

What should excellent integrated service delivery feel like and look like from a young person's point of view? –
'Don't treat me like I'm a bother'



Sharing our experience

Practitioner-led research 2008-2009

PLR0809/096



This report is part of CWDC's Practitioner-Led Research (PLR) programme. Now in its third year, the programme gives practitioners the opportunity to explore, describe and evaluate ways in which services are currently being delivered within the children's workforce.

Working alongside mentors from Making Research Count (MRC), practitioners design and conduct their own small-scale research and then produce a report which is centred around the delivery of Integrated Working.

The reports are used to improve ways of working, recognise success and provide examples of good practice.

This year, 41 teams of practitioners completed projects in a number of areas including:

- Adoption
- Bullying
- CAF
- Child trafficking
- Disability
- Early Years
- Education Support
- Parenting
- Participation
- Social care
- Social work
- Travellers
- Youth

The reports have provided valuable insights into the children and young people's workforce, and the issues and challenges practitioners and service users face when working in an integrated environment. This will help to further inform workforce development throughout England.

This practitioner-led research project builds on the views and experiences of the individual projects and should not be considered the opinions and policies of CWDC.

What should excellent integrated service delivery feel like and look like from a young person's point of view? – 'Don't treat me like I'm a bother'

Julie Stott, GYWOP

Abstract

Gateshead Young Women's Outreach Project (GYWOP) offers support, information and empowering learning opportunities for young women, including young mothers, aged 13 to 19.

The research team, including peer researchers, worked with young women accessing GYWOP, as well as 58 other services, to ascertain what excellent integrated working practice looks like and feels like for young women.

Six focus groups, comprising approximately 30 young women, were involved in the research. The first was peer researchers. Two of the groups consisted of young women who were pregnant, or mothers who were involved in the project as they were not yet ready to move on to other more formal education, employment or training. Another consisted of mothers or expectant mothers who were of statutory school age. Another was made up of young women of statutory school age but not mothers, who either did not attend school or attended very little due to circumstances often related to bullying. The last group consisted of young women, some of whom were mothers, who had issues in their lives, resulting in isolation and low self-esteem.

The main findings were as follows.

- The importance of **the ethos and general environment of the service**. This impacts on the engagement of young women and adds to their confidence and general wellbeing, contributing to positive outcomes and progression.
- The **value of the service** and a **holistic approach** are important, as is ease of access, varied communication methods, a range of social interaction and learning opportunities.
- Being treated with **respect** is paramount.
- **Perceptions** - young women can 'pick up' on things that are not necessarily intended - workers need to be **extra sensitive** and aware of the impact on young women.
- It is vital that young women feel that they can **trust** workers. For young women in care, **confidentiality** is a serious concern, leading to the feeling that 'everyone knows their business'.
- Young women need to feel in **control** of what is happening to them and value voluntary engagement with services.
- **Affirmation** by workers has an extremely positive impact, giving feelings of pride and self-worth.

The findings will be used to produce awareness-raising interactive training sessions and materials, to be delivered and disseminated by young women for use with professionals and students.

Julie Stott
GYWOP

Introduction

Gateshead Young Women's Outreach Project (GYWOP) is part of the Youth & Community Learning Service within Gateshead Council, is a registered charity, has been in existence since 1992, and during this time has always valued close working relationships with other agencies. This specialist Project offers support, information and empowering learning opportunities to young women, including young mothers, aged 13 to 19 years, particularly targeting isolated and 'hard to reach' young women who may find it difficult to access services. The Project prides itself on engaging young women and young mothers and enabling them to gain skills, aspiration and vision to make confident choices about their next steps in life, which may include involvement in their local community provision, training, further education or employment.

A voluntary management committee supports the Project and there is a minimum of five young women members who have all had involvement with the Project. The chairperson is always a young woman and the peer researchers involved in this research are also committee members.

The aim of carrying out this research is to produce good practice guidelines for practitioners linked to a training presentation created and facilitated by young women to be disseminated to a wide range of agencies, including university students. This will ultimately result in improved outcomes for young women using services.

As a specialist organization GYWOP values a multi-agency holistic approach to ensure the best outcomes for young women. The heart of this work is the 'young person's voice', and to this end, when exploring best practice in an integrated service culture, the obvious way forward was to speak with young women.

