Mentoring Toolkit.

The following toolkit provides an overview of Mentoring, with the aim of guiding you to implement this approach in your community.

1. Mentoring toolkit overview – key points for LDATs

- Mentoring involves building a positive relationship between two people: a mentor, who is more knowledgable and experienced, and a mentee, who is less knowledgeable and can learn from the mentor.[1]
- Mentoring can help to facilitate a more open dialogue between adults and young people around the use of alcohol and other drugs (AOD) – helping prevent or delay use.[2]
- Although Mentoring won't always directly address AOD, it may strengthen many social, emotional, cultural and educational factors that help a young person remain healthier overall. This can be a protective factor against alcohol or other drug use.[2,3]
- Mentoring programs can be one-on-one or in a group/team, and delivery can be face-to-face or online (e-mentoring).
- Mentoring programs are typically for young people aged 12-25, but can also be tailored to children as young as 7-11 years.
- Mentoring can also occur outside of formal programs. **'Natural mentoring'** is when an older person known to the young person adopts a mentoring role.[2] **'Youth initiated mentoring'** is when young people cannot find an external mentor, so they locate one within their own family, community or social network.[4]
- Mentoring programs can help reduce known AOD risk factors in young people and promote protective factors. Examples of these risk and protective factors are shown in Table 1 below.

Table 1: Factors that protect against AOD and factors that increase risk of AOD[2,5-10]

Protective factors	Risk factors
• Evidence-based drug education • Community building activities • Positive role models including around AOD • Sense of belonging and connectedness to community, school and family • Knowledge of harms/health beliefs that support healthy AOD use and access to appropriate AOD help and support • Participation in positive activities with adult engagement • Involvement in structured recreational activities	• Family conflict • Lack of engagement in activities with positive adult role models • Mental health issues • Academic failure • Low attachment to school • Low attachment to community • Negative peer influence • Availability and accessibility of AOD

Read more about risk and protective factors here: https://adf.org.au/reducing-risk/community-approaches/prevention-strategies/

A guide to icons used in this toolkit

Strength of evidence
The coloured stars show how strong the evidence is for each program/activity and the potential benefit to your community.

★ Strong ★ Good ★ Fair ★ Little ☆ Promising

Cost, resources and expertise required
The coloured figures indicate how simple, or difficult, it is for LDATs to deliver each program in your community.

Less   More

1.1 Drawing on existing programs

LDATs may like to consider the following Australian Mentoring programs.

> **Alcohol and Drug Foundation Mentoring Module** ⭐ 🧍
>
> The ADF's Mentoring Module has been developed and piloted with LDATs as part of the LDAT Program. It is an easy to use, off the shelf module that provides you with everything you need to deliver a high-quality mentoring program in your local community. It has been designed to be worked through in sequential order – just follow the steps to plan and deliver your program. https://ldatmodules.adf.org.au/pages/use-mentoring-module

> **Raise** ☆ 🧍
>
> Raise is a school-based Mentoring program for at-risk young people under 18 years. A volunteer mentor attends the school once a week to provide one-on-one support to empower the young person to talk through life's challenges. https://raise.org.au/

> **Big Brothers Big Sisters of Australia** ⭐ 🧍
>
> BBBS matches adult volunteer mentors with vulnerable young people, aged between 7 and 17 years, who live in, or with, difficult circumstances. Trained mentors, aged 18+ spend a minimum of one hour per week, for a minimum of 12 months, involving their mentee in activities to build a friendship and develop the mentee's self-esteem, confidence, and life skills. https://bigbrothersbigsisters.org.au/

> **Youthrive** ☆ 🧍
>
> A rural network organisation in Victoria that provides youth Mentoring via Skype, email and phone. https://www.youthrivevictoria.org.au/what-we-do/mentoring/

1.2 Guiding principles

If the above programs are not entirely suited to your LDAT, we recommend using the following principles to guide you to implement Mentoring in your community.

