

Quarter 2: Insight for Combating Drugs Partnership Board Public Involvement

October 2024



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If you would like a paper copy of this document or require it in an alternative format, please get in touch with us.

Involvement Strategy 24-25

Shining a light on what matters to people.

Luminus

Public involvement
Led by the Engagement Manager and Engagement Officer we will deliver a programme of face-to-face activity across Surrey

This will entail 4-5 events per month in community settings, groups or clinical break out spaces to speak to those most at risk of health inequalities.

We will focus the engagement to support the CDP in delivery of their objectives.

Whole system working
Developing and nurturing stakeholder and provider relationships. Stakeholder mapping, regular networking and meeting to ensure cohesive working.

Signposting
Ensure our signposting information is up to date, accessible and available to people wanting to access services. Highlight any gaps in signposting.

Comms and awareness
Using our established channels to communicate our service and call for evidence and experiences. Develop literature and marketing materials to hand out to public and share with stakeholders.

Reporting
We will produce a quarterly insight report to share with commissioners and the wider CDP. We will also use our insight to feedback to those that have shared experiences with us.

Quarterly focus to date and planned

Q1

Breaking Supply
Aim: Understanding what could be done to help stop the supply of drugs

In your experience how can we prevent the supply chain of drugs?

What support could be in place to stop you reoffending? (if applicable)

Do you know where to go for support and advice?

Q2 **Shift in demand**

Working with the subgroup to develop detailed plan.

Focus on parent carers; experience of accessing Catch 22; LGBTQ+

- Understanding where young people get their information and support from
- What communication style format works for youth
- Education
- Prevention

Q3

Q4

Alcohol and Tobacco

TBC lines of enquiry

Communications

Some examples of the literature and social media we produced to promote our service during Q2.

Luminus
Home of Healthwatch Surrey

Thank you

Everybody has a story to share - thank you for sharing yours with our engagement team.

We are Luminus, shining a light on what matters to people. Your story will help shape the feedback we share (anonymously) with providers of services and decision makers, to help them understand what they are doing well and what might need to change.

Luminus - shining a light on what matters to people

turn me over!

Signposting

For further information:

- 01483 301448
- 07592 787533 (text only)
- 07592 787533 (WhatsApp)
- info@luminus-cic.uk
- www.luminus-cic.uk/services/public-involvement-for-the-combating-drugs-partnership/

Luminus
Home of Healthwatch Surrey

Everybody has a story to share...

We are an independent service, listening to people affected by substance use.

We want to understand more about:

- The experiences of people accessing treatment and recovery services
- Why people don't access support services
- What could be improved to help people get the support they need.

Luminus - shining a light on what matters to people

turn me over!

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If you are affected by drugs or alcohol, please take 5 minutes to complete our survey:

www.smartsurvey.co.uk/s/experiences-of-recovery-services/

5 people who complete the survey will be selected at random to receive a £20 Amazon/High street voucher



Instagram posts



Ensure the voices of a range of members of the public are heard:

Our area of focus for Q2 was focused on sub-group 3: generational shift in demand. We engaged with young carers, students, individuals that identify as LGBTQ+, and families who had lived or living experience with treatment and support.

Public involvement activity in Q2

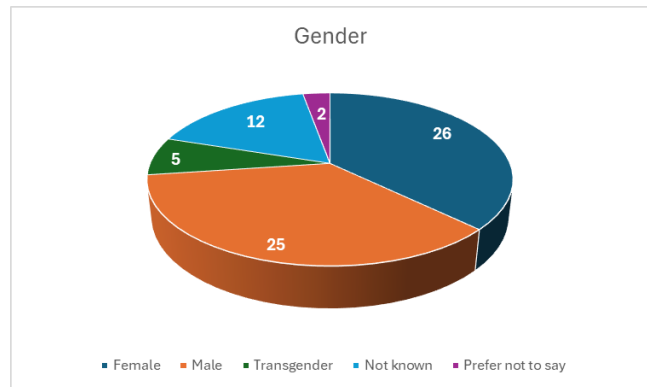
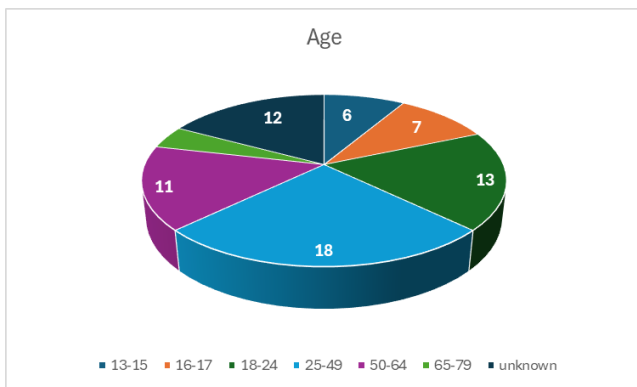
We spoke to **203** people about the service and **70** individuals shared in-depth experiences with us. During the quarter, we visited the following places:

July	Location
Twister LGBTQ+ Group	Redhill
Giving Young Carers a Voice	Online interview
Angelic Network Muslim group	Maybury, Woking
Twister LGBTQ+	Guildford
Building Belonging	Online interview
St Martin's Breakfast morning	Old Dean, Camberley
Royal Surrey County Hospital High Intensity Lead	Online interview
August	Location
Meeting Room	Leatherhead
Youth Offending & Youth Offer Service	Online interview
Giving Carers a voice	Online interview
Horley Library town centre	Horley
Amber Foundation	Ockley
September	Location
Woking young carers	Woking
East Surrey College with Catch22	Redhill
Reigate college with Catch22	Reigate
Parent carer group St Martins	Old Dean, Camberley
Surrey Thrive, Surrey Uni with Catch22	Guildford

