Giving Young People a Voice in Health and Social Care Project Report

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Giving Young People a Voice in Health and Social Care

Section One: Executive Summary
This report outlines the Giving Young People a Voice in Health and Social Care Project that Warwickshire Children and Voluntary Youth Services (WCVVS) were commissioned by Warwickshire LINk to undertake. This included four key aspects:

- Identifying young people’s groups and organisations that offer services to young people
- Creating a co-ordinated mechanism to engage with young people and organisations that work with young people
- Undertake consultations and engagement activities with young people to enable them to have a say on health and social care
- Recommendations for those providing services to young people

WCVVS acted as lead and accountable body with three partner organisations to enable us to fully meet all the requirements of the tender. These key partners in delivering outcomes were: Escape Community Arts, New Ideas and ReVOLve, the latter two are discrete projects of WCAVA. Please see Appendix 1 - Partners Summary Information.

We have been able to identify a wide range of organisations and groups working with young people in Warwickshire. This includes 780 Voluntary and community sector groups alongside the known statutory services that exist, with reference to the changes within Children Services and NHS.

We are able to suggest mechanisms to be able to link in with these organisations and evidence that organisations are willing to participate where they see a benefit to the young people they are working with.

Prior to starting the research we liaised with the leads for the Joint Strategic Needs Assessment, JSNA and explored the key priorities that the Children Trust had identified for 2011-12. We felt it was important to add value to the body of research gathered and analysed for the JSNA to ensure this work gave a voice for young people in influencing and designing services for young people. We agreed with partners within the JSNA and LINk that it would be beneficial to focus on two key priorities for 2011-12: transitions and mental well-being. These had been highlighted as areas which require further understanding and exploration to better meet the needs of Warwickshire’s young people.

Jenny Bevan - Project Manager JSNA said “The main benefit the Giving Young People a Voice in Health and Social Care project brings to the JSNA is insight into what young people feel are the most important transitions in their lives. Effective, high quality service provision at the point of transition increases the likelihood of young people developing their full potential, including good overall well-being and staying engaged with education,
employment or training. This is associated with improved mental health and increased resilience for transition to adulthood. By understanding what these trigger points are for young people we can better commission services which provide this support when they need it most. Linking the Giving Young People a Voice in Health and Social Care project with the JSNA provides the project with an audience comprising local commissioners across the NHS, public health and social care, elected representatives, and representatives of HealthWatch.”

Having agreed this broad based focus we used a collaborative inquiry approach to undertaking the research to enable young people to fully participate in the research and build upon themes that were important to them. We started by working with a small group of young people to determine the focus and method of the inquiry. They developed a specific consultation tool called the ‘River of Life’; this was further developed to redesign a complementary tool for groups and further developed to work specifically with young people with learning disabilities. We then consulted larger groups of young people in a series of consultations across the county assisting us to identify the key themes they felt were pertinent for young people and needed further exploration.

Lastly we worked with art workers to develop creative workshops based on young people’s themes for the LINk Consultation Day event: YOUTH Health YOUTH Opinion. The event was facilitated by artists and supported by health/youth professionals. This enabled us to review and reflect on the issues raised by young people and extend our consultation and consolidate our findings further.

The project has highlighted that the young people involved are keen to have a voice in health and social care. The project has raised the profile of health issues and services to young people with workers and volunteers involved and celebrated that ‘health is everyone’s business,’ encouraging workers to become champions of health issues. It has also raised the profile with young people by offering them a voice and supporting them to consider their own health needs and that of their community.

<table>
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<th>Number of contacts in this Project</th>
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<td>Young people: 261</td>
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<td>Workers and volunteers: 57</td>
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<td>Organisations involved in the consultations: 23</td>
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From the initial consultations we were able to identify four key health issues that emerged from the young people as most relevant. These were:

- Stress
- Smoking Cigarettes & Cannabis
- Bullying
- Issues around Dependency & Independence

These were further explored in the LINk Consultation Day event: YOuth Health YOUnth Opinion.

Following an evaluation of the three elements of the project we have grouped the recommendations into three areas:

- Recommendations for creating a co-ordinated mechanism to engage with young people and organisations that work with young people
- Recommendations for consulting with young people and ensuring they have a voice
- Recommendations for Health and Young People’s Services

These are outlined in the respected sections:

- Section Two: The Findings on Services to Young People in Warwickshire and Mechanisms to Engage
- Section Three: Consultations Methodologies
- Section Five: Recommendations for Health and Young People’s Services

WCVYS would like to thank all the young people, volunteers, workers and organisations involved in supporting this project. We are committed to updating everyone about the findings of the research and the impact of their contribution to the project.
Section Two: The Findings on Services to Young People in Warwickshire and Mechanism to Engage

There is a wide cross section of organisations offering opportunities and services to young people across Warwickshire. This includes:

- WCC Children’s Services and NHS Warwickshire: which includes a wide range of support and services to young people such as social care, early intervention, Integrated Disability Service, acute, community based, learning disability and mental health services
- School and Colleges: including state, new academies, free schools and the independent sector
- Voluntary youth groups: including uniformed groups, faith based groups, local community based youth groups both rural and urban
- Voluntary sector organisations offering services to young people, predominately of a targeted nature such as young people with disabilities, young carers, those with mental health issues, homeless etc. These providers have diverse funding streams which includes those that are commissioned by WCC and NHS Warwickshire to deliver specific services

In the past two years we have seen a transformation of services to young people and significant changes in the way services are delivered, in particular for statutory services, but also impacting within the voluntary sector. This includes cuts in public services, a changed emphasis on communities and the voluntary sector having a role in delivering public services and public services focussing their resources on those in most need. We have seen some services cease and others transform and realign to support ‘doing more with less’ and a targeting of provision, with a focus on early intervention, enhanced partnership working, efficient and effective commissioning.

When considering the organisations that are working with young people it is imperative to understand the changes that are occurring and keep abreast of on-going changes and their impact. Warwickshire has a well-established Children’s Trust that reports to the Children’s Trust Exec Board. The Children’s Trust has links to the Joint Commissioning Board, Warwickshire Safeguarding Children Board and the Children’s Trust Area Partnerships that aim to give a local perspective. These all have representation from the voluntary and community sector through the Children’s Trust VCS Forum that is facilitated by WCVYS. Please see Appendix 2 – Children’s Trust Overview.

There has also been a significant change in the way WCC manages Children’s Services. A new People Group has been established that links Adult and Children’s Services. See Appendix 3 - WCC People Group Overview for more information.

Most importantly for this project the way Youth Services are delivering in the County has change with the development of the Early Intervention Service Targeted Youth Support. Services for young people have been subject to a
transformation project, which has redesigned services so that the universal provision is part of locally identified groups and voluntary sector organisations, with grants being supported by WCVYS through the Voluntary Sector Warwickshire Partnership led by WCAVA. Please see Appendix 4 - Early Intervention Service Targeted Youth Support for further information.

From this change it is important to note the Early Intervention Service Targeted Support will continue to support VOX the County Youth Forum, Area Youth Forums and the Members of Youth Parliaments. These groups all work towards ensuring the voice of young people is heard and can influence services that affect them and their communities. Young people involved in these groups includes both young people from statutory and voluntary sector youth provision.

In working with schools and colleges there are systems in place to communicate with them. Through the People Group, there is a new schools post website: http://warwickshireschoolspost.co.uk that schools can sign up to and choose to receive daily or weekly updates. A separate Governors’ bulletin is also prepared and sent to schools. Colleagues in the Learning and Achievement (L&A) Business Unit organise primary and secondary head teacher meetings covering a wide agenda and items can be brought via L&A colleagues. There are primary, secondary and college representatives sitting on the Children’s Trust along with colleagues from Coventry, Solihull and Warwickshire Partnership (CSWP - previously known as Connexions) who deliver careers guidance on behalf of the Local Authority. Please note that there has been a significant reduction in funding to CSWP, with schools now having a statutory responsibility to deliver independent advice and careers guidance to young people. A number of open access and one stop shops have also closed as part of this reduction in funding. The Warwickshire County 14-19 Strategic Partnership Group has wide membership to ensure the needs of young people are met and there are sufficient places for young people post 16 years. This recognises that The Education and Skills Act 2008 increases the minimum age at which young people in England can leave learning, requiring them to continue in education or training until the end of the academic year in which they turn 17 from 2013 and until their 18th birthday from 2015.

Through the Children’s Trust there has been an annual survey in schools since 2006, called the Annual Pupil and Student Survey, previously known as the Every Child Matters Survey (ECM). Both schools and colleges are invited to participate with the information being collated for school/college personal use and also collectively used to look at funding across Warwickshire. This information supports the Joint Strategic Needs Assessment (JSNA) and is facilitated by the Commissioning Support Service (CSS) within WCC. Please see Appendix 5 - JSNA Overview for further information.

