

ALCOHOL & OTHER DRUGS

**Essential Information
for Social Workers**

A BASW Pocket Guide

Produced with support from:



NHS
*National Treatment Agency
for Substance Misuse*



Tilda Goldberg Centre
for social work
and social care



University of
Bedfordshire
Bedford and Luton

ALCOHOL, DRUGS & SOCIAL WORK

Social workers are in the front line of health and social care services. Alcohol and other drug use can play a significant role in the lives of people who use services.

Service users have the right to professional social care, delivered by well-trained, well-supervised workers. Social workers should be able to intervene confidently and effectively where they encounter alcohol and drug problems.

In the past alcohol and drug problems have not been high enough on the social work agenda. However now it is recognised that core social work skills are ideally suited for work with people's alcohol and drug use.

This pocket guide seeks to support social workers to take professional responsibility for ensuring their knowledge and skills meet the needs of service users with alcohol and drug problems.

SOME DO's & DON'Ts

DON'T assume that other professionals will have assessed for alcohol and drug problems

DON'T be afraid to ask; social work is all about dealing with sensitive personal issues

DON'T worry if you don't understand what people say about alcohol or drugs; they can explain

DON'T be judgemental; nobody starts drinking or using drugs *intending* to develop a problem

DO expect there to be prejudice and stigma associated with alcohol and drug users

DO explain the social work role; what you can and can't do, and talk about confidentiality

DO remember that even brief interventions from front-line workers can help people change

DO routinely address alcohol and drug issues. The more you practise the better you'll get and remember – anyone might be affected

DO find out about referral pathways to specialist alcohol and drug services

DO your best to view alcohol and drug use in its wider context: is it making any problems worse or is it helping to reduce them?

RECOGNISING & IDENTIFYING PROBLEMS

Social workers routinely assess the range of needs people have, but may be less informed on alcohol and drug issues. If this key area of need is missed, interventions for other issues will not be so effective.

Drinking and using drugs are associated with many problems familiar to social workers. Those problems are not necessarily **caused** by the use of alcohol and drugs but may be related. Routine, individual assessment is therefore essential.

While there will be evidence of alcohol or drug use in some cases, there is no magic checklist of signs and symptoms to 'spot'. Routinely asking sensitive questions is therefore vital. Specialist websites provide easy access to basic information about alcohol and drugs (see *Sources of Information* page later in this guide).

The values and skills social workers deploy in conducting comprehensive assessments are those needed to assess alcohol and drugs issues and related problems.

WORKING WITH ALCOHOL & DRUGS

AVOIDING COMMON PITFALLS

DRUGS: people frequently forget to ask about drugs, including prescription drugs. If drug use is identified it is easy to be distracted by it. Drug use is only ever part of the picture; the person's behaviour and experiences need to be assessed as a whole.

ALCOHOL: drinking is so common it may simply be overlooked, especially when there are other obvious problems. Because alcohol use is the norm, it should always be addressed. Many drug users have even worse problems with alcohol.

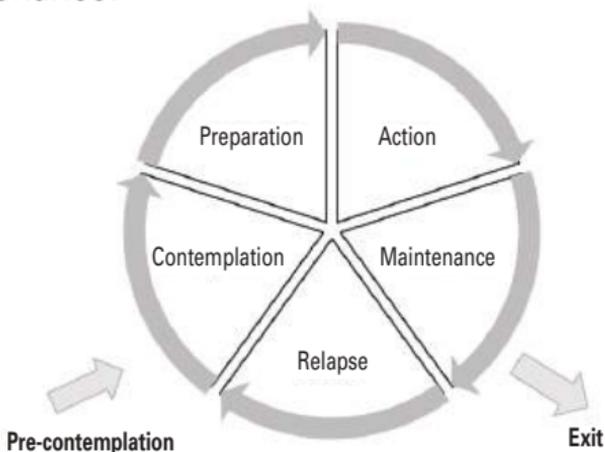
IT'S NOT MY JOB: alcohol and drug use are so prevalent among vulnerable service users that working with them is everybody's job. You do not have to be a specialist but you need to know enough to identify any issues, conduct an initial assessment and make a referral to an appropriate specialist.

PASS IT ON: when referring people on to specialist services, it is essential to ensure that everyone understands what services the social worker will continue to offer and deliver.

WORKING WITH ALCOHOL & DRUGS

Changing problematic alcohol or drug use can be hard, physically and psychologically. People will often resist imposed changes but can and do change with the right support and motivation.

The **Stages of Change** is a model for helping people to understand the process of behaviour change (Prochaska and DiClemente 1983). Change is viewed as a progression from *precontemplation*, to *contemplation*, to *preparation* for change. If successful, the next stages are *action* and *maintenance*.
If successful, the next stages are *action* and *maintenance*.



Never advise anyone to just stop using or drinking – sudden withdrawal can cause serious health problems and can be fatal. Help people to think about change and support them to get the physical and psycho-social support they may need.

ASSESSMENT & INTERVENTION: ALCOHOL

Alcohol can be counted in **units**.

This system can help people work out how much they have been drinking. Research shows that when people are helped to count how much they drink, it helps them to cut down and it helps you to assess the severity of their alcohol problems.

ALCOHOL UNITS – a rough guide:

Daily guidelines are:

- 2-3 units for women
- 3-4 units for men

The advice you can pass on is a) not to drink every day and b) that people **should not regularly exceed** these limits.

Pints of beer usually contain 2.5-3 units (super strong can be 5+); standard pub wine glasses contain around 2 units; large wine glasses 3 units; bottles 9-10 units; 25 ml pub spirits contain 1 unit. At home, people typically pour bigger measures.

