall most focus group participants felt that Bray was very similar to other places in relation to drug use. However, many expressed that if they had children they would not want them growing up here 'cause I wouldn't want them taking drugs and everything' (P – FG2).

3. Drug Debts and Homelessness

'You hear loads of things, like ... yeah... I'm in debt... for like a couple of hundred' – (P – FG3).

Drug debts emerged in four of the five focus group discussions, with many young people knowing others who owe money for drugs and alcohol. These debts ranged from small amounts to hundreds of euro. The pooling of money to buy alcohol or drugs was frequently mentioned.

'Getting kicked out cause people are coming looking for their money, they're putting in peoples windows' - (P – FG3).

Drug debts were linked to broader issues, notably youth homelessness. Although participants admitted this was rare, two narratives emerged of young people being made homeless due to drug debt. In these cases families had *'thrown'* these young people out to *'protect'* the family home. Other narratives surfaced of young people being thrown out of their family home because of their drug taking. In such instances grandparents or friends were providing temporary shelter.

Others had heard stories of young people being sent away for treatment or in one case a family locking a young person in their room for a week to go *'cold turkey'*. Another was *'sent away ... to that place down in Limerick'* (P – FG3).

4. Youth Violence & Fighting

'If they don't get a sniff out of someone else's bag, that starts it [fight]' – (P – FG1)

Getting *'into trouble with'* the guards and fighting amongst young people were common themes that emerged. Fighting was considered hugely prevalent among young people according to focus group participants. Many participants knew of regular fighting and expressed concern for friends who had been impacted by such violence. Participants mentioned common locations and times (Saturday nights) for fights. In addition, participants conceded that violence was often carried out while young people were under the influence of alcohol. Many of these fights were as a result of drug taking, failing to share drugs and not reciprocating friends who had bought others drugs.

'If someone has money this week and they buy cans for everyone, then when its someone else's turn next week and they have no money to buy cans it causes a fight, cause they expect to get their cans' – (P – FG1).

5. Amenities and Resources

'They are looking at older people doing it [drinking and taking drugs] and sure they've got nothing to do so they end up doing it' (P – FG3).

The availability of youth amenities in Bray was raised as a huge issue for participants. Young people don't access certain centres or services. Often this is because *'it's not the first place that comes into your head'* (P – FG1), *'cause you're never really down there'* (P – FG1) or *'this is only one day a week'* (P – FG1). Young people's perception of why other young people used drugs was because of them having *'nothing better to do'* (P – FG2). Participants expressed that many services were not open when they needed them, some services were considered inaccessible due to their location or type of programme/activity offered.

'There's nothing to do in [place name] ... the park is all graffitied and there's glass everywhere' (P – FG3).

Many young people felt like they had no public spaces that were theirs to use. Many participants expressed a lack of safe public places they could use in their locality, such places were often vandalised or frequented by other young people considered trouble makers. Many public spaces had been claimed by those causing trouble, these places were often significantly vandalised and considered unsafe places by young people. Participants expressed a void for age group 17+ years. Some participants highlighted that there are no alcohol-free disco's in Bray. There is no cinema. Transport is an issue and it is difficult for many young people to travel outside of Bray.

Young people highlighted the lack of shops, cinema, and other resources. It was highlighted that there was only one public swimming pool which is positioned in south Bray. Many young people felt that there was nothing for them to do.



Recommendations

Strategic Youth Drug Issues Plan

It would seem logical that a local strategic **youth drug issues plan** be formulated, which might address issues detailed within this report, in addition to other local issues not contained here. Such a plan would require investment from all relevant stakeholders and would respond to issues in a cross-agency multi-disciplinary approach. Such a plan would require consultation and a possible implementation group to monitor and document progress. This plan would allow services to know what agency, service or organisation is responding to an issue; therefore avoiding duplication, replication and/or counter-productive programmes. Realistic and measurable outcomes would need identification. Services working towards shared goals and interests surely will maximise positive outcomes for young people.

Tackle Home Drinking

Many young people are reporting to drink at home or in friend's houses, however, we do not know whether this is with the consent of parents or other adults. Alcohol consumption at home has become more prevalent among adult alcohol users in recent times, and in some respects this may have influence the emergence of this trend among young people. Under age consumption of alcohol is problematic irrespective of where it takes place; however, in this context parents are in a prime position to address this issue. Local family agencies and services can encourage and support parents in responding to this issue. Schools and youth services are in a position to address alcohol use through SPHE programme in schools and within youth services through life-skills and drug awareness programmes. Greater community dialog and discussion to challenge problematic normative beliefs in relation to alcohol may also be useful.