Context

The research question regarding the actual experiences of young people of services lies at the heart of integrated practice, and it is this on which the research mainly focused. However, it is valuable first of all to put the face to face practice into context by briefly looking at the wider picture (see Appendix 7).

The existing knowledge base around 'integrated working' is extensive. The green paper *Every Child Matters* published in 2003 built on existing plans to strengthen preventative services for children and young people and prompted unprecedented debate and consultations about services for children, young people and families. Following the consultations, the government published *Every Child Matters: the Next Steps*, and passed the Children Act 2004, providing the legislative backbone for developing more effective and accessible services focused around the needs of children, young people and families. The Act focused on the need for robust governance arrangements for inter-agency cooperation, which set the framework of accountability for the improvement and delivery of effective services. Integrated processes based on a Common Assessment Framework (CAF) are intertwined with

integrated frontline delivery. The Act talks about 'accessible and personalized services built around the needs of children and young people, not around professional or service boundaries', and 'staff working with children will have a common core of knowledge and understanding about children's needs'. *Youth Matters: Next Steps* (the 2006 white paper), which attracted a massive involvement by young people during the consultation stage, talked about services for 14 to 19 year olds which complemented the changes introduced in accordance with *Every Child Matters*.

The policy documents and much of the research and guidelines around integrated working underline what services should be doing, and what they should be providing, who they should be targeting, and explain the theory of what the practice should look like, and talk very much of strategic and organizational practice. What was much harder to find, when building up a picture of the existing knowledge base, was evidence of the *voice of the young person* regarding their experiences of services and based on these experiences recommendations on how they should be 'worked with' and treated when they are accessing the services. One powerful way of measuring positive outcomes for children and young people is to look at statistics based on targets that are set by the government, for example, around improved school attendance, reduced teenage conceptions and so on. What is much more *intangible* to document is how the *process* was for the young people, and it is this that this piece of research is about.

One piece of existing research that appeared to pose a similar question to the one that this research explored was carried out by BMG Research commissioned by the Norfolk Children and Young People's Partnership (April 2008). They set out to examine what young people think about local services and support, using a telephone questionnaire. In the analysis of the findings respondents were divided into groups, and those young women identified as supported and intensively supported were most akin to the young women who took part in the focus groups of this peer led research (PLR). The kinds of barriers to accessing services that these supported young people talked about were again very similar to the barriers highlighted by young women in this PLR. Some of these included:

- transport difficulties making it hard to access activities
- financial costs for activities
- lack of confidence to try new things
- worry about what friends might think
- not always understanding information that is given to them
- not able to explain what they need
- not having access to IT, so unable to access on-line help
- finding it difficult to trust people
- feeling shameful asking for help
- embarrassment about asking for help
- lack of confidence to ask for help
- worried about confidentiality
- difficulty in talking about private things.

This BMG Research found young women in the supported and intensively supported group were much more inclined to want to seek opportunities for support around emotional and personal matters.

It was very much the sentiment of the PLR peer researchers that the appropriateness of the *environment and the ethos of services* in which young women are given support – for the needs as identified in Norfolk – is vital to enable some or all of these barriers to engagement to be removed.

Methodology

The research team consisted of Julie Stott (Young Mothers' Outreach Support Worker), supported by Jo Vary – both Youth and Community workers, who have a considerable amount of experience in working with young women, including young mothers. There were also three peer researchers.

It was decided that peer researchers should be used in the investigations as it was thought other young women would relate well to them. They were all young mothers who had previously been extensively involved in the Project and were identified because of their commitment to and knowledge of the ethos of the Project.

The research team, including the peer researchers, attended a training day on integrated working around the CAF and lead professional. Drama was used as a tool for demonstrating good practice. Many professionals attended the training and the young women showed significant confidence and knowledge. Indeed, it seemed that some were more knowledgeable of some systems than professionals as they had had firsthand experience – some good and some not so good. They were fully involved in group discussions, writing up and feeding back to the large group and also took part in making a training DVD (*The Walker Family*).

Six focus groups, comprising approximately 30 young women, were involved in the research. The first was peer researchers. Two of the groups consisted of young women who were either pregnant or mothers who were involved in the Project as they were not yet ready to move on to other more formal education, employment or training. Another consisted of mothers or expectant mothers who were of statutory school age. Another was made up of young women of statutory school age but not mothers, who either did not attend school or attended very little due to circumstances often related to bullying. The last group consisted of young women some of whom were mothers, who had issues in their lives, resulting in isolation and low self-esteem.

