'If You Use Speed and Then Downers, Would You be Back to Normal?' An Analysis of the Perspectives of Young People Regarding Alcohol, Drugs and Tobacco: A Togher Link Up Case Study

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Community
- Academic

Research
Links

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What is Community-Academic Research Links?

Community Academic Research Links (CARL) is a service provided by research institutes for the Civil Society Organisations (CSOs) in their region which can be grass roots groups, single issue temporary groups, but also well-structured organisations. Research for the CSOs is carried out free of financial cost as much as possible.

CARL seek to:

- provide civil society with knowledge and skills through research and education;

- provide their services on an affordable basis;

- promote and support public access to and influence on science and technology;

- create equitable and supportive partnerships with civil society organisations;

- enhance understanding among policymakers and education and research institutions of the research and education needs of civil society, and

- enhance the transferrable skills and knowledge of students, community representatives and researchers (www.livingknowledge.org).

What is a CSO?

We define CSOs as groups who are non-governmental, non-profit, not representing commercial interests, and/or pursuing a common purpose in the public interest. These groups include: trade unions, NGOs, professional associations, charities, grass-roots organisations, organisations that involve citizens in local and municipal life, churches and religious committees, and so on.

Why is this report on the web?

The research agreement between the CSO, student and CARL/University states that the results of the study must be made public. We are committed to the public and free dissemination of research results.

How do I reference this report?

Author (year) Project Title, [online], School of Applied Social Studies, Community-Academic Research Links/University College Cork, Available from: http://www.ucc.ie/en/scishop/completed/ [Accessed on: date].

How can I find out more about the Community-Academic Research Links and the Living Knowledge Network?

The UCC CARL website has further information on the background and operation of the Community-Academic Research Links at University College Cork, Ireland. http://carl.ucc.ie

CARL is part of an international network of Science Shops. You can read more about this vibrant community and its activities on this website: http://www.scienceshops.org

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Executive Summary

Background to the Study

This research was conducted as part of a community-academic research link (CARL) initiative run within University College Cork and was carried out as part of a BSW 4 dissertation. The research was carried out in partnership with "*Togher Link Up*" which is a community based drug awareness programme which operates on the south side of Cork city.

Objectives

In order for society to plan effective services and interventions for children, they must first consider the varied perspectives of the children concerned. The United Nations Convention on the Rights of the Child (1990) states that children must be able to express their views and become included in decisions that affect their lives. It also states that children must be protected from the use of narcotic or psychotropic drugs. Qualitative research carried out amongst children offers them not only a channel to air their views but also an opportunity to teach us how to protect them through the analysis of their perspectives.

The principal aim of this research is to utilise existing data collected by "*Togher Link Up*" to investigate the current perspectives of its young people regarding drugs, alcohol and tobacco and through this identify any potential gaps in the service provided currently and to tailor make the service to make it a more client led service.

Methodology

The methodology which was developed for this study was influenced by the participatory nature of the study; therefore it was undertaken as both a community based research project and a case study. The research is labelled as primary data as this data was in essence raw data, although it was not collected by the researcher first hand for the purposes of this study.

Both Qualitative and Quantitative research methods were undertaken in this study in order to gain an understanding of this raw data. A grounded theory approach was undertaken which allowed the researcher to analyse the data prior to establishing theories or a definite research question. The theoretical perspectives applied to this research were: epistemology, interpretivisim, constructivism and Erikson's stages of psycho-social development.

Analysis of the data was aided by grounded theory and desk research. Also limitations to the research and ethical considerations were highlighted and taken into account.

Results

The results of this study found many re-emerging themes which in essence illustrated the importance of these issues to the children who asked them.

Questions concerning drugs dominated the data, accumulating to an astonishing 75% of the questions. This demonstrates the children's overwhelming interest in drug culture rather than that of alcohol or tobacco. It also illustrated the children's general acceptance of alcohol use but not of drug use. The questions also appeared preoccupied with the facilitator and his views and background. It would suggest the children are increasingly curious and interested in the facilitator and his reasoning for undertaking his job. There were also a number of miscellaneous type questions which centred on peer pressure, bullying a fear of being forced or made to take alcohol or drugs in secondary school.

The questions asked suggest there is an incredible degree of knowledge present already regarding drugs, alcohol and tobacco. The sophisticated nature to the questions and the detailed language used such as "crystal meth" suggests that the children have come into contact with some form of substance misuse whether it is from television of reality

Recommendations

The recommendations included further studies to be carried out into the perspectives of other age groups in order to inform practice and programme content. To develop an age appropriate questionnaire to distribute prior to the educational programme and afterwards in order to determine whether the programme has met the children needs. Increased importance should be placed on the external facilitator to undertake these programmes and perhaps an introduction in the programme regarding peer pressure, bullying etc. to help address this issue, generate self-confidence, gain trust in the facilitator and provide a safe space to address these issues. Further programme development regarding alcohol and alcohol effects including fatalities. That further emphasis should be placed on peer pressure and bullying within the programme. The influence of parental attitudes and use of substances on younger children should be highlighted and there should be consideration of involving parents in education programme by facilitating a parent's educative evening. A standardised programme should be developed, which could be distributed throughout Cork City in order to ensure a quality

standardised service to all children within the Cork area. Lastly due to the sophisticated nature of questions asked there may be need to assess the perspectives of the younger children in primary schools and subsequently develop an age appropriate programme for younger age groups.

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Chapter 1: Introduction

1.1 Title

"If you use speed and then downers, would you be back to normal": An analysis of the perspectives of young people, regarding alcohol, drugs and tobacco: A '*Togher Link Up*' case study.

1.2 Introduction to the Research

In order for society to plan effective services and interventions for children, they must first consider the varied perspectives of the children concerned. The United Nations Convention on the Rights of the Child (1990) states that children must be able to express their views and become included in decisions that affect their lives. It also states that children must be protected from the use of narcotic or psychotropic drugs. Qualitative research carried out amongst children offers them not only a channel to air their views but also an opportunity to teach us how to protect them through the analysis of their perspectives. This research can aid services and policy makers interpret the current statistics regarding drug, alcohol and tobacco use amongst children and can help us plan appropriate interventions (European Monitoring Centre for Drugs and Drug Addiction, 2010).

This research project investigates the perspectives of children (5th & 6th class) within the south side of Cork city in regards to drug, alcohol and tobacco use. It will explore these through the use of data previously collected by a drug educational program in the area titled "*Togher Link Up*". It aims to identify re-emerging themes in the data in order to improve and enhance "*Togher Link Up's*" existing programme by tailoring it to its service users, therefore creating a more client directed service.

In this first chapter, a brief background of the topic will be discussed followed by an overview of "*Togher Link up*" project. Then an introduction to community academic research link (CARL) projects and participatory research will be provided. Subsequently the rationale of the research will be discussed, followed by the aims and objectives. Lastly it will introduce the research question and its conclusion.

1.3 Background to the Research:

The term "drugs" in this research includes the misuse of both legal and illegal drugs, tobacco and alcohol and for the purposes of this study, the definition utilised by Corrigan (1994) will be adopted.

"the use of any drug, legal or illegal, which damages some aspect of the user's life -•whether it is their mental or physical health, their relationship with their family, friends or society in general or their vocational functioning as students or as workers both inside and outside the home ".
(Corrigan, 1994: Facts about Drug Abuse in Ireland, Health Promotion Unit, p. 2)

Drug misuse prevention is one the central provisions in Ireland's interim National Drugs Strategy (2009-16) Substance abuse education is a vital part of any countries drug prevention programme as young people need to be made aware of the nature, effects and problems associated with substance misuse (Carr, 1974).

Drug education for children began in Irish schools in the mid 1990's. At this time there were two programmes initiated. The first was called "walk tall" and was aimed at primary school students whilst the second "On my own two feet" was implemented in secondary schools. (Irishhealth.com, 2001).

At present it appears that Irish school children are particularly critical of Ireland's drugs education- research carried out by NUI Galway have found a number of limitations with the educational social personal and health education (SPHE) drugs awareness programme due to teachers difficulties with implementation, no engagement with parents and students curriculum overload (O' Keefe, 2009). This further highlights the need for studies of this nature to analyse the perspectives of children and determine the potential deficits in their drug education.

1.4 Overview of "Togher Link Up"

"*Togher Link-Up*" was established in 1998 by a voluntary Board of Management representative of the local Community and under the direction of Ógra Chorcaí who merged with Foróige in July 2012. It was set up as a response to a need for community awareness about drugs. Therefore it became a community based drug awareness project based in the Togher area but facilitates services in other areas within the south side of Cork city. The service is compiled of two facilitators who work with individuals and families, offering them treatment, support and a referral service. They also work closely with the wider community, colleges and schools in order to provide prevention and educational programmes to people of all ages. Over all there are 11 primary Schools, 4 secondary and 2 institutes of further education engaged with the "*Togher Link-Up*" Schools Drug Awareness Programme.

1.5 Science Shop- Community Based Research

This research was conducted as part of a community-academic research link (CARL) initiative run within University College Cork. They aim to help civil society organisations within the region to conduct research which they would like to carry out but may not have the time or resources to do so (University College Cork, 2012)

These CARL projects are based on a science shop model which are

"Small entities that carry out research in a wide variety of disciplines – usually free of charge – on behalf of (or with) citizens or CSO's. Science Shops respond to civil society's need for expertise and knowledge. This is a key element that distinguishes them from other knowledge transfer mechanisms. Science Shops are often linked to universities, so that students can conduct research as part of their curriculum with no additional costs to partners. (Living Knowledge Network, 2011).

