



# Youth Involvement Project Report

**April 2008**

# 1. Executive Summary

## Aims and Objectives

### ***Aim of the Project***

To establish a Youth Involvement Project to consult young people about substance misuse prevention issues. This would comprise a Young People's Reference Group and consultation with young people via the World Wide Web.

### ***Objectives of the Youth Involvement Project***

To establish a network of young people to give their views on:

- Health and social issues that are relevant to drug prevention work with young people.
- The effectiveness and relevance to young people of current approaches to drug prevention work.
- Mentor's drug prevention projects.

### ***Objectives of the Young People's Reference Group***

To establish a Young People's Reference Group which would be:

- Youth-led – young people will be involved in every step of the planning and implementation of the project.
- Diverse – with young people diverse backgrounds.
- Facilitated in an empowering and supportive way.
- Trained and supported to give their views.

### ***Objectives of the web-based consultation***

To consult a wide group of young people via the World Wide Web.

### ***Outcomes of the Youth Involvement Project***

- The young people will gain self-esteem through their involvement in the project.
- The web based consultation with young people will give a wide group of young people the opportunity to influence drug prevention policies that affect them.
- The outputs of the project will be of a high quality and will make a positive contribution to drug prevention with young people.

## Methodology

Between May 2006 and March 2008 Mentor worked with 63 young people aged 12-20 from around England and Wales. Each young person participated for a year. They attended residential meetings every 2-3 months to be consulted and to receive training and facilitation to develop their ideas around drug prevention.

This culminated in the young people

- presenting their views to the Parliamentary Under Secretary of State for Crime Reduction at the Home Office, key civil servants from across government and the Office of the Children’s Commissioner;
- influencing government drug policy via input into the new UK government drug strategy;
- and influencing the development of two sets of National Institute for Health and Clinical Excellence public health guidance relating to drugs and alcohol.

## Themes

These themes emerged from the views the young people expressed during the project.

**Parents, carers and families:** the young people felt that parents should create a relationship of trust where they can discuss drugs in a non-intrusive way and that there should be better support for families affected by drugs.

**Don’t infringe rights and balance penalties with empowerment:** concerns were raised that young people’s rights were being infringed in an effort to prevent them using drugs, by using methods such as bringing sniffer dogs into schools. The group felt that there should be higher penalties for drug misuse and young people should also be empowered and supported to avoid drugs.

**The need for trusted adults:** there is a need for drugs support, education and intervention needed to be provided by adults who young people trust. Youth workers were seen in a positive light but teachers were not are not trusted to provide good drug education. Confidentiality was a key concern and this contributed to young people’s decisions about who to trust to provide support.

**Alcohol:** some of the young people reported drinking large amounts of alcohol regularly and the majority lacked awareness of the harm that alcohol can do to health and didn’t understand drinking guidelines. They reported that alcohol was easily accessible for them either by buying it directly or being bought it by other older young people.

**Vulnerability:** the young people highlighted factors which make them particularly vulnerable to drug misuse including parental drug use, deprivation in their local area, stress, depression and low self esteem. They said there needed to be specific support to address these vulnerability factors.

**Need for improved education and information:** the group felt drug education needed to be far better and should be a specific subject on the curriculum. It should include simple straight forward messages about the known risks associated with drugs and these should ideally be delivered by drug ‘experts’ brought into schools rather than teachers teaching it.

**Support for young people using drugs:** there was a perception that there was little support for young people who were using drugs and that those services that did exist were not properly advertised.

**Pressures – media and peers:** the young people thought their behaviour was strongly influenced by media portrayal of drug use both on television and by celebrities. Peers were also seen as a strong influence and many feel that their peers were a positive influence because they didn't use drugs.

**Positive activities:** they felt boredom contributed to young people using drugs and said there needed to be more positive activities available and accessible to young people.

**Availability:** both drugs and alcohol were perceived as widely available and easily accessible to young people.

## **Achievements**

The Youth Involvement Project has influenced some of the key policies, strategies and guidance that shape work to prevent young people developing problems with drugs and alcohol, including the UK government drug strategy and National Institute for Health and Clinical Excellence public Health guidance relating to drugs and alcohol.

The young people involved have felt empowered and have gained a variety of new skills and experiences which many have used in their work and educational lives.