Based on their previous experience the researchers were fully aware that where participants who do not know each other, even though they have a common interest, are brought together to form a focus group, they are less likely to contribute than an already established group. This knowledge informed the practice: 'such interviews are useful...where a group of people have been working together for some time...' (Watts and Ebbutt 1987).

A lesson plan (Appendix 1a) was delivered to the peer researchers, to give them initial ideas for the sessions that they would be delivering. They then adapted this plan for use with the focus groups (Appendix 1b). At the beginning of each subsequent peer led session groups were given a full explanation of the research project and how this had come about through the Children's Workforce Development Council (CWDC).

At the beginning of each focus group session participants revisited ground rules specifically focusing on the issue of confidentiality. It was stressed that confidentiality could be broken in ways other than naming people and, or, institutions: 'interviewing is intrusive, but having your personal details splashed in identifiable form across a research project is even more intrusive' (Sapsford and Abbott (1996).

A group exercise (see Appendix 2) was carried out with the peer researchers around confidentiality to give them a better understanding of the complexities of the issue, so as to enhance their delivery within the focus groups. It was important that this learning was processed so that the peer researchers were aware that for different people different things are easier, or conversely harder, to share than others.

Within each group, individuals were asked to list all of the services with which they had had contact (Appendix 3). A prompt list supported this process (Appendix 4)

Each individual was given the opportunity to share good and not so good experiences of these services, it being reiterated that specific comments would not be associated with individual services in the report.

The young women were asked to think of something that a professional had either done or said to them that may have turned them off a service, and conversely something someone had said or done that had a positive impact on them. They were also asked why they carried on or stopped engaging with a service.

A graffiti-type wall was set up for the young women to give messages to professionals who work with young women, to help them to provide the best possible service. This provided a different medium through which to 'voice' their opinions and ensured that as much information as possible was captured.

Young women participants remarked that they had enjoyed giving their views and were empowered by the experience and by the fact that their voices were at the centre of this whole research project: [run on following 3 statements as part of this para] I enjoyed having my say on things'; 'I liked having the young researchers, it was fun';

'Had a fabulous day talking about how to make services better'.

One unforeseen circumstance that arose was that even though GYWOP covers an area of approximately 55 square miles, potentially on two occasions two of the peer researchers had a younger sister in a focus group.

As the focus groups were groups that already existed and were functioning within the organization where the researchers work on a daily basis, it was easy to gain access

to them and manage the whole research process in a seamless manner. Existing and familiar support links for transport, crèche, use of rooms and refreshment facilities were already in place and added to the relaxed atmosphere of the environment in which the research took place. This situation, and the fact that the researchers had 'control' of the environment, was undoubtedly a strength in this research process.

Other identified strengths in the methodology used included the fact that peer researchers delivered five sessions, one following fairly quickly after the other, which kept the momentum. Also, regular contact with the peer researchers proved valuable, especially as a means of keeping them 'on board' during the writing up of the report stage, during which time they started the planning of the dissemination part of the research.

Findings

The following is an analysis of the information gathered in the focus groups in which approximately 30 young women had a combined contact with 59 different services via 295 collective experiences. The following seven key themes arose from this material.

1. The 'ethos and general environment' of the service arose as an important theme

Young women spoke about how important the general environment at the point of delivery of the service was to them. It should be warm and welcoming, with a feeling of ownership of the place by young people; for example, work of young people displayed on walls, photographs, positive images. Additional support such as a crèche, transport and hospitality was valued as part of the whole free service: however, being free to use a toilet when needed, along with complementary sanitary wear, condoms and other health/hygiene related items was highlighted as contributing to excellent services. Young women valued extra contact via the telephone, texts, MSN, reminders, and one to one opportunities, in between any regular planned contact. They valued the professionalism of experienced confident workers, who 'know what they are on about'; in addition, where the relationship with the worker is informal and friendly, and where the worker is seen more as a 'grown up friend', young women felt safe and were able to ask or talk about sensitive issues and feelings, trusting that this would be confidential. It was important to the young women that involvement in a service was voluntary, and they commented on how much they appreciated smiles and laughter from the workers. They underlined how they valued workers who were open and reliable, and genuine in their approach, as well as the appropriateness of the service delivered. Where services included participation in a group setting young women benefited greatly from the support of their peers.