Reduce Access to Alcohol

Alcohol it appears through both survey and focus groups to be readily available for young people. '*Fishing*' [getting an adult to purchase alcohol from an off-license] is common practice for many young people, and considered by many as easily accomplished. Young people are strategic in where they '*fish*'. Targeted re-enforcement of the Intoxicating Liquor Act 2008 in areas known to be easy fishing grounds may prove useful. In addition, many young people are accessing alcohol from their homes. Parental awareness-raising of this issue at a local level would appear to be an appropriate response.

Challenge Cannabis Myths

High level of misunderstanding in relation to the harms of cannabis use was most prevalent in the focus group discussions. Cannabis was also the most commonly used illegal drug indicated by this sample (similar to other data sets pertaining to youth drug use i.e. ESPAD, 2012). The combination of high use among the sample and high level of inaccurate information demonstrated in the focus groups, it would seem appropriate to develop an awareness raising campaign at a local level that includes universal, selective and targeted aspects. This might include; information leaflets for parents, young people and wider community, it may also include cross agency work with community stake holders, involving targeted delivery of workshops and programmes.

Reclaim Public Spaces

Many participants expressed their view of a lack of safe public places for them to use. This may also be reflected in the high number of sample participants (64%) who indicated they spent their free time at home, as opposed to being outside. Therefore we would recommend initiatives to identify local public spaces that are being subjected to vandalism or anti-social behaviour and reclaim such spaces through; community art programmes, neighbourhood watch schemes, civic responsibility initiatives and the fostering of community spirit. The success of such initiatives would be dependent on ensuring consultation and agreement with communities, participation from local authority, funding to carry out essential work and maintenance of reclaimed spaces, and the encouragement and recognition of active participation.

Continued Drug Education and Prevention Programmes

The challenge of drug education and prevention with young people, lies in helping them to adjust behaviours, influence their preconceptions or misconceptions and develop their capacities to make informed healthy decisions, all whilst recognizing the '*multiple influences such as social norms, interaction with peers, living conditions, and their own personality traits*' (EMCDDA, 2011: 19). Therefore it is important to be realistic in what a drugs education and prevention programme can realistically achieve and to be aware of the challenges and obstacles that lie within the work. It is also recognized that to be most effective drugs education and prevention programmes '*need to match their goals, activities and messages to the local situation*' (CCSA, 2009, p.17).

With this in mind, this survey provides a wealth of local data to help inform and direct the provision of future drug education and prevention programmes. The delivery of such programmes, however, requires the continued investment and support of funders, innovate responses to emerging drug issues and the continued effort to build new linkages and partnerships with other community stakeholders.

Broader Community Discussion

Young people don't exist in isolation. They are part of families, peer networks, schools, clubs, and communities and so on. They are influenced by the groups to which they belong. They are also heavily influenced by trends within the various sub-groups of youth culture. Therefore any discussion of youth drug issues should not take place in isolation, but rather should encompass the broader community to which young people belong. In order to address drug use issues among the youth population, all those with a vested interest in young people need to come to the discussion table. Only then will significant and meaningful change take place.



Final Discussion

Given the statistics on youth drug use, many might question why young people engage in such activities. Others may ask *'how can drug use among young people be prevented?'* Adolescence is of course a time of great change and development. This period in life presents young people with a variety of choices, challenges and risks. Young people may engage in drug use due to a variety of factors, including; curiosity, experimentation, the influence of peers, or to experience the thrill of rule breaking or risk taking (Ghodse, 2004). The adolescent period is also marked by higher prevalence of conduct and emotional disorders, which may be exacerbated by depression and or anxiety (Ghodse, 2004). These vulnerabilities put young people at risk.

Additional risk factors have also been identified, including; low self-esteem / low self-concept, family disharmony, family drug use, drug use among peers, violence in the home, stress at school or inadequate adult supervision (Haase and Pratschke, 2010; Ghodse, 2004). Significant risk is attributed where there is parental drug use and or parental approval of drug or alcohol use (Ghodse, 2004). However, in response to these risk factors, there is a broad spectrum of protective factors, which reduce the likelihood of young people engaging in drug use. These protective factors may include; parental concern and involvement, positive school experiences, good relationships with teachers, drug free peers, and participation in extra-curricular activities (Haase and Pratschke, 2010).

