

# Young NCB Research Advisors Newsletter

## 4<sup>th</sup> February 2012



### Who was at the meeting...

**Young people:** Jake, Thomas, Ben, Abbie, Grace, Roxane, Adam, Ceyrone, Angel, Kadeem and Chloe.

**Facilitators:** Jo and Helena

**Other Staff:** Helen (CPRU), and Ginny and Kristin (EPPI)

### What did we do?

For the icebreaker everyone sat in a circle except one person who had to say a truthful statement about themselves, for example 'I'm wearing boots today'. Everyone who agreed with this statement had to stand up and move around with the person who said the statement taking a seat. Therefore, a new person has to say a truthful statement about themselves.



Most of you really enjoyed the icebreaker as you thought it was good fun!

### Sessions 1 & 2: Understanding Health Policy

We were joined by Helen Roberts from the CPRU. We spent the morning looking at policy, and in particular health policy. The aim of

the session was to improve your knowledge and understanding about:

- \* different government departments and what they do
- \* 'what is policy?'
- \* and how policy is developed.

Firstly we thought about all of the different government departments that you knew about and these included:

- ↪ The Department of Work and Pensions
- ↪ The Department for Transport
- ↪ The Department for Education
- ↪ And the Department of Health



We then looked at what is a policy and thought about specific policies that might relate to health, for example not purchasing alcohol until the age of 18.

This led to a discussion about the 'intervention ladder', which showed that a policy could affect people's attitudes and behaviours in different ways depending on what level the policy is at on the intervention ladder. As a group we thought about drinking alcohol and came up with

possible policies at each level of the intervention ladder. For example, in order to inform and educate people you thought that a media campaign could be run showing the problems caused by drinking.



This was seen as a policy that nudged a person's behaviour, as it did not directly control a person's behaviour but encouraged a change in their behaviour. Another example was to regulate the amount of alcohol that a person could have access to and you came up with various means to do this including not having alcohol sold everywhere but having specific shops for the sale of alcohol. This was seen as a regulating policy as the sale of alcohol was being formally regulated.

After a short break we played 2 games. The first highlighted that different people will want different things to happen in a policy. You were all given a scenario and then you all dressed up and represented different people who would feed into developing a policy about the acceptable age of cycling to school unsupervised.

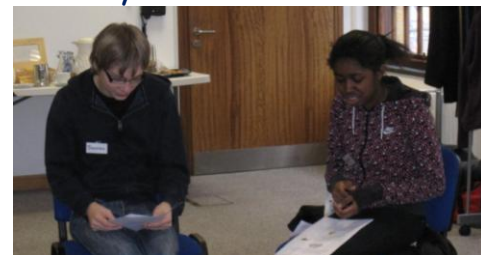
Jake and Ceyrone were from the Department of Health and thought it was OK for an 8 year old to cycle to school unsupervised providing it was safe.



Ben and Angel represented Head Teachers and they felt that the first year of secondary school (aged 10/11) was the right age to cycle to school unsupervised.



Thomas and Chloe were parents who disagreed with each other! One parent thought it was fine for an 8 year old to cycle to school unsupervised while the other parent felt a child should be 12/13 years old before they were allowed to do this.



Roxane, Abbie and Grace represented views of young people who felt at the age of 8 you would feel too scared and it could be potentially unsafe to cycle to school unsupervised.



Finally, Kadeem and Adam were representatives from Child Protection who believed that it was a form of neglect allowing an 8 year old to cycle to school unsupervised.



As you can see all of you had different ideas about what was an acceptable age a child could cycle to school unsupervised and this is what it is like when developing a policy!

The second game involved reading evidence cards to decide what evidence you would use to inform your policy to solve childhood obesity. This game highlighted that different people will want different things included in a policy, people who are making policies need to be informed about their arguments', and to resolve an issue more than 1 policy may need to be developed.

Generally you all enjoyed the session with one of you commenting '**It was interesting, especially learning**

about different government policies'.

### Session 3: Community Involvement

For this session we were joined by Kristin and Ginny from EPPI centre (The Evidence for Policy and Practice Information and Co-ordinating Centre), who are doing research about understanding people's perception of community involvement. We looked at all of the different types of communities each of us belong too, e.g. geographic area, ethnicity, faith and interests.



We then talked about different examples of community involvement. Each group was given an article from a local newspaper and asked to identify the community, and the type of community involvement discussed in the article.

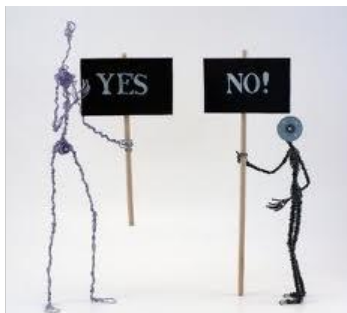


You were asked to come up with 3 different initiatives that could be used to reduce the number of young people who smoke.:

- ◆ Smokers Anonymous - support the smokers to stop smoking
- ◆ Shock tactics - take smokers to visit patients in hospital who suffer from smoking related illnesses
- ◆ Use assemblies and citizenship classes to inform and educate young people about the problems of smoking



You were all asked to pick one of these policies to discuss how young people themselves could be involved in supporting or setting up each initiative. However, there was a heated debate about which was the best policy to chose! For many of you this debate was the thing you liked most about this session!



### Session 4: Piloting a consultation

In the final session of the day we piloted a consultation with you which will be sent out to lots of young people. It was about what the Department of Health should and should not focus on. You gave us some

great feedback about ways we could improve it which included:

- ❖ reduce the length
- ❖ use a ranking system rather than a rating one
- ❖ change some of the language as it is not clear what is meant
- ❖ and take out the education section as it is not relevant.



### What you thought of the day!

9 of you said that you enjoyed the day a lot, and 1 of said you enjoyed the day a little. The best things about the day included:

'I enjoyed all the sessions they were full of enjoyable statistics.'

'Debating!

'Lunch and the icebreaker'

'The mini debate and just coming here.'

'Health community was the best session but enjoyed the day overall.'

### Next meeting

The next meeting will be Saturday 28<sup>th</sup> April at NCVO. We need a volunteer to run the ice-breaker so please contact Jo. If you would like to be involved in any of the other sessions then please let us know. If you have any questions or comments then please contact Jo: [ilea@ncb.org.uk](mailto:ilea@ncb.org.uk) or 020 7843 6338