The project has further promoted the value of youth involvement work in developing drug policy that is relevant for young people.

## 2. Background

### 2.1. Introduction

Mentor is a registered charity that works in conjunction with its partners in the international Mentor family. Our mission is identical: *to focus on the prevention of drugs misuse in our efforts to promote the health and wellbeing of children and young people and to reduce the damage to their lives. Mentor aims to support the effective use of human, financial and intellectual resources to achieve this goal.*

Mentor's work has always had a strong focus on involving young people in developing projects, through consulting them in development and by involving them in making key decisions. Several of our projects, such as our rural project have focussed specifically on this; this project supported young people to evaluate prevention resources used with rural young people.

In 2005 Mentor secured funding to extend this youth involvement work to establish a network of young people to advise Mentor and others working in prevention in order to enable young people to be central to planning, evaluation and dissemination of prevention work.

### 2.2. Aims and objectives

#### ***Aim of the Project***

To establish a Youth Involvement Project to consult young people about substance misuse prevention issues. This would comprise a Young People's Reference Group and

consultation with young people via the World Wide Web.

#### ***Objectives of the Youth Involvement Project***

To establish a network of young people to give their views on:

- Health and social issues that are relevant to drug prevention work with young people.
- The effectiveness and relevance to young people of current approaches to drug prevention work.
- Mentor's drug prevention projects.

#### ***Objectives of the Young People's Reference Group***

To establish a Young People's Reference Group to be:

- Youth-led – young people will be involved in every step of the planning and implementation of the project.
- Diverse – the young people who make up the Reference Group will be from diverse backgrounds.
- Facilitated in an empowering and supportive way.
- Trained and supported to give their views.

#### ***Objectives of the web-based consultation***

- To consult a wide group of young people via the World Wide Web.

## **Outcomes of the Youth Involvement Project**

- The young people will gain self-esteem through their involvement in the project.
- The web based consultation with young people will give a wide group of young people the opportunity to influence drug prevention policies that affect them.
- The outputs of the project will be of a high quality and will make a positive contribution to drug prevention with young people.

### **3. Methodology**

Between May 2006 and March 2008 Mentor worked with sixty three young people aged 12-20 from around England and Wales. This comprised thirty nine females and twenty four males. One young person was from a Black/Black British background, two were Mixed White and Black Caribbean, one Mixed White/Asian, fifty-eight were White British and one was Mixed White/Belgian.

They were selected on the basis that they were not young people who had previously displayed problematic drug misuse but did have many of the characteristics known to be risk factors for substance misuse such as school disengagement, being in or currently leaving the care system and having parents who misuse drugs.

The young people were from Pembrokeshire, Staffordshire, Tyneside, Rotherham, the West Midlands, Essex, London, West Yorkshire and Lancashire.

They were recruited and supported in their involvement in the project via partner agencies who were working with them locally. These included youth services, young peoples' drug

and alcohol services, participation projects and agencies working with families of drug users.

Each young person participated in the project for a year. They attended residential meetings every 2-3 months to be consulted and to receive training and facilitation to develop their ideas around drug prevention.

This resulted in the young people:

- influencing National Institute for Health and Clinical Excellence (NICE) guidance on community based interventions to reduce substance misuse amongst vulnerable and disadvantaged young people by giving feedback on the draft guidance document in November 2006;
- having their views presented by Mentor to a special meeting of the European Union of 25 National drug coordinators and the European Commission.
- making a presentation to civil servants involved in developing the new government drug strategy from the Home Office and Department for Children Schools and Families (DCSF) in April 2007;
- making a presentation to the Office of the Children's Commissioner in April 2007;
- inputting into Mentor's Strategic Plan, via a presentation to Mentor Trustees in May 2007;
- influencing NICE guidance on alcohol interventions delivered in schools by giving feedback on the draft guidance document in July 2007.
- inputting into the new government drug strategy by giving feedback to the DCSF in November 2007 as part of their consultation on the strategy.
- presenting their views to the Commonwealth Parliamentary Association conference *Tackling Drugs, Changing*

*Communities Challenges for Parliamentarians* in February 2008.

