

Welcome

*Peer research: sharing best practice and
developing a community of practice*



What is Fuse?



- Centre of Excellence in Public Health Research
- A virtual centre, operating across the 5 NE universities
- USP - Translational Research in Public Health
- Working in partnership with policy makers and practitioners, enabling research findings to be understood and applied to public health issues
- Founding member of the NIHR School for Public Health Research

The ARC: 'Better, fairer health and care at all ages and in all places'

- NHS Trusts
- CCGs
- Social care
- Public Health
- Local Authorities
- Third sector
- Charities
- Public Involvement



Spaces of good practice in peer research

- **Matthew Williams, Peer Researcher** – *Peer research on men's mental health: BoroughManCan*
- **Connected Voice Haref** - *Peer research on mental health in ethnically minoritised communities*
- **Jo Smith & Emma Giles, Teesside University** - *Peer research on food insecurity in adults with SMI living in Northern England*





Mental Health in Our Communities

Kuveri Katjangua, Steven Mutungwazi, Carrie Rosenthal

Who was involved?

Haref



Fulfilling Lives

Newcastle Gateshead



Who were the peer researchers?

First Step



Riverside Community Health Project



Rainbow Home



**RAINBOW
HOME**

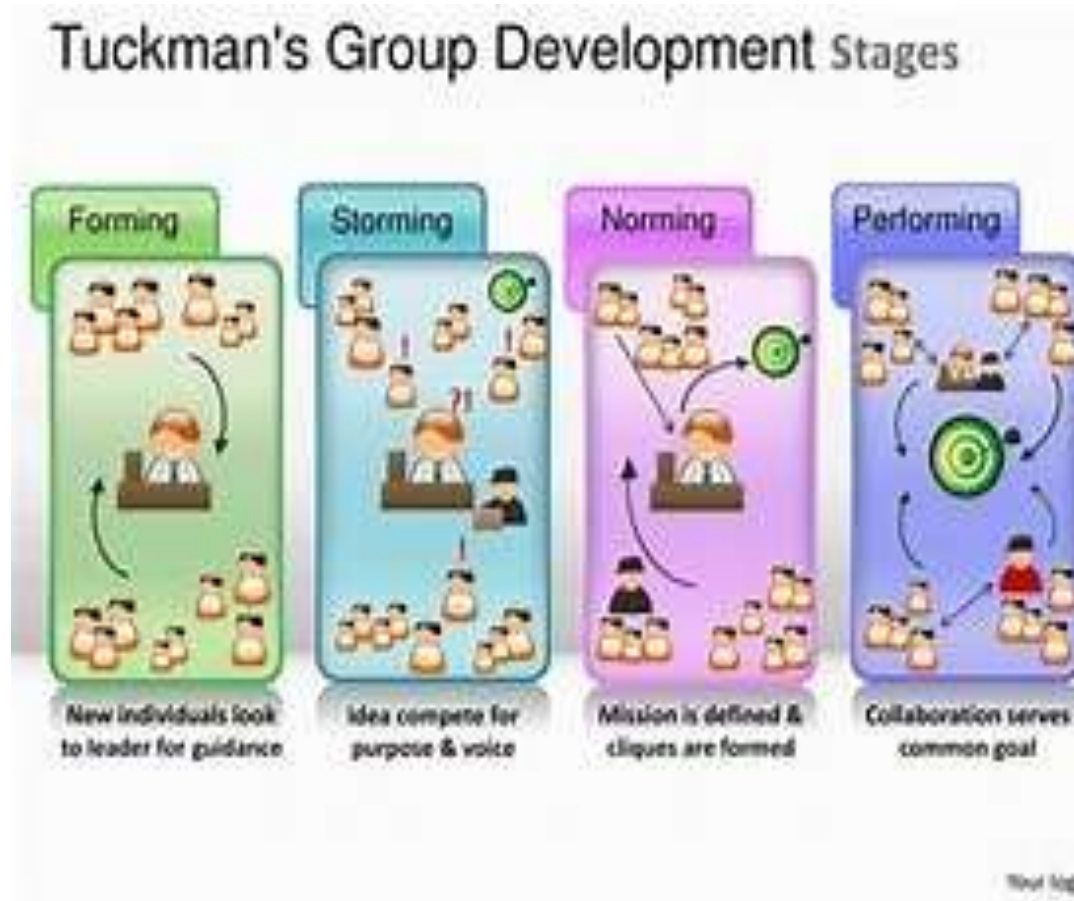
West End Friends/Search



The Learning Process

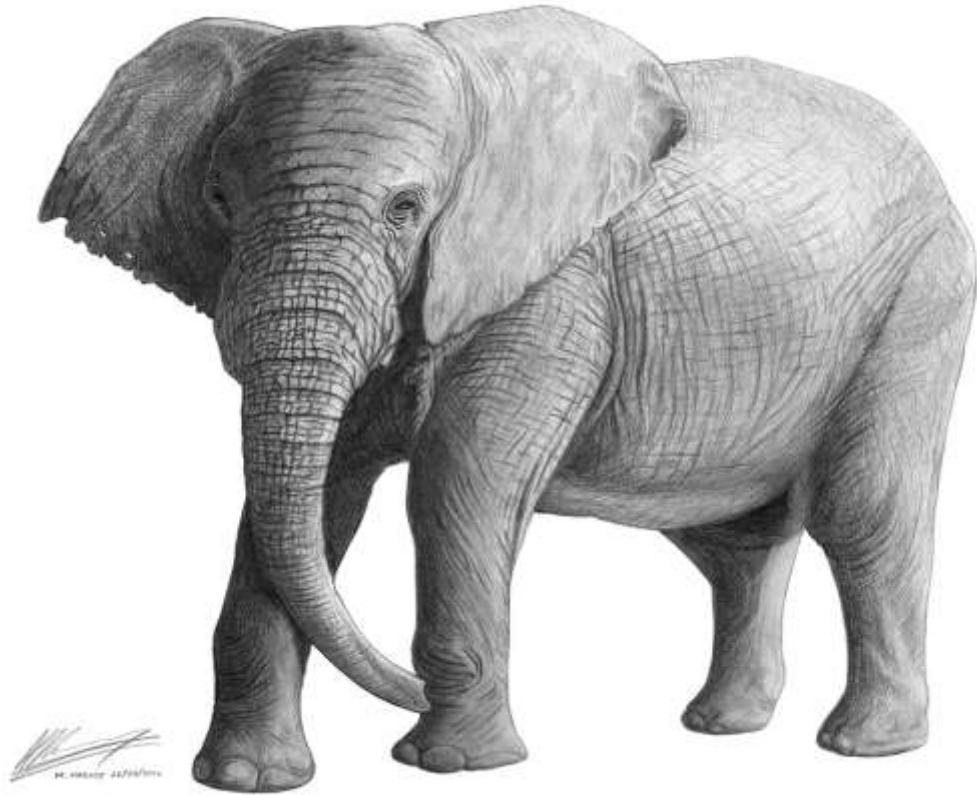


Experience with Training



- 1st time users of Zoom “You are on mute”
- 1st time multicultural collaboration
- Language & Technology barriers
- Mental Health (Anxiety) of researchers during lockdown
- Family, children lockdown at home
- Adults getting training after many years in a different cultural setting

Experience with Training



- Use of term “Mental Health”
- Word evoke emotions
- Extensively discussed cultural, gender, generational differences amongst researchers

Experience with Training



- Immediate, practical, actionable, how-to-guide
- Developed resilience & empathy
- More aware of our mental health on a daily basis
- Once in a lifetime experience

Why is peer research
so important and
effective?





Tees, Esk and Wear Valleys
NHS Foundation Trust



Teesside
University



Peer research on food insecurity in adults with SMI living in Northern England

Jo Smith, Consultant Dietitian TEWV NHS FT, Clinical Academic
Teesside University

Dr Emma L Giles, Associate Professor Public Health, Teesside
University

School of **Health & Life Sciences**

tees.ac.uk/health&lifesciences

Background/context

Key Stats

**9.7 million
adults**

(18% of households)
experienced **food
insecurity** in the past month
(September 2022)

**4 million
children**

live in households that have
experienced **food insecurity**
in the past month
