

A photograph of three young women in a hallway, with the Mentor UK logo and title overlaid at the top. The woman on the left is wearing a brown jacket and a pink bag. The woman in the middle is wearing a white top. The woman on the right is wearing a grey top and a white belt. They are all smiling and looking towards the camera. The hallway has a curved ceiling and is brightly lit.

**M** Mentor UK  
REVIEW 2006-2007

## OUR MISSION

Mentor UK is a registered UK charity that works with its partners in the international Mentor family, with whom it shares the same mission.

The Mentor Foundation focuses on the prevention of drug misuse in our efforts to promote the health and wellbeing of children and young people and to reduce damage to their lives. Mentor aims to support the effective use of human, financial and intellectual resources to achieve this goal.

## ABOUT PREVENTION

Drug treatment services treat individuals once they have developed a problem. The prevention of drug misuse addresses personal, social and environmental factors, in order to contribute to delaying or avoiding the onset of drug use and its progression to harmful or problematic misuse. It is based on the principle that drug misuse is a preventable behaviour and that prevention can bring about lasting changes in communities. The UK government and others have stressed the importance of prevention in tackling the structural problems affecting socially excluded communities across the UK.

Drug prevention is not just about drugs. Mentor's message is positive – it is about promoting opportunities. By building supportive communities, supporting family networks, investing in infrastructure such as playing fields and youth clubs, giving young people things to do, we can reduce the risk of problematic drug use. We can also support young people to make healthy choices, to live fulfilling lives and to contribute to their communities.

## OUR PRIORITIES INCLUDE:

- **Facilitating** dialogue between organisations and individuals engaged in substance misuse prevention, to share experience and learning
- **Achieving** increased investment in the evaluation of prevention initiatives
- **Influencing** policy-makers and practitioners to review and evaluate their prevention activities in order to optimise their impact
- **Advocating** for an increase in investment and activities relating to substance misuse prevention
- **Disseminating** learning about promising and proven approaches in the prevention of substance misuse
- **Providing** projects with financial resources or supporting them in securing funding.



Photo: Mentor UK "Mind the Gap" Grandparents Project

## REVIEW OF ACTIVITIES

Mentor UK continued to extend its activities and influence in 2006–2007. Mentor UK works with providers of services to young people at a local level at the same time as working alongside government officials and senior policy makers to address the gaps in our knowledge about what makes effective prevention. By disseminating findings from all its research and projects Mentor UK helps practitioners and policy makers to commission and develop services that are based on what we know helps young people to avoid drug related harm.

## MENTOR UK'S STRATEGIC OBJECTIVES

Mentor UK is committed to the development of effective drug misuse prevention, thus protecting young people from harm. In order to fulfil this commitment Mentor UK's Strategic Plan 2003–2008 seeks to:

- Influence drug misuse prevention policy
- Support good practice in drug misuse prevention
- Support drug misuse prevention research
- Increase the profile of drug misuse prevention

**Fulfilling these objectives: Mentor UK's activities in 2006–2007...**

Photo: Mentor UK Youth Involvement Project



## YOUTH INVOLVEMENT PROJECT

Mentor UK's Youth Involvement Project, funded by the Rank Foundation, brings together 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 activities

The young people with whom we work are from diverse backgrounds and they are involved in every step of the planning and implementation of the project. In return, we try to facilitate their involvement in empowering and supportive ways, including providing them with training to help them express their views.

“MENTOR UK REALLY DO PUT YOUNG PEOPLE AT THE CENTRE OF THE PROJECT. THEY KNOW THAT THEY CAN ACTUALLY MAKE A DIFFERENCE AND THAT THEIR VIEWS AND OPINIONS COUNT.”

Darren Foley, Staffordshire Youth Service, Mentor UK Youth Involvement Project

Four meetings took place between April 2006 and March 2007. Activities undertaken included drama activities to build team work, agreeing a ‘code of conduct’, education about drug prevention and activities to assess what the young people think influences young people’s decisions to use drugs. The young people also made a “positive message” rap record and each young person received a copy of the song on CD.

In the course of the year the group met to share their thoughts with local drug and alcohol professionals. They also gave their input to the National Institute for Health and Clinical Excellence (NICE) which had been tasked by the Government to produce guidance on community-based interventions to reduce substance misuse amongst vulnerable and disadvantaged young people. Their input was noted prominently in the final guidance.

The young people were supported to record their experiences on the project so as to qualify for the externally accredited UK Youth Achievement Awards.

## RECOMMENDATIONS FROM YOUNG PEOPLE

### Risk and protective factors

Our young people identified the following as risk and protective factors for substance misuse:

- **Risk factors:** boredom, peer pressure, lack of confidence, wrong information, drugs being available, a drug taking environment, peers using drugs, feeling depressed, low self esteem, stress, lack of career/academic success and having no job.
- **Protective factors:** more activities available for young people, more space, more accurate information and education, motivation and aspiration, not liking the feeling of drugs and getting highs from other things.

“IT’S MORE IMPORTANT THAT YOU GET THE VIEWS OF YOUNG PEOPLE THAN ADULTS, BECAUSE YOUNG PEOPLE ARE MORE LIKELY TO HEAR FROM OTHER YOUNG PEOPLE ABOUT DRUGS THAN ADULTS. IT’S EASY FOR [ADULTS] JUST TO SAY, DON’T DO DRUGS BECAUSE THEY’RE BAD FOR YOU.”