The rationale is that many university students are required to undertake a piece of research as part of their courses and are subsequently supervised by university staff in doing this. Therefore it is often possible for universities to offer this service to civil society organisations free of charge as the student and supervisor are required to undertake this work regardless. Moreover this also provides for *"independent, participatory research support in response to concerns experienced by civil society"* (University College Cork, 2012).

In this instance University College Cork (UCC) students were given the opportunity to undertake research with a number of civil societies within the region. A facilitator within *"Togher Link Up"* had identified a need for this research to be conducted and had gained the support of UCC in doing so. The research was therefore identified by the agency and not the student in this case (Bell, 2010).

1.6 Research Rationale

According to a recent EU Commission Communications Document, children are to be formally included in all consultations and actions related to their needs and rights (Commission of the European Communities, 2006). The rationale of this research is to allow for meaningful input from young people into their needs in terms of drug education and prevention in the south side of Cork city. It will also benefit the community by having a quality preventative service which is meaningful, respectful and relevant to the young people in the area and is therefore more effective.

The researcher's rationale was to is to undertake a piece of research for "*Togher Link Up*" which may benefit them in their work educating young people about drugs and which could subsequently benefit the community as a whole.

1.7 Aims

The principal aim of this research is to utilise existing data collected by "*Togher Link Up*" to investigate the current perspectives of its young people regarding drugs, alcohol and tobacco and through this identify what the children were telling the agency about the service and any potential gaps in the service currently provided.

1.8 Objectives

The objectives of this research are as follows:

- To develop a methodology and research design this is fitting to the pre-existing data.
- To determine a theoretical perspective for the research
- Assessment and categorisation of the data.
- Identification of re-emerging themes through the use of grounded theory.
- Coding of the data
- Analysis of the data to determine themes and potential gaps in education.

1.9 Research Questions

The following are research questions, one is determined from the assessment of the data while the second is an additional research question related to the needs of *"Togher Link up"*:

1. What are the re-emerging themes in the data telling us about children's perspectives of drug, alcohol and tobacco?
2. Do these themes represent gaps in the drug educational programme provided by *"Togher Link up"*?

1.10 Conclusion

In conclusion this chapter set out the context of the study. It provided a broad introduction to the research and background of the topic. It outlined the rational, aims, objectives and research question's associated with the study. Lastly it delivered information on both, University College Corks' community academic research links initiative and *"Togher Link Up"*.

1.11 Chapter Summaries

Chapter two will attempt to outline the methodology and theoretical perspective of the research. The data collection and data analysis procedures will then be examined, followed by the limitations and ethical considerations of the study.

Chapter three will provide a review of the literature which is applicable to the subject matter. It will provide definitions, statistics and studies concerning the perspective of young people in the issues of drugs, alcohol and tobacco. It will conclude with an analysis of drug education.

Chapter four will firstly provide a demographic profile of the south of Cork city. It will then present the quantitative findings from the data, followed by a qualitative analysis of the themes identified in the data.

Chapter five will conclude the research and identify recommendations for both the agency and for further research to be carried out.
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Chapter 2: Methodology

2.1 Introduction

 The main aim of this research was to utilise the data collected by *"Togher Link Up's"* to determine the perspectives of young people in the area regarding drugs, alcohol and tobacco. The main challenge of completing this research was developing a methodology and research design to data which had previously been collected independently by the agency. This raw data was collected with no specific research question or research design in mind. The researcher resolved this issue before commencing with the data analysis.

This chapter outlines both the methodology and theoretical perspective chosen for this community based research study. The research design which thus developed was influenced by the participatory nature of the study. The analysis of the data was influenced by an interpretivist framework combined with Erikson's stages of psychosocial development. The conclusion of the chapter will discuss the limitations and ethical considerations of the research.

2.2 Methodology

Methodology is defined as the *"theoretical and philosophical assumptions linked to a topic and the ways in which any such topic will be investigated"* (Carey, 2009:68). This study has a number of elements to its methodology due to the unusual origin of the research.

2.21 Community Based Research:

This research is a community-academic research link project which is categorised as community based research .Strand et al (2003:8) defines community based research as

"a partnership of students, faculty and community members who collaboratively engage in research with the purpose of solving a pressing community problem or effecting social change [...] Faculty and students work with community-based organisations to define the research questions and develop appropriate strategies to address those questions".

As previously mentioned it was participatory in nature, which means that most aspects of the research were determined based on the participation of the research student and "*Togher Link Up*".

2.22 Case Study

The case study approach is a method of analysing a phenomenon by analysing an individual case. It allows for an intensive analysis of the data which may be over looked if using other methods (Kumar, 2005).As this research directly focuses on" *Togher Link Up* "and no other drug education programmes, it may be categorised as a case study of "*Togher Link Up*", an analysis of young people's perspectives of drugs, alcohol and drugs in the south side of Cork city.

2.23 Primary Data

The data used in this research is labelled as primary data. Primary data *is "generated from direct observation, participation, personal experience or a large source of data such as a national census"* (Carey, 2009:76). Although the data was not collected by the researcher, it is nonetheless primary data by definition as it was formed by the direct work of the agency which the researcher was conducting participatory research with. The data collected is empirical by nature in that it is data on the "social world to test, generate or interact with the propositions of social science" (May, 2001:57).

2.24 Grounded theory:

The researcher began this study following the collection of the raw data and with only one broad working title, which was "*To analyse the perspectives of young people in regards to drugs, alcohol and tobacco in the south side of Cork City*". Due to the lack of methodology or research question prior to collecting the data, it was necessary to develop a methodology and theory using grounded theory.

Grounded theory method was developed by Barney Glaser and Anselm Strauss. It is essentially a theory to generate research methodology. It allows a researcher to first" *find out what things are like and then develop a theoretical framework to explain that rather than assuming what things are like"*. This would therefore allow the researcher to focus on the important emerging themes and narrow down the questions; this is described in research as "*progressive focusing*" (Gomm, 2004:235).

Grounded theory researchers do not commence research with predetermined theories but may have underlying perspectives instead. The end result of a grounded theory approach should incorporate the formulation of themes and an understanding about how individuals or communities respond to their experiences (Somekh & Lewin, 2008). This approach is inductive which means that the themes will arise from the data collected rather than from the researcher alone (Sarantakos, 2008).

Inductive Theory (Trochim, 2006).
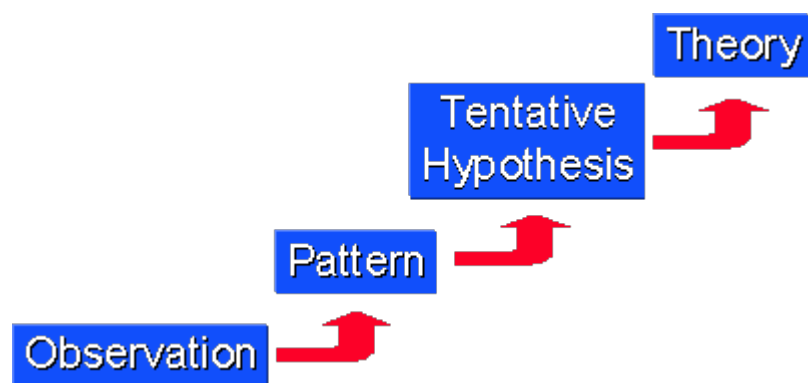
Charmaz (2006:2) states that this method was developed so that it could provide a "*systemic, yet flexible guideline for collecting and analysing qualitative data*" which can subsequently construct theories which are grounded in the data. Glaser & Strauss invites users of grounded theory to use its strategies in a flexible manner.

Therefore this research undertakes a grounded theory approach but in a flexible manner. It uses grounded theory to firstly analyse the data in order to develop a theory and methodology. Following this, it was also used to determine common themes within the data which could be analysed and additionally used to develop the research question.

2.25 Scientific Method

A scientific method was undertaken to analyse the data. The main step in scientific methodology is to observe the phenomena and then to think about the observations in order to discover what appears to go together and what does not (Weatherall, 1968). In this case a scientific method was required in order to make sense of the raw data supplied. Also it provided a logical method for analysis as it allowed the researcher to analyse the data both quantitatively and qualitatively in a logical manner.

2.26 Qualitative & Quantitative Research

As the data collected was a simple collection of questions asked by services users of the programme, with no background or specific context associated, it was necessary to use a combination of both qualitative and quantitative data research methods in order to adequately interpret the answers. This combination requires triangulation which essentially uses both forms of methods and data to study the same phenomena within the same study (Clark & Creswell, 2008).

Qualitative research aims to gather an "*in-depth understanding of human behavior and the reasons that govern such behavior*" (Brewer & Miller, 2003, p.193). Whereas Quantitative research is a numerical account of the information about the world which does not typically occur numerically and requires researchers to turn the data into numbers (Punch, 2005). The combination of both, aims *to "gather and represent human phenomena with numbers……and with words"*. Mixed methods research combines the strengths of quantitative research and qualitative research. (Somekh & Lewin, 2008:274).

2.3 Theoretical perspective

2.3.1 Epistemology

Epistemology is the "theory of knowledge". It queries what knowledge is, how knowledge is acquired, the different types of knowledge and how knowledge is known (Carey, 2009:50). The researcher's epistemological position originates from an interpretivist and constructivist perspective aided by Erikson's stages of psychosocial development.

