



Evaluation of the Mentor/Addaction Street Talk programme

Executive Summary

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The Street Talk project implemented an evidenced brief intervention that set out to identify and engage young people who may be at risk for problematic substance use and associated anti-social behaviour. The intervention had two key stages: screening, and then if appropriate, delivery of a brief motivational interviewing session.

The evaluation objectives were to:

- Report on the quantifiable outcomes of the project
- Report on the findings regarding the process of the planning and delivery of the project

Evaluation data was collected via 2 main sources:

- By a specifically designed app on a phone which contained the screening and evaluation questions. On outcomes for young people. Workers encouraged young people to complete these forms, as well as a web based follow up questionnaire.
- By process interviews with key stakeholders, conducted at both baseline and final stages of the project.

Key Learning from the outcomes evaluation

The evaluation of young people who engaged in the Street Talk project demonstrated that the intervention was productive in supporting young people to increase their knowledge and confidence about accessing support and making informed decisions around substance use.

Whilst there was no statistically significant difference in the overall wellbeing scores between pre intervention and follow up, the baseline measurement demonstrated relatively high levels of wellbeing. This may explain why these young people had not previously reached the threshold or accessed specialist substance misuse treatment services before engaging in the Street Talk project.

With regards to intention to change future behaviour, the Street Talk project elicited consensual agreement amongst the majority of the young people that the role of significant others, personal responsibility to control behaviour and a greater understanding of the interplay between past use, future use and the challenge in changing the levels, methods and social behaviour around substance use were prevalent.

Key learning from the process evaluation

Effective structure, support and commitment

Despite the pressures, there appears to have been a huge amount of good will and commitment to enable this project to be effective, across the whole structure. The majority of respondents felt that the management and co-ordination structures worked well and most people felt well supported and that relationships were good. Co-ordinators and managers of voluntary organisations consistently highlighted how flexible and solution focused staff had been.

Use of technology

A key element of the project was the use of street based technology for the completion of the screening tool, and evaluation forms. Whilst there was some key learning points overall the response to this technology was positive. Workers generally welcomed it as an attractive way of engaging with young people. A general consensus was that the app would be more effective if used on tablets rather than phones.

Capacity Building

The project appears to have achieved a high level of success in capacity building organizations, specifically in their ability and confidence to identify and address substance misuse issues with young people.

Sustainability

Most local areas were realistic about the limited prospects of continued funding due to the financial climate. This has also been compounded by the project timescale being at a disjuncture with local commissioning cycles. Most areas are keen to explore ways of continuing some elements of the project at local levels however, including reinforcing the training, using technology with young people and addressing a wider range of health and well being issues with young people.

Benefit of financial payments

The financial payments to both the voluntary organisations and to the young people were cited as being significant in their initial engagement.

Early Intervention

There was universal agreement that in terms of long-term consequences for young people, their families and communities, an early intervention approach is essential in terms of both human and financial costs. Future investment shouldn't be at the expense of young people's substance misuse treatment budgets however.

Timescale

The factor, which most created pressure on the project, was the timescale in which it had to be delivered. Many of the barriers to the effective planning and implementation of the project were attributed to the timescale and funding delays.

Organisations felt that there would have been a greater return on the financial and resource investment had the project had longer to run.

The restrictions caused by delivery within the funding/financial year meant that a street based project was delivered during the winter months. Organisations would have been able to access more and a greater diversity of young people had it been carried on over the summer months.

Additionally, both the short timeframe and the time of year of delivery meant that engagement with the local commissioning cycle was difficult. Respondents felt that this has had implications for the sustainability and integration of the project within local early intervention strategies.

The time pressures caused a lack of consultation and time to "get things straight" before they went out to the field. This led to perceived "changing of goalposts", miscommunication and issues with unpiloted evaluation questions and technology.

Voluntary organisations stated that young people should have been more involved in the project design – not to do this ran counter to their ethics and way of working.
You can download the full report from www.mentoruk.org or www.addaction.org.uk