Young person aged 16, Mentor UK Youth Involvement Project

### What is needed to reduce substance misuse amongst young people

Photo: Mentor UK Youth Involvement Project



Our young people felt the following are needed in order to reduce drug misuse amongst young people:

1. Better drug education: better training for teachers, variety of teaching methods, focus on specific drugs, starting early and always being age appropriate.
2. More youth led drug prevention projects and consultation with young people.
3. Better support for young people and specifically: more counsellors, better support and relevant youth work for older young people, more support for young people whose parents misuse drugs.
4. More residential meetings for young people: the benefits are that young people gain social skills, receive drugs education, have fun, make new friends.
5. Reduced supply and accessibility of drugs.

“[PEOPLE WHO ARE POOR] ARE IN A POOR MENTAL STATE ANYWAY SO THEY ARE MORE LIKELY TO GET PUSHED INTO DRUGS BECAUSE THEY ARE KICKING ABOUT DOING NOTHING”

Young person aged 16, Mentor UK Youth Involvement Project

## Feedback on interventions to reduce substance misuse amongst young people

Our young people gave the following feedback concerning interventions to reduce substance misuse amongst young people:

1. The personality of the worker is one of the most important factors in determining the success of an intervention.
2. When involving parents, consider that parents might not have time to take part, might not want to take part, and might feel that the offer of training undermines or questions their parenting skills.
3. Interventions should be age appropriate.
4. Concerning the possible introduction of random drug testing in schools, consider: tests may infringe human rights/privacy, label young people, produce false positive results, cause young people to truant from school and lead to a lack of trust between pupils and teachers.
5. When targeting interventions specifically at young vulnerable young people, consider: how is vulnerability defined and how are young people identified as ‘vulnerable’; the term ‘vulnerable’ may stigmatise some young people.

*“Where I live everybody calls us ‘scabs’ because of where we live and there’s no where to go”.* Young person aged 15, Mentor UK Youth Involvement Project.

A further two meetings with this group was planned for April and May 2007, including presentations to the Home Office, the Office of the Children’s Commissioner and Mentor UK’s Trustees. After that, a new group is due to be recruited.



Photo: Mentor UK CEMA Project

## COASTAL AND EX-MINING AREAS PROJECT (CEMA)

Coastal and ex-mining areas (CEMAs) are frequently areas of multiple deprivation, where young people are at an increased risk of drug related harm. In 2005–06, with funding from the Henry Smith Charity and the Department of Health, Mentor UK began to research the needs of young people living in these areas and to pilot interventions to meet these needs. In 2006–07 twelve one-year projects were launched with local community groups across England. The projects focused on mentoring, parenting and diversionary activities, as follows:

“I DIDN’T KNOW ANYTHING ABOUT DRUGS. MY SON IS 12 AND I CAN NOW CHAT CASUALLY TO HIM ABOUT THINGS I PROBABLY WOULDN’T HAVE TALKED ABOUT. IT’S OPENED HIS EYES TOO.”

Parent, Penwith & Kerrier, Mentor UK Coastal & Ex-Mining Areas Project

### **Blyth Valley: Northumberland Community Sports Leadership**

The aim of the pilot project was to offer sports diversionary activities to a wide range of ‘at greater risk’ young people from the South East Northumberland Coalfield Area. Young people also had the opportunity to achieve a qualification as a sports leader. The programme challenged the drugs, alcohol and anti-social behaviour culture that is present within the Blyth Valley area by questioning attitudes and perceptions towards substance misuse.

The programme was running in other areas in the North East and the funding provided by Mentor UK enabled the activities to be undertaken with young people from Blyth Valley.

### **Seaham: Free the Way – The We Live Here Too Project**

Free the Way is a local community-based organisation working in Seaham. The project aimed to: (1) support siblings and children of drug users, (2) break the cycle of abuse, (3) reduce Child Protection/Children in Need referrals, (4) provide education on drug and alcohol abuse issues, (5) raise awareness of issues for young people living with substance misuse.

The Free the Way centre has been a central part of the Seaham community, but it was mainly working with drug users and in the field of rehabilitation. The CEMA project allowed the centre to branch out into prevention work with young people who have drug users within their families.

## **Copeland – Workington: Mobex – Aspire**

The pilot project aimed to enable young people to plan and organise activities that they wish to run. They would offer an ‘alternative high’ to young people through participation in various diversionary activities ranging from outdoor pursuits to clay modelling. Mobex aimed to work alongside the Cumbria Alcohol & Drug Advisory Service (CADAS), which brings in counsellors to deliver drug and alcohol awareness sessions to young people and their families where possible. However, this project was not able to complete the work outlined in its proposal to Mentor UK due to illness and staffing issues.

## **Salford: The Centre for Specialist Educational Assistance (Binoh of Manchester) – Binoh Teenage Support**

Binoh exists to meet the needs of children and families from the Orthodox Jewish Community of Salford. Their primary work includes a variety of innovative community based programmes for over 400 people, which aim to improve education, citizenship, quality of life, and to empower families and young people. The community itself is ethnically compact, buffeted by severe racial and economic problems, and little is known about it outside its immediate location.

Binoh has been running an informal mentoring service on an ad hoc basis. The CEMA project helped to formalise and broaden this service by creating a mentoring and support system for Orthodox Jewish young people in the community.

## **East Lindsey: Mablethorpe Diversion and Mentoring Project**

The pilot project aimed to develop a mentoring scheme and offer support and access to diversionary activities for 11–19-year-olds who are thought to be at risk of substance misuse. The programme covered training of the mentors and the Positive Action Team produced a manual for mentors. Mentors were unable to work with young people during the time allotted for pilot projects of the CEMA project due to referral problems. However, the funding was provided in order to support the mentoring team to work with young people in the area beyond the timescale of Mentor UK’s project.

Many interventions were in existence in Mablethorpe for young people. The funding provided allowed for the training of mentors and established an extra level of support and continuity to the young people involved in services.