There have been numerous political and social discourses in Ireland (as in other places) in relation to youth drug use. These discourses often blame young people for the ills of society and stigmatise certain youthful behaviour (Parker et al, 1998). Often when presented with statistical data, people do not see the wood for the trees. There are positives to be learned from existing research on youth drug use. Although one in four young people will try an illegal drug within their lifetime, three out of four will not. Of those one in four young people who do try an illegal drug, fewer again become regular illicit drug users. Although recreational drug use has found new cultural accommodation among youth populations, it does not mean that young people will become more likely to use drugs; it simply suggests they have more liberal attitudes towards the certain drug use of others.

Gathering data on youth drug issues provides an opportunity to identify emerging drug trends, patterns of use and other related issues. However, it also provides opportunity to identify young people's strengths, and to *'tap into'* these strengths to help other young people most at risk. The intention of this survey is not to highlight how bad young people are (for they are not), but rather identify issues and challenges they may be encountering, with the view to helping as a community. Young people are often incredibly candid and forthcoming. Without such candour and wiliness to participate in discussion, surveys such as this would not be feasible.

Selected Bibliography & References:

- Anderson, T. L. (2001) *Drug Use and Gender*, in Faupel, C.E. and Roman. P.M. (Eds.)(2001) *Encyclopaedia of Criminology and Deviant Behaviour, Vol. IV*, Philadelphia: Taylor and Francis Group.
- Canadian Centre on Substance Abuse (2009) *Building on our strengths: Canadian standards for school-based youth substance abuse prevention: A guide for education and health personnel* (Version 1.0), Canadian Centre on Substance Abuse (CCSA): Ottawa, ON.
- Crome, I. and McArdle, P. (2004) *Chapter 2 – Prevention Programmes*, in Crome, I. et al (Eds.) (2004) *Young People and Substance Misuse*, London: Gaskell.
- Dawson, D.A. and Archer, L. (1992) 'Gender differences in alcohol consumption: effects of measurement', *British Journal of Addiction*, Vol. 87, pp. 119-123.
- Duff, C. (2005) Party Drugs and Party People: examining the 'normalization' of recreational drug use in Melbourne, Australia. *International Journal of Drug Policy*, Vol. 16, 2005, pp.161-170.
- European Monitoring Centre for Drugs and Drug Addiction (2011) *European Drug Prevention Quality Standards*, Lisbon: EMCDDA.
- European Monitoring Centre for Drugs and Drug Addiction (2013) *European Drug Report – Trends and Developments 2013*, Luxembourg: EMCDDA.
- European School Survey Project on Alcohol and Other Drugs (ESPAD) (2012), *The 2011 ESPAD Report – Substance Use Among Students in 36 European Countries*, Sweden: S.M.H.S.A and E.M.C.D.D.A.
- Ghodse, H. (2004) *Chapter 1 – Introduction*, in Crome, I. et al (Eds.) (2004) *Young People and Substance Misuse*, London: Gaskell.
- Haase, T. et al (2008) *Children, Families & Neighbourhoods in the Bray Area*, Bray Community Consortium: Bray, Co. Wicklow.
- Haase, T. and Pratschke, J. (2010) *Risk and Protection Factors for Substance Use Among Young People - A Comparative Study of Early School-Leavers and School-Attending Students*, Commissioned by National Advisory Committee on Drugs, The Stationary Office: Dublin.
- Kiely, E. & Egan, E. (2000) *Drug Education – A Social and Evaluative Study*, National University of Ireland: Cork.
- Kimmel, M. (2008) *Guyland: The Perilous World Where Boys Become Men*, New York & London: Harper.
- National Advisory Committee on Drugs (NACD) (2013), *Drug Use in Ireland and Northern Ireland – 2011/11 Drug Prevalence Survey: Cannabis Results*, Bulletin 3, Dublin: NACD.
- Nolen-Hoeksema, S. (2004) 'Gender differences in risk factors and consequences for alcohol use problems', *Clinical Psychology Review*, Vol. 24, 2004, pp. 981-1010.
- Parker, H. et al (1998) *Illegal Leisure - The Normalization of Adolescent Recreational Drug Use*, London: Taylor and Francis Group.