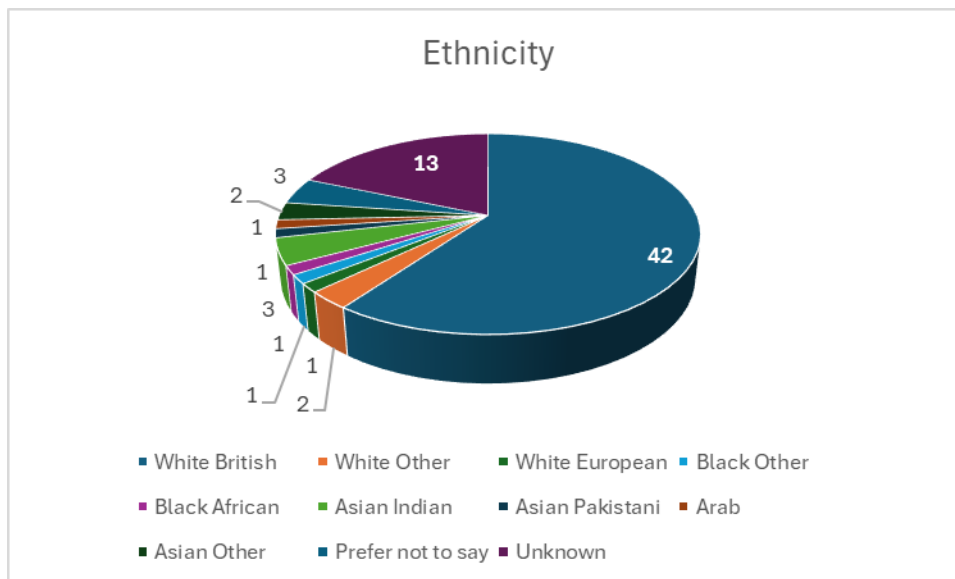


Demographics

We collected demographic information for the **70** people that shared their in-depth experiences with us. The two pie charts below show people’s gender and ethnicity.



The chart below shows the ethnicity of the people we engaged with:



Of the 70 people we spoke to this quarter, 5 were carers and 20 had a long-term condition, disability or impairment.

What we have heard in Q2

Working with Dave McClean and Heather Ryder, we developed guide questions for individuals to provide more insight into this subgroup. We also created questions that professionals could use to feedback to us. We shared these with Building Belonging and Catch22 to reach service users.

We asked people how they found out information about treatment and recovery and what their communication preferences are. We explored if they had experience of substance use

growing up with their parents / siblings / wider family and their thoughts on drugs being normalised and if criminal repercussions were relevant in their lives.

Guide Questions:

- **What do you do to look after your wellbeing?** Prompt: Do you do anything to help with mental health? Prompt: hobbies, activities what do you enjoy?
- **Where do you like to go in your spare time?** Are there any places you like to go? Examples: Park, Gym, Youth Club, Town centre
- **Is there anywhere you would avoid?** - Listening out for safe spaces/ anti-social behaviour/ being approached.

We also asked about where people go to find out information and advice about issues that are affecting them/ their family and how best to communicate information with them.

- **Where would you go to find out about support and advice? (about health, mental health, drug safety and awareness)** Prompt: Social Media / Internet / School/ Doctor/ Family. Note any websites/ ask if they have 'trusted websites'.
- **Is there a person you would choose to go to for support and advice? Do you have a trusted adult?** (If youth). What makes this person good to talk to?
- **How do you like to be communicated with by professionals/ services?** Prompt: What's important to you when having conversations? How would you like to receive information and advice?

We are asking people if they've been affected by substance use recently or in the past.

- **When we talk about substance use what do you understand that to be?**
- **Do you know who the treatment provider is for Surrey? (Catch 22 & Amber for young people i-access for adults)**
- **Do you have experience of a parent or a sibling using substances in the home?** (Or partner/ family member if talking to parent carer)
- **Are you or a family member currently receiving any support from services?** Prompt: Adult Social care, mental health services, family centre, treatment/ recovery services 'Catch22', i-access. (also, could ask about A&E/GP support)

- **Are there barriers do you think for you or your family member to access support and care?** (Prompts: geographical barriers, transport, cost, inflexibility of appointments)

We asked people about drug awareness and their thoughts on cannabis use,

- (If not already covered) **Where would you go to find out more information about smoking, vaping, drugs, alcohol and drug/alcohol safety? (Have you needed to/wanted to find out more?)**
- **Do you think cannabis has become normalised?** Prompt: medicinal / coping / ADHD lack of medication.
- **Do you think the repercussions with criminal justice for substance use is enough to deter use?**

Common themes emerging from the responses

Support networks

We found young people's friendship groups have a huge impact on whether they are using substances and influence which substances they are using. Young people told us they would choose not to be with certain people because they are using substances, they also told us they would avoid certain places or friendship groups because of drug association.

Peer support and the power of a good friend plays a key role in young people seeking help. Some young people told us they were worried about friends, identifying that their friend has problematic, risky use and wanting to share information with them by picking up a leaflet 'for my friend'.

Staff on the ground doing youth work, told us they require clear information and support for wider determinants of health for them to be able to support young people away from drugs and alcohol to make better choices.

