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Substance use by young offenders

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It is now accepted that drug use and offending are linked and most research has found some association between them. Moreover, the combination of substance use with offending may increase the risk of developing substance dependence and/or becoming a persistent offender. This study was conducted by a team of researchers from the University of Essex between summer 2001 and summer 2002. It aimed to document the prevalence of substance use and offending amongst a sample of 293 young people who were clients of Youth Offending Teams in England and Wales.

Key points

- The group was highly delinquent. Most had committed multiple types of offences, repeatedly. Over 20% reported shoplifting, selling stolen goods, taking a car without consent and drug dealing at least 20 times in the previous year.
- Substance use was also very high. Over 85% had used cannabis, alcohol and tobacco. But less than 20% had used heroin or crack cocaine (although this rate is still comparatively high for such a young group – all but one were under 18 years).
- Alcohol, tobacco and cannabis were more strongly related to offending than were other drugs. The shift towards the use of heroin and/or cocaine and/or drug injection observed in the 1980s amongst delinquents was not evident.
- Some key factors were related to both substance use and offending: life difficulties and events; disliking and being excluded from school; lack of positive coping mechanisms; and expecting to get into trouble again. However, growing up with one parent was not related to offending or drug use.
- The young people felt they had received a lot of help from services (mainly GPs and social workers) but that the quality of the help had been low. Individual counselling or small-scale interventions may be more appropriate than generic services to deal with the diversity of substance use in this group.
- Parents need to be engaged concerning their children's substance use and helped to understand the contemporary prevalence of drug use in this age group.
- The adoption of low or zero tolerance to drugs in school may not be helpful as it encourages secrecy in drug taking and exclusion only of those caught – who may not be the greatest users.

There have been many studies of substance use and offending amongst young people and all find that the two factors are associated. It has been suggested that substance misuse and

delinquency develop together in a 'common causal configuration' (Elliot et al., 1985) and that similar risk factors predict both behaviours.

The views expressed in these findings are those of the authors, not necessarily those of the Home Office (nor do they reflect Government policy)

These include:

- a disrupted family background and low parental supervision
- associating with delinquents
- poor social skills
- low psychological well-being
- a history of behaviour inappropriate for their age
- difficulties in school
- having been in care
- having been abused.

However, drug use is now so common amongst young people that, in some forms, it may occur without its being explicable by specific risk factors. This in turn may complicate the classic association between drug use and delinquency. In addition, whilst risk factors can predict who is more likely to try drugs and offending, they are less good at predicting how and why some people discontinue delinquency, some become substance dependent and some increase their substance use but do not become dependent.

Parker et al. (1998) developed the idea that drug use had become 'normalised' amongst young people, which involves the incorporation of drugs, drug use and drug users into their everyday lives. Thus, drug use may be 'normalised' amongst young offenders as much as amongst young people in general and therefore 'decoupled' from the classic risk factors to some extent. Even if young offenders continue to take drugs at a higher rate than the general population, this 'normalisation' might alter the relationship between drugs and offending.

The aim of this study was to examine current patterns of substance use amongst young offenders and identify relationships between substance misuse, offending and personal and social risk factors.

Methods

The sample comprised 293 young people who were clients of 11 Youth Offending Teams (YOTs) in England and Wales. Each completed an extensive, structured questionnaire, on a one-to-one basis, under the guidance of a researcher. The questionnaire included questions on substance use, offending, risk and protective factors and family and social background. Due to the way in which it was drawn, the sample over-represents young offenders with longer offending histories and those with a greater involvement with the YOT. It should not, therefore, be considered to be representative of *all* young offenders and findings are likely to exaggerate the severity of substance use and offending amongst young offenders.

Characteristics of the sample

81% of the sample was male. This reflects the proportion of young men and women referred to YOTs nationally. 52% were 15 or 16 years of age; only five were under 14 and one over 18. Ethnic minority groups were over-represented as three study areas had high ethnic minority populations (83% were white, 8% black, 4% Asian and 4% of mixed background). Almost two-thirds had dropped out of school

or been excluded before the age of 16. Over a third (36%) were still at school and a further 14% were on a training scheme or apprenticeship. 6% were employed but a third (36%) were in neither employment nor education. Three-quarters (72%) were living in the home of their parents or step-parents – the greatest proportion with their mother only (39%). This is a higher proportion of lone parent families than in the general population.