2.3.2 Interpretivism

Interpretivism is defined as the attempt to "*uncover the meaning and reality of people's experiences in the social world".* Interpretivists attempt to understand the opinions, emotional responses and attitudes voiced by their participants and subsequently link them with people's behaviours and actions in order to contextualise the views of the participants. (Carey, 2009:53).

2.3.3 Constructivism

A constructivist lens suggests that an individual makes sense of phenomena by interpreting what is happening and therefore constructing their own version of reality. An individual will then use this construction to "*deal with any new experience in that field*" (Sutherland, 1992:79). An individual does not view things in a strictly objective manner but rather they develop unique personal constructs in which they describe, explain and otherwise account for the world (Gergen & Davis, 1985).

2.3.4 Erikson's Stages of Psychosocial Development

Erikson's Stages of psychosocial development is a theory which explains the eight stages through which a healthily developing individual should pass from infancy to late adulthood. Because this research focuses on 5th & 6th class students, it is Erikson's 4th stage "*Industry V Inferiority*" which must be emphasised (Mooney, 2000). This stage is also quite similar to Freud's stage of latency.

Erikson's Stage Theory in its Final Version			
Age	*Conflict*	*Resolution or "Virtue"*	*Culmination in old age*
Infancy (0-1 year)	Basic trust vs. mistrust	Hope	Appreciation of interdependence and relatedness
Early childhood (1-3 years)	Autonomy vs. shame	Will	Acceptance of the cycle of life, from integration to disintegration
Play age (3-6 years)	Initiative vs. guilt	Purpose	Humor; empathy; resilience
School age (6-12 years)	Industry vs. Inferiority	Competence	Humility; acceptance of the course of one's life and unfulfilled hopes
Adolescence (12-19 years)	Identity vs. Confusion	Fidelity	Sense of complexity of life; merging of sensory, logical and aesthetic perception
Early adulthood (20-25 years)	Intimacy vs. Isolation	Love	Sense of the complexity of relationships; value of tenderness and loving freely
Adulthood (26-64 years)	Generativity vs. stagnation	Care	Caritas, caring for others, and agape, empathy and concern
Old age (65-death)	Integrity vs. Despair	Wisdom	Existential identity; a sense of integrity strong enough to withstand physical disintegration

(Dewey, 2007)

At this stage children become more aware of themselves as individuals and work hard to do the right thing and be responsible. They also form moral values and begin to recognise cultural differences. Often at this stage children begin to illustrate their independence and may become disobedient and rebellious (Nevid, 2009). A child at this stage learns a *"sense of industry"* and learns to win acknowledgment and recognition by creating things (Erikson, 1963:250). Erikson identifies these years as being critical for the development of self-confidence and at this time a child is in danger of developing a sense of inadequacy or inferiority if he is *"discouraged from identification"* (Welchman, 2000, Erikson, 1963). Erikson's theory emphasises the need for this study to analyse the perspectives of children by gaining an understanding of their current stage of development. In addition, it demonstrates the need for this study to analyse the perspectives of children at a specific age group due to the changing stages of development depending on age.

2.4 Research Approach:

2.4.1 Data Collections methods:

Since this research was conducted as part of the community academic research link (CARL) initiative, it was imperative that the insight of the agency involved was consulted. *"Togher link"* up facilitator Kieran O'Connell, the CARL facilitator, the research tutor and the research student all discussed the research question, research method, data collection and data analysis. After much discussion, it was agreed that the existing raw data collected by *"Togher Link Up"* facilitator should be used in order to determine what this data was telling the agency.

2.4.2 Sample Selection

Sampling is simple the process of gathering a *"small group of research participants or subset from which a degree of generalisation can be made"* (Carey, 2009:41). When considering a sample, ideally it should reflect the wider population of that group (Carey, 2009 & Punch, 2005). Due to the limited nature of the study and the increasing volume of raw data, it was decided that a sample group would need to be extracted from the data in order to ensure completion. Although the raw data contained questionnaires from both primary and secondary school groups, the sample group chosen consisted of 5th and 6th class students from primary schools who had participated in the programme within the last 2-3 years. The sample group was compiled of children from different schools, genders and were approximately between the ages of 11-12. As previously discussed in Erikson's theory, this age is very important for building self-confidence and esteem which makes this age group for a very interesting sample group. This method of sampling is titled *"convenient sampling"* as the sample is utilised due to convenience of access to the particular group (Carey, 2009:41).

2.4.3 Collection Methods

This research heavily depended on pre-existing primary data which was collected by the programme facilitator following each initial session in the primary schools drug awareness programme conducted over approximately 3 years. This data was gathered though the use a

"letter box" system where the young people could anonymously ask any questions by placing them in the letterbox provided at the top of the classroom at the end of the first session. Paper was provided and each child had the opportunity to write a question and place it in the letterbox anonymously. This process ensured that each young person could ask a question while remaining completely anonymous. This data is therefore focused on what the children identified as being their key questions, issues and themes.

2.5 Analysis of data:

The data was analysed by using a grounded theory approach to identify key themes throughout the data. The researcher then utilised scientific method to perform a quantitative analysis of the data followed by an analysis of emerging themes through an interpretivist and constructivist lens in conjunction with Erikson's developmental theory. As previously stated a scientific method was utilised in order to grant the researcher a logical method to analyse and interpret the data. This process was necessary in order to gain a better understanding of the questions asked from the perspectives of the children involved, by acknowledging their developmental stage.

It was necessary to firstly assess and catalogue the data in preparation for analysis. Following this, the researcher coded the data accordingly and identified re-emerging themes and subjects throughout. Coding commenced with types of substances, then themes of questions. In regards to questions regarding illegal drugs, it was necessary to code different types e.g. cocaine, hash and heroin. The process of analysing the themes began with firstly a quantitative analysis of the themes throughout the data. Therefore it was the quantity of questions asked regarding a theme which identified it as a theme and not a qualitative review of it. This allowed the researcher to assess what themes and substances the children had placed most emphasis on. Themes such as effects of drugs, peer pressure and fatalities emerged as themes as well as many others. Following this the researcher provided a qualitative analysis of the key themes by using a process of constant comparison between both the themes and previous studies.

2.5.1 Desk research:

Prior to the commencement of this research, the researcher conducted desktop research by reading journals, books, previous research, informative brochures and internet sources regarding this topic. A literature review about young people's perspectives of drugs and drug

education was then conducted. Following analysis this process was repeated and amendments and additional information was added to the literature review. This was necessary in order to identify any commonalities between this research and previous research conducted and to allow for a comparison of themes which emerged. This process offered the researcher a more informed stance on the subject and allowed them to develop insight and knowledge into the topic.

2.6 Ethical Considerations:

According to O'Leary (2004) certain ethical considerations need to be considered prior to the commencement of any research.

- **The need for informed consent from the participants.**

Due to the fact that the data was collected prior to the researcher's involvement, it was not possible to obtain written consent from the participant. However the facilitator involved who essentially gathered this raw data has verified that the schools involved are aware of this research. Additionally, prior to commencement of each educational session, all parents whose children were involved were delivered notice regarding the programme, its commencement and its subject matter. It is necessary to include that the children's informed consent was unobtainable during the gathering of this research as it was unclear at that point that their questions would be utilised for research. Subsequently it was impossible to obtain consent due to the anonymity of the process. Ideally, if the researcher had been involved from the beginning, informed consent would have been obtained prior to data collection.

- **Ensuring no harm comes to the participant**

In social research this generally refers psychological or emotional harm. Although the data was collected prior to the researcher's involvement, the researcher has been informed that it was collected during drug educational programmes which were age appropriately tailored for children of that age. The children were not put in any pressure to answer questions or ask questions if they did not wish to do so.

- **Ensuring confidentiality and anonymity**

No names of individuals or schools have been mentioned throughout the study. The identity and confidentiality of these participants have been respected and withheld throughout the entire research process. However, it may be possible for certain schools to be identified, because their geographical location is within the south side of Cork city.

2.7 Limitations to Study:

Although this research was thoroughly prepared, there are nonetheless a number of limitations which need to be address:

- Due to time constraints not all of the raw data was utilised, which may limit the researches understanding of young people's perspectives of drugs, alcohol and tobacco.

- As the data was previously collected, it was not sought with a particular question in mind, and therefore the children were not asked to give their perspectives on drugs, alcohol and tobacco. They merely responded to a request for any questions they may have. This study is therefore a mere interpretation of their reasons for asking particular questions.

- This study essentially, only analyses the perspectives of children who have undertook the *"Togher Link Up"* programme and not the children who have not participated.

- Another limitation derived from the collection of the data, was the failure of any consideration regarding the young people's literary skills and whether this may hinder a young person from asking a desired question.

- The data analysis was conducted by one analyst and is therefore open to a certain degree of subjectivity. This subjectivity can be eliminated in larger studies where are a number of researchers and analysts are employed.

2.8 Conclusion

Both qualitative and quantitative research was carried on primary data using a grounded theory approach to identify theories within that data. An interpretive and constructive perspective was used in conjunction with Erikson's stage of development to inform the conduct of this research. Both ethical considerations and the limitations of the study were also discussed.

Chapter 3: Literature Review

3.1 Introduction

According to Mcintosh, MacDonald and McKeganey (2003), an increasing number of pre teenage children are beginning to experiment with illegal drugs. In terms of drugs, alcohol and tobacco, pre teenagers are an enormously under researched group. Research regarding drugs usually focus on older teenage groups and on the actual usage of the substance but few study the perceptions of those presumed too young to experiment with substances. Due to the decrease in age of first usage, there is a need for an increased awareness of this age group, especially in terms of developing drug educational programmes which are age appropriate.