Barriers to having inter-generational conversations

People told us about stigma when talking about smoking and problematic alcohol use. They told us because it's legal it's seen as someone's own lifestyle choice and therefore, is harder to broach. The barriers to having conversations about other people's lifestyle choices starts from early on with the young people we spoke to.

Young carers, carers/family, told us how they have had to deal with a parent or sibling who have both mental health issues and substance use issues. These issues around substance use



were very often normalised at home. They felt that they themselves were not able or equipped to have conversations about problematic use and wouldn't know how to signpost to support and treatment services.

Some of the older people we spoke to found it hard to talk about their mental health with their older parents. Stigma, even in older people, was apparent, hiding their substance use and not speaking about it to family/ friends.

Culture

We heard that dealing or using can for some, be just a way of life and part of living in a particular area. We heard some experiences about life revolving around drinking at the local social club being told 'it's what we did growing up'. We heard that for some, drugs were readily available at home or through friends. Seeing friends or a parents substance use normalised their own. We heard from many, that people were using substances to cope with poor mental health. Cannabis use was widely accepted across generations.

Deep Dive into Q2 insight

1. Information and Advice: Timing and Support.

Getting information in the right format and at the right time can make a big difference to successful treatment engagement. Fear of stigma or repercussions for reaching out is also an important thing to consider when trying to get people to find out about treatment and recovery services. Receiving information in the right place, in a clear format, using the appropriate tone and language makes it more impactful. Having something to take away or photograph is important so people can share this with friends or read it on their own without judgement.

"The hospital gave me leaflets when I left about services, i-access and what not, but I didn't want to think about those services then. I like to research things. I suppose I don't have any barriers to accessing services - just myself."

Male, 50-64, White British, Old Dean

"I was often in A&E, and I rejected all the help the alcohol liaison nurses offered. Not because I didn't want it, but you think in that environment that there will be repercussions with the police. I always lied. If they had told me, it's totally confidential or assured me no one else would know, perhaps I'd have taken the help sooner."

Male, 18-25, White British, Mole Valley

"I think there is a lack of education around substance use in our community. Because it is not normal in our culture and against our religion then parents are



more likely to want to hide that their kids are drinking or smoking or they might not even realise. Drugs are just seen as bad and so not something we talk about or are educated about. I think it is something we could explore at the local mosque, offer education in a safe environment."

Angelic Network Muslim group leader, Woking

"I'm not sure some of the lads would pick the leaflet up, they are self-conscious in a big group and so they are frightened to pick a leaflet up and read it in front of their mates as they are worried about what they would say. [Asked about posters] Yep definitely something that would be good for the group I teach; we could have it up on the wall and its reminder."

College tutor, East Surrey College

"I prefer getting advice from people who have lived experience, they can tell you things and support you in a good way."

Male, 25-49, White British, Ewell

"I like things written down. I'd have liked a booklet which someone could have talked me through, giving me support choices."

Male, 18-24, White British, Reigate

"I didn't know CA existed or recovery support, had no idea. When I was released if someone had given me some information, asked for my email and sent a booklet or something, I would have read it."

Female, 18-24, White British, Mole Valley

"I like to see posters and things on the walls, When I visited Guildford college, they had loads of information posters, I liked the visuals, you can take a picture for information."

Transgender, White British, 13-15, Guildford, Neuro Diverse.

"I have ADHD so too much information and my mind wanders off. I like information that gets to the point, it's clear with facts and I understand why they are telling me. I like a leaflet or a booklet that I keep until I need it."

Female, 13-15, young carer, White British, Woking, Neuro Diverse

"At school they cover drugs in the higher years as part of PHSE. They always use the same example for everything though, they use this kid who used to live around here – the kid was groomed online and then murdered in the end. I know who it's aimed at, but they always use the same example, so it's lost its meaning for me."

Transgender, 13-15, White British, Redhill

"I'm definitely picking up the cocaine leaflet for [name]. He needs to know what he's getting into; I'm going to give it to him. Hope he reads it."



Female. 18-24, White British, Reigate

"We had Catch22 recently, they brought in information and examples of drugs. We talked about it, it was an excellent way to engage the young people here and a good way to talk about reducing harm from substance use."

Guildford Twister leader

"A bonus for us would be clear, printed information that is targeted at young people, covering a range of topics in one place, rather than giving out multiple leaflets. It's also really important to have services regularly coming out. On top of this, handholding is key to support people attending appointments".

Southeast Quadrant for the Youth Offending & Youth Offer Service

2. Coercion and criminality and normalisation of substances where people live.

People told us about places in the community people would avoid due to feeling unsafe or knowing drug use happens there. We also heard about coercion and grooming. We explored attitudes towards cannabis and drugs in general and if people consider the criminal implications or knock on effects in terms of jobs, relationships, housing, school etc.

"I came here because I'm now homeless and I have an issue with Cocaine. I had been living with my dad, we always get on but not when we live together. It ends badly. The cocaine use had gotten out of control, I was using every other day. I'd been hanging out with an older guy, I'm in my early 20's and he is in his 50's, my friends had a problem with it. I'm a lesbian so couldn't see the problems with that relationship. He was funding my habit, I barely had to pay for anything, and he didn't seem to want anything in return other than to hang out. Now I'm wondering where that would have led, I've stopped all contact with him."

Female, 18-24, White British, Mole Valley

"Culturally as Muslims, we are not allowed to drink and there is even more stigma around drugs. One of the families from a local school got in touch with me recently about their teenage son, who has been arrested and charged. They are lost and don't know where to turn. He was threatened one day walking to the train station after school by some older black boys who got him in a choke hold with a knife. Two older Asian boys 'saved' him and told him not to tell anyone, we're your friends now and we will look after you, you're under our protection. He was really scared and so he trusted them, they said they would protect him and began meeting him and walking him to the train. They started to give him little jobs to do just small 'favours' like to give something to someone in year 11.