By working in partnership there may be opportunities to consider specific questions or areas for research as part of this survey in the future. The survey is reviewed annually by CSS to explore its future use after the analysis of each year’s survey, the most recent one having taken place at the beginning
of 2012. In addition a parent/carers survey is also being offered in 2012 led by the Family Information Service.

WCC has a consultation group that aims to coordinate consultations across Warwickshire and has a Consultation Hub which aims to share the findings and encourage participation in relevant consultations. This includes a wide range of partners within the Children’s Trust.

WCVYS supports a network of county and district wide organisations that support work with children and young people. WCVYS County members directly support small local groups at a grass roots level and other members deliver services to young people, in total our members support 712 children and youth groups. In identifying voluntary children and youth groups we have been able to identify 780 groups currently linked with Warwickshire infrastructure organisations. This includes a small number of sports based groups, who have received support and are affiliated to VASA and WCAVA, two generic infrastructure organisations in Warwickshire. We have developed links with all these infrastructure organisations so information can be shared and targeted to youth based organisations.

In identifying those that work with youth it should be noted that specific age divisions are less apparent within the voluntary sector with some groups working with children and young people aged 6 – 25 years. For the purposes of the Giving Young People a Voice in Health and Social Care project we have focussed on age 11 – 19 years and up to 25 years for young people with disabilities, where possible.

The success of working with a wide range of voluntary sector youth groups was facilitated by personal contact following e-mail bulletins and information sharing at relevant partnership and forums meetings. Organisations needed to feel safe and be clear about the purpose of any contact prior to agreeing access to young people and promoting opportunities for young people. There is benefit in using locally known volunteers and workers to facilitate contact and support delivery. This approach supports the participatory nature of collaborative inquiry as the young people and workers become participants in the research process. This may require additional training and support at times but ensures those less confident young people will engage and also increases the awareness of the workforce in health and social care issues.

Although some sporting based groups have chosen to affiliate to a local infrastructure group most do not. CSW Sport (Coventry, Solihull, Warwickshire, is the name given to the County Sports Partnership (CSP), one of six sub regional CSPs within the West Midlands and one of forty-nine across England. This is a collection of organisations working together to provide opportunities for people to participate in sport and physical activity. The Partnership covers the Sub-Region of Coventry, Solihull and Warwickshire and is made up of organisations which include seven Local Authorities, School Sports Partnerships, National Governing Bodies of Sport, Volunteer Sectors and the Youth Sport Trust.

CSW Sport work closely with Warwickshire’s District Councils and their Leisure and Sports Development Teams. There is a guide for sports clubs
and these are listed on the Warwickshire County Council Community Information Database and on the Coventry, Solihull and Warwickshire Sport websites; in addition some District Council have specific District guides. These are not fully comprehensive so if you wish to contact young people through sports clubs we would recommend working with both the District Councils and CSW Sport to have the widest reach; both organisations have limited resources for development and may be able to signpost easily for specific focuses.

Recommendations for creating a co-ordinated mechanism to engage with young people and organisations that work with young people

- Work with a specialist youth infrastructure organisation within the area that has firm foundations with extensive knowledge and links to relevant organisations
- Be mindful of the significant changes in Children’s services and the role of VCS to ensure the relevant organisations are engaged and information goes to the right people and teams
- Maximise resources by utilising existing networks to share information and encourage participation
- Access young people through the groups they attend both voluntary and statutory provision and with the support of workers and volunteers who have the established relationships with young people
- Make use of existing youth forums across the statutory and voluntary sector
- Ensure the voice of young people with additional needs by targeting groups that support them

Focusing on research and consultations we would also make the following recommendations

- Work with the Children’s Trust and the JSNA to identify key areas that add value and ensure a strategic approach
- Increase awareness and understanding of the WCC Consultation Hub
- Encourage and support coordinated consultations, reduce duplication and encourage partnership working to maximise the effectiveness of consultations and research in meeting key priorities
- Encourage all providers to share their research and findings with the JSNA and Consultation Hub to support future planning and delivery of services
Section Three: Consultations Methodologies

Partners within the project developed various methodologies. The methodologies were adapted throughout the consultation process in consideration of young people’s needs within various groups across the county. Three main methodologies were established.

ReVOLve: Young people were active in designing and developing the consultation methodology with support from sessional staff within Revolve. The methodology was developed following principles of collaborative enquiry.

Part 1: The first part of the consultation helped young people to map the key transitions in their life. We did this using a ‘river of life’ where the young people marked down all the ‘ups’, which were periods in their life when they felt good and ‘downs’, which were periods in their life when they did not feel as good. They marked these onto the river.

Part 2: Young people then wrote these periods down on a ‘wall of transitions’ and using coloured ‘post it’ notes we asked young people to make suggestions on:
   1) How they made you feel?
   2) What support did you have?
   3) What support could have made the transition easier?

For full consultation methodology overview and key findings please see Appendix 6 – Revolve Methodology Overview and Key Findings.

The results from Part 2, the wall of transitions collated from all consultations, can be found in Appendix 6 - Revolve Methodology Overview and Key Findings, figure 1.1.

Escape Community Arts: ECA developed their methodology alongside a support worker who was identified as being able to complete a number of consultations, using both an approach to group work and individual enquiry. The method was adapted onto three colourful and simple worksheets for young people. The three worksheets focused on the same areas, School, Home & Family and Friendships. For consultations with older young people such as young parents the three worksheets focused on the areas of Education & Training, Friendships & Relationships and Home & Family. Thought bubbles are on each worksheet representing Changes, Thoughts & Feelings, Effects on Health and Support. The support worker continued to use principles of collaborative enquiry and encouraged the participants to note points that they felt were significant onto the thought bubbles.

For methodology overview and key findings please see Appendix 7 - Escape Community Arts Methodology and Key Findings.
New Ideas Advocacy: New Ideas Advocacy developed a broad consultation method with various interactive elements to meet the needs of young people with disabilities. The consultation was designed for use across the Wacky Forum and the Saturday Club, with varying group sizes from 6 – 12 young people.

The interactive elements within the methodology were designed to explore changes within their lives, how these changes affected them and their feelings, the support they received and how they feel now. Young people were encouraged to explore their experiences and the supporting staff collated the information with consideration of the following areas; school changes, changes at home and with family, friendship changes and other changes.

Wacky Forum is a group of young people aged between 14 and 19 with disabilities who are from the six specialist schools in Warwickshire; they speak up about current issues aiming to develop self-advocacy skills and influence the delivery of services designed for them.

The Saturday Club provides recreational activities for children and young people with learning and other disabilities. The club meets weekly in term time, and attracts young people from around South Warwickshire.

For the Wacky Forum consultation methodology and report of key findings please see Appendix 8 - Wacky Forum Methodology and Key Findings.

WCVYS consulted with young people attending youth provision within Rugby. These consultations were undertaken with the support from Bradby Club, a third sector community youth provision within Rugby. For an overview of WCVYS consultation methodology and key findings please see Appendix 9 - WCVYS Methodology Overview and Key Findings.

The consortia decided that the LINk Consultation Day event: YOUth Health YOUth Opinion would primarily use the arts to creatively consult and engage young people. The aim of these creative sessions was to accurately expand upon young peoples’ opinions and share experiences to inform the decision making process about how services can be developed and change.

The initial traditional methods of consultation had led to key themes being identified and the creative consultation enabled further exploration and reflection with artist-led workshops supported by health and youth workers, both with a series of prompting questions to keep the focus of the sessions. Workshops included Comic Skills Workshop looking at change, Animation Workshop looking at the theme of stress. ‘Stressed’ a 3 minute animation was created by young people which is on the blog. A Blog Zone was set up to enable young people to use online networking and diary methods to share comments, opinions, upload photographs, art-work and ideas immediately anonymously and giving others the opportunity to comment. We also took advantage of the kitchen facilities at Coton End and ran healthy snack-making workshop, which was particularly related to young parents who were keen to know more about cooking for their families on a budget. This gave them an
opportunity to explore issues that were relevant to them in a safe and secure atmosphere.

Consultation Methodologies Evaluation
Some young people struggled with the consultations and needed support to engage with the process in identifying where they had overcome changes or transitions in their life or what the implications on their health may have been. Having skilled youth and support workers and a range of methodologies enabled us to meet the needs of different groups and those with additional needs.

Some young people did not want to disclose information which was personal to them with the rest of the group and preferred to disclose this during one to one interviews with youth workers. Others preferred to take part in the activity as a group because it allowed them to share experiences and discuss aspects of transitions and health with each other. Building in the flexibility to have one to one and group work opportunities assisted engagement.