In order to get a broad view of this topic as a whole, this chapter will first discuss the definition of drugs for the purposes of this literary review, followed by the current stats regarding drugs use within Ireland. It will also discuss the reduction in the age of first usage internationally. It will then discuss the social construct of drugs, normalisation and risk taking behaviour amongst young people, followed by theories regarding children's developmental stages. Various research regarding drugs, alcohol and tobacco and the perspectives of young people concerning these substances will be examined and finally it will take a look at drug education, its importance and presence in Ireland.

3.2 Definition

The term "drugs" for the purpose of this literary review is determined as illegal drugs only and tobacco and alcohol will be referred to separately. The term substance abuse will be defined by Corrigan (1994:2).

"the use of any drug, legal or illegal, which damages some aspect of the user's life -whether it is their mental or physical health, their relationship with their family, friends or society in general or their vocational functioning as students or as workers both inside and outside the home ".

The term child will be used to refer to individuals under the age of 13 years.

3.3 Statistics

It is quite unclear as to exactly how many people in Ireland today use drugs because of the illegal nature of the past time. According to Irishhealth.com (2013) there are 95,000 alcohol dependants and 840,000 nicotine dependents in Ireland today. The European monitoring centre for drugs and drug addiction (EMCDDA) carried out its first national survey on drug use among Ireland's general population in 2002-2003. The survey was carried out amongst 15-64 year olds and was repeated in 2006-2007 and in 2010-2011. It reported an increase in those who reported the use of illegal drugs during their lifetime from 24 % in 2006 to 27.2% in 2010. (EMCDDA, 2012). In the same survey 28% of young people reported 16 as their age of illegal drug first usage while 35% reported being less than 16 years of age when they first took drugs. A national survey carried out as part of European research found that among 16 year olds 37 per cent had used cannabis and16 per cent had used an illegal substance other than cannabis (National Youth Council of Ireland, 1998).

3.4 Social Construct/Normalisation/Risk Taking

Hadley & Stockdale (1996:233) state that drugs have been present in this world for nearly as long as man has and are in fact "*socially, historically and culturally located phenomena*"

The social construction of drugs implies that the public view of drugs is not a natural occurrence but rather a perception generated by the nature of society i.e. "*something is a social problem when relevant actors define it to be one*" (Dingelstad et al, 1996). It is argued that drug use is a social construct because of "*individual and group subjective interpretations of drug use, the physical, interpersonal and social settings in which drug use occurs and wider structural and environmental factors" (*Mayock, 2001:1).

Hadley & Stockdale (1996) & Manning (2007) state that there has been a normalisation of recreational drug use, with young people experimenting with a wider range of drugs at a younger age. Normalisation looks at the social and cultural elements of youth intoxication through an everyday life perspective (Blackman, 2009). According to Parker (1997:7) rates of drug use amongst mid adolescents has risen and some reports suggest that children as young as 11-13 are experimenting with drugs for the first time. In one study titled "the North West Study" carried out in the United Kingdom, most of the young people had been in situations where they were offered drugs. These statistics are common facets of the "normalisation" of recreational drug use in society. In fact evidence suggests that risk taking behaviour is a

common behaviour amongst young people in comparison to older adults and younger children. The three foremost reasons for mortality amongst young people are; accidental death, homicide and suicide which are all associated with alcohol use (Bullock & Room, 2006). Gardiner (1993) reports that harmful patterns of behaviour consisting of drugs, alcohol and tobacco usually occur during adolescence.

3.5 Development

In order to understand young people's perspectives of drugs, alcohol and tobacco, it is firstly necessary to understand their current development stage and cognition. Erikson's stages of development have been used as the primary theoretical perspective because of its detailed account of a child's development from the ages of 11-12. However there are also additional theories regarding development which may be relevant in order to interpret children's perspectives of drugs.

3.5.1 Piagets Stages of Development

Piagets Stages of development suggest that children between the ages of 7-11 develop operational thinking which is essentially an individual's ability to hold one idea in their head while considering another one or dealing with a problem. It is thought that is of great benefit to a child as they are no longer *"victims of apparent change"* (Sutherland, 1992:16). This may help those facilitating drug, alcohol and tobacco educational programmes to gain an understanding of how children learn and how to best accommodate this learning.

3.5.2 Bronfrenbrenner Ecological Theory:
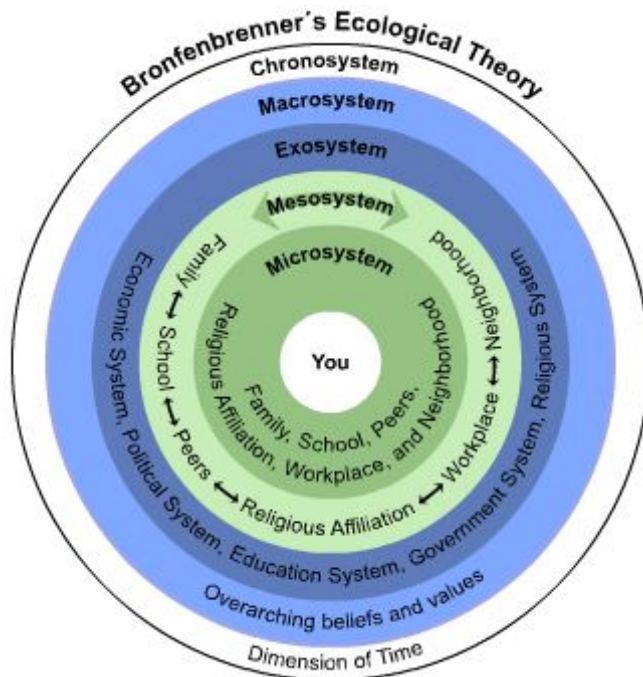
(Impact of Special needs, 2012)

Bronfrenbrenners (1979) ecological theory is a variation of Talcott Parsons social systems theory. It suggests that a child develops through the interaction with people, objects and symbols within its environment. The most important environment is the microsystem which is the system which it comes into contact with most often. A child's development will essentially be determined by what they experience in these environments such as appropriate ways to behave etc. This theory may be utilised to understand the rationale for children's perspectives of phenomena such as drugs, alcohol and tobacco and to gain an appreciation of the effect children's environments have on their understanding of the world.

3.6 Drugs

 Worldwide, there are concerns regarding young people's use of illicit drugs such as cannabis, inhalants, tranquilisers, stimulants, cocaine and heroin. Similarly young people's drug use in Ireland has attracted attention over the past 20 years. Additionally, research

suggests that problem drug use appears to cluster in areas affected by poverty and deprivation and that young people living in these areas are particularly at risk (Mayock, 2001).

3.7 Young Peoples Perspectives of Drugs

As mentioned previously, there does not appear to be a considerable amount of research regarding young people's perspectives on drug culture in Ireland specifically. However, Hyde et al (2009) conducted a piece of research with children of a mean age of 11.5. This research found that while this age group had a high level of exposure to drug culture, they had little direct experience with being offered drugs and had a vague or dramatic knowledge of the effects or outcomes of drug use. In this study a small number had experimented with cannabis, however a majority of the children had a negative view of drugs. The findings of this study highlighted themes such as children's knowledge of drug names and children's knowledge and understanding of the effects of drugs. Under these themes it emerged that a majority children questioned could name at least 2 types of drugs, with heroin being the most mentioned followed by marijuana. Marijuana appeared to obtain a level of acceptance amongst the children. A majority of the participants had an awareness of some of the effects of drug use, with death being the most commonly mentioned effect of drug use.

In a paper entitled *"Children's Voices: Experiences and Perceptions of European Children on Drug and Alcohol abuse"* (2010), the EMCDDA attempted to give a voice to children that was based on qualitative research which was carried out in 14 different European countries. This paper referenced the statistics that 1.6 million (13%) of respondents were 13 years or younger during their first experience of being drunk. These children illustrated how social status, sport sponsorship, older adults, parents influence and own problems have influenced their drinking habits. One such young person stated

"Don't judge us until you consider your own behaviours….. we young people don't ask adults how often they get stoned or drink" (EMCDDA, 2010:19)

Other issues emerged from this paper in relation to drugs use such as peer pressure, access to drugs, drugs emerging in pubs and clubs and its use to deal with life pressures. An Irish young person commented that "*If I was angry, worried, upset, stressed, the first thing I would do is cut myself- that was the easiest option. Then I replaced it by getting stoned because I calm down*" (EMCDDA, 2010:25). In terms of abstinence of drug use, children highlighted

how their parents potential reactions to their use of drugs, was enough to make them refrain from using drugs. One 14 year old boy said "*They would be angry but more disappointed*".

Research carried out by McIntosh, MacDonald and McKeganey (2003:331) regarding pre teenage children in Glasgow; found that the participant's knowledge of illegal drugs was *"limited, vague and often erroneous"*. A quarter of its participants viewed all drugs as bad and the remaining participants appeared to be able to differentiate between them in different ways. As in Hyde et al (2009) study, participants viewed cannabis as being more acceptable and less harmful than other drugs.