Program planning

- Youth initiated mentoring and natural mentoring are viable options to consider, especially when suitable Mentoring programs are not available.[2, 4]
- Mentors should try to link with the mentee's parents, peers and schools, as each of these factors can influence youth substance use.[1, 11]
- Mentees should be screened for substance use in a non-intrusive and non-stigmatising manner.[2] Commonly used tools for assessing young people include the Alcohol Use Disorders Identification Test (AUDIT), which can be done online or via printable PDF, and the Alcohol, Smoking and Substance Involvement Screening Test (ASSIST).
- Approaches that target specific issues, such as AOD harm prevention, may be more effective for the mentee than more general approaches.[12]
- Regular supervision for mentors should be mandatory over the duration of the mentor/mentee match.[11, 13]

Mentor training

- Training should highlight the importance of the mentor acting as a 'close connector'. This involves introducing the mentee to influential adults and services in the community who could offer future support, advice or training. This builds a community network for the mentee that they can turn to once the structured mentorship is done.[14]
- Training should give priority to the development of empathy and self-efficacy for mentoring. This can improve relations between mentor and mentee and increase the effectiveness of the mentorship.[13]
- More intensive training should be offered to inexperienced mentors, including natural mentors and youth initiated mentors.[15]

The mentor relationship

- The mentor and mentee should agree on one or more specific goals for the mentee to achieve during the mentorship. These goals should be measureable to help determine success.[16,17]
- Both mentor and mentee should maintain an individual record of their meetings, events and interactions that can be provided to the sponsor/manager to assist monitoring and evaluation.[17]
- The duration of meetings can influence their effectiveness and mentors should be prepared to adjust timing to suit.[17]

1.3 Considerations for planning and delivery

Attention to **how** a program is delivered or implemented is just as important as **what** is delivered, when it comes to your project's outcomes.

Implementation considerations for Mentoring programs

The 5Ws

Being clear about what you want to do and the outcomes you want to achieve will support you to deliver a Mentoring program in your community, safely and effectively, as well as track success. Consider the 5Ws:

- **What** do you want to happen? (activity)
- **Who** will it happen with? (direct audience)
- **Why** will it happen? (outcome – e.g. improving an identified gap for that audience)
- **When** will it occur? (time frame – e.g. over 6 months)
- **Where** will it occur? (location).

Measuring success

Once you know what you want to achieve you need to be able to measure the success of your activities so that you know how effective they are. You can do this by evaluating your activities using process and impact measures.

- **Process measures:** these relate to how your activity is being delivered. In other words, they help you to monitor if the implementation of your activity went according to plan, e.g. did you get the targeted number of attendees to your event? Did you run the targeted number of workshops that you originally planned?
- **Impact measures:** these relate to the short-term difference your activity has made on the community. Impact measures seek to increase protective factors, decrease risk factors, or change how people think about AOD harms, e.g. did people report knowing more about AOD harms after attending your event? Did people report feeling more connected to their community after participating in your workshop?

Working with community partners

Whether you're linking to an existing Mentoring program or developing your own approach, strong partnerships will be critical to your success. Partners can support you by:

- promoting the program
- recruiting mentees and mentors
- providing a venue for training
- providing financial support.

Partners may include:

- youth workers in migration/settlement agencies
- alcohol and drug support services
- community health services and similar groups
- local libraries, councils and schools
- youth associations and groups in the area
- major employers of young people
- sporting clubs
- community arts centres
- homework clubs and study groups.

Resources required

Below is an indicative list of resources required to deliver Mentoring approaches:

- program participants, especially the availability of suitable mentors
- basic administrative tools, such as access to stationery and office supplies
- venue for meetings – this may include in-kind use of a meeting room from a partner organisation, local library or community organisation (your local council will have a list of available places for community use)
- police checks/Working With Children Checks (these are mandatory when working with young people)
- knowledge to deliver orientation and training of mentors and mentees
- travel costs (particularly in large geographical regions)
- design and publication of promotional material to attract mentors/mentees. Include your own designs and imagery to localise campaign
- insurance and liability coverage (where appropriate).

Your LDAT may choose to consider allocating some of your Community Action Plan grant money towards some of these resources (where money is required).

Groups that are linking to existing Mentoring programs are encouraged to find out what resources are required for the specific program.

Accessibility

To ensure mentees participate in the engagement process, the physical location of the engagement is crucial. While some consultations will work better in school hours, it might also be necessary to hold activities after hours or on weekends. Make sure the venue is accessible to mentees (e.g. close to public transport, wheelchair friendly, has access to interpreters for multicultural communities).

Digital delivery

LDATs might also consider digital access to provide the Mentoring program to young people when in-person mentoring is too difficult due to distance, lack of mentors or physical disabilities. Electronic mentoring (e-mentoring) involves online contact, either exclusively, or partially. E-mentoring can be done through email, text, social media, messaging applications, video calls or computer platforms.[18]

Warning of unintended negative effects

There is a risk of unintended negative effects occurring in a Mentoring relationship if the mentee engages in hazardous activity or is harmed while under care. This includes if the mentor and mentee engage in drug use or sexual activity. Mentor training for mentors is important to help minimise this risk.