Even if you know about units, check that you are up-to-date. Calculation of alcohol units can be crucial to assessment and helping service users.

ASSESSMENT & INTERVENTION: ALCOHOL

Helping people talk about their drinking or drug use is about asking the right questions in the right way. Tone of voice and an empathic approach are crucial. Once you understand units you can ask the following questions:

Women: *Do you ever drink more than 6 units a day?*

Men: *Do you ever drink more than 8 units a day?*

If they say 'never' they are unlikely to have an alcohol problem; however, to explore further:

- *How does your drinking help you?*
- *Does drinking ever cause problems for you?*
- *Would you like to change your drinking?*
- *Have you successfully made changes before?*
- *How confident are you that you could change your drinking if you wanted to?*
- *What help do you need to change?*

There may be locally agreed alcohol screening and assessment tools in place: find out. They can help social workers work in partnership with specialist agencies. Specialist alcohol services can also be a source of advice and guidance. Ensure you are familiar with the local alcohol referral pathways.

ASSESSMENT & INTERVENTION: DRUGS

The social worker may be the first professional to ask about drug issues. They can play a key role in helping people with drug-related problems.

The key information to ask about includes:

- ***What are people using?***
- ***How much are they using?***
- ***How often do they use?***
- ***How do they use (smoke, swallow, inject)?***
- ***What are the effects for them – positive and negative – of using drugs?***
- ***What happens if they stop using?***

Slang is often used to describe drugs. If you don't understand – ask the person to explain. This acknowledges the person's expertise in their own use and is part of an empowering approach.

Most local areas have agreed drug questionnaires to screen and initially assess drug problems. There will also be local drug referral pathways. If you don't know about these, check with managers or local specialist drug services.

ASSESSMENT & INTERVENTION: DRUGS

With illegal drug use, people may be wary of telling officials what they use. An assertive, empathic social work approach can be effective.

Key questions that may help include:

- ***What do you want from your drug use?***
- ***Do you always get it?***
- ***Are there other ways you could get the same things?***
- ***Would you like to change your drug use?***
- ***What help do you think you might need?***

People respond differently to different drugs at different times. Don't assume you know the effects a drug will have on someone. Ask them.

Drug information and trends in drug use also change rapidly. Local specialist services can be a source of up-to-date information and training. Ask them to explain what their specialist drug service provides and how your services could work together e.g. information sharing.

RISK ASSESSMENT & UNMET NEEDS

People with alcohol- and other drug-related problems and their families are vulnerable to other risks. Make sure you ask about them.

Suicide and self-harm prevalence is much greater among people with drink and drug problems.

Domestic violence and abuse is highly correlated with problem drinking and drug use.

Mental ill health often co-exists with alcohol or drug problems and both issues need to be addressed through partnership working.

Physical health problems may be caused or exacerbated by alcohol and drug use.

Child care: alcohol and drug use may impair parenting capacity but neglect or abuse should not be assumed. Assess: is support needed?

Older people also experience problems more often than has previously been recognised.

A FRAMEWORK FOR HELPING

FRAMES is a model based on a proven intervention, 'Motivational Interviewing'.

Feedback on their alcohol and drug use must be accurate and positive

Responsibility – be clear that the **choice** to change and responsibility for it rests with the client

Advice giving – give clear information and advice

Menu – offer a choice of change options

Empathy – adopt an empathic counselling style

Self-efficacy – promote independence

WORKING WITH SPECIALIST SERVICES

- Ask for advice and information on alcohol and other drugs, the services they offer and their referral procedures
- Establish their willingness to conduct joint assessments and joint visits
- Establish information sharing boundaries **before** work starts
- Offer two-way support, eg. training exchanges
- With permission, conduct three-way meetings with service users and specialist services
- Maintain regular communication and meetings with specialist services

SOURCES OF INFORMATION

- BASW British Association of Social Workers
www.basw.co.uk
- NTA National Treatment Agency
www.nta.nhs.uk
- AERC Alcohol Education and Research Council
www.aerc.org.uk
- DrugScope
www.drugscope.org.uk
- Alcohol Concern
www.alcoholconcern.org.uk
- Alcohol Learning Centre
www.alcohollearningcentre.org.uk
- Release
www.release.org.uk
- Social work, alcohol and drugs
www.swalcdugs.com
- Alcohol Focus Scotland
www.alcohol-focus-scotland.org.uk
- Scottish Drugs Forum
www.sdf.org.uk
- Alcohol Concern Wales
www.drinkwisewales.org.uk
- North Wales Substance Misuse forum
www.nwsmf.org.uk
- Alcohol Action Ireland
<http://alcoholireland.ie>
- Drugs.ie
www.drugs.ie

LOCAL CONTACT INFORMATION

Drugs
Alcohol

FEEDBACK

BASW and the sponsoring organisations of this pocket guide welcome feedback on this first edition. Advice on individual cases is best obtained in partnership with local professionals.

Feedback online at:

www.basw.co.uk/networks/alcdugs

An online version of this pocket guide can be downloaded from the above address and also at www.beds.ac.uk/goldbergcentre/resources

Developed on behalf of the BASW Special Interest Group in Alcohol and other Drugs by Trevor McCarthy (trev.mcc@virgin.net). Edited by Sarah Galvani.

First edition published 2010
Reprinted 2012

© University of Bedfordshire 2010

To cite this guide: McCarthy, T. and Galvani, S. (2010)
*Alcohol and other Drugs – Essential Information
for Social Workers. A BASW Pocket Guide*. Luton:
University of Bedfordshire