Having a range of formats such as ‘comic’ layout bubbles, widget symbols, and ‘river of life’ imagery ensure all age and abilities were able to engage. The ability to give space for young people to explore themes and set their own agenda backed up by prompts and supplementary questions helped progression and review of emerging themes. The forms used also helped those young people who were less vocal and reluctant to talk in front of others to contribute, with scribe supporters assisting the process.

The smaller groups tended to draw out more quality information. They created quality opportunities to think about the issues; developed a better understanding of what the project was doing and how young people could contribute to it. Young people clearly felt safe and able to contribute honestly. Responses were very thorough and detailed which reflected a maturity of attitude and insight into how things can be improved and developed.

Engagement of young men and women was evenly matched, with both engaging in the process. Older young people seemed more comfortable and able to express themselves, with younger young people needing more supporting and prompting. Young people definitely felt that it was a good chance to get their point across.

New Ideas are extremely skilled & experienced in adapting consultations for the young people with disabilities to enable meaningful engagement with all members; therefore the majority of young people were able to contribute in a meaningful way with the right level of support. Building in time to adapt materials and adequate resources are key in ensuring accessibility.

At the LINk Consultation Day event: YOUTH Health YOUTH Opinion, the use of the arts and creative mediums supported young people to express themselves. There was a high degree of participation and young people from very different backgrounds mixed and engaged in the programme fully. The atmosphere created on the day was relaxed and informal with workers and
volunteers having assigned roles to support the art worker in capturing the messages from young people.

The ‘blogging’ at the event was an effective way for individual young people to add their thoughts and truly feel that their voice was being heard. We also have young volunteers in the role of ‘roving reporters’ getting feedback from young people about their experiences. This enabled us to capture young people’s thoughts and experiences for the benefit of improving services. This evidenced how committed young people are to improving things for themselves, their peers and their community. Please see the website which captures young people's thoughts, feelings and experiences at: http://www.wshirelinkyouthconsultation112.co.uk

To gain a visual sense of the website please refer to Appendix 10 - Welcome Page to the Link Consultation Website.

To ensure that the findings captured through the use of ‘blogging’ are widely shared the involved partners will host a link to the website from their organisations websites. The WCC Warwickshire 4 Youth website www.warwickshirevoice4youth.org.uk will also be hosting a link.

At the event transport was supplied for some participants and a crèche was available and used by young parents. Parents and carers also facilitated transport. Venue choice and accessibility are important to supporting participation. If more transport had been available we are likely to have had more young people attending.

Feedback from the young people was that they enjoyed contributing to the project and felt valued and listened to. On the day 9 young people with learning disabilities attended. Very positively all were fully engaged in all the activities and workshops and were totally integrated and accepted by the other young people at the event. One parent commented “This is really good for my son to have an opportunity to mix with young people that do not go to his special school.” The opportunity to bring a range of young people from different backgrounds and experiences together supports greater exploration and reflection on the emerging themes and views shared to produce robust findings and valuing of every contribution.

Time available to deliver the project was a factor that should be considered. During the short period given there were 3 weeks of school holiday. This has an impact on where young people are located and how easy it is to work with partner organisations to access youth groups. Many groups were having special Christmas celebrations or had extended closure during the Christmas and January period. For young people with disabilities access is easier to facilitate during school terms due to the difficulties with transport, support staff and the large distances young people travel to school. In addition the ability to extend consultations would also enable the consultation to be broken down into smaller sessions, which would have been particularly beneficial for young people with disabilities.
Recommendations for future consultations with young people and ensuring they have a voice

The following recommendations are considerations for future consultations with young people and are grouped into three areas:

**The methodology**

- The collaborative inquiry approach ensures a greater level of participation that relates and build on young people’s own experiences and that of their peers in a systematic way to capture emerging themes and findings.
- It is important to have a flexible approach that meets diverse needs and recognises issues around confidence, being sensitive and confidentiality; such as using one to one and group work.
- Engaging young people in designing tools for consultation helps engagement and sees young people as active participants in the research rather than research being ‘done’ to them.
- Adapting consultation methods to the audience you are working with is important, such as specific tools for some young people e.g. disabled young people.
- Using creative mediums such as the arts enables young people to voice issues and explore themes in a non-threatening environment.

**Getting the support and engagement of young people**

- Selling your consultation and its importance to organisations and key workers is crucial to access young people and support engagement.
- Young people will engage more easily with those adults they have a positive relationship with (their youth worker, teacher, health visitor) sell the idea and its value to them.
- There is a need to build in appropriate timescale for consultations and consider constraints such as holiday, religious festivals etc.
- Young people value opportunities to have a voice. They tell us they want feedback from any consultations they participate in and that does not often happen; failure to give feedback within a reasonable timescale results in them becoming disinterested in participating and feeling ignored.

**Being inclusive**

- There is significant value in bringing different groups of young people together and working alongside them to share experiences which enables a more inclusive response that all can learn from.
- Events that wish to include young people with learning disabilities may be better attended if held during the school term, as schools are willing.
to support such events by providing transport and extra staff or additional resources will be needed for transport and support staff

- Young people with learning disabilities need a longer period of time and extra support to engage meaningfully

- Crèche facilities are needed to enable young parents to engage, or meeting in their space, or working with centres which are child friendly and provide a safe environment

- Offering transport to support young people attending or ensuring you have a maximum of one bus journey

- Accessible buildings that are young people friendly support inclusive consultations
Section Four: Consultation Findings

NB: When referring to young people within the following sections this is inclusive of young parents.

Statistical Overview of Consultations:
Giving Young People a Voice in Health and Social Care consulted with a total of 261 young people across Warwickshire. The young people consulted were aged from 11 – 18, up to the age of 25 with disabilities.

![261 Young People Consulted](image)

Young people were consulted from a broad range of localities such as rural communities and Super Output Areas of deprivation.

Postcodes representative of:
CV9, CV10, CV11, CV12, CV21, CV22, B46, B49, B50, B78, LE10, CV31, CV32, CV33, CV34, CV35, CV36, CV37, CV47, B80, B78, WS1.

91% of young people consulted were White British and 10% of Black Minority Ethnic Groups (BME). This is representative of the statistical picture of Warwickshire where 92.3% of the population are White British and 11.7% are of BME groups.

![Ethnicity of Young People Consulted](image)

Figures may not directly add due to rounding (National Statistics 2011)

Young people were consulted through a range of youth provisions across Warwickshire, this included targeted support and open access groups. In total 23 different youth groups/forums were consulted.
Groups Consulted:

- Dale Street Children's Centre
- Doorway
- Escape Arts Award group
- Escape Consultants
- Hurley Youth Club
- Just4U – Kingsway
- Lillington Children's Centre
- Lillington Youth Centre
- Members of Youth Parliament
- North Warwickshire & Hinckley College Student Union
- Piccadilly Youth Club
- ReVOlve Forum
- The Bradby Club
- The Saturday Club
- VOX County Youth Forum
- Wacky Forum Brooke School
- Wacky Forum Exhall Grange School
- Wacky Forum Oakwood School
- Wacky Forum Round Oak School
- Wacky Forum Woodlands School
- Warwickshire Young Carers
- Wood End Youth Club
- Young Asians Women’s Group
Consultation Summary
This represents the findings from the consultations undertaken prior to the day event called YOUth Health YOUth Opinion. They include the initial work with a focus group of young people to help design the consultation tools and subsequent consultants across Warwickshire. These findings then set the themes for further exploration at the event held at Warwick Youth Centre on 28th January. This enabled us to use the collaborative inquiry approach where young people are active participants in the research and their emerging themes are further explored and analysed to support robust recommendations for improving services and future study.

Young people go through a variety of transitions in their lives. In the consultation the most frequently evidenced issues were friendship and relationship changes and breakdowns, family breakdowns, ill health/loss of a loved one, moving area and schools.

‘I didn’t know what to do; I just turned up at the homeless charity after months of being really really lonely, sad and so cold.’ (Young man’s experience of homelessness)

‘Friends’ are the most highlighted form of support for most transitions. There needs to be a consideration for young people who find it difficult to make friends and the implication that the lack of emotional support may have when experiencing transitions. This was particularly highlighted as an issue for young people moving areas or schools who felt that they would lose the support from friends. Social isolation can exacerbate mental ill health and the importance of helping young people make friends post-transition cannot be underestimated.

Relationship dynamics both sexual and non sexual became regular occurrences across the consultations, especially exploration of bullying (including cyber bullying). Relationship dynamics were communicated alongside implications to mental wellbeing such as feelings of anger, stress, anxiety, distraction, fear, pressure and low self esteem.