(September 2022).

**54% of
households**

on Universal Credit
experienced **food
insecurity** in the past month
(September 2022).

**The Food
Foundation
(2022)**

Background

- Food Insecurity is a lack of financial resources needed to ensure reliable access to food to meet dietary, nutritional, and social needs.
- An estimated 8.4 million people in the UK are affected by Food Insecurity which has become worse since COVID-19.
- Adults with Severe Mental Illness (SMI) have even higher levels of Food Insecurity.
- It is estimated that just 11% of people living with psychosis are in employment.
- People living with Severe Mental Illness are more likely to live with physical health conditions like obesity or diabetes, many of which are preventable. This may result in a shorter life expectancy of 15-20 years compared to the general population.

Income & Mental Illness

- People living with mental ill health face a significant income gap compared to those without mental ill health (as high as £8,400 per year) (Elliott, 2016).
- Just 11% of people living with psychosis were in employment in 2014 (Bond and D'Arcy, 2020).
- 38% of people accessing food banks are experiencing mental illness (Hadfield-Spoor).
- This has been exacerbated by COVID-19 (Trussell Trust, 2020).

Development of this research

- A recent systematic review conducted by us (being prepared for publication) on Food Insecurity (FI) in adults with Severe Mental Illness (SMI) showed that there is **limited UK-based evidence on the prevalence of FI in SMI**.
- Discussions with Equally Well UK (EW-UK), a campaign of the Centre for Mental Health, highlighted that **FI is increasingly prevalent for people living with SMI**. This has been worsened by COVID-19.
- Anecdotal reports describe service users prolonging their hospital stay to receive meals that they would not be able to purchase upon discharge home. Early conversations with local Food Power Partnerships and the Mayor of Middlesbrough identified that there are **no current initiatives to address FI for people with SMI**.

Research Plan

- Title: “A mixed methods study using co-production to explore food insecurity in adults with Severe Mental Illness living in Northern England”.
- Funded by the NIHR Research for Patient Benefit –Mental Health in the North programme.
- This is an 18-month project which started on 27th September 2021.
- Jo Smith is the NHS Chief Investigator with Dr Emma Giles from Teesside University acting as the academic CI.

Our study

Funding received by NIHR RfPB to understand the following research questions:

- What are the **experiences** of adults with SMI in relation to FI in Northern England?
- What are the possible **approaches** that adults with SMI think would be useful to support them to access adequate healthy, affordable food?