These young boys are so innocent really, they don't know what they are getting themselves into. The boys started to tell him that this country doesn't like Asians and promoted this kind of rhetoric to him, creating a distrust in him for other services designed to help him. He is scared of what will happen to him as he doesn't trust the police now but also scared about what his 'friends' would do. He says he can't leave them. He told me 'I wouldn't tell you names, I'm so scared, they said they'd kill my family.'

Angelic Network leader

"She is mixed up with people who take her money and facilitate her drug use. They circle round her when she has been paid her PIP and other benefits. She thinks they are her friends and doesn't learn from them treating her badly, people take advantage of her. She ends up with no money as she will lend money whilst under the influence and never get it back, or in the past people have nicked her money and emptied her bank account. She's also told me that people will say give me £100 and I'll get you X and then they will give her £20 worth of whatever she's asked for and keep the rest. She then turns to her mum for money. I'm so worried for her, the people she is mixed up with would hurt her and in the past, she has turned up injured to the meeting room. She's also turned up in such a state under the influence that we have had to call the emergency services."

Female, 50-64, White British, Ewell - Safeguarding concern raised

"Some of the young people we support have been exploited through substance use."

Southeast Quadrant for the Youth Offending & Youth Offer Service

"I live in Woodhatch, if I step out of my house there is a risk of getting stabbed, I live on the estate, in a council flat with my mum, stepdad and sister. We used to live in Horley, it was nicer there and we are trying to move back. Our neighbour got shot here, she died, it was all drug related."

Transgender, 13-15, White British, Redhill

"The structure and routine help me to stay focused and they drug test here. The support is solid. I have two great support workers. That said recently, I went on leave for the weekend and smoked Cannabis. I knew it was going to be a problem but that didn't deter me. I came back and they tested me and 'I blew numbers'. I have a written warning. Two more and I'd have to find alternative living arrangements."

Male, 18-24, White British, Mole Valley



3. Growing up, early influence of substance use and how it can affect your relationship with substances.

We heard about substance use in people's childhood, near where people lived, and substance use for coping purposes.

"All my family did drugs, they've all been to prison. I was living on the rivers estate and used to hang out on Cromwell in Redhill with people there. I've been doing drugs since year 7, I got kicked out of school. None of my family are around now."

Transgender, White British, 16-17, Looked after Child, Guildford

"People are born and grow up on the estate, everyone and anyone is involved in drugs. I feel safe in my house. If we see anything, Mum will call the police, my friends have tried Crimestoppers, but nothing seems to change in my area. I try and dress better so I'm not the same as people who live on my road, but it still impacts me."

Transgender, 13-15, White British, Redhill

"I've been exposed to drugs and alcohol, it gets scary after him having too much, one time it got really bad, and he was waving a knife around, I got really scared and took it off him. I'd had a self-defence course at cadets and so I knew what to do. That was a long time ago now, we have text conversations more these days, I don't see him so much anymore. Don't get me started on my dad's side of the family. My nan was a heroin addict and some of my family have severe learning difficulties. My dad used to do crack/ heroin, he hid it well from everyone, he hid it from my school, from my teachers and our family but he was arrested eventually. The thing is, it's part of me, I think about using, but I wouldn't, I fight that mind."

Transgender, 13-15, White British, Redhill

"My dad was a big alcoholic. He was very physical with me and his partner. One day he went for her, and I intervened. I had previously had heart surgery, and he hit me right in the chest knowing I had surgery, and he kicked me out. He had kicked me out before, but this was different. I was never going back. Growing up was tricky. My mum drank, I think to cope with my dad. Alcohol was always around me and drugs. She was using a bong when I was 10 and cocaine when I was 12. I sometimes had to roll her joints because she was too drunk to. Because of my heart operation, I am on blood thinners so if I took cocaine, I would have a heart attack!"

Male, White British, 18-24, Reigate

"I've been in dark times. I've been a user of Xanax and meth, they are really big in the gay scene where I live, it was part of going out and I wasn't good with it. It was an addiction, and I was dependent - I would try and get it even if I had no money. I wouldn't turn to harder drugs, but those for me, I was into them. I guess back in



that time, it was more about mental health for me, trying to make myself feel good and I was dealing with a lot of stuff on my own. I was with people who could always get the stuff I was using. I was even using at school, no one knew that was happening. I did bunk a lot, I wasn't very well behaved at school, my attitude was bad, I couldn't stay quiet. Looking back growing up gay, everyone 'knew' I was gay. I was bullied for being gay even though I didn't even know what gay really was."

Male, 18-24, White British, Mole Valley

"Well let's say I choose my friends wisely, my friend here he doesn't smoke or drink or do drugs. These are the people I want to be friends with, I don't want to associate with people who do."

Male, 18-24, Arab, Reigate

"I avoid those friends now and don't hang out with them much anymore. I had to choose between the friends and what was better for me."

Male, 18-24, White British, Reigate

4. Normalisation of substance use, what young people think.

The young people we heard from spoke openly about their thoughts on substance use.

"A lot of people at school talk about drugs and I think cannabis is normalised and I think it should be legalised and then if they want, it can be regulated."

Male, White British, 13-15, Guildford

"Every single one of my other friends smoke or vape. Lots of my friends use cannabis, I think it is normalised in my group."