To summarize, the environment in which a service is delivered, linked to the welcome and wider ethos of the service, has an impact on the engagement of young women

and adds to the confidence, self-esteem and general wellbeing of participants, which all contribute to positive outcomes and progression of the young people

2. The value of the service

Positively, from a more practical point of view young women liked having somewhere to talk about issues in their lives, and highlighted that it was useful to be able to make contact with services via different means of communication, as well as being able to access support easily when needed. Links to other services when appropriate was valued, as was support to 'move on' when ready. A service was considered valuable where a range of opportunities were offered; for example, being able to gain qualifications and new skills, try new things, and providing social contact with others. Young women liked it when they understood what the service was about, when things were explained clearly and information was relevant to them, and there is continuity of staff. Services with an outreach and /or domiciliary role are accessible and much valued to complement centre based provision; as were different services on one site. Sometimes links with other family members by the service was helpful from a young person's point of view. Where a service offers child care this was much valued by young mothers who thought that social activities improved child development while giving the mother a break; at the same time it was acknowledged that continuity and a high standard of care by the same workers helped the mother to be more relaxed and thus able to benefit from their involvement.

Conversely, the majority of the young women who took part in the research had had some negative experiences of services. Clearly there were services that were not welcoming or flexible, where young people were not even given a service, where they were frustrated, angry, confused, bored, disempowered, 'told of', 'made to wait', or 'got the feeling of being ignored'. One young person said 'it took two and a half hours and saw about six different people just to fill in a form'. Another remarked that 'nothing happened in my [dire] situation until another agency became involved'.

Young people often felt that they were asked for the same information over and over again, and that personal attitudes and opinions marred the professionalism of the worker. Workers were sometimes 'unhelpful', one 'gave me a pack and said give them a ring'. Where young people experienced workers being 'rushed and busy' they were reticent to talk about problems.

Several young women talked about the use of complicated language by some professionals, stating that often they didn't understand what they were talking about and were left confused, embarrassed and shocked. Others talked about being 'told' how to do things, which then resulted in a negative relationship.

Overall, young women valued a holistic and flexible approach as offered by some of the services, where they understood what the service was about, and where they were enabled to easily link into other services as necessary. Young parents in particular rated highly the wide range of relevant help and information offered by workers who are experienced and knowledgeable regarding the needs of young parents.

Negative experiences of services resulted in young people saying that they wouldn't go back to that service.

3. How young women were treated

Young women talked about the relationship with workers, and the overall theme that came across was around 'respect'. They wanted workers to be able to 'connect' with them and treat them as they would like to be treated, as 'equal' and in a 'non-judgemental way'. They liked it when workers showed an interest in their life and kept in touch.

Experiences that were not conducive to positive relationships included poor communication, including body language, feeling that they were 'being talked down to', 'ignored' or 'put down'. When asked 'What message you would give to a worker', one response was 'Don't treat me like I'm a bother'.

4. Perceptions

Several responses by young women were felt by the researchers to be around feelings and were not necessarily shared as facts, though were no less powerful in the impact they had on young people.

Some *things* may well have been *picked up* by the young women in a way that was not intended, which could have been due to poor self-esteem; however, it does show that workers need to be sensitive when dealing with young people, and perhaps be particularly aware of how what they say, and do, might be interpreted: 'I was given condoms two days after I had my baby and it made me feel like a slag'. Some young women felt that their words had been 'twisted', with the result that a third party was given the wrong impression. Other workers came across as being nosey and asking what seemed like irrelevant questions leading to anxiety. Some young mothers felt that they were watched more closely in a negative way due to their age, and some felt that they were perceived as over-reacting in some situations, for example, when taking their child to the doctor to be checked for something: 'They are supposed to be there to help you – they treat you like shit', was one comment about a worker/service.

Heightened sensitivity by workers to the interpretation of their words and actions is therefore crucial when engaging with young people.

5. Confidentiality

Confidentiality was discussed within each research group and young women appreciated feeling they could trust a worker.

Some young women contributors had varying degrees of experience of the care system and confidentiality issues were more of an issue of concern for these young women than to those who had not experienced the care system. They felt that everyone knew their business. In recent times when the rights of children and young people have become central to service delivery there is the potential for confusion around what should and should not be shared and young people do not always feel in control of what is happening.