Personal traits and experiences

Multiple life experiences and problems were common amongst this group. Over half had experienced the following: school exclusion, parental divorce or separation; a family member with a criminal record; and a family bereavement. Nearly a quarter had been a victim of crime in the previous two years. Most did not like school or get on well there and two-thirds said they had played truant 'a lot' when at school.

The young people did not commonly use positive coping mechanisms and 39% said they used drugs or alcohol in order not to think about their problems. Low self-esteem was also common – particularly amongst the young women. Perceptions of parenting styles were mixed. 55% said that their parents let them decide things for themselves and the same proportion said that their parents tried to control everything they did. In addition, more than half said their parents 'often' or 'very often' did not know where they were when they were out, what they were doing or who they were with.

A considerable number of the young people thought it likely that they would be in trouble again and that they would have a prison sentence by the time they were 25 (see Table 1). Their general adult aspirations in terms of employment and money earned were also low.

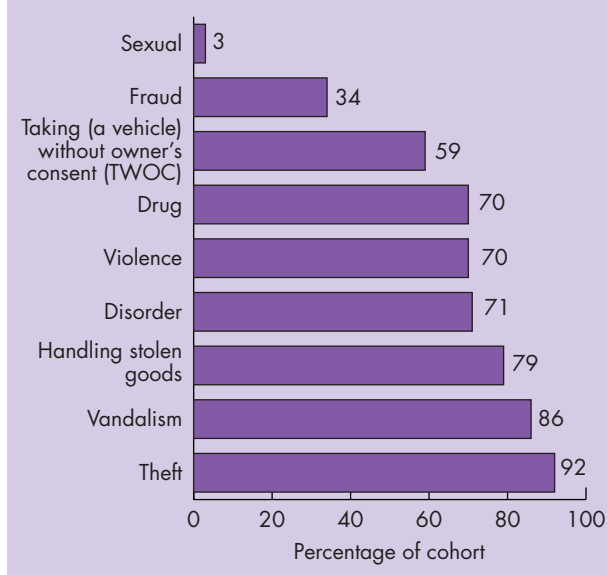
Table 1 Expectations of being in further trouble by the age of 25 (n=293)

	Likely %	Maybe %	Unlikely %
Likelihood of being in trouble with the law again by the age of 25	31	15	43
Likelihood of having a prison sentence by the age of 25	23	22	53

Notes: Four respondents did not provide an answer for each item 'Likely' includes 'very likely'; 'Unlikely' includes 'very unlikely'.

Offending

Participants were asked to record all the offences they had committed, regardless of whether they had been caught (see Figure 1). The most common type of offence was theft but most respondents admitted to committing six or more different types of offence. More than 20% said they had committed the following offences more than 20 times in the previous year – shoplifting, selling stolen goods, taking a car without consent, buying drugs, keeping or carrying large quantities of drugs and selling drugs.

Figure 1 Type of offences committed ever

Substance use

Substance use was very high amongst the young people. Even without correcting for the fact that this group are relatively young and would therefore be expected to use drugs less, rates exceeded both those of the Youth Lifestyles Survey offenders group and the British Crime Survey 16 to 30 years group. Most had taken alcohol (91%), cannabis (86%) and/or tobacco (85%). 44% had taken ecstasy, 41% amphetamines and 37% amyl nitrate. A quarter had taken both cocaine and LSD. Use of the hardest drugs was lower; 18% had taken crack cocaine and 11% heroin but use of these drugs was infrequent.

There was no evidence of a progression towards heroin or crack cocaine use or dependence, despite the diverse drug use amongst the group. However, there was evidence of 'normalisation' and use of a wider range of drugs at a younger age than 20 years ago. On average, the group had first tried alcohol and tobacco at just under 12 years; cannabis at just over 12 years; and all other drugs by the age of 15.

Despite this high prevalence, few reported dependence and only 15% were rated (by the Assessment of Substance Misuse in Adolescence) as at high risk of substance misuse problems. However, this figure is ten times higher than that found in a large school survey (Willner, 2000). Drug use was also highest amongst the most frequent offenders, lower in the medium offenders and lowest in the less frequent offenders. Over half of the group agreed that alcohol or drugs had been associated with getting upset or angry which had led to offending. 44% said that they sometimes committed crimes to get money for drugs or alcohol.