Parker, H. et al (2002) 'The Normalization of 'Sensible' Recreational Drug Use: Further Evidence from the North West Longitudinal Study', *Sociology*, Vol. 36, 2002, pp. 941-964.

Parker, H (2005) 'Normalization as a Barometer: Recreational drug use and the consumption of leisure by younger Britons', *Addiction and Theory*, Vol. 13, 2005, pp. 205-215.

Wilsnack, R.W. et al (2000) 'Gender differences in alcohol consumption and adverse drinking consequences: cross cultural patterns', *Addiction*, Vol. 95, 2000, pp. 251-265.

Web References

Alcohol Action Ireland (2013), *Alcohol, Children and Young People*, URL:
<http://alcoholireland.ie/facts/case-studies-society/> accessed 10/10/2013.

Central Statistics Office (CSO) (2011) *Bray Area Profile*, URL:
http://census.cso.ie/areaprofile.aspx?Geog_Type=ST&Geog_Code=35007 accessed 17/09/2013.

Appendix 1 – Selected Comments from Participant Surveys

“People brag about it too much” – Female 14-15yrs

“In some areas parents don’t care about their kids drug use, because they do it too” – Female 16-17yrs

“Some parts of Bray such as [place name] may feel neglected and such may result in drug use” – Male 14-15yrs

“It’s easy to get” – Male 14-15yrs

“I don’t like drugs cause you can hallucinate and die” – Male 14-15yrs

“Open a rehab centre” – Male 14-15yrs

“Try and improve some estates around Bray” – Male 14-15yrs

“Only common in groups that all do drugs” – Male 14-15yrs

“Drug use is huge in Bray and I’ve seen it destroy many of my friends. I think it needs to be stamped out as at the moment drugs are so easily available and seen as a cool thing” – Male 16-17yrs

“It has caused a lot of violence in groups” – Male 16-17yrs

“It seems to be getting younger when children that their first drink / smoke” – Male 16-17yrs

“Marijuana is looked down on with shame, I find marijuana is fine, just stay clear of any harder drugs” – Male 16-17yrs

“Some people smoke and drink etc. to ‘forget’ things, such as depression. This should maybe brought to light more” – Female 16-17yrs



Appendix 2 - Questionnaire Form

Bray Drugs Awareness Forum – Prevalence and Patterns of Use Survey 2013

BDAF

Please fill in this questionnaire as fully and honestly as possible.
This questionnaire is confidential and cannot be traced back to you or your school / youth group.

Please tick (X)

Q1 Are you... Male Female

Q 2 Your age... 12 -13 yrs 14-15 yrs
16-17 yrs 18+ yrs

Q3 Where do you live... Bray Outside of Bray

Q4 Have you ever drunk alcohol? Yes No
If yes, go to Q.4.1. If no, go to question 5

Q. 4.1 How often do you drink?
Once Special occasions Daily
Weekly Monthly

Q4.2 What age were you when you started to drink? _____

Q4.3 Where do you generally get alcohol?
At Home From Friends Off License
Pub Club/Disco

Q4.4 Where do you drink your alcohol (general location e.g. home / park)?

Q5 Do you smoke cigarettes? Yes No

Q5.1 If no, have you ever tried a cigarette? Yes No

Q5.2 If yes to Q5, what age did you start to smoke? _____

Q5.3 If yes to Q5, how many cigarettes do you smoke a day? _____

Q6 Have you ever tried a drug other than alcohol or tobacco?
Yes No
If yes, go to Q6.1. If no, go to Q7 on page 2

Q6.1 What drugs have you tried?

Q6.2 What age were you when you first used a drug? _____

Q6.3 How often do you use drugs?
Once Special occasions Daily
Weekly Monthly

Q6.4 Do you use more than one drug at a time? Yes No

Q6.5 Where do you get your drugs?
Home School Friend
Street Club / Pub

Q6.6 Where do you take your drugs (general location e.g. home / park)?