Further research carried out by McIntosh, MacDonald and McKeganey (2005) in Glasgow and Newcastle with pre-teenage participants found that children tend to abstain from drug use due to lack of interest, fear of the effects it may have and a fear that drug use would negatively influence others areas of their life such as family and sport. As in the EMCDDA (2010) report, children reported that their parents anticipated reaction and their parents values influence their choice to abstain from using drugs. This report acknowledged the importance of drug prevention education but placed more emphasis on the significance of parents and their role in preventing their children from using drugs. This study further acknowledged the participants differing views of cannabis in comparison to other drugs, in that cannabis was viewed as less harmful and more acceptable.

In Hadley & Stockdale's (1996) study on children between the ages of 5-11 in outer London found that while the children had an understanding of good and bad drugs and methods of use, they had little understanding of how or why drugs were dangerous. The children in this study represented drugs in a fearful manner and had a preoccupation with death or dying from drug use. Overall the children presented as wanting to know more on the subject.

Cole's (2000) study on pupil's views of drugs and drugs education when they move from primary to secondary education in Sheffield, found that some children did not understand the message regarding drugs alcohol and tobacco as clearly as would have been expected. For an example some children did not understand that alcohol was dangerous. This study also found that the children tended to exaggerate the dangers of finding illegal drugs in secondary school and thought that someone would try and force them to take them. Overall the children interviewed approved of their drug education which is a direct contradiction of how secondary schools viewed their drug education.

3.8 Perspectives of Alcohol

Children are introduced to alcohol at a very young age due to parent's usage and commercials on television. Images of alcohol are everywhere and it is often depicted that those who drink alcohol have more fun. It is present at most sporting events and often teams are sponsored by alcohol companies. Therefore children form their opinions of alcohol from the early age of four or five. Studies have shown that on average consumption of alcohol is shown twice per hour on day time shows and three times in an average evening program (DeHaan, 1998:1)

According to Bullock & Room (2006) the average age of those who have consumed at least one glass of wine, beer or other form of alcohol in the developed world is 13 years of age. Therefore introduction to alcohol comes at a time when a child is preparing for their initiation into adulthood. Levingston & Melrose (2009) suggest that young people often view drinking as a rite of passage, a rebellion to the restrictions placed on them by adults. The engagement of an accepted adult pastime which is accepted by most western societies validates the young person's aspiration to join the adult ranks.

In Ireland four out of five adults consume alcohol and this statistic has not changed in over 10 years. Ireland has one of the lowest rates of non-drinkers in Europe. In addition to this 10% of those drinkers report drinking in excess of the recommended weekly limit. This is alarming considering that the harmful use of alcohol is the third largest preventable cause of death in the world (Morgan et al, 2009). According to UNICEF Ireland (2011) following a recent survey of Irish Young people, 25% reported to have been 16 when they first got drunk. While 15% reported having got drunk between the ages of 11-13.

Children's Voices (EMCDDA, 2010) express how the increase in binge drinking and European Union is of huge concern due to the health and social risk associated with this type of behaviour such as intoxication, risk taking behaviour, early sexual activity, violence and accidents. Children's views about alcohol are shaped by a number of factors including parental use and ethics and advertising. In the study one 16 year old boy stated *"that's what my dad drinks so I drink it"*. This is in direct contradiction to the same study's findings concerning children's abstinence of drug use because of their parents.

The department of health research entitled drinking and smoking among young people in Ireland (1996) found that 63% of second level students aged 12-18 nationally had consumed alcohol and 42 % of those are current drinker i.e. they had at least one alcoholic drink in the

past number of months. It also emerged that 40% of all students indicated that they had been drunk at least once in the last 12 months. A link was also found to exist between young people's drinking and the drinking habits of their parents, with children of non-drinkers much less likely to drink.

Bullock & Room (2006:126) discuss how drinking patterns differ from country to country and suggest that drinking patterns are determined by *"the extent to which consumption is concentrated in heavy drinking occasions"*.

3.9 Perspectives of Tobacco

It is reported that one in three Irish adults still smoke and those who do smoke, smoke more than the EU average (Pope, 2012) In addition to this startling information, Ireland has the youngest smokers in the EU and those who do smoke will take up smoking at a much younger age than their European counterparts (Pope, 2012). On average drug, alcohol and tobacco education is delivered between the ages of 11-15 but it is found that initiation into smoking often occurs much earlier than this which would suggest a need for earlier tobacco education (Hurry, Lloyd & McGurk, 2000).

Research conducted by the Department of Health found that 29% of second level students nationally are current smokers i.e. smoked at least 1-2 cigarettes in the last month while 16% are regular smokers i.e. smoked at least 1-2 cigarettes daily in the last month. This study also discovered a link between young people's smoking status and that of their best friend i.e. if their friend smoked so did they and vice versa. It was found that young people who smoke are more likely to come from a household where one other person smokes e.g. parent, sibling. Lastly approximately one quarter of the smokers was unsure as to whether smoking would shorten their lives.

In Cole's (2000) study on drugs education from primary to secondary school, it was found that very few children smoke between the ages of 11-12, however some had mentioned experimenting with smoking while others spoke of smoking opportunistically. The participants gave their reasons for not smoking as "it's bad for your health" which illustrates an understanding of the effects tobacco has on your body.

3.10 Drug Education

"*There is a social and political desire to discourage children from smoking cigarettes, abusing alcohol and taking illegal drugs*" (Hurry, Lloyd & McGurk, 2000:183). According to the World health Organisation (1993) the ultimate goal of "*prevention…in drug related problems is….to ensure that the members of a given population do not use drugs at all*". However this goal appears overly ambitious, given the drug-orientated society which young people live in today.

Drug prevention is one the central provisions in Ireland's interim National Drugs Strategy (2009-16) Substance abuse education is a vital part of any countries drug prevention programme as young people need to be made aware of the nature, effects and problems associated with substance misuse (Carr, 1974).

Drug education for children began in Irish schools in the mid 1990's. At this time there were two programmes initiated. The first was called "walk tall" and was aimed at primary school students whilst the second "On my own two feet" was implemented in secondary schools. (Irishhealth.com, 2001).

At present it appears that Irish school children are particularly critical of Ireland's drugs education and research carried out by NUI Galway have found a number of limitations with the educational SPHE drugs awareness programme due to teachers difficulties with implementation, no engagement with parents and students curriculum overload. (O' Keefe, 2009)

Having considered the alarming increased use of drugs, their dangers and the age of first usage declining, it is important for Irish children to be exposed to effective, useful and efficient drug education. As previously mentioned drug education has been available in Ireland since the 1990s' when two programmes were established. One programme was aimed at primary school students while a second was aimed towards secondary school students. There is very little information available regarding the children's views of these programmes or of any input by the children as to how these programmes should be run. The National drugs strategy (NDS) 2009-2016 has seriously questioned the effectiveness of the country's main drugs education programme for schools especially at second level. It is reported that the effectiveness was questioned not only by the NDS but also by school goers as part of an

external evaluation by NUI Galway. The NDS aims to improve the SPHE in schools and to develop a whole school approach to substance use but still none of these recommendations were taken from the children themselves.

Hadley & Stockdale (1996) suggest that because of the increased drug use in pre-adolescent teens, there needs to be a more age appropriate drug education which is informed by children's construction of drugs. Constructivist education programmes are mostly based on the participants existing knowledge and beliefs.

Currently drug education is working at a disadvantage because of the gaps in information regarding the perceptions of pre teenage youths to drugs, alcohol and tobacco. In order to have an adequate effect on this age group, drug educators need to have an understanding of the ways which children perceive and understand drugs (McIntosh, MacDonald & McKeganey, 2003). Hadley & Stockdale (1996) discuss how drug education has typically been regarded as a sporadic educational class rather than an integrated part a child's curriculum which needs to be altered in order to prevent the escalating rates of children experimenting with drugs. According to Clutterbuck (2008) children as young as 4 should be taught how harmful drug misuse is followed by the dangers of needles at 7 and the categories of drugs etc. at 11.

3.11 Conclusion

The statistics of young people using drugs continues to rise and the age of first usage continues to decline. This chapter illustrates not only the perspectives of young people regarding alcohol, tobacco and drugs but also the need for effective age appropriate drug education in order to combat these. This study aims to identify children's perspectives of drugs, alcohol and tobacco so that *"Togher Link Up"* can provide such a service.