FUNDED BY

NIHR | National Institute
for Health Research

Objectives

1. **To form a research collaboration:** between TU, TEWV NHS FT, and Equally Well The Centre for Mental Health
2. **To train peer researchers:** to undertake data collection for the study
3. **To undertake a survey:** to ask about experiences of FI
4. **To undertake interviews:** explore feasible and acceptable FI solutions/approaches
5. **To undertake data triangulation:** to inform recommendations

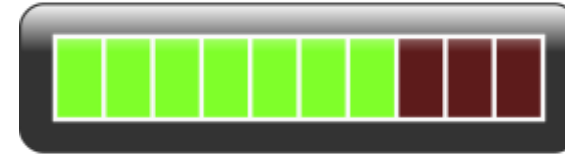


A Focus on Peer Research

- Feedback from EbyEs developing the funding application suggested that people would feel **more comfortable discussing their potentially difficult experiences of FI with a peer** rather than an academic/clinician.
- Therefore, we planned for EW-UK to recruit two sessional EbyE (as PRs) **to undertake data collection** (supported by EW-UK's researchers).
- Facilitate a peer support model, with the **two PRs working together to support each** other in developing research skills.
- Provide **initial training and induction** for the successful PRs, trained by EW-UK's research team, largely focusing on research activities such as interviews. Additional support to be provided by Teesside and Newcastle co-applicants.
- EW-UK preferred two researchers in the room when conducting interviews (for support and mentoring), therefore interviews will include one of EW-UK's researchers and a PR.



Where we are up to



- Data collection was completed just before the end of December 2022
- Data analysis is ongoing; and discussions are occurring with EW-UK and the peer researchers about their involvement in write-up and dissemination
- Previously discussed that peer researchers did not want to be involved in analysis

What have we learned as a research team?

- Research Passports and Letters of Access were required for Peer Researchers for all NHS sites, even when supported by the research team.
- We needed at least four Peer Researchers for a project as **they may become unwell** during the project = the project had delays waiting for other PRs to join and be trained.
- Peer Researchers need to have **regular reminders** of interview details – sometimes they forgot about interviews that were organised in advance.



What do we suggest?

- Apply for Letters of Access and Research Passports early; **apply for more** people than may be required in case anyone is unavailable.
- **Train** additional PRs in case any one/more PRs become unavailable, otherwise it creates a time lag.
- Factor in potentially **increased administrative load** to send reminders.

What have we learned as a research team?

- The Peer Researchers did not feel comfortable recording interviews using a Dictaphone and preferred to ask the questions only. **This required an ethics amendment.**
- It would be easier to employ the Peer Researchers **within the sponsor organisation** than to work with an external organisation, as HR processes were often out-with of the research team's control. This made the Research Passport application very complex and led to delays.



What do we suggest?

- Discuss all aspects of data collection well in advance to plan logistics, to avoid potentially lengthy ethics delays.
- Consider legal, policy-related, and pragmatic factors well in advance. Do all organisations in the partnership **'sing from the same hymn sheet'** with regards to ways of working and documents/training required?

Feedback from peer researchers



"For me the opportunity to work on a project like yours, as a peer researcher specifically, feels very validating. It helps me to believe that although I have been through some unfortunate and unpleasant times, I now have the opportunity to learn from and influence the experiences that others in similar situations may come to face. On an even more basic level it helps me to see that I am not the only one; there is nothing inherently 'wrong' with me to have experienced food insecurity alongside living with SMI – it's unfortunately a very common situation and now I have the ability to recognise that, I think I can make changes in my own life and future planning also. And as always working with and alongside a professional and dedicated team of academics goes a long way to helping me see the value in my experiences, and my opinions."

Thank you – any questions?

Jo Smith, NHS Project PI/Lead

Jo.Smith13@nhs.net

TEWV NHS FT

Dr Emma Giles, HEI PI/Lead

e.giles@tees.ac.uk

Teesside University (TU)

Project Team:

Dr Grant McGeechan, Co-App, TU

Prof Amelia Lake, Co-App, TU

Fatemeh Eskandari, research
associate, TU

Dr Steph Scott, Co-App, Ncl Uni

Examples of peer research training and resources

- Karen Morris & Rhona MacLeod, University of Cumbria/ Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust
- Rebecca Harrop & Megan, Peer Action Collective
- Peter van der Graaf, Northumbria University/ NIHR PHIRST Fusion



Supporting participation: Co-production of an occupational therapy research funding application with patients living in a secure mental health setting

- Rhona MacLeod (Cumbria, Northumberland, Tyne & Wear NHS Foundation Trust)
- Dr Karen Morris (University of Cumbria)
- Co-researchers (Cumbria, Northumberland, Tyne & Wear NHS Foundation Trust)

Outline

- Overview of the project
- Explore design of the Recovery College Course
- Supporting co-creation of the research funding application
- Plans for supporting ongoing co-creation

Project overview

Supported by Research Design Service



Initial idea

Rhona and Karen wanted to collaborate on something to do with OT in secure setting

- Asked Confirm & Challenge group for ideas
- Could only meet online

No funding



Recovery College course

Basic research methods

- 25 SU participants across 5 units on 2 sites over 6 weeks
- Face to face sessions
- Leaflet evaluation used as focus for learning

Funding

- Research Internship (Rhona) for SU time/expertise contributions
- University of Cumbria for travel (Karen)



Collaborative Proposal design

One unit

- 3 SUs and 3 OTs working as co-researchers over 10 weeks
- Face to face sessions
- Research question development
- Literature review
- Methods planning
- SU research proposal written

Funding

- Research England – SU time/expertise, materials & resources, proposal development, travel



Bid writing

Translating idea into formal bid to carry out the study:

‘Do service users and occupational therapists share the same goals in the context of secure environments?’