'One worker said it was OK for my relation to look at my notes and they learnt something about me that I didn't want them to know'. Workers haven't always closed the door of a room so as to prevent other people hearing private conversations.

Being able to trust workers was of paramount importance to the young women, who generally had a good understanding and experience of confidentiality issues, and of when issues needed to be shared in association with the protection of children.

6. Control

Young women who are involved in the running of an organization or service expressed feelings of empowerment, as did those who had been involved in the design of programmes in which they are/were involved. Young women appreciated being asked by workers what they could do to help as this helped them to feel in charge of what was happening to them. One way that young women say they have control is by not answering the door or telephone to a service.

Young women felt that they were not in control of a situation when, for example, questions were directed to the carer and not to them. It was deemed disempowering when young women had to see professionals they didn't want to see or didn't think they needed to see. Young women felt that labels being applied to them was not helpful; for example, 'it makes you depressed if you are diagnosed as depressed'. Some young women felt that if they didn't like a worker and requested a change it could be embarrassing if this didn't happen and they still had to see that person.

When talking about a medical procedure one young woman stated 'it doesn't feel right at all having a woman touching my bits'.

When young women are empowered they feel in control and positive about a service, and the outcomes for them, and children if they are a parent, are likely to be better. Workers should always speak with the young woman and not direct questions to her carer or parent, but ensure that they are involved whenever this is appropriate.

7. Affirmation

The impact on young women of affirmation by workers was extremely positive, giving feelings of pride and self-belief.

Conversely, young women were left with feelings of anger, being undervalued, and unworthy, when discouraging remarks were made to them, as, for example, when a young woman, referring to a worker, said 'he told me it was my fault for getting pregnant so therefore I should just suffer the consequences'.

'So you are 18, had a baby three years ago and you haven't done any courses yet' was something that was said to a young a mother. 'They didn't seem to understand that you might want to be a full time mam'.

Conclusion

The experience of this research project has been enlightening and exciting for the whole of the research team and although the findings were in line with the expectations of the practitioners involved (Young Parents in Gateshead...life now and aspirations for 2000 and beyond (2000)), the weight of the present-day young women's voices will have a significant and powerful impact. The involvement of confident young women as peer researchers enhanced the quality of the research process and provided focus group participants with extremely positive role models and added credence to the research: 'It was worthwhile doing the research, it was good to be involved, and I learnt a lot about myself and others too' (peer researcher).

The young women peer researchers will use the evidence obtained from this research to produce awareness-raising interactive training sessions and materials for use with services and organizations that work with young women in particular, though it will be of relevance to any services working with young people for the purpose of addressing front-line delivery practice. It is their intention that the findings of the research will challenge and question those delivering services to young people and encourage workers to 'keep on their toes' and be extremely sensitive to how they are responding to young people.

The findings will help to affirm workers and services that are already offering excellent services – and there was a lot of evidence of this – but at the same time remind all workers that there is no room for complacency. Young people should be able to expect and receive excellent services from each and every worker in each and every service. One bad experience with one person – perceived or real – can prevent that young person from accessing that service again, and it may be that this will impact on their peers who will also choose non-engagement.

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Appendix 1a - PLR with Peer Group Session Plan

1.

- Introductions and involvement with Group
- Explanation – What we are doing
 - CWDC – small grant for research
 - To try to improve services that young people might use
 - To produce report
 - To produce ‘report’ in a different way
 - How – by peer workers speaking with GYWOP groups about the services they use or have contact with
 - Today is an example of how it may work – can be changed
- Ground rules – stress confidentiality, anonymity
- Confidentiality game
- Agree a confidentiality statement

2

- “What services has this group had contact with?”
- Brainstorm – individuality on post its, these services (one service per post it, use colour co-ordinated post its i.e. Green/Jemma etc)
- Prompt if necessary (using list)
- In a round, each person say their service and put on flipchart
- Group services together
- Ask young women what their understanding is of that service (Jo R)
- Take one of your post its and think about your first contact. What were the good things/not so good things about that contact ®
- How was first contact made? ®
- Did you ask for the contact or were you approached ®
- One service at a time,