Young people being excluded from school for short periods of time on a regular basis became a regular occurrence discussed throughout consultations. This made young people feel depressed and it made them feel like they were going to fail at school. They wanted more help to control their behaviour, rather than just teaching assistants. Often the reasons behind the disruptive behaviour were very personal and young people often didn’t feel comfortable talking to anyone about why they acted as they did. Having a ‘safe’ person for them to open up to is crucial to understanding and tackling their issues. This could be someone in school but was more likely to be outside school, such as a youth worker.

Young people recovering from illness said that they would benefit from support groups or forums with other young people facing the same issues.

Concerns over drinking, smoking and drugs are common place across consultations.
Young people discussed how they would like more help from school staff alongside a supportive family environment. Young people continually mentioned that they wanted more support to be independent with someone impartial that they could trust.

Young people sometimes discussed living situations as being very cramped and therefore creating a very tense and stressful environment at home. There were some discussions around difficult relationships with step parents/half siblings, which were causing stress and anger. Often this would lead the young person to spend more time out of the home. The knock on effect being that they rely on youth clubs as a safe place to spend time and to have people to talk to.

Some experiences and health implications were frequently evidenced within specific groups, such as all young parents consulted discussed depression, lack of confidence, social isolation, sleep deprivation and poor view of body image and future prospects.

Young parents discussed support from their mothers (no fathers mentioned) as well as Sure Start Children's Centres. Children’s Centres had helped reduce feelings of isolation and making new friends with other parents, without the fear of being judged.

Young parents stated that they would have benefited from more supportive midwives and health professionals that were approachable. There were two exceptions who said the family nurse partnership had supported them significantly with the workers being very supportive and non-judgemental.

Being non-judgemental and respecting young people were the two qualities most expressed by young people as being important to them using services and accessing help when they needed it. Young parents discussed how they would have benefited from GPs that they could build a trusting relationship with to enable them to receive more help and guidance, with signposting to support groups and timely access to counselling.

All young carers discussed experiences around bullying, stress, anxiety, drinking, smoking, low self worth, or sleep loss. Young carers’ experiences of support are focused around family and the Warwickshire Young Carers’ Project. Some mentioned counsellors and school social workers. Young carers discussed how they would like someone impartial to talk to and to receive extra support in the home. This would offer them more time for themselves and with friends.

A need was identified that young people consulted through young carers should be made aware of what support and advice is available. A 16 year old young carer said she would have liked counselling, but didn't think she could afford it, this misconception has lead this young person to continue without support. Young carers heavily rely on youth workers and community support groups.
For further information on the specific consultation findings from each of the partner’s methodologies please refer to Appendices 6, 7, 8 & 9.

WCVYS and involved partners analysed the results from the consultations across the county to identify reoccurring themes throughout young people’s experiences for further exploration at the LINK Consultation Day event: YOUTH Health YOUTH Opinion. These included:

Stress: Stress was a frequent occurrence across consultations; stress with schools, exams, homework, peer pressure, bullying, family arguments and relationships were all regularly stated. Many young people consulted made the connection between feeling stressed and smoking cigarettes, cannabis and drinking alcohol.

Smoking cigarettes & cannabis: This regularly featured in consultations and young people were unable to share what changes occur to influence the mind-set of a non-smoker into a smoker. The consultations evidence a relationship between smoking cannabis and cigarettes to feelings of isolation and geographical isolation.

Bullying: Bullying was discussed frequently throughout consultations. Bullying was related to causing stress and impacting other elements of mental wellbeing, such as low self esteem and incidents of self harm. Young people were experiencing bullying through online and technology mediums as well as face-face.

Issues around dependency & independence: There is a sense from the consultation that young people are wishing to feel more independent but can feel isolated when making big decisions. We wished to further explore the support and services young people with disabilities and additional needs received to empower their independence.

These themes were assigned to interactive and creative workshops throughout the day event. This was with the intention to establish previous findings and explore the areas further, considering the impact on young peoples’ health and health services.

Youth and community workers were present in each workshop to capture key comments, experiences and points in relation to a broad range of health services. This included capturing points regarding awareness of health services, previous experiences with health services, and accessibility to health services.
LINk Consultation Day event: YOUth Health YOUth Opinion

Young people were encouraged to consider what services support their health. Hospitals, doctors and school nurses were the health services that young people were most familiar with. The familiarity with doctors and GP surgeries may be due to normality of use through their family/carers. We encouraged young people to discuss what they felt was positive and negative about these service.

Here is a selection of comments collated from young people across the workshops:

My doctor was good at explaining what happened to me.

I get information from my doctors, physio gym and youth centre. I want to do my physio at home, which I used to. But I can’t anymore I have to do it all at gym and school.

I rang my surgery early to make an appointment, they asked me on the phone why I wanted to see a Doctor on my own and I didn’t like that so hung up.

I use the computer at the front to check myself in, then I don’t need to talk to anyone, I like that.

No one talks to me at the hospital; they talk to my mum, always.

I can’t get to like my GP, I always feel judged. I felt judged when pregnant and still feel it when I go in with baby.

We line up like cattle for school injections, everyone makes you more anxious and you see people coming out the room crying so you get worked up then the school nurse just says the same thing to everyone. I’ve had to see my dentist lots, I really like him, he’s funny and always has different badges on his outfit and things on the ceiling and I like his outfit!
The only thing that could stop me smoking is more mental power – I don’t think there is a service for that!

Youth workers were stated as being valuable people to talk to and knowing how to support in accessing additional services.

When there was no ‘true friend’ I spoke to my youth worker, they knew how I could get some counselling, I like to speak to someone out of the picture.’ (Young person during the ‘virtual friend’ workshop)

Saturday club makes me happy when I am cross. I know more about how to use the bus and make things for me – I would like to do more at home. (Young person during the healthy eating workshop)

I needed my youth worker to sort out counselling as people in my community do not have mental health troubles or bad worries; they wouldn’t like the fact that I did. The counsellor was too local and I was scared someone I knew from my community might see me. My youth worker rearranged the session and location for me. I have to lie to me parents about where I am going, which is sad, but I talk to my youth worker about it. (The experience of a young Muslim woman. Mental health is not acknowledged or discussed within some Islamic communities)

Young parents explored the health services and support they had received.

I went to A&E with my baby boy; I was made to feel like an over reactive, paranoid mum and sent home. I went back later that night, only then did my boy get a thorough examination and medication. My health visitor for (baby) was so supportive when I had a miscarriage. She was really focused on helping me through that as well as helping with (baby).

The best service for me is SureStart (The Children’s Centre)

One young parent wished to state her positive experience through the family nurse partnership.
After meeting my midwife they informed me about a service that helped people under the age of 19 with their pregnancy. The service takes over the role of a health visitor and gives a lot of support. I did my application to the service and although I was told there was no chance I would be accepted as they were so busy, a week later I was phoned asking when I was free to meet and discuss the service. I meet my family nurse once a week now and during every visit she gives me lots of advice and information. She makes sure I’m confident and not worried about anything.

Young people evidenced an awareness of the internet being a tool in gaining information and support around health. Young people had used the internet to:

- Use NHS Direct
- Google healthy recipes
- Use pregnancy and infant forums
- Access Kooth (one young person often used Kooth when feeling overwhelmed with anger)
- Google symptoms/feelings
- Find help/services

Young people also voiced concerns around using the Internet to access support and information. Young people held an awareness of the potential dangers in talking to strangers online and stated that this was discouraged by parents and teachers.

*There’s millions of health websites, there could be loads of stuff that is wrong and might make you worry more.*

*I was worried about using KOOTH (web-based mental health support service) at first for help as you chatted on line with counsellors. They have been great.*
The day event was a valuable method is further exploring the themes identified through consultations and drilling down specific experiences in relation to health services. For more information on the day event and young people’s views around health and social care please visit the blog, which was recorded and developed live on the day, see: http://www.wshirelinkyouthconsultation112.co.uk

Completed workshop material is also accessible from this link.

Young people were asked on the evaluation ‘what key messages about health and health services did you talk about today which are important to you?’

Young people answered:

- What is good & bad about my Doctor
- Talking about injections and things I don’t like
- Talking about stress
- Thinking about healthy eating
- Talking about labour, health visitors and midwifes – how they made me feel.
- Health and links to life style

The Virtual Friend Workshop
Section Five: Recommendations for Health and Young People’s Services

Considering the vast amount of research gained through collaborative enquiry we have analysed reoccuring themes and needs and were able to develop the following recommendations for Health Services and organisations working with young people.