Transgender White British, 13-15, Guildford

"I do smoke weed with my college friends, it helps us all to chill out for anxiety and depression. I like to be at home and my whole friendship group goes to one house when we smoke. The person in our friendship group that buys the weed, it's their house. They had a load of issues and thinks of the weed as helpful for medicinal reasons. Now they have done well at college and have got a job, we see this as where we want to be. I'm really responsible because of my job. Having a purpose holds you to account. I think I'm a 'sensible' drug user, I'm cautious and have rules for myself, no more than once a week, not before college and never 24 hours before work."

Transgender 16-17, White British, young carer, Waverley

"I don't listen anymore, no one does what they say they will. It doesn't matter what I tell you, it won't change. I was in trouble on Monday again with the police. I don't care about going to prison all my family are there. Nothing stops you from doing



drugs, once you're in prison you can still do it, you just smuggle it in, no one cares."

Transgender, White British, 16-17, Looked after Child, Guildford

"Dad is a big user of weed he says, for mental health reasons. I know if he uses too much – his mental health declines more. I think cannabis is too normalised and if it was legalised for recreational use it would need to have more limits set on it. "

Transgender, 13-15, young carer, White British, Redhill

"I work with 15–17-year-olds mostly. We have the young person with us for a short term and it can be challenging if the young person doesn't want to engage and are just going through the motions for a court order. It's a really good intervention if we get it right and has positive outcomes for those who engage. We hear about mental health and we hear about substance use issues. There can be a bit of bravado from some of the young people caught up with drugs and they may exaggerate their substance use, or not be receptive to talking about it as a problem. Once you get to know them this can change. We definitely hear a lot about weed. It's quite normal, everyday for some of those we support. It's a difficult one, weed is the hardest thing to get them to think about giving up.

Southeast Quadrant for the Youth Offending & Youth Offer Service

5. Using substances for mental health

We heard about the link between people's mental health and substance use, hearing from individuals and the networks around them.

"I smoke weed for my wellbeing. Yeah, I'm on meds for anxiety/ depression/ ADHD/ Autism. I'm living round here now; I live in a children's home."

Male, White British, 16-17, Looked after Child, Guildford

"My best friend, I would say she is a high-risk drug user. She does weed, ketamine and drinks. She started off like me smoking weed, but she uses every day. She says she needs it for mental health reasons although I think its problematic use and an issue. I tried to talk to her about getting help, she's been in denial. I think her issue is she has no consequences. She hides it all from her mum."

Transgender, 16-17, White British, Young carer, Waverley

"Parents carers are often not telling us about smoking or if they aren't, they don't see it as a problem. We have heard of parents smoking weed to chill out from their daily stresses of parent caring."

Giving Carers a Voice, Contract Manager

"Mum does smoke though. She gets very stressed, my grandad makes her stressed, he's just moved nearer to us now. She said the family problems make her



stressed and so she needs to smoke to de stress. me and my brother have asked her to stop. We don't like it. We don't like it at home, the smell and stuff but we are also worried about it. I'm worried about her lungs and cancer, I've seen online ads about it."

Female, 13-15, White British, young carer, Woking

"Both my parents smoke, mum wants to stop but I don't think she could stop unless my dad did too. He says he needs to smoke for mental health reasons. Mental health is more of a priority for him than his smoking."

Female, 18-24, White British, young carer, Woking

"My dad has mental health issues. My dad's drinking was related to his mental health too. Dad realised he needed some help, prompted by mum a bit too, he went to the GP. He has been depressed and his drinking was becoming problematic. I wouldn't have those kinds of conversations with my dad. My concerns would be about his mental health, and I might talk to him a bit and try and support with that, but I wouldn't have spoken to him about drinking, I'm the youngest so wouldn't even know how to broach that it's a tricky conversation and being the youngest is a barrier to having those kinds of chats."

Female, 18-24, White British, young carer, Woking

"It was when I was having money problems I started to drink more. It put a strain on our relationship and then the drinking was helping me to sleep, that's what I told myself, it got out of control. I'm a manic depressive, the staff help me with my meds. I'm now taking my meds probably; the meds were all over the place when I was drinking."

Male, White British, 25-49, Mole Valley

6. 'Legalised' substances – alcohol and smoking

From conversations we had had this quarter, drinking doesn't appear to be a priority amongst youth, with substances more prevalent. Alcohol consumption though is part of culture for older people.

Alcohol

"We go to house parties sometimes; I might have the odd drink, but I think I'll end up being the designated driver when I'm older as I'm not into alcohol. I listened to this podcast about the science of alcohol, knowing the limits and how to make it enjoyable but not exceed the levels. I now follow what it said."

Transgender, 16-17, White British, Young carer, Waverley.



"I don't do any drugs, I don't really like alcohol either, I might have the odd drink, but not lots."

Transgender, White British, 13-15, Guildford

"I used to drink alcohol now and then when I was feeling cheeky but now, I'm on antidepressants it's a big no. They said you shouldn't drink alcohol when you take them, so I wouldn't now."

Transgender, 13-15, White British, Redhill

"I will never go back to alcohol and Catch22 helped me with this. It takes me to such a dark place, and it lowers my inhibitions. It's alcohol that leads me to drugs."

Male, 18-24, White British, Mole Valley

"Alcohol is all around us it's part of everyday culture, seeing it as fun and a way to unwind. It tends to be the occasions that I think well, I'll just have a couple of cans. Or if I meet up with someone else who likes a drink. I've been off the drink now for just over 2 months, now the weather is good, the thoughts start creeping back in. I tell myself well, just one night a week and then it creeps to 4, 5 then every night. I say well only in the evenings and then eventually it's drinking in the mornings and it's out of control."