Chapter 4: Findings and Analysis

4.1 Introduction

The information which was calculated, categorised and analysed will be presented in this chapter. Through the analysis of these questions, many interesting themes emerged. Overall there were 504 questions within the sample group. This chapter will provide a profile of the south side of Cork city. It will then present the findings in a quantitative manner, followed by a qualitative analysis of the questions and emerging themes through the use of literature. For the purposes of this chapter the term drugs will be used to define illegal drugs and the terms alcohol and tobacco will be used separately.
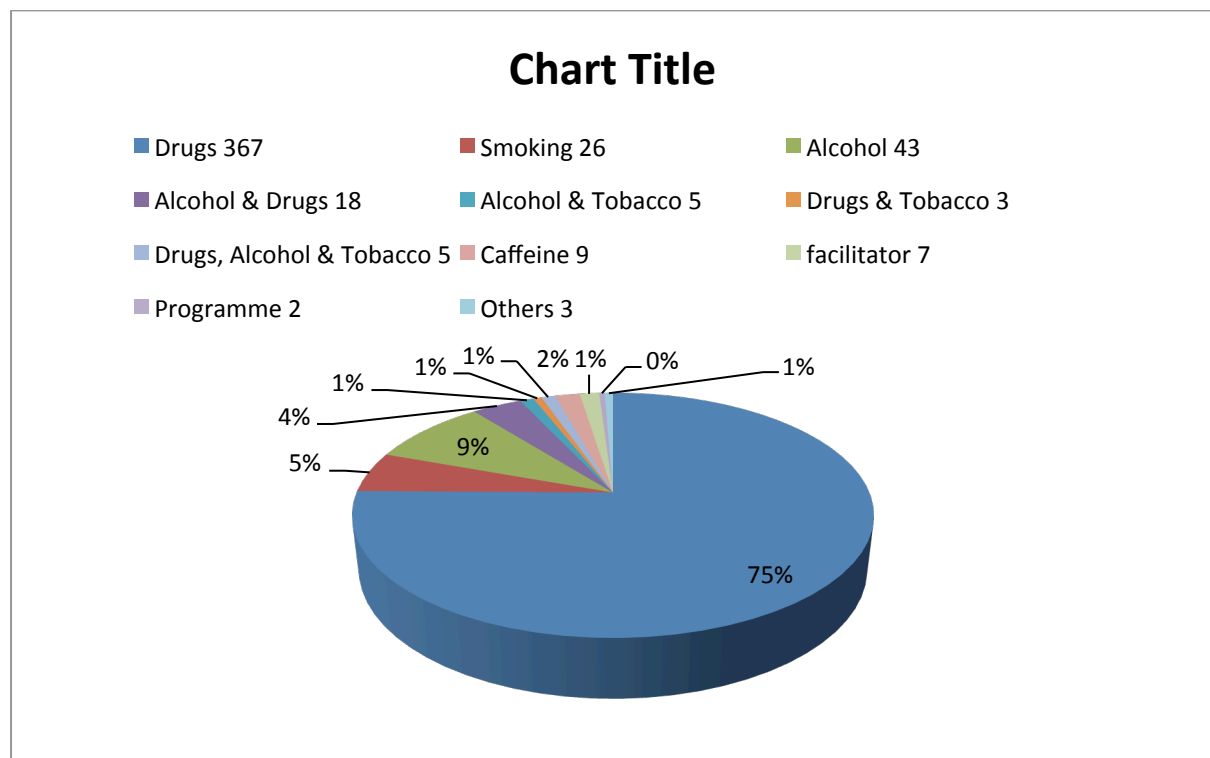
4.2 Profile of the south of Cork City

A profile of the south side of Cork city is needed in order to contextualise the study and to gain an understanding of the systems in which these children have grown up in.

Although the south side of Cork city is considered to be more affluent than other areas, there are some areas which experience high levels of disadvantage and deprivation in the areas of *"unemployment rates, lone parenthood, dependence on social welfare, age dependency rates, local authority housing and educational attainment"*. There are high levels of early school leaving and approximately 50% of the population in some area's left school at or before the age of 15. Less than half of those in those area's completing their second level education. At the time this profile was established in 2002 the unemployment rate for some of the areas was at 25 % and population decline was at -29.9% (Haaze, 2002). A number of areas are currently RAPID area's which means that it is officially regarded as an area of deprivation which the government have vowed to revitalise by planning, investing and developing (Cork City Council, 2012).

4.3 Findings

Drugs:

Out of the 504 questions asked, 367 of them were exclusively concerning drugs and drug use. This would appear to suggest that the children involved were preoccupied with the drug element of the programme rather than the tobacco and alcohol element

Chart Title

- ■ Drugs 367
- ■ Smoking 26
- ■ Alcohol 43
- ■ Alcohol & Drugs 18
- ■ Alcohol & Tobacco 5
- ■ Drugs & Tobacco 3
- ■ Drugs, Alcohol & Tobacco 5
- ■ Caffeine 9
- ■ facilitator 7
- ■ Programme 2
- ■ Others 3

Tobacco:

26 of the questions asked were solely about smoking. There were also 3 regarding drugs and tobacco and 5 about alcohol and tobacco.

Alcohol:

There were 43 questions about alcohol alone. 18 questions about alcohol & drugs and 5 about alcohol and tobacco.

Caffeine

There were 9 questions about caffeine mainly concerning whether caffeine was a drug and was it addictive.

Others

Other substances arose in 3 questions concerning chocolate, energy drinks and coca cola.

Facilitator

There were 7 questions about the facilitator and his job. Most of these were concerned as to why the facilitator did this job and was it scary.

Programme

There were 2 questions about the programme itself.

Miscellaneous:

There were 18 miscellaneous questions. However 10 of these questions were about bullying, peer pressure, mocking and fear. 4.4 Drugs

4.4 Quantitative Analysis of Drugs

397 questions were asked about drugs, this number also includes questions that included drugs and other substances. Of the 397 questions, 282 questions were about a non-specific type of drug e.g. *"What is a drug"*. However 115 of the questions mentioned a specific drug and some mentioned 2 or 3 within the same question. The following is a graph consisting of the number of questions asked about each substance. As can be seen, hash/marijuana/weed and cannabis questions appear to be the most common.
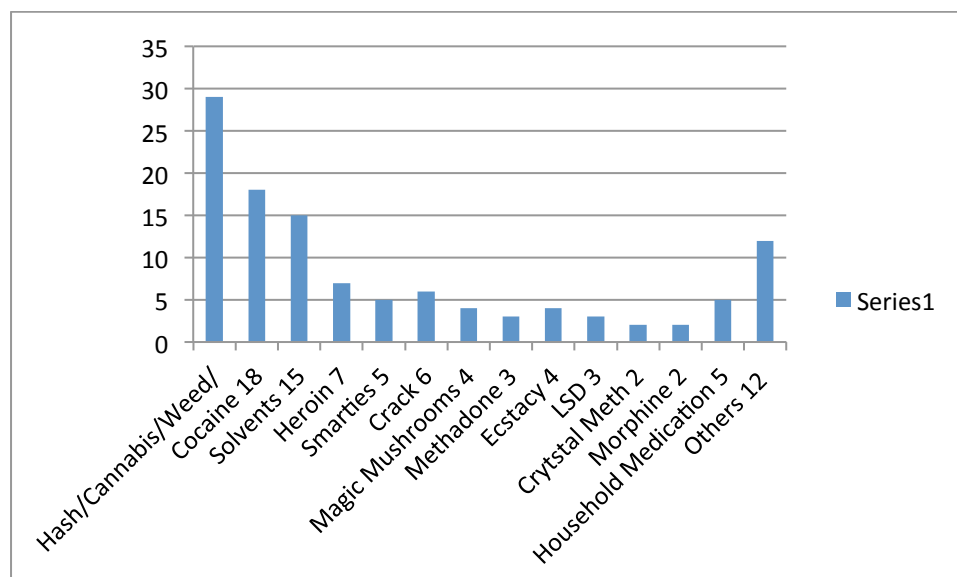
Questions about drugs appeared to divide into certain themes. Of the 397 questions regarding drugs, 259 of the questions appeared to fit into 1 out of 8 themes. Those were:

- Fear of taking drugs/What to do when offered them
- Death or being killed by a drug
- Questions about facilitator and his use of drugs
- Enquiries about "Smarties" i.e. prescription tablets.
- Effects of Drugs
- Worst of most dangerous drug to take
- Marijuana
- Different Types of Drugs
- Solvents
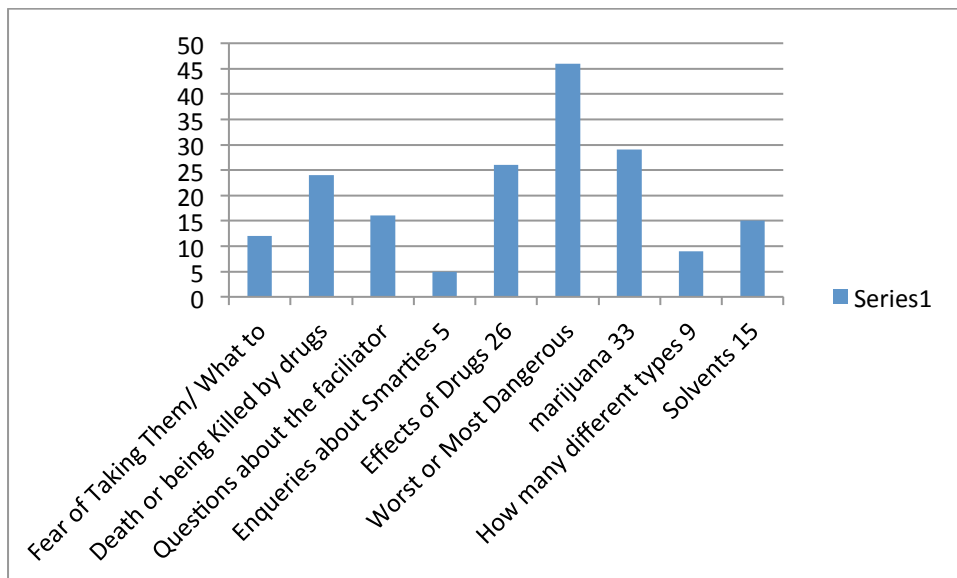
4.5 Tobacco