Voice of young people

- Young people are interested in having a voice; opportunities should be created to listen to young people in all health services.
- Training young people to conduct research and involve them in developing consultation and research tools may support greater engagement of all young people including hard to reach groups.
- Future consultations with young people would benefit from being focussed on specific health issues or service reviews.
- Young people want to influence positive change. Promotion of the ‘You’re Welcome Criteria’ may address young people’s negative perceptions and experiences within health services.
- In this research stress, bullying, smoking and cannabis use and moving into independence remain key issues that young people want support with.

Meeting the needs of disabled young people

- Health services need to consider an empowering approach towards young people with disabilities and additional needs.
- Young people with disabilities and additional needs want to take more control of their own health, be spoken to directly rather than through parents or carers.
- Young people with disabilities want to be encouraged and supported to do more at home; decreasing the dependency they feel to their parents and carers.
- Young people with learning disabilities want to be treated as their non-disabled peers and have access to information about topics such as sex education, abuse of substances, employment and further education. Often these are areas that are not covered to the same level that mainstream schools would.

Meeting the needs of young parents

- Young parents want to receive support from health professionals prior to and after the birth of their children which do not make judgements regarding their age.
- Young parents said they would benefit from the services of children centres prior to the birth of their children.
Young parents are concerned about the future of children centres due to cuts in funding and need information about changes to services that may affect them.

Young parents welcomed and recognised that good professional support has a positive impact on their health and wellbeing and that of their children.

Young parents want to receive consistent support where ever they live in the county.

**Young people accessing information and services**

- Young people receive much of their health information through their peers. Developing peer education projects can increase knowledge and understanding of key health issues and develop a sustainable model of health champion within communities.
- Young people are unsure how to access support and services. They need clear information of what is available and who can help them.
- Young people who are experiencing difficulties want one to one support and information about health issues and services from trusted adults.
- Young people want direction about which websites are safe and appropriate to use for health information.
- Health Services could coordinate promotion of key websites across all services to young people in Warwickshire.

**Workforce development issues for health and non health professional**

- Health education and promotion is needed for the young people’s workforce that addresses the issues that young people feel are important.
- Training and support is needed to make ‘every contact count’ with clear health promotion messages being routinely addressed by all.
- Training and support around working with young people and developing a listening culture within health services is required.
- Assessment skills of all those working with young people needs to be improved to support early help and appropriate signposting.
- Workers need to increase their understanding of services available to young people and how to support young people in accessing them.
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APPENDIX 1

Partners Summary

Escape Community Arts is an established Warwickshire charity based in Stratford and the first participatory arts organisation in Warwickshire to become a WCC Key Arts Client. Escape works with children, young people and adults providing participatory arts interventions which support personal development, social empowerment and issue based change. The majority of Escapes’ core work is integrated bringing together a range of people from different backgrounds including those who are isolated (including people with learning disabilities or due to social, economic and health reasons) in a safe and creative environment with members of the wider community. The contents of the arts sessions are developed in consultation with service users and the Studley project includes Grow, Cook and Eat programme to encourage healthy eating. Escape is presently developing its volunteer support role for its extending group of volunteers.

New Ideas Advocacy works with young people aged 14-19 who have learning disabilities and often additional disabilities. New Ideas Advocacy works with young people aged 14-19 who have disabilities in Warwickshire. They co-ordinate a countywide group called Wacky Forum which consists of 12 young people, whose role is to represent their peers from the special schools. In addition to this there are Wacky Forum groups based in six special schools across the county. In total the Wacky Forum has 45 members; who are funded by the Integrated Disability Service (IDS) as a participation forum. New Ideas youth team also work as empowerment workers with young people up to the age of 25 on a one to one basis to ensure they are fully involved in all decisions that affect their lives.

The staff and volunteers working with these groups have considerable skills and experience in supporting young people to develop the confidence to speak up and be active participants. They work in very creative inclusive ways ensuring that young people with a whole range of learning disabilities and often additional physical or sensory impairments are included.

The reVOLve youth volunteering project supports young people aged 14-25 to get involved in a range of positive activities in North Warwickshire, Nuneaton & Bedworth. All activities are identified and delivered by young people themselves and the project engages with over 200 volunteers. An active youth led steering group meets regularly to consult with other young people, plan projects and discuss wider issues affecting young people.

The project runs an accredited peer mentoring scheme which enables young people who need additional support, to access the service and participate in volunteering opportunities. This 1 to 1 support has ensured that the project is fully inclusive and as a result, the project is widely recognised for its work with a diverse range of young people.
All the partners recognise the added value that working together brings to the tender and more importantly the offer for young people who will take part in the project. The partnership aims to develop and deliver a coherent project using their specialist knowledge and expertise in working with young people, youth organisations and clubs to complete the tender to a high standard.

**WCVYS - Warwickshire Children & Voluntary Youth Services** is a registered charity, No.1023132. We are an umbrella organisation that brings together the major voluntary children and youth organisations in Warwickshire.

The focus of WCVYS is to support county and district wide voluntary organisations that empower children and young people and give them somewhere to go, something to do and someone to listen. Our members:

- support local groups to increase opportunities for children and young people
- deliver services to vulnerable children and young people

We currently have a membership of over 40 organisations in Warwickshire who support over 400 groups and over 20,000 children and young people and 2,000 workers.

WCVYS is affiliated to the National Council for Voluntary Services, NCVYS, which has established an effective communication with Central Government and lobbies on children’s and young people’s interests.

WCVYS’ Chief Officer represents the voluntary and community sector on the Warwickshire Children’s Trust and Warwickshire Commissioning Board. We are also linked to the key infrastructure organisations supporting the wider voluntary sector, rural communities and the BME communities through the Warwickshire Partnership.
APPENDIX 2

Warwickshire Children’s Trust Overview

The Children’s Trust brings together all services for children and young people in the County. The Apprenticeships, Skills, Children and Learning Act 2009 requires partners to cooperate, and to facilitate integrated working with a focus on improving outcomes for children, young people and their families. Partners include County Council, district and borough councils; voluntary and community sector; police; health; schools; Connexions; Job Centre Plus, Probation, and Chamber of Commerce, as well as children, young people, parents and carers. The Children’s Trust consists of the Joint Commissioning Board and five Area Children’s Trust Partnership which feed into their Local Strategic Partnerships. The Joint Commissioning Board and the Area Partnerships report to the Executive Board.

Executive Board:

✓ The Children’s Trust Executive Board with representatives from local authority agencies and partners which takes the strategic lead and is responsible for the performance management of the Children and Young People’s Plan (www.warwickshire.gov.uk/cypp)

Joint Commissioning Board:

✓ Develops and implements joint commissioning in line with national and local drivers working across all relevant services recognising that children, young people and families are at the heart of the design and delivery of services

✓ Monitors and agrees the priorities of the Needs Assessment for children and young people ensuring appropriate links to the Joint Strategic Needs Assessment

✓ Ensures that services internal and external are of the highest quality and offer value for money

✓ Ensures that services meet the diverse needs of our population, identifying gaps for certain groups and allocating resources to 'Closing the Gaps,'

✓ Invests resources to achieve outcomes in line with the Children and Young People’s Plan priorities

Area Children’s Trusts Partnerships ensure that........

✓ Services are having a positive impact on outcomes for children and young people in their area

✓ Children and young people are at the centre of service planning and delivery, that their voice is heard and their views are taken into account by other theme groups
Strategic decisions are made in partnership at district / borough level addressing Local Strategic Partnership priorities and feeding this information through the Officer Group to the Children's Trust Executive Board

Priorities agreed at area level and contained in the area Sustainable Communities Plan are put into action

Encourage greater integration, and co-ordination of services to reduce duplication. They seek to pool resources to ensure a more consistent, coherent approach which the public understands, finds accessible and delivers the support they need

They support the shift of public services towards prevention and early intervention

Report both to the Children’s Trust Executive Board and also the Local Strategic Partnership as appropriate

Local Strategic Partnership:

Brings together, at a local level, the different parts of the public sector as well as private, business, community and voluntary sectors so that different initiatives and services support each other and work together

It provides a single, overarching, local co-ordination framework within which other partnerships can operate

Is responsible for developing and driving the implementation of local Sustainable Community Strategies

Theme groups to oversee the planning, delivery and performance management of the Sustainable Communities Strategies reflecting the priorities agreed in the Local Area Agreement.

Membership, governance and ‘to do’ list varies from area to area reflecting local need and priorities
Our vision: that every child and young person, including those who are vulnerable and disadvantaged, has the greatest possible opportunity to be the best they can be

Our Principles: Ambition – raising aspirations and providing high quality services  
Participation – putting children, young people and families at the centre  
Effectiveness – developing a skilled, flexible and effective workforce
APPENDIX 3
Warwickshire County Council People Group

The creation of the People Group brings together the services delivered by Adult, Health and Community Services and Children, Young People and Families’ Services.