Predicting substance use and offending

Patterns of offending and patterns of substance use were identified and further explored to see how they related to each other and which factors contributed to that relationship.

Substance use did predict offending, but 'socially acceptable' drugs (alcohol, tobacco and cannabis) did so

more than any other drugs. More specifically, 'addictive type' drug use (heroin, methadone, crack cocaine and valium) was related to shoplifting and 'stimulant and polydrug' use was related to stealing cars and violence. Thus, the classic link between offending and heroin or crack use is just one relationship amongst much more diverse substance use and offending.

Other key factors predicted both substance use and offending:

- experiencing a number of life difficulties and events
- disliking and being excluded from school
- lacking positive coping mechanisms.

Those who currently offended and took substances more frequently were more likely to expect to be in trouble again. However, parenting arrangements had no impact on either substance use or offending. So, whilst it can be noted that there was a high frequency of single parent families in the group, why this should be so remains unexplained.

Service use and involvement

Extensive service use can be an indicator of psychosocial problems, whilst evidence of lack of service use can provide information about unmet needs. Participants were therefore asked about their contact with services over the previous two years. GPs and social workers were most commonly seen – a third having had more than three contacts with each. More than half of the young people had also visited an A&E department.

Substantial numbers had also received special help with a range of problems and behaviours (see Table 2). But a considerable minority who had not received help with either education or with getting a job felt that they needed that help.

The quality of help received was generally felt to be low. Over 40% said it had only been 'better than nothing' or 'no use at all'. The exception to this was help in getting a job.

The more problematic drug users were most likely to have been referred to a drug service and/or received other

Table 2 Special help received

	Had special help	
	No.	%
Offending behaviour	216	74
Education	151	52
Getting a job	127	43
Family problems	123	42
Drug or alcohol use	96	33
Worries and difficulties	89	30
Physical health problems	64	22
Mental health problems	49	17

Notes: Between 19 and 40 respondents did not provide an answer for each item.

help, but only a few felt that that help had been useful. In addition, only those users of heavier, addictive-type drugs (heroin, opiates and crack) were likely to have made more than a single contact with a substance service.

Conclusions

Despite 'normalisation' of drug use it still predicted offending – alcohol, tobacco and cannabis more so than other drugs. The fact that young offenders use cannabis and alcohol extensively means that interventions need to address these substances as well as others. The shift towards the use of heroin and/or cocaine and/or drug injection of delinquents observed in the 1980s was not evident.

Some key factors were related to both substance use and offending. A vicious circle might develop whereby drugs and offending are used to cope with life's difficulties – making those difficulties worse and confirming young people's expectations of getting into trouble again. Young people need to be taught positive coping mechanisms, including those for dealing with past events and trauma.

Because of the diversity of substance use in this group, it is well to be wary of generic programmes tackling their problems. Individual counselling or small-scale interventions may be more appropriate. For young patients, GP health behaviour screenings need to consider drugs as well as drinking and smoking and social workers need to enquire routinely about substance use when other problems are evident. Engaging young users with services is a key

problem. It is also important to recognise that, for most young offenders, substance abuse is neither the main cause of their other problems, nor a symptom that will naturally vanish when the other problems are treated.

Parents need to be engaged concerning their children's substance use. This may be easier when that use is predominantly alcohol, cannabis and tobacco, rather than focussing on drugs perceived to be more serious. The results show that 11–14 years is the key period for drug experimentation. The purpose of working with parents would be to teach them about the prevalence of drug use among this age group. This includes recognising that experimentation is a common part of adolescent drug use but also appreciating that excessive use of any substance is a cause for concern.

Many schools adopt a low- or zero-tolerance to drug use. This may not be helpful, as it encourages children to conceal, rather than deal with, their drug use and can lead to the exclusion of those caught. They are not necessarily those who use drugs most and not the only users in school.

This study broadly confirmed that drug use has become normalised amongst young offenders. This is not to suggest, however, that drug use is a problem-free activity that society is merely prejudiced about. As evidence from this survey shows, young offenders drink and take drugs more than their peers. The long-term impact of this requires further exploration.

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