## **Mansfield:** The Mansfield Youth Movement

Engaging vulnerable young people in music workshops may help them to develop their personal skills and increase their personal ambitions, social awareness, self-confidence and motivation. The aim of the project was to deliver music workshops to young people and challenge drugs and anti-social behaviour/attitudes through music. The workshops were held in the heart of the local community and were supported by youth and drug workers. Young people from outlying ex-mining areas attended the project.

The Youth Movement project was successfully delivering music workshops to inner-city youth. CEMA funding enabled the project to set up in an ex-mining area and work with young people in isolated rural communities.

## **Bolsover:** The Bolsover Arts and Transition Project

The transition from Key Stage 2 to Key Stage 3 has been identified as a crucial time in pupils' lives. As young people in Year 6 approach the transition to secondary school, many do so with preconceived ideas and apprehensions. Some will be from first-hand knowledge, just as many will be based on myths, misunderstanding and mis-information. The Bolsover Arts and Transition Project took place during the summer of 2006 and sought to explore some of those preconceptions and apprehensions with children through art.

The Arts and Transition Project was match-funded by Derbyshire Health Promoting Schools and was an innovative approach for this particular age group and developmental period. The project is now being extended to other schools in Derbyshire.

## **Scarborough (Whitby):** The Cambridge Centre – Young People's Mentoring Project

The aim of the project was to develop a mentoring scheme and deliver a peer education and mentoring service to 600 pupils aged 14–16 years at the Whitby Community College. The project recruited and trained mentors about the roles and responsibilities of a mentor, drug and alcohol awareness, group work and presentation skills. The Young People's Mentoring Project was a new project, developed entirely as part of the CEMA project.

“LATELY I WASN’T ABLE TO GET MY SON TO GO TO SCHOOL, BUT SINCE THE STRENGTHENING FAMILIES PROGRAMME, HE HAS STARTED GOING AGAIN AND IT MAKING THE EFFORT TO WORK HARDER. WE’VE ALSO GOT A LOT CLOSER, AND NOW HE IS MAKING THE EFFORT TO TALK TO HIS SISTER MORE. IN FACT, IT WAS MY SON WHO REALLY WANTED TO KEEP GOING EACH WEEK.”

Parent in Barnsley, Mentor UK Coastal & Ex-Mining Areas Project

### **Barnsley (Grimethorpe): Young People’s Health Project – Strengthening Families Programme**

The Strengthening Families Programme (SFP) was delivered by the Young People’s Health Project in Grimethorpe and targeted young people aged 10–14 and their parents. The SFP is designed to reduce the likelihood of substance misuse and anti-social behaviour in the teen years.

CEMA funding enabled the SFP to be piloted and further evaluated in Grimethorpe.

### **Doncaster: Safer Doncaster Partnership**

The pilot project aimed to encourage the community groups to come up with innovative interventions. It had been identified that involvement or potential involvement in drug use was an issue in the area, and that anti-social behaviour of all kinds increases during the Easter holidays. As a result of the feedback provided from the young people, an art-based programme was developed. A programme of six twilight sessions in four areas of Doncaster was set up. Each series of sessions was issue-driven, but with an eye to creating something that could be shared at the end of the project.

The Home Office Drug Strategy Unit match-funded the Mentor UK funding and supported the excursions and diversionary activities provided for 175 young people and their families during the Easter holidays.

## Penwith and Kerrier: Know Limits Parents Project

The aim of the project was to work with groups of parents and carers, including carers of looked-after children, in Penzance and Kerrier, and prevent harm from substance misuse among young people (aged 8–16). Four two-hour sessions were delivered to each group of parents/carers, using the Know Limits training materials. A further aim was to recruit and support older young people in the groups in order to present a young person's perspective and to model empowerment.

The Know Limits Parents Project had already been developed in the area; CEMA funding allowed it to expand to incorporate more isolated populations of parents and to run seven further programmes.

The following pilot projects continued after the end of the CEMA project. These are as follows:

- Doncaster – Far Out Arts
- Diversionary activities in Blyth Valley
- Know Limits Parents/Carers Project in Penwith
- Know Limits Parents/Carers Project in Kerrier
- Mansfield Youth Movement
- The Bolsover Arts and Transition Project
- Mentoring programme for Orthodox Jewish young people in Salford

The Young People's Mentoring Project at Whitby College delivered by the Cambridge Centre did not continue after the end of CEMA funding. However, the agency will be rolling out similar projects, based on learning gained through the CEMA project, in other schools in Scarborough and Malton.

The Young People's Health Project is fundraising to continue the Strengthening Family Programme in Grimethorpe.



Photo: Mentor UK CEMA Project

## CEMA RECOMMENDATIONS

The following recommendations are based on the CEMA project's experience of piloting drug prevention activities in coastal and ex-mining areas.

### Government

1. Building on the work undertaken by this project, government should commission research to assess the long-term impact of prevention in coastal and ex-mining areas.
2. Government should recognise that drugs and alcohol are an embedded problem in coastal and ex-mining communities.
3. The next Drug Strategy should recognise the specific needs of these communities and allocate lead responsibility for addressing them to the Department for Communities and Local Government.
4. Government should give local commissioners/Drug Action Teams in coastal and ex-mining areas sufficient financial guarantees to fund projects for at least three-year cycles.