- Inclusive philosophy
- Developing collaboration partners

Report for Research England

NIHR bid submitted

Publications:

- News items for Trust, Uni & RDS
- Write up process we followed
- Offer to share with others

The Recovery College Course

4 sessions with practical focus:

- Introduction to research
- How research makes people feel
- Different ways of doing research
- Creating research together

Our learning:

- Collaborative ground rules
- Being prepared only gets you so far
- Tailored session for each area
- Remember collaborative philosophy
- Trust the process
- Snacks help motivation 😊

Supporting co-creation during proposal development

Our sessions

- Ground rules and principles
- Patient researchers decided question
- Checking out interest with others
- Looking at literature
- Deciding methods
- Writing the plan
- Referring back to the course to support discussion

Our learning

- Being genuine to collaborative principles & equity
- Challenge and support
- Work at patient researcher pace
- Listening to everyone before deciding
- Cannot underestimate those snacks 😊
- Doing research can be more interesting than a football tournament!!

Ensuring ongoing support

- Will be continuing to check out patient interest in the topic during application process
- Funding applications include:
 - Paid patient researchers
 - Ongoing training for patient researchers
 - Payment for patient participants
 - Illustrator to support inclusive reporting

Our co-researchers have to have the last word:

“I really enjoyed the group, this experience allowed me to use my time in an intellectual project that was both stimulating and challenging and made me think in ways I don’t normally think. I learned that no idea is wrong or bad and working in a team can generate more information where ideas bounce from person to person”

Thank you for listening

rhona.macleod@cntw.nhs.uk

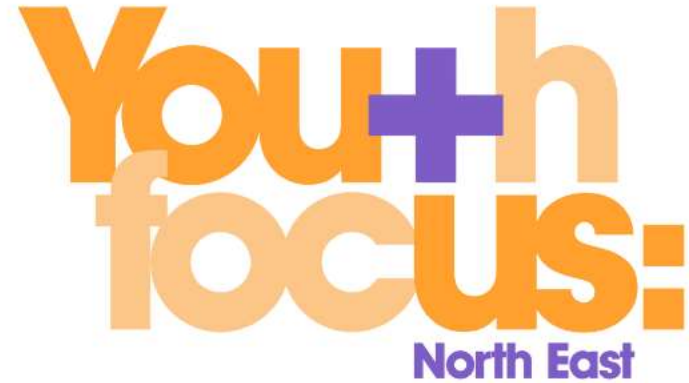
karen.morris@cumbria.ac.uk



PEER ACTION COLLECTIVE PEER RESEARCH IN YOUTH WORK

Rebecca Harrop, Programme Manager

Youth Focus: North East



Training and Development of Peer Research



11 Young people were employed as peer researchers across the UK. All young people and their host organisations underwent research training. Topics included ethics, consent, bias, methodologies and analysis.



11 Research projects were designed and underwent ethical approval from both professionals and young people.

Topics Included:

Racism

Sexual Violence

Cyberbullying

Spiking

Drug and alcohol use

Young men's experience of violence

Misogyny

Findings



The peer researchers worked as a team to analyse the findings of all 11 studies.

They used thematic analysis to come up with between 3-5 themes for each study.

They also recognised that there were three common themes which ran through all of the research studies.

Education

Mostly a lack of education, both formally and informally.

Mental Health

Poor mental health was both the cause and consequence of serious youth violence

The Peer Group

The peer group was extremely influential in serious youth violence and was also a strong source of support.