- presenting to the team Leader of the Substance Misuse Team at the DCSF in March 2008.
- presenting to the All Party Parliamentary Group on Drugs in March 2008.
- meeting with Vernon Coaker MP, Parliamentary Under Secretary of State for Crime Reduction at the Home Office in March 2008.

Initial objectives of the project included consulting young people via the internet, but attempts to engage young people in this were not fruitful.

#### 4. Themes

During the project the young people expressed views and ideas on a variety of issues relating to drug prevention. The following themes emerged.

##### ***Parents, carers and families***

Overall the young people saw the benefit of involving their parents in supporting and educating them about drugs and alcohol, but this depended to some extent on the individual's relationship with their parents. There was a sense that the young people, like adults saw this as a challenge and would want to think about it and explore it in more depth to identify the most effective way to facilitate such a dialog.

The young people were clear that parents needed to build up a relationship of trust (rather than accusing the young person) where rules and boundaries could be negotiated. They should make the young person feel relaxed by not showing anxiety themselves and shouldn't overreact to what they have to say. They also didn't want what

they perceived to be 'unnecessary intrusion' into their lives and emphasised that parents should not keep repeating their messages about drugs.

***“I've had the drug talk from my parents, but it wasn't really a talk, more of a threat.”***

Young person aged 15.

There was an expressed need for parents to be given information, training and support to support their young people around drugs and alcohol, but this should be done in such a way as to engage rather than alienate parents, so they didn't feel their parenting was being questioned or undermined. One way to do this was to offer local community events but not to present these as specifically linked to drugs. Providing parent support workers who could visit parents in the home was also suggested.

***“Parents might think that [the worker] is telling them what to do and [their parenting] is wrong. You don't want them to think it's butting into the way they are doing things.”***

Young person aged 16.

A negative relationship with parents was seen as making young people vulnerable to drug misuse and some of the young people did not live with parents highlighted that guidance around parenting needed to take account of carers other than parents.

##### *Impact*

*The new government drug strategy promises better information and parenting skills support to enable parents to educate their young people about drugs and alcohol. The young people expressed their views on this as part of their feedback on the strategy.*

*As a result of the young people's feedback, NICE's guidance on community based interventions to reduce substance misuse amongst vulnerable and disadvantaged young people was amended to refer to 'parents and carers' rather than specifically parents.*

*The group presented their ideas about local community events and parent support workers to Mentor Trustees in May 2007. The trustees considered these alongside other priorities when developing Mentor's strategic plan for 2008-2013.*

### ***Don't infringe rights and balance penalties with empowerment***

There was a theme of young people feeling that their rights were being infringed in a way that adults rights would not be, in an attempt to prevent drug use and antisocial behaviour.

These infringements included the use of sniffer dogs to find drugs in schools, the possible introduction of random drug testing in schools, and the use of dispersal orders whereby police split up groups of more than two people.

They felt that drug testing and sniffer dogs infringed young people's privacy and potentially led to stigmatisation of young people who use drugs. They believed it would weaken trust between pupils and teacher and could ultimately lead to some of the most vulnerable young people becoming disengaged from the school system. In the case of sniffer dogs some schools were also apparently not informing young people of their right to refuse to participate. However, some of the group did say that the fear of being found with drugs had stopped their peers taking drugs to school and in one case led them to stop using altogether.

***"Drug testing in schools is patronising and demoralising and it shows a lack of trust."***

Young person age 19

Dispersal orders were being used to disperse young people who gathered in groups; this made young people angry, particularly as they felt the police targeted the less intimidating young people.

Whilst they highlighted these rights issues the group did endorse higher penalties for drug dealing, drug use and misuse and drink driving as the best ways of keeping young people off and away from drugs.

They emphasised the importance of empowering young people by enabling them to have a say in policy development, run youth led projects and mentor and train other young people.

### ***Impact***

*The young people raised awareness of the use of sniffer dogs and dispersal orders at the Commonwealth Parliamentary Association conference in February 2008. This led to a discussion amongst international parliamentarians about the use of such tactics which some considered 'heavy handed' and discussion of alternative ways to reduce drug misuse amongst young people.*

*The group took their concerns about random drug testing in schools to civil servants in April 2007. Since then the government have indicated they are going review this practice but are yet to commission such a review. In the interim, partially due to general lack of interest from schools in this approach, it has not been rolled out widely across the UK.*

## ***The need for trusted adults***

There was a strong emphasis on the importance of trust in adult professionals who provide support and education to young people.