## Local service provision

5. Drug Action Teams and commissioners in coastal and ex-mining areas should regularly undertake an audit of local community organisations and create work-plans to engage and involve them in drug prevention.
6. Drug Action Teams and commissioners in coastal and ex-mining areas should establish work-plans to engage and involve young people in drug prevention.
7. Drug Action Teams and commissioners work-plans in coastal and ex-mining areas should include diversionary activities and provide for adequate transport to enable isolated young people to use services.
8. Drug Action Teams and commissioners in coastal and ex-mining areas should work with local communities to find solutions to transport barriers.
9. When commissioning services, local commissioners and Drug Action Teams in coastal and ex-mining areas should:
  - in the first instance consider working with existing partnerships and relationships
  - assess realistically the capacity of small local agencies and provide support for development and delivery of projects
  - work in partnership with service providers to establish a realistic and supportive set-up, and planning and monitoring arrangements
  - publicise initiatives in local media, meeting places and community services
  - provide fundraising training for local groups to support sustainability
10. Local service providers in coastal and ex-mining areas should recognise that the most vulnerable young people and parents are often the least confident. They should:
  - support programmes to make informal assessments in order to overcome barriers to participation
  - ensure that programmes are culturally appropriate and make drug information materials available for people with literacy problems
  - incorporate the following into programmes: self-development opportunities; consultation and involvement of young people; creative activities; work on relationship development; rewards and confidence-building activities, such as awards to recognise achievements

11. Local commissioners and service providers in coastal and ex-mining areas need to allocate sufficient planning and set-up time for projects to create the greatest potential for success.

## Recommendations related to specific types of intervention

The pilot projects undertaken as part of this project fell into three categories: Parenting, Mentoring or Diversionary Activities. The next set of recommendations relates to these specific activities.

### Parenting interventions

12. Local commissioners and Drug Action Teams in coastal and ex-mining areas should:
  - commission parenting programmes, including web-based resources, as part of the local drug prevention strategy
13. Local service providers in coastal and ex-mining areas should:
  - use existing networks and structures, such as fostering services and schools, as a way of recruiting parents/carers to parenting programmes
  - plan actively to engage more male parents/carers in parenting programmes
  - provide information for parents about all drugs other than alcohol and cannabis

### Mentoring

14. Local commissioners and Drug Action Teams in coastal and ex-mining areas should:
  - commission mentoring as part of the local drug prevention strategy
15. Local service providers in coastal and ex-mining areas should:
  - encourage young people to become mentors to their peers
  - regard mentoring as a two-way process that can benefit both the mentees and the mentors
  - consider flexible and varied ways of recruiting and use resources such as local media
  - support mentors' training so that they learn skills such as public speaking and making presentations

- consider delivering targeted mentoring in the community in order to reach vulnerable young people from ethnic minorities who may not have a positive relationship with formal education
- consider providing peer mentoring in education for the over-14s
- address local racial and other discrimination issues and have a clear, well-publicised and enforced confidentiality policy

## Diversionsary activities

16. Local commissioners and Drug Action Teams in coastal and ex-mining areas should:
  - commission diversionsary activities, including sports, art and musical activities, as part of the local drug prevention strategy
17. Local service providers in coastal and ex-mining areas should:
  - use sports and recreation activities as a medium for encouraging people to develop an interest that can lead to volunteering and eventually employment
  - try to engage young people of all ages in activities/environments that stimulate them and allow them to freely express themselves
  - focus on activities that aim to increase the self-esteem and aspirations of young people
  - ensure all staff delivering projects understand drug and alcohol issues
  - organise linked sessions, close to each other in time
  - use pre-existing and available community resources to encourage young people's interest in their community's history
  - specifically target activities to key transition periods in young people's lives, such as the transition from primary to secondary school
  - design projects to address young people's risk and protective factors
  - use adventurous activities, such as climbing and other outward-bound activities, to attract young people
  - use art and music activities such as lyric writing or drawing as a way of exploring sensitive issues in drug prevention projects

## DRUG EDUCATION FORUM

Since 2004, Mentor UK has hosted the Drug Education Forum, the leading umbrella organisation in England for the drug education field, bringing together over 30 national organisations from health, education, police and voluntary sectors that deliver or support the delivery of drug education. Mentor UK's Chief Executive, Eric Carlin, was recently elected as Chair of the group and Mentor UK employs the Coordinator, Andrew Brown. In 2006–07 the Drug Education Forum was able to use the grant funding from the DfES to deliver a programme that included:

- Three Forum meetings, covering topics which included; updates on Blueprint, members' information exchange, Every Child Matters and High Focus Areas, and the National Drug Strategy
- New Forum members – Children in Crisis, Child Safety Education Foundation, Clubs for Young People and the Drinkaware Trust
- Publication of 2 Public Policy Briefings on “Random Drug Testing in Schools” and “Young People, Drugs and the Role of Drug Education” and the “Involving Children and Young People in Drugs Education” report
- Formal responses to NICE and the ACMD
- Membership of the steering group of the ACPO/Home Office guidance for police on working with schools on drug education and drug incidents
- Active participation in the Department of Health Volatile Substance Abuse Framework meetings
- Membership of the steering group of the NCB led work on Positive Guidance on Aspects of Personal and Health Education
- A weekly email highlighting additions to the regularly updated news blog. This year the Forum's blog has had over 11,000 page loads and 6,500 visitors. The Forum's website had over 58,000 visits during the year and documents have been downloaded from the site on over 9,000 occasions
- Undertaking a survey of Drug and Alcohol Action Teams (D(A)ATs) with the findings to be published in 2007

In the coming year, the Drug Education Forum will continue to hold regular meetings, build its media and public affairs profile and work alongside Government. It will also seek to improve its involvement of children and young people.



Photo: Mentor UK "Mind the Gap" Grandparents Project

## “MIND THE GAP” GRANDPARENTS PROJECT

Funding from the Department of Health enabled Mentor UK to undertake a groundbreaking piece of action research into the needs of grandparents caring full time for their grandchildren, to develop materials to help meet their needs and to make recommendations for policy makers. This project received a great deal of media attention.