3

- Think of these services you have had contact with and highlight what for you were good things about that service® (not GYWOP)
- Repeat for ‘not so good’ ®
- Repeat questions for GYWOP ®
- Think of something that someone said or did that turned you off that service ®
- Think of something that someone said or did that had a positive impact on you ®
- Why did you carry on or stop engaging with that service ®

Perfect 10

Create the perfect service, thinking about everything that we have done today

What message would you like to give to professionals working with young women in Gateshead to enable them to provide the best service possible

Appendix 1b - Session Plan 1

- Round of Introduction – Name badges
- Explain what we are here to do
- Ground rules – Confidentiality (make aware of Ground rules, identify how confidentiality plays a huge part) – 5 mins

- Which services have young women used? – Write **one** per post it.
- Prompt with other list of services
- Each person identifies a Service they have used – Stick on flipchart-in a round- if anyone else has used the same service, stick this on too.

- Refer back to list of services and in a round pick one service off and say in general what was good about the Service and not so good?
- Have you had any concerns about confidentiality?
- Have any workers made you feel good/positive about yourself either by saying or doing something? Quotes
- Have any workers made you feel negative about yourself either by saying or doing something?

- What message would you give to Workers to enable them to provide the best service for young women?

Appendix 2 - Confidentiality Exercise

Participants are asked to line up side by side. They are then asked to step forward if they don't mind "people" knowing the following about them:

- How old you are
- Where you live
- Who you live with
- What religion you are
- Your relationship status
- Your parenting status
- How you voted in the last elections
- How much you earn
- Whether you have ever been arrested
- Your sexual history
- Whether you have had a termination
- Whether you have been abused
- Your sexual orientation
- Whether you have ever seen a counsellor
- Whether you have ever attended a sexual health (GUM) clinic
- Whether you have ever had mental ill health
- Whether you have ever suffered domestic violence

What should become apparent is that some things are easier to share than others, and it may be easier to be open depending on what your answer is. Participants should realize that not everyone would be happy to have all of their information shared with "just anybody" and that that is their prerogative.

Appendix 3 - Services accessed

- Social Services 10
- Hospitals 23
- Youth Clubs 2
- Education Welfare Officer 8
- Streetwise 3
- Health Worker 1
- Ald/Neeta (training agencies) 3
- Police 11
- Child and Family Unit 2
- Victim Support 1
- School Mentors 1
- School 5
- The Centre (in school) 1
- Connexions 19
- Leaving Care Team 2
- Emotional Therapy 1
- Teenagers to Work 1
- School Nurse 6
- Midwives 13
- Childcare/ Creche/ Nursery 13
- Citizens Advice Bureau 4
- Surestart 10
- Counsellor 5
- Scan Clinic 11
- Local GP 18
- Parent Outreach Workers 1
- Ouch (Child Safety Equipment) 1
- Community Service Volunteers 1
- Support Worker (Linked to Family Centre) 1
- Aquilaway (Supported Housing) 5
- Gateshead Young Women's Outreach Project 14
- Sexual Health Services/ Contraception Nurse/ Clinics 6
- Young Mothers Outreach Worker (Linked to Gateshead Young Women's Outreach Project) 7
- Housing/ Gateshead Housing Company 12
- Whoops! (Child Safety) 2
- Benefits Advisor/ Job Centre 12
- Emotional Wellbeing Team 3
- Princes Trust 1
- Family Centres 3
- College 4
- Health Visitors 13
- Healthy Start Vouchers 2
- Youth Offending Team 2
- Tenancy Support / Norcare 3
- Smoking Cessation 2
- Social Work Therapy Team 1
- Alternative Education 4
- Care to Learn 2
- Face Book / MSN 2
- The Council 1
- Words and Wheels Project 1
- Youth Workers 1
- Transport 2
- Child Support Agency 1
- Child Benefit Agency 6
- Learning Support (College) 1
- GUM Clinic 3
- Child Tax Credit 1
- Family Link 1

Appendix 4 - Agencies/Services (prompt list)