People Group Aims and Vision are:

- To support people, especially the most vulnerable and disadvantaged, to access throughout their lives every opportunity to enjoy, achieve and live independently.
- The People Group will provide social care, learning, and achievement and health related services for all ages.

Wendy Fabbro is the Strategic Director for People Group, Warwickshire County Council. The People Group is made up of the following business units with corresponding Heads of Service:

- Business Management: Ron Williamson
- Early Intervention and Family Support: Hugh Disley
- Learning and Achievement: Mark Gore
- Safeguarding: Phil Sawbridge
- Social Care and Support: Jenny Wood
- Strategic Commissioning: Claire Saul

Our vision: that every child and young person, including those who are vulnerable and disadvantaged, has the greatest possible opportunity to be the best they can be

Our Principles:
Achievement – raising aspirations and providing high quality services
Participation – putting children, young people and families at the centre
Effectiveness – developing a skilled, flexible and effective workforce
APPENDIX 4
Early Intervention Service Targeted Youth Support

Services for young people have been subject to a transformation project which has redesigned services so that the universal provision is part of locally identified groups and voluntary sector organisations with grants being supported by WCVYS through the Voluntary Sector Warwickshire Partnership led by WCAVA. The Warwickshire County Council service will offer only targeted and specialist support and ensure the participation of young people as part of the Council’s ambitions. Where there are no opportunities for young people to engage in the Youth Offer the service will assist with capacity building. The aim of the Early Intervention Service regarding capacity building is to work in those communities where there are no appropriate opportunities for young people and to find and recruit local people or organisations to offer activities. Once established The Early Intervention Service will withdraw and ensure ongoing support from existing voluntary sector support organisations.

Targeted youth support through the Early Intervention Service is focused on delivering the Youth Offer, ensuring that young people are provided with something to do, somewhere to go and have someone to talk to; this includes empowering young people to find their voice. The priority is that there is targeted support for those young people that are most in need with their personal and social development, working collectively with all partners including schools and colleges on targeted interventions. The voluntary and community sector will receive support to ensure the Youth Offer is available to all young people.

The transformation of the youth service into Early Intervention and Targeted Youth Support has resulted in five statutory centres still running, Camp Hill Education Sports and Social (CHESS), Hatters Space Community Centre, Atherstone Youth and Community Centre, Lillington Youth Club and Studley Youth Club. Centres, such as Fareham and Campion are unable to continue to use the school premises where they were based, but have worked with the local communities to secure alternative provision. The majority of other centres (18) are transferring into the voluntary sector. The only centres where this is not the case is Park House in Nuneaton, which reluctantly will be sold, though the rehousing of groups is being supported. Kingsbury and Dunchurch will no longer have WCC youth provision where they have had previously.

Teenage pregnancy and substance misuse remains high on the agenda for statutory youth support. The Early Intervention Service have worked closely with Respect Yourself with teenage parents and through supporting groups outside of Children’s centres and sexual health in general, this work has had positive impacts with reductions in the areas concentrated on. The Early Intervention Service runs ‘Health Store’ in Nuneaton which is now being developed in some "outposts" around the area to give better access, and used ‘Clinic in a Box’ successfully in the south of the County.

The Early Intervention Service will remain closely involved in relevant health related approaches that will assist in meeting health related targets. Though not known at this moment in time it is the intention that the Early Intervention
Service will link with and provide training opportunities that should be available to all that work with young people. The Early Intervention Service are partners in the revised sexual health training programmes, have trained staff regarding smoking cessation, have worked with substance misuse re-approaches to unhealthy lifestyles and alcohol.

Peter Hatcher
February 2012
APPENDIX 5
Joint Strategic Needs Assessment, JSNA – Overview

The Local Government and Public Involvement in Health Act 2007 specify that local authorities and Primary Care Trusts (PCTs) produce a Joint Strategic Needs Assessment (JSNA) of the health and well-being of the local community. The JSNA is a process undertaken in partnership across Health and Social Care, with local councils and PCTs working together to identify the current and future health and wellbeing needs of a local population.

Work is well under-way on Warwickshire’s new JSNA, with a number of projects on-going 2011/2012. The purpose of the JSNA is to analyse and examine the current and future health and well-being needs of the local population, to inform and guide the commissioning of health, well-being and social care services. The JSNA aims to establish a shared, evidence based consensus on the key local priorities across health and social care and will be used to develop Warwickshire’s Health and Well-Being Strategy. Warwickshire’s last JSNA was published in 2009, in the form of a traditional, static, paper-based report. They are now developing a much more dynamic process, with an on-going, web-based programme of needs assessment work, consultation and engagement.

JSNA 2011 Children & Young People’s Review
The NHS White Paper, ‘Equity and excellence: liberating the NHS’ reaffirmed the JSNA’s place in future planning through the statutory implementation of Health and Wellbeing boards. These are to be convened by local authorities and will be responsible for leading the JSNA process and promoting collaboration on local commissioning plans.

Warwickshire’s approach to the JSNA has been updated to account for the changes in responsibilities and as a result of feedback received from the initial report. In response to this feedback, future reports will be smaller, more targeted and easier to read.

In supporting the engagement of the voluntary and community sector, these reports are shared with the Children’s Trust Voluntary and Community Sector Forum via regular bulletins. In addition JSNA presentations have been given at Forum meetings and the VCS are encouraged to share their research and consultations to add value to the work of the JSNA. The VCS have also been supportive in creating access for workers to conduct focus groups and one to one interviews with young people and organisations to increase information and learning about the needs in Warwickshire.

For further information and the most up to date data and intelligence, please go to www.warwickshire.gov.uk/jsna

www.warwickshire.gov.uk/childrensneeds This website gives information on ‘What makes a good needs assessment’

For the Consultation Hub see:
https://democratic.warwickshire.gov.uk/theconsultationhub
ReVOLve Methodology Overview and Key Findings

**Part 1:** The first part of the workshops helped young people to map the key transitions in their life. We did this using a ‘river of life’ where the young people marked down all the ‘up’s’ which were periods in their life when they felt good and ‘down’s’ which were periods in their life when they didn’t feel as good. They marked these onto the river.

**Part 2:** We then wrote these periods down on a ‘wall of transitions’ and using coloured ‘post it’ notes we asked young people to make suggestions on:

1. How they made you feel?
2. What support did you have?
3. What support could have made the transition easier?

The results from the wall of transitions can be found in [figure 1.1](#).