EDUCATION

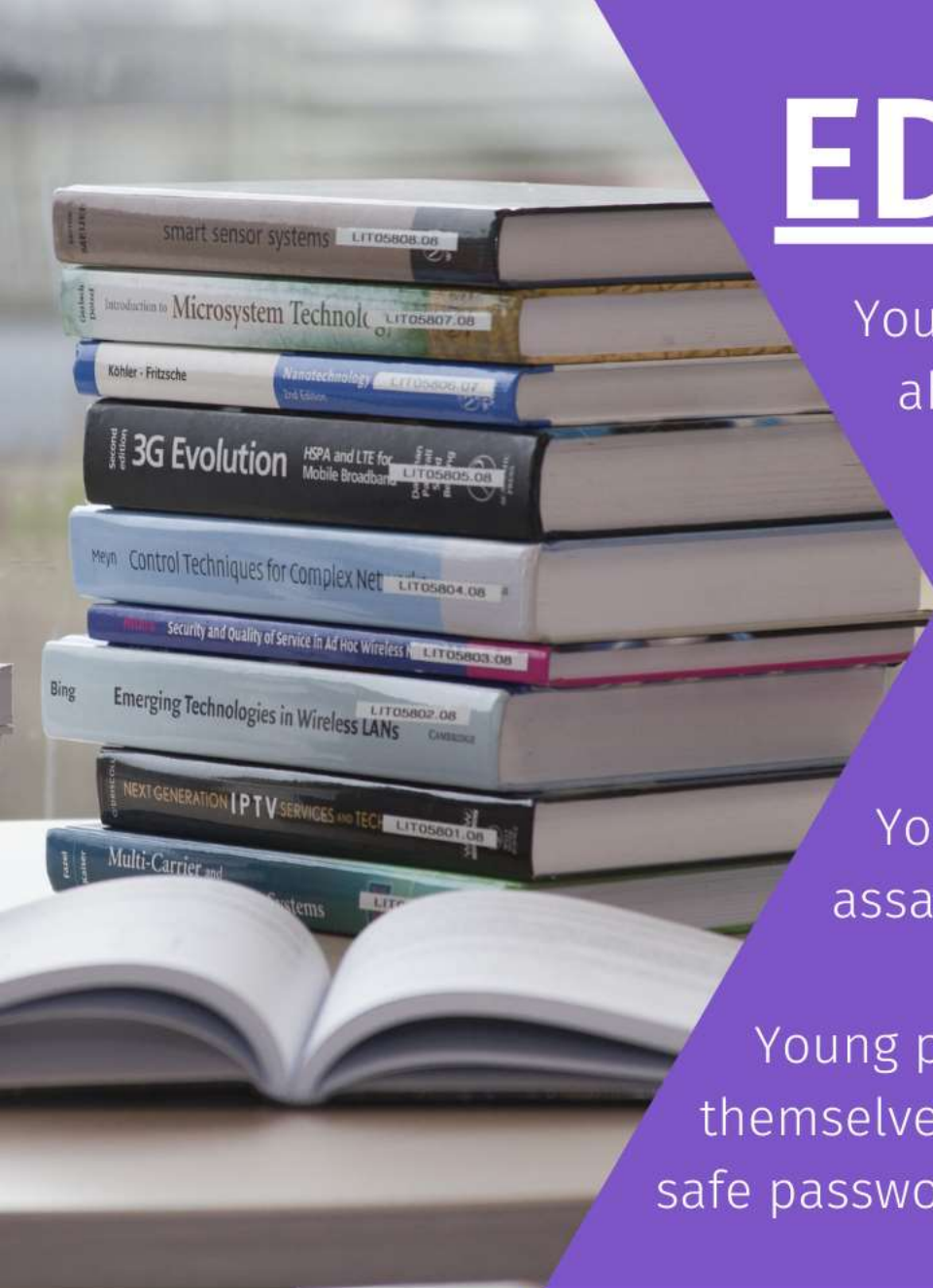


Young people felt like adults did not know how to talk to them about sensitive topics

Young people should be taught about the mechanisms of drugs, how they affect the body but also how to be safe when taking them.

Young people should be taught at a young age about sexual assault and consent

Young people weren't educated well enough on how to protect themselves online, how to hide their information and how to create safe passwords and report or block bullies



MENTAL HEALTH



Young people who experience violence in their lives (e.g. domestic violence, sexual assault, bullying) have poor mental health and as a result are more likely to turn to drugs and alcohol as a coping mechanism.

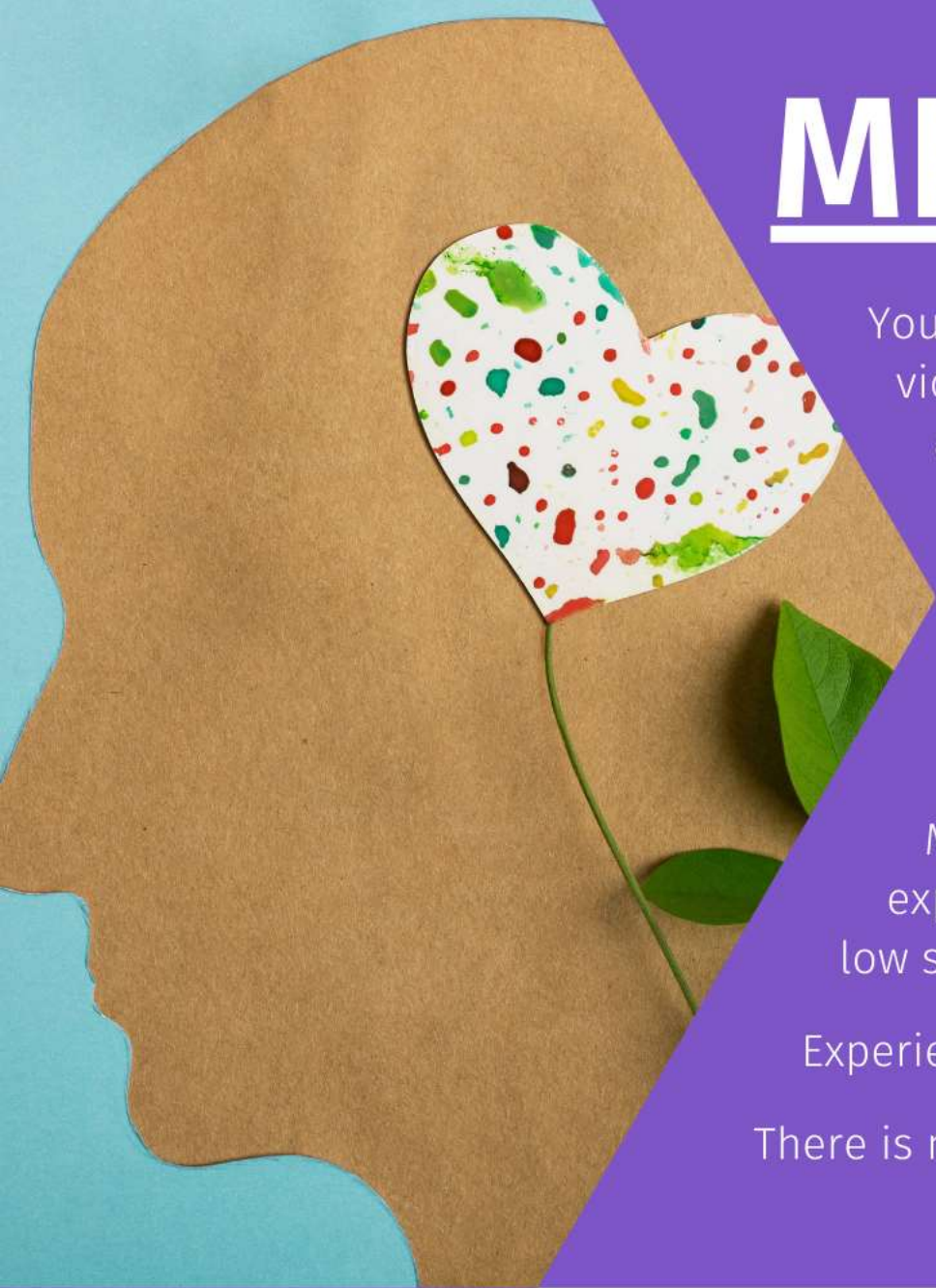
Poor mental health lead to poor behaviour and school exclusion. Exclusion exacerbated this and led to even worse behaviour.