There were 39 questions which mentioned tobacco use overall. These were divided into 6 themes.
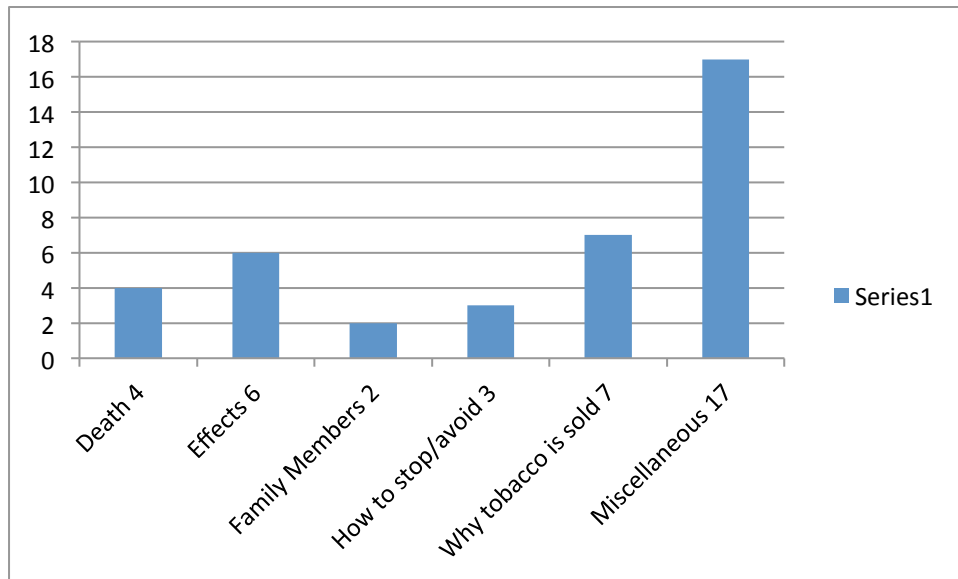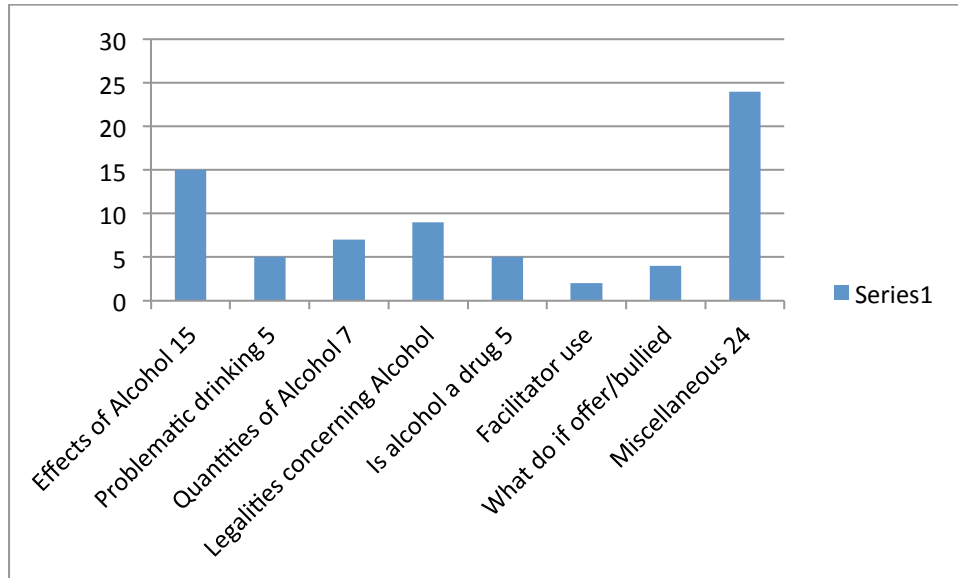
4.6 Alcohol

There were 71 questions concerning alcohol overall. These could be divided into 8 themes.

Analysis of Themes

4.7 The prominence of drug Questions

Questions about drugs equated for approximately 75% of the overall questions asked. It would appear that the children were increasingly inquisitive about drugs in comparison to alcohol and tobacco. Lloyd (1996) suggests that due to the public's perceptions and fear of illegal drugs and their general acceptance of alcohol use, there has been a demotion on the emphasis of alcohol education in drug education programmes. This may explain the increased number of drugs related questions in comparison to alcohol and tobacco. Its plausible to suggest that the over familiarity and the general availability of substances like alcohol and tobacco may not be considered as interesting to the children as illegal drugs because of the criminality, secretive nature to its use and dramatic association attributed to it . This surge of questions may also illustrate a particular lack of knowledge in regards to illegal drugs.

4.51 Drug themed questions:

Effects of drugs amounted to 26 questions overall. The word "effect" was mostly used but some used words like "painful" "addiction" or "hallucinate" were also used in conjunction.

Questions about the effects of drugs included;

"What are the effects of drugs?"
"What effect do crystal meth's have on people?"
"How dangerous are drugs?"
"How dangerous is heroin?"

This would suggest that the children are unsure and curious as to how drugs are actually harmful. This was also found in Hadley & Stockdale (1996) where it was found that although the children could recognise that drug use was dangerous, they were unsure as to how and why. It was also found that the children were fearful of the effects of drugs and wanted to know more about this. In McIntosh, MacDonald and McKeganey (2003) that the children's knowledge of illegal drugs was *"limited, vague and even erroneous"*.

From these 397 questions, 46 concerned questions about the **worst drug to take**. This question was asked in a number of different manners including substitute for the word worst with words like "dangerous" "addictive" "destructive" "harmful" and "lethal". Examples of these questions are as follows:

"Is heroin the worst drug?"

"What are the worst drugs you can take?"

"How dangerous are drugs?"

"What is the most lethal drug?"

This links in with the questions regarding the effects of drugs and the children's lack of understanding regarding why drugs are dangerous and what they do to your body.

12 of the questions centred on the issue of **a fear of drug**s and **what to do if they were offered a drug**. Fear of drugs was a common theme and reason given in a study carried out by McIntosh, MacDonald and McKegney (2005) for refraining from taking drugs. Specifically it was the fear of the immediate effects of the substance, fear of addiction and fear of the physical and psychologically effects of the drug.

"If you get offered drugs by my friend should I walk away from them and stop being friends with them?"

"If your best friend offers you drugs, do you tell A) Your Parents B) Their parents C) The police?"

Many referred to secondary school or peer pressure when questioning this.

"Will I be offered drugs in secondary school?"

"How can I say no to drugs or alcohol in secondary school?"

"If someone forced you into taking drugs, what would you do?"

This suggests a certain level of fear equating from the entrance to secondary school level and the possibility of being offered drugs, alcohol or tobacco. This was evident in Cole's (2000) study of primary school children which found that they exaggerated the dangers of finding

illegal drugs in secondary school and feared that someone would force them to take drugs when they entered secondary school level.

Death or being killed by drugs was included in 24 questions. Questions such as:

"If I take ecstasy will I die?"

"When you snort a drug can it interfere with your breathing and could you stop breathing and die from it?"

"Can you die from methadone?"

"What drug kills you quickest?"
"Can a small bit of cocaine kill you if it is a bad bit?"

Similarly in McIntosh, MacDonald and McKeganey (2005:247) it was found that the children were worried about the possibility of death if they took drugs and how this might occur. In Hadley & Stockdale (1996) found that children were preoccupied with the death and dying in relation to drugs and this was linked to the *"big drama media images of drug use"*. Similar findings were also present in Hyde et al (2009) study of young people's perceptions of drugs.

An increasing number of the questions concerned **the facilitator** and his experience with drugs. Many children wanted to know about the facilitators experience with drugs.

"Did you ever take drugs like cocaine, tobacco, weed or crack?"

"Did you ever taste a drug?"

"Do you know anybody who take drugs and suffer from it?"

Compiled with the 7 general questions about the facilitator illustrates the children's immense curiosity about the facilitator and his job. At least four questions queried why the facilitator did this job

"Why he wanted to learn about drug?"

"Do you find your job scary?"

In Cole (2000) the participants expressed the desire to receive drug education from a drug expert and felt that the more experience and training a facilitator has, the more details he will have to explain drugs etc. because he has seen it first-hand. It was also suggested that it would be useful for someone who had taken drugs and who had stopped to talk to them. This may be the rationale for the numbers of questions concerning the facilitator.

Marijuana (29), **Solvents** (15) and **"smarties"** (5) became themes of their own as there were many questions each.

EMCDDA (2012) found in their 2009/2010 survey that 15% of 15 and half year olds in Ireland had used cannabis during their lifetime. The common use of marijuana may explain the increased level of questions for this particular drug. McIntosh, MacDonald and McKeganey (2003:335) found that the children expressed a *"wide range of knowledge and attitudes towards cannabis"* in comparison with any other drug.

It appears that the long term debate about the illegality of marijuana use may have influenced the children in this study. In this debate many argue that the alleged hazards of marijuana use are exaggerated and that the illegality of it is a "social hazard" in itself (Dingelstad et al, 1996: 1839). This can be viewed in some of the children's questions such as
 "Are drugs a good thing, like hash?"

 "Why should you get into trouble with the Garda with having weed when it calms people down and you won't do anything stupid with it and it's good for hangovers?"

 "How come when you smoke marijuana in Ireland you go to jail but not in Amsterdam?"
The marijuana debate also contests that health hazards associated with marijuana use are no worse than the health hazards associated with tobacco or alcohol use (Dingelstad et al, 1996). A direct link to this view can be found in a question regarding the legality of tobacco over cocaine and hash

 "Tobacco is deadly but it's legal unlike cocaine or hash etc. Why is this?"

This was also found in McIntosh, MacDonald and McKeganey (2003) where a number of students viewed cannabis as no more harmful than cigarettes or alcohol.