**Figure 1.1 Wall of transitions:**

<table>
<thead>
<tr>
<th>Transitions</th>
<th>How they made people feel</th>
<th>What support have you had, was it any good?</th>
<th>What support would help you feel better</th>
</tr>
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<tbody>
<tr>
<td>Living on your own</td>
<td>‘Scared’</td>
<td>‘None’ Leaving Care Team Social worker</td>
<td>‘Advice from professionals’ Help paying bills</td>
</tr>
<tr>
<td>Being made homeless</td>
<td>‘Really, really lonely, sad and cold’</td>
<td>‘None’ ‘Doorway’ – really nice and friendly staff, helped me find a place and do things like pay the bills.</td>
<td>‘Having lots of socks’ ‘Homeless charity’ ‘Someone to speak to’ ‘homeless hostels’ People at Doorway Having some hot soup</td>
</tr>
<tr>
<td>Breakdown in family relationships inc. divorce</td>
<td>‘Sad’ ‘upset’ ‘like the world was caving in’ ‘I didn’t think it would happen. Low – like they didn’t care about me’</td>
<td>‘talked to friends’ ‘School counselling’ ‘spoke to friends’ no one I could talk to. Didn’t want to speak to anyone</td>
<td>‘Text 2 Talk’ ‘One stop shop for young people’ Help from staff Leaflets Website with forum where you can talk to other young people</td>
</tr>
<tr>
<td>Losing a close family member / friend</td>
<td>Didn’t know what to do. scared</td>
<td>‘Counselling’ ‘Friends helped me’ ‘mum’ Friends were supportive which was nice. Social worker helped. Spoke to Councillor who was nice</td>
<td>‘People that understand you’ ‘Friendly councillors’ ‘Nice teachers’ ‘leaflet’s, more support from social worker Anything’</td>
</tr>
<tr>
<td>Bullying</td>
<td>‘Low’ ‘frightened’ ‘scared’ ‘upsetting time’ upset</td>
<td>‘None’ ‘None’ ‘Spoke to friends’ ‘friends supportive’ Teachers just moved me away from the person bullying me</td>
<td>‘If you get bullied, don’t be scared to tell somebody’ ‘Speak to friends’ ‘Someone to talk to’ Friends understanding more Good teachers Need someone who can do something about it. Excluding the bullies</td>
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<tr>
<td>Smoking / Drugs</td>
<td>‘Happy at the time’ ‘Regretted starting’</td>
<td>‘None, don’t want any’ ‘Nothing’ Workshop at school Leaflet from youth worker</td>
<td>‘Stop mixing with the wrong people’ ‘Get a hobby’ ‘If you have a drug problem’ ‘Ask for help’ ‘Youth clubs’ ‘Youth worker to speak to’ ‘Someone impartial’ Patches, other stuff to do.</td>
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<td>Getting into trouble at school</td>
<td>‘Sad’, ‘angry’ ‘like no one cared’ stressed - exams</td>
<td>‘Had speech therapy aged 11/12’ ‘Teacher tried to help’ Anger management councillor. One to one support from teacher in lessons Teachers were not supportive</td>
<td>‘Didn’t feel confident enough to speak to anyone’ Help from youth workers More support from teachers Anger management support</td>
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<tr>
<td>Starting secondary school</td>
<td>‘Bullied, didn’t feel supported’ ‘felt sad, felt anxious’ ‘Scary’ ‘being scared and intimidated by others’ ‘makes you feel nervous’</td>
<td>‘Didn’t tell anyone’ ‘None’ ‘Friends’ Friends helped me No-one</td>
<td>‘Free phone support / text support from mobile’ ‘Online chat (for bullying)’ ‘Peer mentors’ ‘having someone to talk to’ ‘mentors’ ‘older years to write about their experience’ ‘mentors’ ‘getting support on how to make friends’ ‘knowing a friend that will stay with you’ ‘induction day without lessons – day to meet new people’ More activities outside of school to meet new people</td>
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<td>Getting suspended/expelled from school</td>
<td>‘Annoyed’ ‘bored’ parents angry, depressed, just hung around with mates, angry</td>
<td>‘Poor teaching’ ‘Spoke to head teacher who got me some help’ ‘Parents’ ‘friends’ Counselling for anger management</td>
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<td>‘Felt low’ ‘No friends’ ‘Didn’t know anyone’ ‘Struggled to make new friends’ ‘Couldn’t speak very good English’ Lonely, unhappy</td>
<td>‘School didn’t help’ No-one,</td>
<td>‘someone’ ‘never felt settled’ ‘Youth club’, ‘youth worker to speak to’ ‘Organisations like reVOLve’ ‘friends’</td>
</tr>
<tr>
<td>Young Parents</td>
<td>‘My friend said it felt like her life was being turned upside down’ ‘Daunting’</td>
<td>n/a</td>
<td>‘Give people knowledge before children e.g. give fake baby to look after so you know your responsibility’</td>
</tr>
<tr>
<td>Becoming sexually active/relationships</td>
<td>‘nervous’ ‘apprehensive’ ‘felt pushed into doing something’ ‘Drunk the first time’</td>
<td>‘Some information off parents’ ‘Info at school rubbish’ ‘friends helped me’</td>
<td>‘VOX phone operation’ ‘real sex education – not half hearted’ Hones</td>
</tr>
<tr>
<td>Identity – who you are</td>
<td>‘Insecurity’ ‘finding out about myself’</td>
<td>‘None’ ‘friends’</td>
<td>‘Other people going through the same things’ ‘Someone to talk to’</td>
</tr>
<tr>
<td>Independence</td>
<td>‘Excited’ ‘Nervous’ ‘Scared of growing up’</td>
<td></td>
<td></td>
</tr>
<tr>
<td>General Comments</td>
<td></td>
<td>‘Leaflet with all the services on, not lots of different ones because we don’t know where they all are’ Some kind of A-Z booklet ‘Show the positive side of youth’ Need more stuff to do,</td>
<td></td>
</tr>
<tr>
<td>Anger management issues</td>
<td>Sad, don’t know why it keeps happening. Annoyed, angry, upset</td>
<td>Help needed, school tried to help. Teachers were rubbish. Got ADHD, no-one understands. Keep getting kicked out of everywhere. There was one nice teacher.</td>
<td>Help to control behaviour Nice people to speak to More understanding</td>
</tr>
<tr>
<td>------------------------</td>
<td>-------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------</td>
</tr>
<tr>
<td>Getting ill</td>
<td>Sad about missing school all the time, sad because I didn’t see my friends. Going through a change medically can change you where as it had made me confident</td>
<td>Friends helped me recover. Doctors supportive. Help from people with the same illness. Didn’t understand what the doctors were saying</td>
<td>Support for epilepsy, someone to talk to. Support from people with the same illness, support groups Information leaflets so you understand what is happening to you.</td>
</tr>
</tbody>
</table>
APPENDIX 7
Escape Community Arts Methodologies and Key Findings

Initial Methodology:
- Initial consultation with group leaders on project background and process, ensuring process appropriate for needs of young people in each particular group.
- Explanation of background to the project, how the information will be used and how information used will feed into the creative arts and health event on the 28th Jan.
- Group leader and young people asked to complete monitoring form.
- Clarity on why this process is needed and how young people’s input will be valued, but also that the consultation is voluntary.

Consultation centres on 3 flip chart posters

<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>School</td>
<td>School</td>
</tr>
<tr>
<td>Home and Family</td>
<td>Home and Family</td>
</tr>
<tr>
<td>Friendship</td>
<td>Friendship</td>
</tr>
</tbody>
</table>

3. ‘Wish-list’ What would have made things easier

<table>
<thead>
<tr>
<th>School</th>
<th>Home and Family</th>
<th>Friendship</th>
</tr>
</thead>
</table>

Young people were placed into small groups of 3 or 4 and given a number to keep their responses anonymous (enabling ECA to follow consultation stories across the post-its).

Young people were given 3 different coloured post-its for each theme, i.e, school – blue, home and family – yellow, friendships – pink. Each group had a flip chart sheet and asked to consider the first question ‘changes in my life’. The group can mindmap ideas using flip chart or discuss informally.
Young people were asked to write a change in their life relating to the 3 themes and say how this made them feel on the coloured post-its.

Numbers are written on the back of each post-its and then response placed on the flip chart posters.

The process is then repeated with the remaining two questions.

Young people thanked, feedback sought and invites and consent forms handed out.

Results collated in evaluation tables with highlighting key themes/Issues.

**Development of Methodology:**
As discussed within the body of the report, Escape Community Arts developed their methodology, examples as follows:
Key Findings:

**Youth Groups**: Stress from changes in school (primary to secondary and to new schools), Form changes, Teacher Changes, Stress and anxiety from exams, Anxiety caused from movement across foster carers, Difficulty in making friends, Sadness in family splits, Anxiety about leaving school and college, Loosing contact with friends-difficult friendships and feelings of loneliness, Little stability, Bullying (including cyber bullying), resulting in feelings of anger, stress, anxiety, low self worth and fear.

**Support Received**: Support from school (teaching assistants mentioned specifically), Revision sessions, Careers advice, Good friends – being able to talk to friends, Family support, Social worker, Family counselling.

**Support they would like**: More help from school staff to settle in; Need for a happy and supportive family; Volunteering opportunities; More time to be outside; More time with friends; More support to be independent; Someone to trust and to talk to.

Young people sometimes discussed living situations as being very cramped and therefore creating a very tense and stressful environment at home.

There were some discussions around difficult relationships with step parents/other half siblings, which were causing stress and anger.

Both the above seem to lead to spending more time out of the home. The knock on effect being that they rely on youth clubs as a safe place to spend time and to have people to talk to.

Drinking, Smoking and Drugs are common place across the consultations.

**Young Parents Groups**: Depression/Feeling down/Low self-esteem & lack of confidence/Stress/Social Isolation/Sleep deprivation.

**Support received**: most mentioned support from their Mum's (no Dad's mentioned) some said support from Partners; GP's; Mayday Trust Housing association; Sure Start Children's Centre; Staff at Dale Street Children's Centre; Health visitors; GP - with giving up smoking.

**Support they would like**: More from their friends; Better midwives; More approachable staff on Maternity Ward; Being told about Sure Start groups earlier in their pregnancy; GP they can trust - more help and guidance from GP & to be offered support groups and counselling when most needed; Earlier access to local young parents support groups with crèche facilities; Want to not feel judged; Want more secure living situation and to feel less socially isolated.

**Young Carers Groups**: Stress/Anxiety (attacks); Depression; Self harm; Bullying; Sleep loss; Drinking & Smoking.
Support received: Mostly from Parents and Young Carers Group Leaders. Some mentioned counsellor and some school social worker.