We concluded that the key issues affecting the lives of grandparents who are bringing up their grandchildren include:

- Financial hardship
- Health problems
- Feelings of isolation: many grandparents experience strong feelings of isolation
- Breakdown of relationships with others
- Unsatisfactory relationships with professionals
- Difficulties related to dealing with bereavement
- Anxiety about drugs and alcohol issues affecting their grandchildren



“WHEN I SAID WE COULDN’T AFFORD TO CARE FOR THE GRANDCHILDREN WITHOUT FINANCIAL SUPPORT, THE SOCIAL WORKER SAID ‘IN THAT CASE THEY’LL BE ADOPTED’ – AND SHE ACTUALLY USED THE WORD ‘ADOPTABLE’ TO DESCRIBE THEM.”

(Participant, Mentor UK Grandparents Project)

The project’s recommendations are as follows:

1. Grandparents across the country urgently require information and advice in accessing the financial support and benefits that are available to them, including residency order payments, foster care allowances and Section 17 payments. This information should be made available in an accessible format to grandparents who are bringing up their grandchildren as soon as they come into contact with statutory or voluntary agencies.

**Action:** *Local Government and Voluntary and Community Sector.*

2. Payments to kinship carers, including grandparents, should be standardised and comparable with payments to other carers such as foster carers.

**Action:** *DfES should review the statutory arrangement for financial support for kinship carers. Local government should ensure that discretionary payments to grandparents are in line with financial support available to foster carers.*

3. Grandparents who are bringing up their grandchildren should be given accessible information on specialist support services (Grandparents Plus, the Grandparents’ Association and the Family Rights Group) and on local generic services (welfare rights, advocacy and childcare services).

**Action:** *Local Government and Voluntary and Community Sector.*

4. Grandparents bringing up their grandchildren who are in contact with statutory services should receive a comprehensive assessment of their needs as well as the child/children’s needs. Appropriate referrals to counselling, family therapy, respite, self-help, advocacy and other support services should then be made.

**Action:** *DfES and local government, working with the Children's Services Inspectorate should ensure that when judging whether "parents and carers receive support to keep their children healthy" they consider whether grandparents needs have been assessed and responded to in order that they can keep their grandchildren healthy.*

5. Dedicated kinship care workers should be the norm not the exception within Children's Services Departments and these workers should have a high profile in the department and within the voluntary sector.

**Action:** *DfES and Local Government.*

6. Grandparents should have access to information on peer support services and such services should be supported by local and national statutory agencies. As well as support groups, support services and newsletters could bring isolated grandparents into contact with each other.

**Action:** *DfES and Local Government.*

7. Grandparents bringing up their grandchildren should have access to sensitive and appropriate respite care and childcare arrangements. These arrangements should take into account the needs of traumatised children who have experienced bereavement and loss and who may take considerable time before trusting adults. Respite care should also address the needs of grandparents whose health and age may mean that even twice daily trips to and from school leave them exhausted.

**Action:** *The Children's Service Inspectorate (Ofsted) should ensure that when judging whether "parents and carers receive support to keep their children healthy" (as stated in the Framework for Children's Services) they should consider whether carers such as grandparents have been provided with adequate respite care. Local government should provide respite for grandparents who are bringing up grandchildren.*

8. A question should be added to the Census to collect information about the number of grandparents who are bringing up grandchildren in the UK. Additionally, data should be collected concerning the number, ethnic origin, first language and religion of grandparents who are bringing up their grandchildren from black and minority ethnic communities. Without this information there is no way of assessing what services grandparents from black and minority ethnic communities need.

**Action:** *DfES, Local Government, and Office for National Statistics.*

9. Culturally sensitive, mother-tongue services should be provided to grandparents from black and minority ethnic communities.

**Action:** *Local Government and Voluntary and Community Sector organisations.*

10. Training for social workers, GPs, teachers, drugs workers and other health and social care professionals should cover an overview of the practical and emotional implications of becoming a kinship carer.

**Action:** *Local Government.*

11. Voluntary sector agencies working with children and families should ensure that staff receive training on the needs of kinship carers and the children for whom they care.

**Action:** *Voluntary and Community Sector.*

12. Training providers should consult grandparents who are bringing up their grandchildren in developing appropriate training.

**Action:** *Local Government and Voluntary and Community Sector should engage with grandparents when planning staff training.*

13. Information on local, regional and national services for families should indicate that kinship carers' needs are recognised and are on the agenda.

**Action:** *Local Government and Voluntary and Community Sector.*

14. Grandparents should have access to free legal advice.

**Action:** *Ministry of Justice.*

The following materials have been produced as a result of the Grandparents project and are available from Mentor UK by post and also on the Mentor web-site:

**“Mind the Gap” Staff Training Pack:** a guide for facilitating a half day training session for staff and volunteers working in community or family group settings.

**“Mind the Gap” Grandparents DVD:** the DVD shares the experiences of grandparents bringing up their grandchildren and raises awareness of their situations.

**“Mind the Gap” Grandparents Policy Recommendations.**

**“Mind the Gap” Grandparents Leaflet:** this provides information written by, and for, grandparents about where to go for support and advice when talking to young people about drugs and alcohol.

**“Mind the Gap” Grandparents Directory of Services:** a directory of services that grandparents bringing up their grandchildren and others including professionals can use to find local and national services which can help provide support.



“I HAVE HAD A LIFE CHANGING EXPERIENCE BEING PART OF THE MIND THE GAP PROJECT. I WOULD VERY MUCH LIKE TO WORK WITH MENTOR AGAIN IN ANY ASPECT OF THE BRILLIANT WORK THAT THE PROJECT DOES.”