- Midwives
- Health Visitors
- Sure Start
- Parent Outreach Workers
- Children Centres
- Scan people
- Police
- School Nurse
- Mentors
- NECA/Smart/24/7
- Smoking Cessation
- Princes Trust
- Rape Crisis
- Streetwise
- Alternative Education
- Play Groups
- Safer Families
- Whoops
- Community Centre/Youth Workers
- School – Comprehensive/Primary
- Foundations – community Furniture
- Northern Initiative for Women and Eating (NIWE)
- Aquilla Way – Elizabeth House, Naomi, Eagle Project, Cares
- Training Agencies – NEETA, ALD Access, Phoenix, Rathborne, Zodiac
- Sexual Health Services, GUM, Specialist Nurse TP, Clinics, Chlamydia
- Benefits agency, Job Centre Plus, Child Benefits, Care v2 Learn
- Behaviour support Services/Hospital Home Tuition Service
- Housing/Tenancy Support, Norcare, Aquilla Way
- Emotional Wellbeing Team, Child Family Unit
- Ouch
- Family Centres
- Connexions
- Youth Offending Team (YOT)
- Service
- Hospitals
- Social Services/Leaving Care
- Education Welfare
- Childcare, Creche, Nursery
- Bernardos
- Childrens Rights
- Care To Learn
- Citizens Advice Bureau
- GP's/Doctors
- Housing
- College
- Young People's Services
- Social Work Therapy Team

Appendix 5 - Quotes

Positive

Training Agency – when I was homeless – told me “no matter what time of day/night it was I could ring her for advice/support, offered me dinner/money” (after I had not been given any help at connexions).

Family Centre Worker/Support Worker – When I did my 6 weeks assessment, when I was at my house she offered to buy me stuff as I had nothing in cupboards, told me I was a really good mam.

Young Women’s Project – They got me a birthday cake and card.

Health Visitor – Telling me my son was advanced for his age.

Young Mothers Outreach Support Worker – **Saying I have a nice house and nice dog.**

Creche Worker – says she loves my son – he’s so pleasant.

Young Women’s Project saying you are the best group.

Felt proud when the workers told me I was brilliant for breastfeeding, felt good in myself.

Zip Wire Worker (nervous/couldn’t do it) – “Don’t tell yourself you cannot” and then I did it/first that little bit of encouragement and lots of encouragement – I use that quote in other situations.

Loved the descriptions that workers and other young women gave me – saying the things about my qualities.

Letter from **Social Services** saying I was good mam.

Young Women’s Project Worker always gives us good comments.

Social Worker – You’re a good mam keep on going the way you are.

Old lady said affirming things re: my drawings.

Young Women’s Project Worker told me to – “ignore him and use the bubble” when I was upset (at my brother who was hurting me).

Workers say positive things about my singing and drawings at **Gateshead Young Women’s Outreach Project.**