The young people emphasised that the personality of the worker who delivers a drug intervention is key to its effectiveness.

There was a general lack of trust in the ability of teachers to deliver drug education; it was felt that they were not really motivated to teach to subject and were biased in their messages, they only talked about the negative affects of drugs and did not give a balanced view.

***“I don’t think [teachers] actually care about it, they’re just paid to do the job.”***

Young person aged 15

Confidentiality was a key concern and the extent to which an adult would maintain this contributed to the young person’s trust in them and their decision as to whether to go to them for support.

Youth workers were viewed as someone who young people could trust to provide support and advice. They believed they gave a balanced view, had the required training, didn’t patronise young people, didn’t stigmatise or judge young people and held a role somewhere between a friend and a parent.

School nurses and older siblings were also seen as trustworthy sources of support and advice about drugs and alcohol.

## ***Impact***

*As a result of the young people telling NICE their views on who they trusted to provide alcohol education and support, NICE amended their guidance on alcohol interventions delivered in schools so that the guidance named youth workers as key people to facilitate delivery of alcohol interventions.*

## ***Alcohol***

Alcohol appeared to be a part of everyday life for the young people; they drank it regularly and in large quantities and did not generally view it as a ‘drug’.

The majority of the group had drunk alcohol, about half drank frequently and a handful of the females reported drinking a quarter to half a bottle of vodka each night over three nights of the week. None of these young people perceived themselves to be misusing alcohol.

They did not know about or properly understand sensible drinking guidelines or the potential effects on their health from alcohol. For example they hugely underestimated the amount of alcohol that constitutes a binge drink – they estimated it was twelve pints of larger and when told that the commonly used definition was five drinks for a male and four for a female they were alarmed and said this was unrealistically low.

When asked to define what they considered sensible drinking the group said it involved parental supervision, knowing your limits and not going over these and drinking on special occasions, where as not drinking sensibly was characterised by drinking daily, large amounts on one day, not being supervised, drinking to have fun or because you’re depressed and drinking which affects your life and results in unsafe behaviour (eg accidents, unsafe sex).

The group believed it would be difficult to identify a young person who was misusing alcohol either through schools or other services.

There was a sense that it was easy to get alcohol if you wanted it either by getting older young people to buy it or by going to shops which were widely known to sell alcohol to underage young people. They described areas where hundreds of young people would gather to drink and said that there were fights and other anti-social behaviour as a result but the police would turn a blind eye to this.

### *Impact*

*In response to the young people's feedback NICE amended their guidance on alcohol interventions delivered in schools so that it called for schools to identify those deemed at risk of alcohol misuse rather than those already misusing. This was in response to the young people's feedback that it would be difficult for schools to identify those who are misusing alcohol. Also in response to their feedback, NICE extended their recommendation concerning partnership working to call for schools to work more closely with youth services and young people's drug services.*

### **Vulnerability**

The recognition by some of the young people as to their own vulnerability was striking and they identified the need for specific support for vulnerable young people.

Sources of vulnerability they identified included their environment; coming from a poor area where the community is stigmatized, where there is a lack of jobs, lack of aspiration and facilities and affordable activities for young people. There was also a strong sense that many vulnerable young

people were either not in school or not actively engaged.

Emotional health issues were repeatedly mentioned as increasing vulnerability; stress due to school and personal problems, depression, low self-esteem and lack of confidence, eating disorders and bereavement issues. The young people said there should be better provision of specialist counselors to help young people with these problems.

***"I think they should space out exams so there's less stress from school. "***

Young person aged 14

Several members of the group highlighted the needs of young people in families where drugs are used and said that they needed specially trained workers to support them and structures in place to identify drug problems within the family early on.

Despite this recognition of vulnerability there was concern about how 'vulnerable young people' would be defined and identified so as to avoid stigma.