Male, 50-64, White British, Old Dean

"My mate drinks though, he's, my carer. He is alcohol dependent, so we end up caring for each other. He helps me with all my letters and things. His drinking doesn't affect me, but it does affect him. He had a detox through Two Bridges a couple of years ago now. He still drinks though. Yesterday he fell off his bike and collapsed, people helped him to get back and then he ended up being taken to hospital by his daughter. He should be home today."

Male, 50-64, White British, Old Dean

"I work closely with the Alcohol Liaison Nurses around alcohol admissions. People are brought in because they've hurt themselves under the influence, have been found passed out and brought in via ambulance or they've been drunk in the street and picked up by the police. Some people come in seeking a 'detox'. Detox will require sedation and a bed in intensive care. The more frequent the detox the trickier they become; it shouldn't be viewed as a 'quick fix' as it can be harmful. A&E will refer to the alcohol liaison nurses who will coordinate services. They will need consent from the patient to do this. They will refer to i-access and create a care plan."

High intensity lead, Royal Surrey County Hospital

"Alcohol can be a problem in older people when they stop suddenly as the withdrawal of that can be a factor to cause delirium when a person enters hospital. Alcohol in older people is worsening as people are getting more isolated and



lonelier. Plus, a lot of older people are able to order their alcohol from their sofa which makes the problem even worse and more hidden."

Consultant geriatrician, Ashford St Peters Hospital

"My son lives with us, he's sober now and has been for some time but he's an alcoholic. He was doing well but he decided at Christmas to have a couple of cans and then it spiralled from then. We try to help him as best we can. We're not carers he looks after himself, but we do step in when things go wrong, and I suppose we support him because he lives at home."

Male, 65-79, White British, Old Dean

Vaping

"Vaping at our school is a problem and is everywhere, you walk around smelling strawberries."

Male, White British, 13-15, Guildford

"I've seen a rise in THC vapes recently which have seemingly become easier to get hold of these are supplied by private individuals, but we have also reported concerns to the police about a couple of local shops."

Youth Justice Support Worker

"I hear about vaping being commonplace at school. It's appealing to the younger people, and I hear them talking about favourite flavours. Even if they are not vaping, they will talk about it with their peers, and it's seen as cool. Some tell me it's happening outside the school gates and others mention it happening in the school toilets. When I meet carers in school, they are less likely to mention these kinds of topics although some may come up like vaping. Many of the carers I meet may have parents and family members who use substances at home but don't mention it as they don't want them to get into trouble."

Young Carers Public Involvement Service Manager

"I used to work at a local secondary school too, vapes are a big issue at secondary school. It's seen as cool and its addictive. Easily obtained too. Parents from the Muslim community have no idea what their young people are getting up to especially as vapes are relatively 'new'."

Female, 50-64, Asian Pakistani, Woking - Angelic leader

"Many of the students use vapes these days, this is something I find harder to address, we don't know the long term affects and so most of them just think it's harmless."

College Tutor, East Surrey



"I started vaping with my friends, they smoked and vaped and so I started doing it. I don't think I really knew it could be harmful to me. I tried to stop but found it hard [Catch22 worker explained the different types of addiction, some are physical and some psychological]. My Mum found out; she found my vapes. She explained about the nicotine and then she found me a vape with no nicotine as I said it was too hard to stop, she's helped me now and I've stopped completely." I don't miss it. I avoid those friends now and don't hang out with them much anymore. I had to choose between the friends and what was better for me."

Male, 18-24, White British, Reigate, Neuro Diverse

Smoking

"At my school, they got us to pick our drug of choice and then we had to research and present back to the class about it. I did smoke, it definitely put me off, not for me."

Male, White British, 13-15, Guildford, Neuro Diverse

"I've never smoked – my Mum bribed me. She said if I got to 18 and hadn't smoked, she'd give me some money. It worked initially as I thought, she thinks I can't do it, but now I just won't smoke, I'm not interested and it's not my thing."

Transgender, White British, 13-15, Guildford

"I do smoke, but I can take it or leave it. If I find something better to do, I then won't smoke."

Male, 50-64, White British, Old Dean

"I started smoking when I was 13, I can't let it go, it's the last thing. I've moved more to vapes now. For me it's associated with being social, social smoking - let's have a break and have a fag, let's chat and vape. I don't think I'm looking to give that up at the moment - I didn't realise there was support for giving up."

Male, 18-24, White British, Mole Valley

"I'd like to quit smoking, but I've been doing it since I was quite young, I'm in year 3 now [college]. It's been too hard to quit so far so I will go and find out some more, thank you, I will give this a go."

Male, 18-24, Arab, Reigate

"Mum does smoke though. She gets very stressed, my Grandad makes her stressed, he's just moved nearer to us now. She said the family problems make her stressed and so she needs to smoke to de stress. me and my brother have asked her to stop. We don't like it. We don't like it at home, the smell and stuff but we are also worried about it. I'm worried about her lungs and cancer, I've seen online ads about it."

Female, 13-15, White British, young carer, Woking



"Both my parents smoke, Mum wants to stop but I don't think she could stop unless my dad did too. He says he needs to smoke for mental health reasons. Mental health is more of a priority for him than his smoking."