Page 1

Please return to BDAF C/O Bray Youth & Information Services, St. Bricin's, Herbert Road, Bray, Co. Wicklow. Tel: 01 2050502 Email: bdafe@bys.ie

Bray Drugs Awareness Forum – Prevalence and Patterns of Use Survey 2013

BDAF

Q.77 If you or a friend had a problem with alcohol or drugs, would you go for help? Yes No

Q7.1 If yes, who would you go to? _____

Q7.2 If no, why not? _____

Q8 Do you think drugs are a serious issue among young people in Bray?
Yes Only for some young people
No I don't know

Q9 Have you ever been affected by someone else's drug or alcohol use?
Yes No

Q10 Have you ever been worried about a family member's drug or alcohol use? Yes No

Q11 Have you ever been worried by a friend's drug or alcohol use?
Yes No

Q12 Which of the following, if any, are you currently involved in?
(You can tick more than one box)
Sports Activities Community Games
Youth Club Church Group
After School Club Music / Drama
None of these Other

Q13 Where do you spend most of your free time?
In your own house On the street
Down the town Public park / field
Friends House Youth Centre / Club
Other family members house (e.g. grandparent)
Other place

Q14 Are you currently attending school or a training course / programme?
Yes No

Q15 Are you currently employed in a paid job?
Not employed Employed Part Time Employed Full Time

Q16 Name three things that would make Bray, a better place for young people.
(i) _____
(ii) _____
(iii) _____

Q17 Have you any other comments or thoughts about drug use and young people in Bray?

Thank you for completing our survey!

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Please return to BDAF C/O Bray Youth & Information Services, St. Bricin's, Herbert Road, Bray, Co. Wicklow. Tel: 01 2050502 Email: bdafe@bys.ie

Appendix 3 – Parental Consent Form



BRAY DRUGS AWARENESS FORUM

*C/O Bray Youth & Information Service,
St. Brigid's, Herbert Road, Bray, Co. Wicklow.
Tel: (01) 2050592 Fax: (01) 2050710 Email: bdaf@bys.ie*

Dear Parent / Guardian,

I am writing to you on behalf of the Bray Drugs Awareness Forum (BDAF). As you may be aware BDAF has been providing drug awareness initiatives in Bray for the past 20 years. Since it was established in 1992, the forum has sought to raise awareness of local drug issues and respond to these issues through the provision of training, education, information and appropriate interventions.

The forum is looking to complete a local survey to uncover drug prevalence and patterns of use among young people in Bray. The last such local study took place over 20 years ago and the landscape of drug issues experienced by young people in Bray has changed since. The data that could be acquired from such a piece of research would have huge benefits for a variety of services and agencies engaged with young people in Bray. It would provide a real picture of the drug issues experienced by young people in Bray and help inform appropriate and effective responses to such issues.

Your child's class has been chosen to take part in this survey. Participation by young people will be voluntary and your consent is also being sought (please see below). Participants will be assured of anonymity and schools will not be named as having taken part in the research.

Data will be collected through the completion of a paper survey (a copy of which is attached) during an appropriate time during the school day, this survey will take no more than 15 minutes to complete. Collected data will then be used to furnish a detailed report which will be launched later this year to coincide with Bray Drugs Awareness Month. All participating schools will be furnished with a copy of the completed research.

This survey has the potential to offer real insight into current drug issues experienced by young people in Bray and offers a unique opportunity for services to better respond to current youth issues and needs. We would encourage you to discuss this survey with your child and encourage you to give your consent to this research.

Should you have any questions or concerns, please do not hesitate to contact me.

Kind regards,

Clay Darcy – Drug Education & Prevention
Development Officer

Consent Form;

I (your name in block capitals) _____ do / do not (please circle) give my consent for my son / daughter (name of son / daughter block capitals) _____ to participate in the BDAF Prevalence and Patterns of Use Survey 2013.

Signed: _____ Date: _____



The Bray Drugs Awareness Forum is an organization comprising of a variety of representatives from community, voluntary and statutory organizations and concerned individuals.

Appendix 4 - Focus Group Schedule

Is there such a thing as a good drug or a bad drug? What might they be?

Do you think young people in Bray drink more alcohol or use more drugs than in other places?

Are there many problems in Bray due to young people drinking alcohol or using drugs?

What problems or difficulties do young people face due to drinking alcohol or using drugs?

Do you think young people in Bray have a problem with their alcohol or drug use?

What might prevent or stop a young person from drinking alcohol or using other drugs?

Besides drugs what other issues are young people in Bray faced with?

Is Bray a good place for young people to live? Why, why not?

What is good about Bray? What is bad about Bray?

What would make Bray a better place for young people?