***"Schools shouldn't judge young people just because of their background"***

Young person aged 15

### *Impact*

*The young people highlighted some of these issues around vulnerability to NICE in their feedback on community based interventions to reduce substance misuse amongst vulnerable and disadvantaged young people. As a result of this NICE made a number of amendments to their guidance. This included stating that a variety of services (not specifically schools) should refer young people for drug interventions.*

*The government drug strategy has a strong focus on supporting families where substance misuse is an issue, including prioritising the protection of children in these families and identifying earlier those families where parents are misusing substances. This followed presentations by the young people to civil servants in April 2007 in which they emphasised the issues faced by children of substance misusing parents.*

### ***Need for improved education and information***

The young people were unimpressed by the quality and quantity of the drug education they had received so far and expressed a desire for this to improve. They thought that drug education should be put on the curriculum as a subject in itself, rather than taught as part of other subjects and that more time should be spent on it.

They wanted simple straight-forward messages about drugs which tell them the known facts in an unbiased way and they wanted these to be delivered by someone who knew about the subject, was unbiased and was motivated to teach it. For this reason they preferred 'experts' such as drug workers to be brought into schools to teach drug education rather than teachers who they perceived to be biased towards only telling young people about the negative aspects of drugs, lacking knowledge about drugs and not really wanting to teach drug education.

***"I prefer it when they just tell it like it is."***

*Young person aged 14*

Drug education lessons needed to be short and keep information simple, be interactive, use practical learning methods, use role plays and use the language that young people use. Drug education should also start early, before

young people go to secondary school and the messages delivered to younger children should focus on the dangers but be delivered sensitively so as not to scare them.

In addition to school, the young people felt there should be more websites and helplines providing information about drugs and alcohol.

They wanted to hear from people who had experienced the negative consequences of drugs; there was support for the idea of ex-drug users being brought into schools to teach about the dangers of drug use. They also said advertisements showing the negative consequences of drug use were far more effective if they featured real people than actors.

### ***Impact***

*The new government drug strategy called for improved drug education. This followed the young people's feedback on the drug strategy consultation about how to improve drug education.*

*The government has commissioned a review of evidence on effective drug education. The young people's views will form a core part of the evidence on which it's recommendations are based.*

### ***Support for young people using drugs***

The young people talked about their perception that there was not enough support for young people who were using drugs or that there was a lack of advertising so they weren't aware of where they or their peers could go for such support.

They were keen on the idea of drop-ins because it was seen as somewhere young people could go for information and advice about drugs if they felt they needed it.

## *Impact*

*Vernon Coaker gave feedback that the young people's presentations were excellent and their views would help make public policy more relevant to young people. Specifically, he said advertising and communications would take account of their views about lack of advertising of services.*

## **Pressures – media and peers**

The group frequently discussed the pressure they felt from others about drugs, including their peers and the messages they got from the media.

The younger young people particularly perceived what they called 'peer pressure' to be a key cause of young people using drugs. However they didn't appear to have experienced this themselves, instead they talked of their own experience of positive peer pressure; friends who didn't take drugs.

***“I'm lucky of got a close group of friends who don't do drugs”.***

*Young person aged 14*

The young people also felt that older young people were often a source of negative peer pressure – particularly if they were over eighteen as they would buy underage young people alcohol.

They thought that seeing drug taking and drinking in the media influenced their attitudes and behaviour a great deal. Seeing celebrities drinking and taking drugs made them curious to try it and increased the perception amongst the public of young people taking drugs, but seeing celebrities who they perceived as having a negative image such as Pete Docherty taking drugs put them off. TV programmes featuring drug use also made them curious, but those that showed the

negative consequences such as vomiting due to alcohol also put them off.

***“When you see skins and they're drinking and smoking it makes you want to try it, but then they show them being sick in the morning and that's like the real side of it so it puts you off. “***

*Young person aged 13*

## *Impact*

*The young people's presentation at the Commonwealth Parliamentary Association conference in February 2008 prompted discussion from the attendees about the media's trivial treatment of celebrity drug taking.*

*The young people raised the importance of media and peers' influence on their alcohol consumption in their feedback on NICE's alcohol interventions in schools guidance. In response NICE added a recommendation that effective alcohol education in schools should include helping young people explore other's perceptions of alcohol consumption.*

## **Positive activities**

Boredom was seen as an important factor in leading to drug misuse problems and the group thought a key protective factor would be young people being engaged in activities which didn't involve drugs.