Support they would have liked: Counselling; Someone to talk to; Extra support in the home to have time to themselves; Better friends; Want to know how to access local support relevant to their needs; Want more support groups they can go to locally.

A need has been identified that young people consulted through young carers should be made aware of what support and advice is available. A 16 yr old young carer said she would have liked counselling, but didn't think she could afford it; this misconception has lead this young person to continue without support.

Young carers heavily rely on youth workers and community support groups.

The most frequent word I heard during these consultations is STRESS; almost every young person consulted said they were stressed and anxious about different things going on in their lives.
WACKY FORUM

LINK Consultation
Warwickshire Local Involvement Network
**Background to consultation:**

A consultation is when something needs changing or improving but to do this people need to be asked what they want or what their experiences and opinions are.

This consultation was to look at changes young people experience in their life.

We asked them:
1. What the changes were
2. How they felt at the time of the change
3. Who helped them and how
4. How they feel now about the change

Part of the project was an activity day that explored health issues using creative arts. The answers that young people gave in the consultations influenced what the health issues looked at were.

The consultations took place in January 2012, and the event was on Saturday the 28th of January 2012.

Different organisations that work with young people worked together to do this consultation. These were:

- New Ideas Advocacy (part of Warwickshire Community And Voluntary Action)
- ReVolve (part of Warwickshire Community And Voluntary Action)
- Escape Community Arts
- Warwickshire Children and Voluntary Youth Service (WCVYS)
- The project was funded by Warwickshire Link (a health organisation).
This report is to share with you the experiences that the young people in the Wacky Forum and the Saturday Club have had during their lives.

The Wacky Forum is a group of young people that live in Warwickshire, are between 14 and 19 and have a disability. The Group look at issues that are important to young people and their transition into adulthood, they are supported to speak up and express their opinions.

The Wacky forum is a project supported by New Ideas Advocacy, which is part of Warwickshire Community And Voluntary Action (WCAVA). The project is funded by the Integrated Disability Service (IDS).

The Saturday Club is a youth group run on a Saturday for young people aged between 13 and 18 in Warwick with disabilities. New Ideas Advocacy visited the Saturday Club as part of the consultation.

53 young people in total took part in the consultations from both Wacky Forum and Saturday Club.
**Reading this report**

The report is set out into 4 themes, which are the different areas of change that the young people were asked about:

1. School Changes
2. Home and Family Changes
3. Friendship Changes
4. Other Changes

Each theme is split into 4 parts:

1. The change
2. Feelings then
3. Support the young people felt they had
4. Feelings now

Each theme is colour coded.

- School Changes are blue
- Home and Family changes are green
- Friendship changes are red
- Other changes are orange

From each theme there will be 3 or 4 changes that have been talked about a lot. These have become a focus for the report. Each of the themes has 4 pages, each page shows the answers to the questions we asked.

For each theme parts 3, 4 and 5 have smaller circles which are divided into the number of young people that spoke about the issue and are consistent through that theme to show you each persons experience.
Feelings were talked about in the consultations, these are the pictures used in the report to show the emotions experienced.
Theme 1. School
The Changes
We asked young people: “What changes have you experienced during your school life”
Most young people talked about these changes:  Other changes young people talked about were:
Theme 1. School
Feelings at the time
We asked young people: “How did you feel at the time of the change”
Theme 1. School
Support
We asked young people: “What help they got at the time of the change”

Changing Class
Leaving School
Moving School
Going to College
Theme 2. Home and Family

The Changes
We asked young people: “What changes have you experienced at home or with your family”

Most young people talked about these changes: Other changes young people talked about were:

- Moving house (2 young people)
- Brother being away from home (5 young people)
- Moving Countries to live
- Going to a new home
- Living at college
- Visiting my aunt and uncle’s house for the first time in ages
- I got a brother
- Changing my bedroom around
- My mum has a new job
- When I became a father and have a son
Theme 2. Home and Family

Feelings at the time
We asked young people; “How did you feel at the time of the change”

Moving House

Brother being away from home

Someone being in hospital
Theme 2. Home and Family

Support
We asked young people; “What support did you get at the time”

Moving House
- Did not meet away
- Mumm

Brother being away from home
- Mumm
- Dad
- Mumm helping me when he’s home

Someone being in hospital
- Gramadad
- Friends
- School staff
- Youth club
- School staff help calling me
Theme 2. Home and Family

Feelings now
We asked young people; “How do you feel about the change now”

Moving House

Brother being away from home

Someone being in hospital
Theme 3. Friends

The Changes
We asked young people: “What changes have you experienced with your friends”
Most young people talked about these changes:

Other changes young people talked about were:

- When I got two best friends
- Communicating to different people
Theme 3. Friends

Feelings at the time
We asked young people: "How did you feel at the time of the change"

Falling out with someone

Losing friends when moving school

Making new friends
Theme 3. Friends

Support
We asked young people: “What help did you get during the change”

Falling out with someone
Losing friends when moving school
Making new friends
Theme 3. Friends

Feelings now
We asked young people; “How do you feel now”

- Falling out with someone
- Losing friends when moving school
- Making new friends
Theme 4. Other

The Changes

We asked young people: “What other changes have you experienced”
Most young people talked about these changes:
Theme 4. Other

Feelings at the time
We asked young people: “How did you feel at the time of the change”

- Braces off
- Change is good
- Going to a new club
- Kittens
- Being in hospital

- Very Happy
- I felt horrible
- Happy and excited
- Sad because it happened
- Like an ill person
Theme 4. Other

Support
We asked young people; “What help did you get”

- Braces off
- Change is good as a rest
- Going to a new club
- Kittens
- Being in hospital

not sure

The teachers told them off

My mum was really sick!
I helped mum to find out about the club

myself

Help at hospital
Theme 4. Other

Feelings now
We asked young people: “How do you feel about the change now”

Braces off
Change is good as a rest
Going to a new club
Kittens
Being in hospital
We would love to know what you think about our work!

Contact us through:

Jen Walsh  
Youth Forum Co-ordinator  
Or  
Sarah Deeming  
Youth Development Worker

On  
(02476) 361 800

You can view this report and see what else we have been up to at:  
www.newideasadvocacy.wordpress.com/wackyforum
APPENDIX 9

WCVYS Methodology Overview and Key Findings

Methodology:
WCVYS consulted young people on an individual and group basis, through the open access and targeted provision at the Bradby Club, Rugby and through the work of the Bradby Substance Misuse Worker within Rugby schools.

The consultation used was adapted from the ‘River of Life’ methodology developed through ReVOLve (see Appendix 6) and delivered through a WCVYS employee and the Bradby Club team. The methodology had to be adapted to meet individuals’ needs and maintain engagement both on individual and group basis.

Consultation Findings:
Young women in Bradby identified expectations and pressure to look a certain way to be seen as attractive to others and pressure amongst peers to follow popular trends. Some young women discussed peer pressure to participate in sexual activity. The majority of young women discussed how although they receive a lot of contraception information and advice (from school nurses and educational staff, youth workers, leaflets and internet) they would not feel able to take control of discussing/using contraception with a partner, resulting in unprotected sexual contact. This identifies the importance of services using an empowering approach to the work they deliver with young women.

Relationship dynamics both sexual and non-sexual became regular occurrences across consultations, especially exploration of bullying (including cyber bullying).

Members of the Bradby team have continually challenged young people involved in gang culture. Members of the team identified aggression, commonly amongst young men, as a mental health issue. Some young men were able to identify incidents of cyber bullying as triggers to their aggression, often involving provoking comments/footage online relating to gang culture.

Relationship dynamics were communicated alongside implications to mental wellbeing such as feelings of anger, stress, anxiety, distraction, fear, pressure and low self esteem.

Young people continually discussed regular binge drinking and implications such as placing themselves in risk situations and struggling at school with hangovers. Young people perceived alcohol as being socially acceptable as well as regularly available and had to thoughtfully consider health implications.

The use of cannabis was also highlighted through consultations.

Young people were accessing support through the team at Bradby and the substance misuse worker, some discussed support from an assigned worker within their supported housing.

The substance misuse worker has been able to gain access to two schools in Rugby where they deliver a variety of sessions to raise awareness around
substances and the implications to misusing substances, including implications to health and wellbeing.

The substance misuse worker discussed barriers experienced to delivering work within more schools across Rugby. These barriers included lack of communication, which may be down to time capacity within the school and capacity issues in scheduling external sessions into timetables. The substance misuse worker highlighted how valuable it has been to build a relationship with the nurse team within schools, enabling the nurse team to understand the value of the work and champion the need of the external substance misuse worker and services.