Bully's may choose to bully people online due to poor self-esteem and mental health.

Misogyny, sexism and sexual violence led girls and young women to experience mental health conditions and also have a poor self-image and low self-worth.

Experiencing racism in any form had a detrimental impact on mental health.

There is not enough support for victim of serious youth violence.





Peer Group



Becoming a perpetrators may be a way for young people to avoid become victims themselves.

Young people talked about how they saw a lot of violent behaviour in alternative education. They felt like this normalised the behaviour for them and meant that they were more violent as a result.

Young people who did not give into peer pressure and were seen as 'different' were the people who were targets of cyber bullying.

Young people are seen as different if they don't drink alcohol and go to parties and this often led to bullying from peers.

Does misogyny amongst young people influence violence against women and girls?



01

Introduction

This research focused on Violence Against Women and Girls, with a focus on establishing if misogyny amongst young people and the attitudes they have towards women and girls influence VAWG. Therefore, this research will centre around investigating how does misogyny (including internalised) shape VAWG? And does young people's attitudes of girls and women influence VAWG? As a Youth Worker based at Bright Futures Young Womens Project, (located in South Tyneside) through my youth work delivery and extensive work with young women, VAWG is a highly relevant and pertinent topic within my local area. Which therefore highlighted a need to conduct research around this, with the aim to cultivate positive meaningful change on a grassroots level. Moreso, as a survivor of VAWG, this is a topic I have a personal and professional interest around.

02

Objectives

This research aimed to establish if misogyny amongst young people and the attitudes they have towards women and girls influence VAWG. Objectively, this research aimed to gain insight into the attitudes and potential bias young people have towards women & girls; this research highlighted a need for early intervention social action/education work surrounding misogyny, internalised misogyny and VAWG. Thus, the research investigated topics such as language young people use in relation to women and girls. The stereotypes young people hold, and ultimately, how misogyny amongst young people presents.

03

Methodology

To conduct this research, I developed a range of innovative young person friendly interview approaches utilising both focus groups and one to one interview. I ensured my methodology was engaging, interactive whilst adhering to ethical guidelines and ensuring the methodology would appropriately capture relevant data. Including devising fictitious yet realistic case studies depicting examples of VAWG for young people to analyse. Said methodology significantly highlighted misogynistic beliefs whilst also highlighting internalised misogyny.



04

Results

My research evidenced obvious instances of misogyny and how misogyny presents amongst young people. This was recognised in young people's language, attitudes and beliefs. The research highlighted obvious internalised misogyny amongst young women. This became apparent when young women observed a perceived wrongdoing amongst women and girls. When discussing perceived wrongdoings [in the context of my research project] the research pointed to said wrongdoings as women whom were deemed 'sluts', wearing short revealing clothing, cheating on partners, being out of the house late and sending nude images or videos (to name a few).



05

Implications

As a result of this research project, it highlights an evident need for more nuanced and engaging education work pertaining to internalised misogyny and victim blaming. Research shows young people understand what VAWG is, what it means and what VAWG looks like. However, when tasked with thinking about VAWG critically in real life contexts, my research shows young people engaged in victim blaming and displayed clear internalised misogyny. Thus, research shows young people would benefit from more nuanced education pertaining to internalised misogyny and victim blaming. It's clear from research that young people believe VAWG is somewhat justifiable if there is a perceived wrongdoing; this highlights another focal education topic. From this research, the 'Are U Sexist' cards were developed by young people for young people, small in size to enable young people to recognise and challenge their own sexist and misogynistic behaviour. In addition, from this research, young people identified a need for:

- Increased funding pertaining to VAWG
- Increased education
- Resources to facilitate challenging misogyny

Youth Voices

Throughout the duration of said research project I have worked with a diverse range of young people who have shared fascinating insight into this topic. I thought it was crucial to share their voices and their insight.

"You always see things on social media and hear on the news things happening to women and it frightens me"

-Young Person, aged 14

"Wear trainers in case you need to run away"

-Young Person, aged 15

"girl's [are] the big hero"

-Young Person, aged 11

Hannah Woodward
Youth Worker

Bright Futures Young Womens
Project

HOW RACISM AFFECTS THE YOUTH OF TODAY?

INTRODUCTION

- The theme I chose is racism. I chose this theme as it's something that has affected me my whole life.
- The society I live in is a diverse one with many individuals from different backgrounds.
- When conducting my pilot project at the start, I found many of the young people today also suffer from prejudice views about them, simply because of the colour of their skin.



SO WHAT DID THE RESEARCH FIND?

75% of young people said they had experienced racism first hand.

100% of young people had heard the word racism before.



77.5% of young people stated that schools, and government institutions are not doing enough to help combat racism.



87.5% of young people agreed that the media play a major role in influencing people's opinions on race.



The statistics are extracted from research conducted on 40 young people, aged between 10-25, within the Middlesbrough area. *

AIM: To understand How Racism affects the Youth Today

OBJECTIVES:

- To research how racism affects young individuals by Q2 2022.
- To investigate any possible side effects young individuals may face after a racist incident.
- To measure out of 40 young participants how many have been affected by racist incidents.
- To develop a better understanding of factors that can cause racist incidents.
- To examine possible preventive measures for this.
- To develop a social action project, led by change-makers in relation to racism.