(Participant, Mentor UK Grandparents Project)

**“Mind the Gap” Service Assessment Tool:** an assessment tool to help managers and team leaders of statutory and voluntary agencies assess how well their services currently meet the needs of grandparents bringing up their grandchildren and the children that they care for and help them develop an action plan to improve their services.

**“Mind the Gap” Family Group Checklist:** an assessment tool for volunteers and paid staff working in family groups and services for families affected by drug and alcohol use, including grandparents. This will help them improve the services they offer to grandparents bringing up their grandchildren and the children that they care for. Grandparents Plus has also produced “Grandparents First”, a pilot newsletter for grandparents who are bringing up their grandchildren to help overcome feelings of isolation and to share challenges, anxieties, and achievements.

The “Mind the Gap” resources were published in February 2007, and previewed for parliamentarians and policy makers at the House of Lords in early March 2007 – 46 people attended. Following this, a series of regional dissemination launches were held in London, Bristol and Manchester. 173 people attended these events, including grandparents, those working with children of drug users and those working to support grandparents. Letters will be drafted to relevant government departments to make them aware of the Mind the Gap policy recommendations for their departments.

Subsequent to these events the resources were marketed widely to organisations, including social services teams, Drug Action Teams, Safeguarding Boards, fostering organisations and drug, parenting and children’s charities and kinship care organisations. Media interest included BBC One’s “Politics Show” and BBC Radio Sheffield. The resources have been reviewed in “Young People Now” and there have been articles about the project in “The Guardian”, the “Big Issue” and “Drink and Drug News”. “The Times” is preparing an article about the resources for its Public Agenda section and a Radio Four programme, featuring interviews with grandparents involved in the project, is scheduled to be aired in October 2007.

Photo: Mentor UK Alcohol Misuse Prevention Awards. Photo by Chris Young



“WINNING THE AWARD HAS BOUGHT US A GREAT DEAL OF RECOGNITION AND HAS RAISED AWARENESS AROUND THE ISSUES FACED BY THE CHILDREN AND YOUNG PEOPLE WHO HAVE ALCOHOL USING PARENTS/CARERS. THERE IS A SENSE OF PRIDE WITHIN THE ‘TIME FOR ME’ GROUP THAT THE MEMBERS FEEL WHEN ANYONE TALKS ABOUT THE AWARD.”

## MENTOR UK ALCOHOL MISUSE PREVENTION AWARDS

The Mentor UK Alcohol Misuse Prevention Awards project was launched in 2006 and calls upon the public, professionals and young people to nominate projects and activities that they feel influence children's attitudes, their skills and their behaviour so that when they are older they can avoid the damage that the misuse of alcohol can cause. Funded by Diageo GB, this scheme has already awarded 30k worth of prize money to three community based projects across Great Britain.

An Awards event was held at the Museum of London in September 2006, hosted by Mentor UK's Chairman, Lord Mancroft, with special presentations by Benet Slay, Managing Director of Diageo Great Britain, and Francis Grew, the Museum's Curator. Celebrity presenters Konnie Huq and Zoe Salmon from BBC's Blue Peter awarded the prizes. As well as receiving £10K each, the winners also received a further £10k worth of mentoring/practical consultancy support, the content of which was negotiated and agreed with Mentor UK.

The Alcohol Misuse Prevention Awards project has been covered in more than 400 media stories. In July 2007 Mentor UK was also planning to publish a handbook, "First Measures: a guide to alcohol misuse prevention work with children", which is intended to help anyone working with children in the community by summarising what is effective practice in alcohol misuse prevention and providing case study examples from not just the winners but all the shortlisted projects. The next awards will be distributed in 2008 and advertising and planning has already begun.

“STAFF AT GEAAP WERE VERY CLEAR THAT WINNING THE AWARD HAD RAISED THE PROFILE OF GEAAP IN GLASGOW, AS THEY HAVE RECEIVED CONSIDERABLE PRESS COVERAGE (THREE ARTICLES AND A LEADER)... THEY HAVE NEVER HAD ANY NATIONAL RECOGNITION OF THEIR WORK AND THE STAFF FEEL THAT THIS AWARD WILL MAKE IT HARDER FOR FUNDING TO BE CUT LOCALLY.”

Evaluation of the Winners Report, 2007



Photo: Mentor UK Alcohol Misuse Prevention Awards

## EVALUATION OF “CHILDREN’S CHARITIES WORKING TOGETHER ON DRUG PREVENTION”

In 2005, the Department of Health commissioned an innovative new project, “Children’s Charities Working Together on Drug Prevention”, which has supported the five leading national children’s charities – National Children’s Bureau, NCH, Barnardo’s, NSPCC and the Children’s Society – in developing a coordinated programme of activity to prevent drug related harm to children and young people. The initiative has aimed to mainstream substance misuse work within children and young people’s services and to build capacity among voluntary sector children’s organisations by funding a partnership approach to drug prevention.

In 2006, Mentor UK was engaged by the Department of Health to carry out the external evaluation of this project, focusing on identifying both good practice and the strategic challenges that partnership work of this kind involves. The fieldwork was completed in 2006–07 and a draft final report was produced and circulated to stakeholders for comment.

## OTHER ACTIVITIES

Mentor UK gave substantial input to the RSA Commission on Illegal Drugs, Communities and Public Policy and our experience and comments appear at various stages in the Commission's report "Drugs – facing facts".

Mentor UK's Chief Executive sat on the Home Office Voluntary and Community Sector Group. He also represented the international Foundation at the United Nation's Vienna NGO Committee and was elected as one of the two Vice Chairs of the Committee, co-chairing the annual NGO meeting which coincides with the inter-governmental Commission on Narcotic Drugs. He also undertook research on behalf of the committee to review best practices in relation to collaboration mechanisms between NGOs, governments and United Nations agencies and to propose new or improved ways of working. This will help set the agenda for "Beyond 2008", an international NGO meeting to be held in 2008 which will feed into the review of United Nations' member states' activities on drugs in the last 10 years.