***“Getting your highs from other things, that makes people less likely to do drugs”.***

*Young person aged 15.*

They expressed a need for more activities for young people, including making existing activities more accessible by reducing the cost and improving local transport to these activities. There were concerns about the

deterioration of parks which they felt should be accessible to young people but were no longer accessible to all because of the intimidating groups of young people who now inhabited them.

***“If [young people] are doing fun stuff like going on residential there’ll be less of them on the streets, they’ll get new skills, it’ll boost their confidence, give their parents some time out and they’ll all have fun. “***

*Young person aged 13*

They called for money from other restrictive approaches (such as drug testing in schools) and from taxes on cigarettes to be channeled into such activities.

Finally, the young people wanted more youth led activities and peer mentoring programmes, because these were felt to both help those benefitting from the projects and empower and give new opportunities to those who deliver them.

#### *Impact*

*At a Mentor trustees meeting held in May 2007 the young people emphasised the importance of positive activities for young people including youth led activities and project such as the Mentor Youth Involvement Project. Mentor’s new strategic plan includes the development of youth initiated projects by 2013.*

#### **Availability**

There was a clear consensus that drugs and alcohol were both widely available and easily accessible for these young people, should they wish to acquire them.

***“I know at least twenty places in my area where you can get drugs easily.”***

*Young person aged 15*

The low cost of drugs and alcohol was seen as enabling young people to use these and particularly enabling young people to drink alcohol in large quantities. The group therefore suggested prices should be increased to make drugs and alcohol more difficult to acquire.

#### *Impact*

*It was informative but perhaps surprising for Mentor Trustees to hear from the young people that in some of their local areas cannabis was easier to access than alcohol.*

## **5. Achievements**

### **5.1 Enabling young people to influence policy**

The young people who participated in this project have influenced some of the key policies, strategies, guidance and people who shape work to prevent young people developing problems with drugs and alcohol.

They have influenced the way that young people around the UK will be helped to avoid drug misuse for the next five years by inputting into the development of the new government drug strategy and have communicated their views to some of the most senior Politicians making decisions about drug prevention policy in the UK. They have also presented their views and had their views presented in an international arena.

People that they met with were extremely impressed with their considered views and for this reason repeatedly asked for input from young people into their work.

**“We found the presentation by the young people from the Mentor Youth Involvement Project very useful as an insight into the priorities that young people feel should influence government policy on drugs. The fact that the young people had prepared well thought out arguments to back up their decisions made their recommendations carry more weight.”**

*Matthew Scott, the Substance Misuse Team Leader at the Department for Children, Schools and Families*

## **5.2 Achievements and opportunities for young participants**

The project set out to enable young people to influence policy but has also helped the young people who participated gain a great deal in terms of personal development.

They found the opportunity to influence policy very empowering and this gave them confidence.

**“It was so easy to talk to top bosses from different places (Home Office and Office of the Children’s Commissioner) and I’m glad they came to see us.”**

Young person aged 15

**“It’s actually good to know that the government and people like that actually ask you how [young people]**

***like to be taught and what do they know and what they don’t know.”***

Young person aged 16.

### **Case study: Dave**

Dave is from an economically disadvantaged rural area in the west midlands and was 17 when he joined the Mentor Youth Involvement Project. At the time he was in an Education to Employment Programme, he was extremely shy, would not speak in groups and was wary of trying new activities. He lacked confidence and didn’t know what he wanted to do for work; he had tried several jobs, none of which had worked out. He was involved with helping out in a voluntary capacity at his local youth service.

During the year, Dave became a lot more confident in both personal and work life and much more willing to try new things. For example, the final meeting of his group of young people was held in London so that they could visit the Home Office to present their views to civil servants involved in developing the new drug strategy. The youth worker who usually Chaperoned Dave to meetings was unable to attend but Dave was so keen to be there to present his ideas that he travelled to London by himself. Dave’s youth worker said that he could never have imagined him travelling so far on his own and under his own initiative prior to being involved in this project.

After Dave had been involved in the project for six months he secured full time employment and some time later was promoted. He also started driving lessons and began proactively volunteering for his local youth service; he now recruits and trains young people as part of a peer mentoring scheme. He also accredited his involvement in the Youth Involvement Project through the youth achievement awards.

For some it was the new experiences that were the highlight. Many had never been to London and a handful had not travelled further than the next county. The opportunity to travel and build friendships with other young people, from very different backgrounds and experiences helped broaden their perspective.