Female, 18-24, White British, young carer, Woking

Suggestions on how to increase public involvement in recovery and treatment communications

A finding in our insight this quarter is that young people shared concerns about their friends. Sometimes, they felt they couldn't raise an issue, or they avoided them altogether.

We feel young people would benefit from having a leaflet which gave them the tools, support and opportunity to have difficult conversations around substance use. We have seen a good example of one that ESDAS [East Surrey Domestic Abuse Service] have developed. This could be a great co-production opportunity to work with Catch22, a young carers group or Twister for example.

Case studies

Male, 25-49, White British, Ewell

"I'm an alcoholic. I had a job, wife and x4 kids but it all fell apart because of using coke and drinking. I managed to get a new job but then didn't have anywhere to live. I was sofa surfing, a friend helped me and let me stay with him. He said if I used, I couldn't stay, he doesn't drink or do drugs himself. I was introduced to AA I met this guy who got me to go along.

A friend at AA helped me find out about renewed hope and I was very lucky to be supported by the person that runs it. I'm lucky to have found her, she said look you just need to be honest with me, I can't help you sort this out unless you are honest. So, I was. She keeps in touch. She helped me get to Leatherhead Start and now I live nearby in a place.

I've been to AA, CA and NA, I've been to groups in person and online. AA tells you to stop, i-access is good but a bit too medical, they don't want you to stop straight way, they are more medical and want you to reduce gradually. I prefer getting advice from people who have lived experience, they can tell you things and support you in a good way. I have a sponsor in NA, we meet up weekly. I've been clean, off coke for a while now – over a year. The irony is I wanted to celebrate and so I bought booze, couldn't think of how else to celebrate. Ridiculous and it's set me back.

I've been making TIK TOK videos about recovery, that's been helping me. I've been saying on those how ridiculous it is that cigarettes are locked up in metal cases and have warnings on them, but it's two aisles of the supermarket for booze you have to walk past in order to get



to the frozen peas. On the bottles there is a tiny sign saying 'Drinkaware' it's not really putting anyone off.

I grew up on the Goodwyns estate in Dorking, alcohol factored into my life from a very early age. Everything revolved around the social club, my parents went. I had a 'normal' life, left school at 16, got a job, got married and had kids, but it wasn't me. I've just come out, now that's something my dad will find unacceptable, and it's not accepted on my old estate. I've started therapy, the person comes here, and I see her weekly, I'm working through this stuff now.

I'm on bail and I can't see my kids, I live for my kids, I love them so much, it's killing me not to be able to see them. They are stricter with fathers than the mothers about that, my cousin, she's done a lot worse than me and she still sees hers. It's my fault though, I wanted to see them but with drug addiction and alcoholism things escalate. I exploded at Christmas and was verbally abusive towards my ex, I was arrested and had drugs on me, ended up with a Class A possession charge. I asked if I could see the kids via a contact centre – they said it was £90 an hour for me to pay, can't afford it, I just can't. A friend has agreed to mediate for us.

I want to get back to work, I'm signed off by the doctor and universal credit have said I'll lose money if I work. People have said to me I should get better first and then work. Doesn't feel right to me, it's hard to get back to work and a normal life because the cost of everything is so high. I can't cope financially on my own yet. It would be good to be rewarded for getting back into employment, a phased return, with 3 months low rent would get me back up and running. I don't want to stay on benefits. They say alcoholism is a disease and I'm disabled but I don't think that, I fear there is no route off benefits for people like me.

At school in the 90's police told us 'Drugs are bad', they didn't say anything about alcohol. Kids need to be aware of the harm, they are not learning about that. I have a 13-year-old, and his mate uses those THC vapes, I think cannabis has been normalised it's easy to get hold of. On the other hand, they could definitely legalise it for those in pain but in general I think prison sentences are probably too soft."

Male, 25-49, White British, Mole Valley

"I arrived here via turning tides, it's a recovery project. I was homeless and had been drinking. I stopped drinking completely and came in here tee total. I tried AA but didn't get on with it, the people there were much older, and I couldn't identify with their stories. I just stopped. I came via emergency accommodation on the east coast. I've been getting into trouble here recently, every weekend I'm going home to visit but ended up smoking weed last time I went. I get drug tested here and now I'm on notice to leave, because of it. I've been here 3 months. I've always smoked it, just didn't think, got tested and it's not acceptable here.



I came in for drinking though, my reasons for drinking are very different and separate to the weed smoking. I had a job, a house and was living with me partner. It was when I was having money problems I started to drink more. It put a strain on our relationship and then the drinking was helping me to sleep, that's what I told myself, it got out of control. I'm a manic depressive, the staff help me with my meds. I'm now taking my meds probably; the meds were all over the place when I was drinking.

I'm gay, my man and I we've been together since we were 13 years old. We met at school. My partner smokes weed and drinks but he's a 'normy', he can do that and get up the next day and hold down a job. When I was visiting home, I was with him and the cannabis was just there, so I smoked with him, we always have. It's the drinking that got me in this mess. It's no good for me but my cannabis use, I've never viewed it as a problem until now. Cannabis isn't normalised here and I need to curb it after the warning, or I'm out. I have made good friends here who are supportive and understand, they want me to turn things around and stay for longer.

I tried NA but didn't like the holding hands, it's such a small thing but it put me off, I worry about my sweaty palms and sharing that personal space made me uncomfortable. I had tried CGL (Change Grow Live) before and liked it. I had to do that as part of a court order, I was on probation, it was the same for the others there. I found it helped me a lot but lots of the others were not bothered. For me it gave me tools and I liked what we were taught. You could say criminal rehabilitation worked for me. I'm working through my alcohol issues. I'm now able to question the thoughts and why I want to drink. It's taken a lot of personal growth to get to a point where I accept the feelings and question, why do I feel like this? what makes me want to do that? I've never done anything else no other drugs; I wouldn't do any of the hard stuff.