In 2006–07 Mentor UK staff addressed several major conferences. This included participating in an international conference held at Wilton Park by the Foreign and Commonwealth Office.

As well as this, in November 2006 Mentor UK's Chief Executive, Eric Carlin, was invited to present the views of the young people engaged on the Youth Involvement Project to a special meeting called by the Finnish Presidency of the European Union of 25 national drug coordinators and the European Commission.

## PUBLICATIONS

Mentor UK continues to publish and disseminate its findings and drug-prevention related resources.

As well as the "Mind the Gap" resource pack, in 2006–07 Mentor UK published a review of the research on drug and alcohol prevention activities in Further and Higher Education settings.

Final project reports on the CEMA and Grandparents projects, as well as "First Measures: a guide to alcohol misuse prevention work with children" were due to be published early in the new financial year.

Mentor UK continues to publish a six-monthly newsletter, summarising activities and plans.

H.M. Queen Silvia of Sweden and H.M. Queen Noor of Jordan at the Mentor Gala Dinner and Auction. Photo by John Cobb



## PLANNING FOR THE FUTURE

As well as continuing its ongoing project work, Mentor UK will prioritise trying to influence the new UK Government Drugs Strategy which will be published in 2008 and to ensure that young people's voices are heard in this. Mentor UK will also work with international colleagues to prepare the "Beyond 2008" NGO forum at the United Nations. The Trustees have also committed themselves to developing a new Strategic Plan for Mentor UK, to run from 2008–12.

In the coming year, Mentor UK hopes to expand the impact of its Youth Involvement Project across the UK with policy makers and to develop specific localised areas of influence. We hope that a successful bid to Futurebuilders England will support the development of "Quality Counts", a nation-wide, and potentially international Quality Mark for Drug Prevention which we would hope to market alongside consultancy services to support the evaluation of local projects. We will begin a joint project with the United Nations Office for Drugs and Crime in Russia and Belarus, exchanging experience between the different countries. We also hope to develop more activities with Muslim young people and other Faith groups and to encourage more communication and exchanges of experience between older people and young people. We have also submitted a proposal to the European Commission to develop a Kinship Care network to support drug prevention across Europe, building on our experience with our Grandparents Project.

## MENTOR INTERNATIONAL

Mentor International continued its support for the work and development of Mentor Nationals and Mentor's work internationally. In 2006–07, this included formal establishment of Mentor Arabia and Mentor Belgium and major development of the role and operation of Mentor USA.

The international web-site, which includes a section hosted for Mentor UK, was reviewed and improved, including setting up a Lithuanian version. It was accessed by people in over 100 countries with over 1.5 million visits in 2006–07.

Mentor International also developed a number of specific projects, including collaborating with Mentor UK on the CEMA project and developing "Prevention online", an international interactive web-based resource for parents. It also continued its advocacy work, conference inputs and collaboration with other major agencies including United Nations agencies, the International Olympic Committee and FIFA.

### Review of financial position

In 2006–07 monies were gratefully received from the following:

- The Cecil Rosen Foundation
- The Clore Duffield Foundation
- The Department for Education & Skills
- The Department of Health
- Diageo Great Britain
- The Eva & Hans K Rausing Trust
- Futurebuilders England
- The Henry Smith Charity
- Miss Selfridge
- The Rank Foundation

In May 2006, Mentor UK held a gala fundraising dinner and auction with Mentor Foundation International, hosted by HM The Queen of Sweden, at the Natural History Museum in London. The net proceeds of £340,572 were shared equally by the two organisations.

Thanks to all donors including those who elected to remain anonymous and to individuals who have supported Mentor UK's work.

## FINANCIAL STATEMENTS:

MENTOR FOUNDATION UK  
(CHARITY REG NO 1112339) FOR THE PERIOD ENDED 31ST MARCH 2007

### Statement of Financial Activities for the period ended 31 March 2007

	Unrestricted funds	Restricted funds	Total 2007
	£	£	£
<b>INCOMING RESOURCES FROM GENERATED FUNDS</b>			
Donations & legacies	258,658	373,482	632,140
Investment income	800	–	800
	<hr/>	<hr/>	<hr/>
	259,458	373,482	632,940
Other income	1,616	–	1,616
	<hr/>	<hr/>	<hr/>
<b>Total incoming resources</b>	<b>261,074</b>	<b>373,482</b>	<b>634,556</b>
	<hr/>	<hr/>	<hr/>
<b>RESOURCES EXPENDED</b>			
<b>Costs of generating funds</b>			
Fundraising and publicity costs	38,960	–	38,960
	<hr/>	<hr/>	<hr/>
<b>Charitable activities</b>			
Drug related projects	146,300	453,086	599,386
	<hr/>	<hr/>	<hr/>
Governance costs	7,133	1,583	8,716
	<hr/>	<hr/>	<hr/>
<b>Total resources expended</b>	<b>192,393</b>	<b>454,669</b>	<b>647,062</b>
	<hr/>	<hr/>	<hr/>
<b>Net incoming / (outgoing) resources before transfers</b>	<b>68,681</b>	<b>(81,187)</b>	<b>(12,506)</b>
	<hr/>	<hr/>	<hr/>
Gross transfers between funds	18,244	(18,244)	–
	<hr/>	<hr/>	<hr/>
<b>Net income for the year / Net movement in funds</b>	<b>86,925</b>	<b>(99,431)</b>	<b>(12,506)</b>
	<hr/>	<hr/>	<hr/>
Transfer from unincorporated charity at 1 April 2006	44,211	218,719	262,930
	<hr/>	<hr/>	<hr/>
<b>Fund balances at 31 March 2007</b>	<b>131,136</b>	<b>119,288</b>	<b>250,424</b>
	<hr/>	<hr/>	<hr/>

The statement of financial activities complies with the requirements for an income and expenditure account under the Companies Act 1985.