***“One of the great things was some of the things we learnt – you learn quite a bit from just listening to the others in the group talking about random stuff that’s going on where they live.”***

Young person aged 19

Teambuilding leisure activities were an integral part of every residential meeting and were also new experiences for most of the group, including kayaking, dry slope skiing, the London Eye, visiting the London Aquarium and the Houses of Parliament and cooking meals for the group. The training and facilitation helped them develop confidence in their communication and presentations skills.

***“[the meeting] was really good, at the beginning I didn’t like speaking in front of everyone, but by the end I felt like I could stand up and say what I thought”***

Young person aged 16

Some young people also accredited their involvement in the project through the Youth Achievement Awards.

***“They can actually make a difference, their views and opinions count and they get to do some accreditation, they’re doing the Youth Achievement Awards.”***

Darren Foley, Participation Officer, Staffordshire Youth Service, partner agency in the Mentor Youth Involvement Project.

Some of the young people developed a real interest in drug prevention work and continued work in this area after the project. One young person has gone on to carry out a survey of drug education in his area and another to chair a national drug conference.

#### **Case study: Sally**

**Sally is from Pembrokeshire, Wales. When she started on the Mentor Youth Involvement Project she was aged 15 and was living in foster care as a result of her mother’s mental health problems; she has bipolar disorder. She was at school taking part in an alternative curriculum programme (a package of GCSEs and vocational qualifications).**

**Sally really enjoyed being involved in this project and made the most of the opportunity. She attended all four residential meetings during the year and was a positive and helpful influence as part of the group. These meetings and the training she received massively boosted her self esteem and confidence to express her views and communicate with influential people. This culminated in her presenting her view at the Office of the Children’s and to key civil servants from the Drugs Strategy Unit at the Home Office; she highlighted issues around the stigma of living in a deprived area and the lack of facilities and activities available. During this time she developed an interest in politics and organised a school election and a trip to Parliament for fellow pupils. She also appeared in Children and Young People Now magazine to highlight her concerns about the possible introduction of random drug testing in schools; she felt this would lead some of the most vulnerable young people to disengage from school and that the money could be better spent to support young people to avoid drugs.**

While Sally was involved she began working towards a Gold Prince's Trust award which she has since completed. After GCSEs she went on to college to study Travel and Tourism.

In March 2008 Sally won the Prince's Trust Educational Achiever Award, a national award for young people who have shown outstanding academic achievement.

Her youth worker feels that the work she did developing presentation skills and communicating with influential people on the Mentor Youth Involvement Project not only boosted her confidence, but also really helped her with the presentation and media work she did for the Prince's Trust Award.

Sally now lives with her long term boyfriend and his family, is doing well at college and hopes to train to be a nurse in the future.

### 5.3 Promoting the value of youth involvement in policy development

The project has helped to further promote youth involvement in policy development, predominantly by providing those developing policy and guidance who were not currently consulting young people with the opportunity to do this and helping them to see the benefits of such involvement.

The National Institute for health and Clinical Excellence did not routinely involve young people in the developing their guidance prior to the Youth Involvement Project's involvement. The project's input in two sets of this guidance helped make these relevant to young people and highlighted the importance of engaging them in the process of developing such guidance.

Likewise, the young people's presentation to the All Party parliamentary Group on Drug Misuse was the first time in many years that the group had heard the views of young people. This enabled MPs and others key people with an interest in drug misuse issues to hear about these from a young person's perspective.

Feedback from the CPA about the young people's session at their *Tackling Drugs, Changing Communities Challenges for Parliamentarians* indicated that hearing directly from young people was really a highlight of this conference, predominantly consisting of adult professional speakers.

Overall the project has helped to further highlight the importance of consulting with young people in policy development to make policy relevant to young people and therefore more effective in helping them avoid drugs.

These young people also shaped Mentor's future work through the young people's input into the strategic plan and by continuing to maintain and develop youth involvement work as central to the organisations' vision.

## 6. Conclusion

This project has gone some way towards helping to both engage young people in drug policy development and enabling those who develop such policies to see the benefit of youth involvement. Further work should be done by Mentor and others to take forward their ideas and recommendations and to continue to develop youth involvement in drug policy development.

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