I called i-access for help with the cannabis, I'm getting a key worker and hoping to see them. They've been telling me about SMART recovery and that sounds good for me. I haven't got anywhere else to go so I want to get this sorted out. People on average stay here for 6-9 months, the things we learn on the program, a lot I know about. I've had that life experience, but I do want the help, there are always opportunities to improve. I want to apply for my driving licence and get back into the care work I was doing. I've made my amends with my family but don't want to put a strain on things by moving back. I want to be independent again."

Female. 18 to 24 years, White British, Mole Valley

"I'm from a village near Dorking. I came here because I'm now homeless and I have an issue with Cocaine. I had been living at my dad's, we always get on but not when we live together. It ends badly. The cocaine use had gotten out of control, I was using every other day. I'd been hanging out with an older guy, I'm in my early 20's and he is in his 50's, my friends had a problem with it. They said get away from him, he's grooming you. I couldn't see it. I saw him



as a mate, I'm not into men I'm a lesbian so couldn't see the problems with that relationship. He was funding my habit, I barely had to pay for anything, and he didn't seem to want anything in return other than to hang out. Now I'm wondering where that would have led, I've stopped all contact with him, sometimes I think he was just buying a friend, but who knows.

Things were escalating and I was using a lot, I got arrested from my dad's house, his wife called the police. I got arrested for criminal damage. I was released from Salfords, and a friend came and got me. Their parents took me in but made it clear it was short term, so then I was on probation, and I was homeless. I got in contact with the council. They were good, they got me in here. Whilst here I tried CA, I think it's [****] rubbish, unpopular opinion in here as others think it's great. The first time was alright, it was in the house, a meeting here. After that I tried two more meetings, different people each time running it but the same story. It felt scripted and that made it draining and not helpful. I'm not going again to listen to the same story. I've tried to stop before and haven't managed for long, I've been clean now for 3 months and I think now I'm alright, I'll be able to cope. [asked if heard about SMART recovery?] Yeah someone told me about it. I might think about it. I'm on the council list and so don't want to be here for much longer, I'm going to start bidding as soon as I can, and I want to get my licence. Driving will help me to get a job. My relationship is better with dad now but wouldn't move in again.

Growing up my dad was a heavy drinker, dad does cocaine so yep it did impact me when I was younger. My mum walked out on us all when I was young, one Christmas she just left. So, it's been me, my dad and my brothers. I was brought up down the village social club. I've got a brother who drinks a lot, and he does cocaine too. That comes from somewhere. It's normalised seeing dad's drug use.

He doesn't like to see his kids like it, but it's a life choice. I first tried it at a school after party. It was there and everyone did it. I was desperate to try it, I didn't want to be the 'boring' one, I was a sheep. I wanted to see what it was like for myself. I hated it but I did it again. When I lived at my brothers, he always had it around, on the table on a tray. I shouldn't judge but his habit is as out of control as mine, he drinks too. I did it because it was just there, I wasn't seeking it out then.

From the age of 13 we could recognise cocaine and had been exposed to other drugs. My dad's family were not users, it's not part of their lives. We were always exposed as kids from an early age at home. You learn the signs of when he's using. I've always been able to walk away from alcohol, I can have a beer and stop, that hasn't been a problem for me.

I have other run ins with the police. I've been arrested whilst on Coke, I'm a nice person when I'm sober, I've bumped into police officers in the supermarket and they have said, why are you doing this – you are so lovely when you're not using. I have been asked after being arrested if I am dependent on cocaine, but I wasn't arrested because of the drugs, always



because I did something whilst doing the drugs. I didn't know CA existed or recovery support had no idea. When I was released if someone had given me some information, asked for my email and sent a booklet or something, I would have definitely read it."

Stakeholder meetings / where we have networked

We talked with the following stakeholders / service providers to understand what it is they do, explore ways to work together and hear from them, what things are working well and what could be improved.



Luminus Signposting and safeguarding



On engagement, our team always signpost to appropriate support and care services. Sometimes, people do not want information given to them. Support services are given where relevant, e.g. i-access, Catalyst, Mind Matters (if mental health exclusively), One You Surrey, Catch22, Al-Anon, AA etc.) We also support people needing help with other issues, for example, trying to find a dentist or registering with a GP.

We check in with community leaders if someone has said something we are unsure of or concerned about to ensure that the person is being supported and not alone. We also ensure

that support services are aware of appropriate treatment pathways and local support available, such as food banks, mental health support groups, befriending initiatives etc.

This month we did raise a joint safeguarding concern to MASH with The Meeting Room as both concerned about an individual who attends the group.

Bridge the Gap
Surrey Adults Matter (SAM)
i-access
MECC Training
Surrey Drug and Alcohol Service
Healthwatch Surrey Helpdesk
GP for medication review
SMART Recovery programme
Kooth
Headway App
SILC
Hope Hub
Lighthouse, Woking
Catalyst Cuckooing Service
MASH
One You Surrey Smoking Cessation

Training

Sarah has undertaken **MEEC training in substance use** (The Gen Group) this quarter. Sarah and Kathryn are booked to attend a bespoke Trauma Informed workshop, Catch22 substance use in young people and Stigma training in Q3.

Contact us:



Contact us through any of the channels below.

We'd love to hear from you:

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