WHAT NEEDS TO CHANGE?

- **Change the Syllabus** - Syllabuses should be looked at and include more representation of today's diverse society. For example, more books that are authored by British ethnic minority writers etc.
- **Don't Be Shy to Talk About Race** - The word race shouldn't be a taboo word. The phrase "I don't see colour" is untrue. We all see colour, it's important to talk about racism and bring awareness to educate others.



DOES MY RACE BOTHER YOU?



"This art piece symbolises a collection of ideas, thoughts and opinions from young people today on the topic of racism. The silhouette represents our changemakers together as one. It displays their definition of racism, how it makes them feel, their experiences, raising awareness and how we can prevent it."



CHANGEMAKER PROJECT

- Young people wanted to end the project doing something artistic and creative to bring more awareness of racism.



- An artist was brought in to work alongside myself and the other young people to create a piece that represents the young people today and how they feel about racism.



SEXUAL VIOLENCE

The issue of sexual violence is very relevant in everyone's life, especially involving young people. Young people can be victims, perpetrators or witnesses to sexual violence but it is not discussed as an important issue. Sexual violence is frequent yet majorly under reported. This may occur in home life, schools, social groups, walking down the street and even potentially in professional environments.

OBJECTIVES

This topic needs to be addressed in order to expand our knowledge, raise awareness, plan prevention and introduce support.

People lack education. Not enough people understand what sexual violence actually is.

My main objective was to find out what young people think sexual violence is and what can be done to prevent it.

Another important aim for me was to let young people be heard, if they were comfortable sharing personal experiences then this was welcomed. It was a safe environment and the only way their experiences would be used is to benefit them and other victims.

METHODOLOGY

I used semi-structured group interview. I wanted to focus on different social groups such as LGBTQ+ community and neurodivergent participants. (these two were factors that made people more vulnerable to being a victim of SV)

This method made the interviews easier to carry out as participants felt the most comfortable when the interviews felt more like a conversation rather than research.

By Sophie Pails, Northumberland Pride

RESULTS

- Social groups can be both positive and negative
 - They can be positive in a way that they act as a support network for victims.
 - However, they can also be the source of sexual violence itself.
- There is a lack of education
 - Both from parents and teachers.
 - Parents need to rely less on the education system to be the main source of sex ed for children.
- Sex education needs to cover sexual violence
- Factors make people more vulnerable to be a victim

IMPLICATIONS

This highlighted a problem with the support of victims, especially women and children. It also identified a problem with the education system and the way they treat sexual violence and what they do to raise awareness and prevent it.

Young people brought up the fact that sex ed does not touch on violence within sexual relationships, like domestic violence, rape, age of consent etc. So an implication of my research will hopefully be to raise awareness especially in the education system and expanding the topics of sex ed further than just what sex is and how we engage in sexual activity.

SOCIAL ACTION

My social action focused on helping vulnerable women and children, who were victims by making hampers filled with necessities and luxury items they are in need of and giving them to NIDAS (Newcastle Integrated Domestic Abuse Service) which is a women and children's refuge in Newcastle. They provide shelter and safety for women and children who are victims of domestic abuse.



THE IMPACT DRUGS AND ALCOHOL HAS ON YOUTH VIOLENCE

By Bethany Parratt & Carl Armstrong



OUR TOPIC



We chose this topic because it is an issue that is very important to both of us, as a prominent issue in our local communities of Seaton Delaval and Ashington in Northumberland.

We wanted to do something about this issue and try to make a difference for our areas and the Northeast as whole.



WHAT WE DISCOVERED? OUR FINDINGS:

After conducting our research, we brought it all together and reviewed everything that the young people told us. The recurring themes and issues that came up were:

Mental Health - they talked about using drugs and alcohol as a coping mechanism or escape from personal difficulties

Lack of education - they felt they needed more education about drugs and alcohol, from an earlier age

Lack of support or opportunities - they said people often turned to drugs and alcohol through boredom or lack of other things to do. They identified the importance of services like open-access youth groups (e.g. YMCA in Ashington), but felt that there needed to be more awareness that these services exist.

- **Drug dealing / County lines** - they said there was a big issue with young people being manipulated or 'trapped' by older people or their peers to get involved in drug-dealing as an easy way to make money.

HOW DID WE TACKLE THIS ISSUE?

OUR METHODOLOGY:

We wanted to find out how young people have been affected by drug and alcohol misuse, the awareness and knowledge that they have on the topic, and how they thought we could make our community a safer and healthier place for all. We did this through:

- **1:1 Interviews** - developing questions that allowed young people to talk comfortably and openly about a taboo topic

Workshops and Focus groups - through discussions and mind map activities

- **Anonymous box questions** - to gain more truthful answers from a large number of young people who wouldn't be able to take part in

This methodology went through an ethical review to ensure all young people could tell us their opinions safely and voluntarily.

HOW WE RESPONDED?

OUR ACTIONS:



After reviewing all of our findings, with help from The Key UK and PAC (Peer Action Collective) we were able to form a group of young people - or **changemakers** - who were like minded in wanting to try and tackle this issue and come together to form a social action plan.

Our Changemakers came up with the idea to produce an **information pack** which would be circulated with all secondary schools in Northumberland and the surrounding areas - **written and created by young people**. The pack will cover:

A summary of our research findings

Key messages from young people to adults about speaking to young people about drugs and alcohol

Key messages from young people to other young people about the impact and affects of drugs and alcohol

Signposting links to organisations who can provide support

Positive stories of young people who have been affected by these issues, but been able to come out the other side.