## Balance Sheet as at 31 March 2007

	2006	
	£	£
<b>Fixed assets</b>		
Tangible assets		7,579
<b>Current assets</b>		
Debtors	121,308	
Cash at bank and in hand	145,322	
	266,630	
<b>Creditors: amounts falling due within one year</b>	(23,785)	
<b>Net current assets</b>		242,845
<b>Total assets less current liabilities</b>		250,424
<b>Income funds</b>		
Restricted funds		119,288
Unrestricted funds		131,136
		250,424

## Trustees' Statement on the Summarised Accounts

These summarised accounts are extracted from the full unqualified audited accounts approved by the Board of Trustees on 22nd August 2007 and subsequently submitted to the Charity Commission and Companies House. They may not contain sufficient information to allow a full understanding of the financial affairs of the charity. For further information, the full accounts, the auditors' report on those accounts and the Trustees' Annual Report should be consulted. Copies of these can be obtained from: Mentor Foundation UK, 4th Floor, 74 Great Eastern Street, London EC2A 3JG.

# MAKE A DONATION AND MAKE A COMMITMENT TO YOUNG PEOPLE

## Why donate?

### Your money could help Mentor UK prevent a young person from misusing drugs.

Through all the projects and research we undertake, we are committed to providing young people with opportunities – opportunities to take part in activities such as sport and music, opportunities to express their views and opportunities to gain skills which will allow them to make informed decisions. All this is vital in enabling our young people to avoid drug and alcohol misuse.

For instance in the last year we've helped fund a mentoring service to 600 young people in a deprived coastal resort, undertaken a ground breaking piece of action research into the needs of grandparents caring full time for their grandchildren and given an award and cash prize to Scotland's largest alcohol misuse prevention programme for children. All these projects have two things in common – they are some of the best examples of frontline prevention work and they make a little money go a long way.

So please think about helping future generations of young people to make the most of their lives by making a donation to Mentor UK.

I would like to support the work of Mentor Foundation UK.  
Here is my gift of:

£

I enclose a cheque payable to Mentor Foundation UK  
Address: 4th Floor, 74 Great Eastern Street, London EC2A 3JG

## Gift Aid Declaration

YES, I wish Mentor Foundation UK to treat all donations I make from the date of this declaration, until I notify you otherwise, as Gift Aid donations. I am a UK tax-payer, and I understand that I must pay an amount of income tax or capital gains tax at least equal to the tax that the charity reclaims on my donations in the tax year.

Date

Signature

Your name & address is essential for the Gift Aid Declaration to be valid.

Name
Address
Postcode
Email

You could also consider helping Mentor by making a regular donation. Monthly giving enables us to plan ahead and keep administration costs to the minimum, leaving us more funds to carry out our vital work. If you would like to help in this way, please complete the information below.

## Gift Details

I would like to support Mentor UK with a monthly contribution of:

£20	£50	£200	£500
Other £			

Please send me details of how to set up a:

Direct debit	Standing order
Name	
Address	
Postcode	
Email	

### **Mentor Foundation UK**

4th Floor, 74 Great Eastern Street, London EC2A 3JG

T 020 7739 8494 E [admin@mentoruk.org](mailto:admin@mentoruk.org)

W [www.mentorfoundation.org/uk](http://www.mentorfoundation.org/uk)

Registered Charity No. 1112339

Registered Company No: 5609241

## PATRONS

Baroness Greenfield CBE  
Mrs Eva Rausing

## TRUSTEES

The Trustees who served during the period were:  
Ms Sim Scavazza (Appointed Chairman 28.3.07)  
Ms Mary King (Treasurer)  
Lord Mancroft (Chairman until 28.3.07)  
Ms Louise O'Connor  
Ms Ellen O'Donoghue  
Mr Martin Paisner  
Sir David Sieff  
Sir Jack Stewart-Clark  
Mr Tom Wass  
Mrs Helen Watson

## STAFF

Eric Carlin (Chief Executive)  
Joan Shearman (Business Manager)  
Andrew Brown (Development Manager & Coordinator of the Drug Education Forum)  
Derek Ferguson (Project Manager)  
Susi Farnworth (Development Officer)  
Apostolos Polymerou (Development Officer)  
Vicky Brooks (Project Officer)  
Joanna Travis Roberts (Seconded to the Coastal & Ex-Mining Areas Project)

## RESEARCHERS AND CONSULTANTS

Graeme Boyd (Market Research)  
Ruth Joyce, OBE (Policy Adviser)  
Esme Madill (Strategic Planning & Fundraising)

Designed and printed by Calverts [www.calverts.coop](http://www.calverts.coop)



**Mentor Foundation UK**

REGISTERED CHARITY NO. 1112339  
REGISTERED COMPANY NO. 5609241

4th Floor, 74 Great Eastern Street, London EC2A 3JG

T 020 7739 8494 F 020 7739 5616

E [admin@mentoruk.org](mailto:admin@mentoruk.org)

W [www.mentorfoundation.org/uk](http://www.mentorfoundation.org/uk)



**Mixed Sources**

Product group from well-managed  
forests, controlled sources and  
recycled wood or fiber

[www.fsc.org](http://www.fsc.org) Cert no. SGS-COC-1654  
© 1996 Forest Stewardship Council