Negative

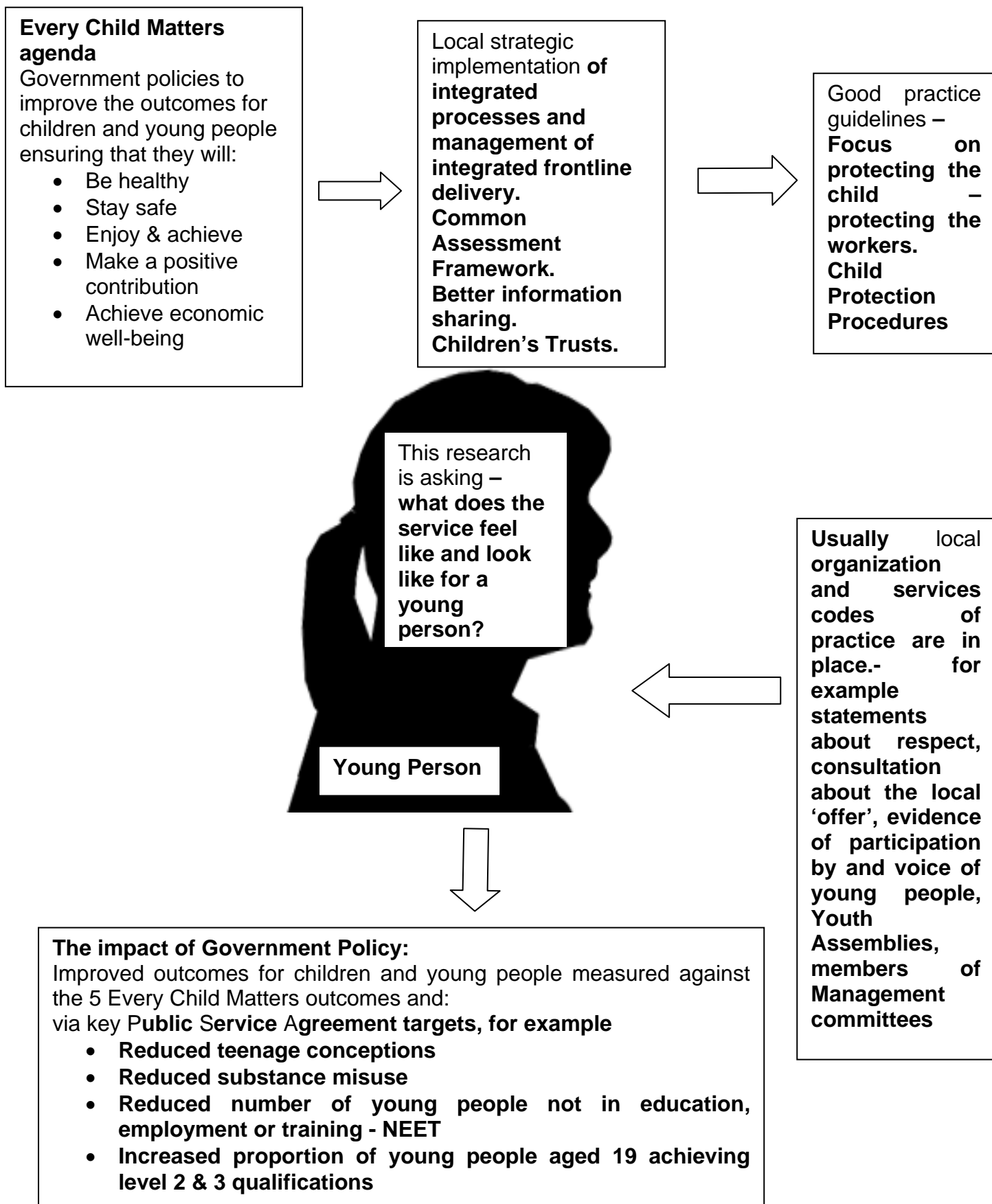
Getting called mentally ill – (depending on how you are treat).

When Pregnant at School – you'll have to sit in the isolation room with bullies truants etc, for safety couldn't go for my own dinner.

Appendix 6 - A Perfect Service/Worker For Young People

- People to talk to
- People good at listening
- Somewhere to go once a week
- Made us feel welcome
- Non-judgemental
- Get to know you/me
- Have a laugh
- Have a cuppa
- Able to use toilet
- Dealing with things sensitivity
- Warm/inviting environment
- Smiles on faces
- Bright – walls
- Helpful
- Workers who are confidentiality
- Don't break confidentiality
- Say nice comments
- Treat me as an equal
- Be positive
- Act like a friend
- Don't talk to me like I am silly
- Friendship/meet other young people
- Don't treat us differently to adults
- Groups work on the walls e.g. toilets
- Clean toilet and plenty of toilet roll
- Talk to me and not who I'm with
- Don't think you are better than me
- Involvement eg. In programme planning
- Friendly people, being nice, not ignoring you
- Non-judgemental and not putting your own views in the way of the service you give
- Freebie things in toilet e.g. sanitary towels, money for breast pads
- People qualified in the area i.e. someone who's worked with young people and can refer/link to other services
- Some services e.g. Sexual Health Team that can come to the house sometimes
- Treat me how you would expect to be treated
- Why do you work with young people if you don't like them and your going to be grumpy
- Treat people how you want people to treat you
- Friendly, talkative, confident (know what they're on about/talking about)
- Respect me
- Be friendly and talkative
- Be polite and kind
- Have a laugh
- Smile (be fun)
- Don't look down your nose at us
- Be normal
- Understanding
- Don't be stuck up
- Be cheerful
- Be positive
- Happy
- Fun
- Smile
- Treat me like an adult
- Make me feel comfortable
- Don't have a grumpy face
- Nice
- Talk with respect
- Don't break confidentiality
- Don't treat me like I'm a bother

Appendix 7 - The Wider Picture



The Children's Workforce Development Council leads change so that the thousands of people and volunteers working with children and young people across England are able to do the best job they possibly can.

We want England's children and young people's workforce to be respected by peers and valued for the positive difference it makes to children, young people and their families.

We advise and work in partnership with lots of different organisations and people who want the lives of all children and young people to be healthy, happy and fulfilling.

For more information please call **0113 244 6311**
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