In other studies concerning the perspectives of children of this age, such as Hyde et al (2009) and McIntosh, MacDonald& MCKeganey (2003) found that marijuana use was viewed differently amongst this age group and that there was an acceptance of its use and a belief that its effects were not as detrimental as other drugs.

"Smarties" are street names for prescription tablets such as Ritalin. There were six questions concerning *"smarties"* which were:

"Are Smarties colourful like the sweet (real) Smarties?"

"Do they sell smarties in a sweet box?"

"How would you know if they are real chocolate smarties instead of drug smarties?"

"What do smarties look like?"

While there is no further research on children's curiosities with this particular drug, it may be the term "smarties" which has sparked their interest due to its name also being a popular children's sweet. One question asked:

"What effects would I have if someone gave me drugs in a sweet?"

This suggests there may be a fear that drugs may be disguised as regular chocolate smarties. It also appears that the children are curious as to how they would know the difference between regular smarties and drug smarties.

Questions regarding **solvent abuse** consisted mostly of glue, tipex, markers, petrol and nail varnish. These appear to be general queries as to the nature of glue, markers, petrol and tipex use and a curiosity of its use.

"Is smelling markers a drug or smelling glue?"

"Why do they sell tipex and glue if it is dangerous?"

"Can you get high off a maker or tipex?"

Striking Questions

"If you use speed and then downers, would you go back to normal?"

"I heard LSD opens your imagination and mind, it opened Steve Jobs mind and he is the biggest technology guy ever so why do people say it is lethal? I am not sure what to believe?"

4.52 Tobacco Themed Questions

Three main themes emerged from tobacco related questions; those were death or dying from tobacco, effects of tobacco and questions about why tobacco was legal and sold in shops. There were no questions querying what to do in the event you are pressured or bullied into smoking, which arose several times in the questions concerning alcohol and tobacco.

This suggests that there is less worried about being forced to smoke than there is of being forced to drink or take drugs.

There were four questions about **dying** or being **killed** by cigarettes.

"Can people die from one cigarette a day?"

"How long would it take until you could die from tobacco?"

Effects of smoking amounted to 6 of the questions asked. There was particular emphasis on its effects of your lungs and the possibility of cancer:

"If you smoke do your lungs get smaller?"

"Does it take long for nicotine to give cancer?"

The children particularly highlighted the rationale as to why smoking was not banned and why shops sold them.

"Why do they sell tobacco if it can kill you?"

"Why don't they ban cigarettes?"

These questions compliment Cole's (2000) study which found that most children have negative views of smoking and that they have an understanding that tobacco is bad for your health.

Two references' made links between the legality of tobacco and the illegality drugs.

"Tobacco is deadly, but it's legal, unlike cocaine/hash, etc. why is this?"

"Why do shops sell fags but not drugs?"

This suggests that while the children understand that tobacco is bad for you, they also understand that drugs are bad for you and fail to understand why one is legal while the other is not.

Striking Question:
"What should I tell people I love who smoke?"

4.53 Alcohol Themed Questions

Questions concerning alcohol tended to be quite varied but the main themes which emerged were the effects of alcohol, quantities of alcohol, and legalities of alcohol, whether alcohol was drug and what to do if pressured or bullying into drinking alcohol.

In the alcohol questions there were also questions concerning the **legalities of alcohol**. These questions ranged from the outright banning of alcohol;

"Why do shops sell tobacco and alcohol?"

"If alcohol and tobacco is bad why is it legal?"

To questions about limiting the supply or raising the legal age.
"Shouldn't there be a limit about how much alcohol someone should drink or buy?"

"Do you think the government should hier the age of drinking to 20?"(sic)

Questions regarding the **effects** of alcohol were either quite broad such as;
"What happens to you when you take alcohol or drugs?"

They could also be very specific;

"Can alcohol cause cancer? Which is the worst type of cancer to get?"

"Does alcohol affect your bowl?"(sic)

"Does alcohol make you fat?"

Lloyd (1996) suggests young people often have a high level of knowledge regarding the effects of alcohol but are not aware as to the small amounts of alcohol which can cause this harm.

The children appeared to be confused as to whether alcohol was in fact classified as a **drug** as this question was asked 5 times. This was similar to Cole's (2000) study which found that it was not until after drug's education that the children involved referred to drugs as including alcohol and tobacco.

Questions concerning the **quantities of alcohol** seemed to be used to identify safe quantities of drugs or queries about how many alcoholic drugs could harm you.

"Is it bad to have a drink once a week?"

"Is it ok to drink but to a limit?"

While other questions centred on the issue of drunkenness;

"How much drink about would you have before you get pumped?"

"How much pints of any alcohol can make you drunk?"

Lloyd (1996) states that very few young people understand the idea or practice of "sensible drinking" and this was also found in Cole's (2000) study of the same age group. Sharpe and Lowe (1989) suggest that children often get drunk in order to learn how to drink sensibly.

As with the drugs questions there appeared to be a fear about being **forced, pressured or bullied i**nto taking alcohol. As previously mentioned this was not mentioned in terms of tobacco use.

"How can I say no to drugs or alcohol in secondary school?"

"What can we do if someone bullies us into taking drugs or alcohol?"

In comparison to smoking and drugs there was a noticeable decrease in the amount of questions regarding **death from alcohol**, with only one child asking if you could die from alcohol.

"How much alcohol people does alcohol kill every year?"

This would suggest an unawareness of the dangers of alcohol. Lloyd (1996) found that very few young people actually understand that alcohol cause's more deaths than drugs.

4.6 Conclusion

It is evident from these findings that the children who participate in the "*Togher Link Up*" programmes were considerable more interested and curious of the drugs aspect of the programme. Several themes emerged and their analysis attempted to decipher the perspectives of these young people regarding drugs, alcohol and tobacco. Former studies provided for explanations of the emerging themes and their meaning.

Chapter 5: Conclusion

Introduction

Although there were limitations to this study - which have been previously discussed in chapter 2 - a number of interesting themes and issues were raised during the course of its analysis. This chapter will discuss a number of the emerging themes and subsequently highlight the key recommendations generated by this study.

Discussion

During the course of this research, the researcher observed many surprising themes which emerged through analysis of the data. One such theme was the repeated questioning of the facilitator, his views and his background. It would suggest the children are increasingly curious and interested in the facilitator and his reasoning for undertaking his job. It appeared from other studies mentioned throughout the course of this study that the rationale may be that children have identified the need for external third party experienced individuals to provide this type of education. It was viewed that these individuals would have more in depth knowledge, experience, a greater understanding of what is happening and that they could be more honest with an external individual than they could with a teacher who may know them and their family quite well. This was also suggested in the quantity of miscellaneous type questions which were asked by the group. These questions centred primarily on bullying, lack of friends and peer pressure, and although they did not mention these themes in terms of substance misuse, these questions illustrated the children's comfort in asking such questions. This may have occurred due to the safe and anonymous forum which was provided to ask questions or it may be because of a trust and respect earned by the facilitator.

Another theme which was highlighted heavily in the data was how children view alcohol in comparison to how they view smoking and drugs. It would appear that the children have a more accepting view of alcohol and its use. Studies mentioned previously in the literature reviews such as children's voices (2010) found that parental attitudes to alcohol and drugs can greatly influence their children's attitudes to alcohol and drugs and as Ireland has a primarily general acceptance of alcohol, so do parents. This may be the reason as to why the children were less inquisitive regarding the fatal effects of alcohol.

As previously mentioned questions concerning drugs dominated the data, accumulating to an astonishing 75% of the questions. The curiosity concerning drugs maybe because of the dramatic nature of the stories told about them or the illegality of them. It may also arise from children's exposure to celebrity culture, their drug misuse and a number of television shows which show drug use and its criminality. Or it may be the widespread and frequent use of alcohol and tobacco in their surroundings such as home, community, gatherings and in shops and supermarkets. Also as the questions suggest there is an incredible degree of knowledge present already regarding drugs, alcohol and tobacco. The sophisticated nature to the questions and the detailed language used such as "crystal meth" suggests that the children have come into contact with some form of substance misuse whether it is from television of reality. This demonstrates the need for this type of education in children of this age group and perhaps even younger.

Recommendations

Based on the discussion above, the following are the recommendations highlighted for this study:

- Further studies into the perspectives of other age groups in order to inform practice and programme content.
- To develop an age appropriate questionnaire to distribute prior to the educational programme and afterwards in order to determine whether the programme has met the children needs.
- Importance of external facilitator to undertake these programmes and perhaps an introduction in the programme regarding peer pressure, bullying etc. to help address this issue, generate self-confidence, gain trust in the facilitator and provide a safe space to address these issues.
- Further programme development regarding alcohol and alcohol effects including fatalities.
- Further emphasis on peer pressure and bullying within the programme.
- Highlighting the influence of parental attitudes and use of substances on younger children and consider involving parents in education programme by facilitating a parents educative evening.
- Develop a standardised programme which could be distributed throughout Cork City in order to ensure a quality standardised service to all children within the Cork area.
- Due to sophisticated nature of questions asked, there may be need to assess the perspectives of the younger children in primary schools and subsequently develop an age appropriate programme for younger age groups.

Conclusion

This research proved to be quite effective in identifying the perspectives of young people in the south side of Cork City. However as the discussion element of the research illustrated there are many recommendations which could be utilised by *"Togher Link Up"*. Also because these recommendations were derived from questions asked by the service users, they may

illustrate potential gaps in the educational programme which could be filled by in order to provide a more comprehensive and client led programme.

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Appendices