Ziad Badawi – Peer Research: Racism and Youth Violence

Authors
Ziad Badawi
Supported by Jack Burton, James Lane and Jay Conlan

Affiliations
PAC
YEF
Jack Drum Arts
NE Youth
Youth Focus NE

Introduction

As part of the Peer Action Collective, I have been conducting research to establish connections between Racism and Youth Violence. From my research participants I identified 'Changemakers', who I supported to secure funding through The Key, to begin a Social Action project following my initial research.

Objective

The objective of this project is to establish what the links are between Racism and Youth violence, with a view to better understanding underlying causes and effects.

Methodology

I conducted research through interviews, in 1-2-1 and group settings. Interviews were conducted in English and Arabic. I ran ice breaker games before getting into the questions, and I provided refreshments for those taking part.

"I mean it can be dangerous to somebody's mental health even if it's not physically dangerous or physically affecting anything, but um, definitely like it can have that domino effect where it's like, if it's repeated offenses as well, where it can get worse and worse and worse."

"There's the individual level of you have to think about how you view other people, and then there's the government level of everything they put out affects the citizens and if they're saying we won't welcome refugees, it can create a negative mindset and the media has a really big role in shaping how people view refugees."

Social Action

Following my research, I supported a group of Changemakers to design a Social Action Project, with the aim of highlighting some of the key themes I discovered in my research.

The group I supported decided to write and record a song, and create an animated music video. They worked with musician James Lane, and animator Sheryl Jenkins to create a moving piece of work. It can be found on the Jack Drum Arts Vimeo page. Jack Drum Arts will be selling the track on its Bandcamp label page, with all proceeds being donated to charities working to support refugees across the world.



Analysis and Key Themes

Lack of Understanding

There is a lack of understanding of minority cultures and traditions which has a significant contribution to racism and associated youth violence.

The young people discussed that there was a lack of understanding of minority cultures and traditions. Contributing to this is a fear of the unknown, often perpetuated by family beliefs, which may have been passed down through generations. The young people I spoke to thought that peer pressure via Social Media can also contribute to how people view people from other cultures, creating a sort of social conditioning where stereotypes are normalised.

"more often than not it comes from a place of fear and not understanding someone else's culture"

Education

Better education on different cultures would lead to a reduction in racism and related youth violence.

The young people mentioned the need for education several times throughout our interviews and focus groups. This links strongly to our theme of lack of understanding of different cultures as people are not taught enough about the world. The young people discussed how they felt the government and figure in authority could do more to educate and challenge racist views in the UK. Young people talked about how better education on different cultures and traditions would lead to a decrease in racism related youth violence. They also said that when people see racism happening they have a responsibility to educate that person on why racism is wrong.

"I think education plays such a key part in reducing youth violence."

Challenging Views and Taking Responsibility

It is important for everyone to challenge their own views and assumptions, taking responsibility for the racism around them.

The young people talked about how people's bias and assumptions lead to racist beliefs and actions. They said that people are responsible for their views, so it's down to individuals to know that racism is wrong and recognise that in their own behaviour. The young people talked about how groups, organisations, and governments can do more to raise awareness and challenge racism. The young people spoke about everyone needing to take more responsibility, challenging racism where they see it and reporting it at all opportunities.

"I feel like people need to hold their own a bit more and if they feel like something's been said that isn't right, they need to raise that a bit more and not just be okay with it."

IMPLICATIONS OF THE RESEARCH

Benefits to the research sector

- Upskilling future researchers - young people who might not have thought about research as a career if not for being part of the project
- Young people are more invested in taking action based on the results of the research.
- Data is high quality and more reliable
 - Young people feel more comfortable and confident talking to their peers about sensitive subjects
 - Young people know the relevant questions to ask young people about their experiences
 - Young people are more likely to take part in something designed by their peers
 - It gives all young people a chance to get their voices heard in a safe environment



IMPLICATIONS OF THE RESEARCH

Youth led social action!



- Using the research findings to inform projects with young people and led by young people.
 - Social media campaigning
 - Educating peers
 - Creating resources such as videos and posters
 - Holding awareness events
 - Supporting local charities
 - Expression through artwork



Does My Race Bother You?



“This art piece symbolises a collection of ideas, thoughts and opinions from young people today on the topic of racism. The silhouette represents our changemakers together as one. It displays their definition of racism, how it makes them feel, their experiences, raising awareness and how we can prevent it.”

IMPLICATIONS OF THE RESEARCH



Benefits to peer researchers

- Upskilling young people
 - Research skills
 - Organisation skills
 - Leadership skills
 - Time management skills
 - Communication skills
- Real work experience in a practical but safe work environment
- Builds confidence
- Young people having their voices heard
- Young people making professional connections



What is a community of practice?

“ A community of practice is where a groups of active practitioners (and academic and community members) in a specific field come together to share ideas, experiences and best practice and support each other.” (the social change agency)

- Pooling valuable learning
- Creating new knowledge
- Take learning and knowledge back out to your organisations
- Shared values: openness, honesty, lack of judgement and confidentiality

How to start a community of practice?

- Decide on membership: active involvement in peer research
- Set clear ground rules

Questions:

- How often do we meet? (twice a year?)
- Online, in-person or mixed?
- What platform do we use to share knowledge (e.g. MS Teams, blogs)?
- How do we make decisions? (poll to vote for suggestions?)