Unintended negative effects may also be a risk for group mentoring of at-risk young people, due to the possible spread of antisocial attitudes and values when supervision is lacking.[16,19]

2. Delivering Mentoring: key activity and measuring success

The key activity associated with delivering and evaluating Mentoring in your community is outlined below.

You will need to deliver this activity and evaluate it using process and impact measures to determine whether or not you have achieved your intended results (see 1.3 above: Considerations for planning and delivery).

Note: you can also tailor your approach by adding additional activities that suit your community's needs and evaluating them using appropriate process and impact measures.

The key activity for delivering and evaluating Mentoring is:

• Training or workshops:
An event that is held for the specific purpose of training community members in a new skill set, and/or delivering a structured presentation aimed at increasing knowledge about risk and/or protective factors associated with an AOD health issue.

Evaluation is a critical component of delivering your program and needs to be factored in at every stage of planning and delivery. You'll find more detailed information on effective evaluation measures in our essential guide for LDATs: Evaluation Measures Guide. Your LDAT will also be guided to select appropriate process and impact measures when you're developing your Community Action Plan (CAP) online.

3. Delivering Mentoring: key steps

The below section outlines key steps that can be involved in developing and delivering a Mentoring approach in your community. These steps are an indicative guide, as it's important that you tailor your approach to your local community.

Step 1: Consultation, planning and design

Through the support of your community partners, conduct consultation and planning with your community and prospective mentors/mentees to inform the design of your Mentoring approach. Mentoring is flexible and should be tailored to suit the individual needs of the people who will be involved.

The following approach may help:

- determine the focus for your activity. It could be social emotional wellbeing; individual talents and leadership; youth justice and crime prevention; identity, culture and beliefs; and/or, education, training and employment. Your activity can have more than one focus
- select a delivery mode - face-to-face, e-mentoring or a combination of both
- select a relationship, for example one-to-one, group or team
- choose the setting for the Mentoring sessions. Will it be school, community, workplace or another location?
- consider venue access for people with a disability. This could include not only wheelchair access, but also people who are vision or hearing impaired, etc.

Step 2: Recruitment

Mentors come from all walks of life and may include local community champions, music or dance teachers, corporate employees and university students. They may be identified through schools and tertiary institutions, sporting clubs, arts clubs, youth groups, workplaces, volunteer associations and community agencies.

You'll also need to establish a process for the referral/application of mentees.

Your community partners may be in a good position to help you identify young people that would benefit from Mentoring. Other sources for potential mentee referrals could include teachers, counsellors, community workers, health professionals and parents and guardians.[17]

Step 3: Screening and selection

It's important to develop a clear selection process for assessing the suitability of mentors and mentees.

For mentors, this includes developing selection criteria and establishing an application process. Selection criteria may address the need for mentors to be committed to investing time and energy into the relationship, and to role model an appropriate relationship to alcohol and other drugs.[17]

Screening could include an application form, at least one face-to-face interview, a criminal background check (including sex offender and child abuse registries), Working with Children Check, reference checking with multiple adults who know the applicant (ideally, both personal and professional references).

Prospective mentees, and their parents or guardians, should also be screened to determine if they have the time, commitment, and consent to be mentored.[17]

Step 4: Orientation and training

Comprehensive orientation and training for mentors and mentees will help them build an effective Mentoring relationship together.

Training should cover:

- requirements, such as: match length, match frequency, duration of visits, response to missing meetings or being late, and match termination
- mentor's goals and expectations for the mentee
- mentor's obligations and appropriate roles
- relationship development and maintenance
- ethical and safety issues
- closure of the Mentoring relationship
- assistance available to support mentors.[17]

Your group may provide this training or contract another organisation that has the appropriate skills and knowledge.

Step 5: Matching and initiation

The matching process should consider the relevant characteristics, skills and interests of the mentee and mentor. Mutual suitability can be determined via personality, shared interests, geographical location, age, gender and the preferences of the mentor, mentee, and parent or guardian.[17]

There should be an official agreement between the mentor and mentee on the terms and conditions of the Mentoring relationship. For example, mentor/mentee agreements can identify key elements of the relationship such as duration, likely method(s) of contact, likely frequency of contact, maximum length of contact, and key Mentoring activities and goals. The first meeting of mentor and mentee should also be attended by a parent or equivalent and discussion/outcomes should be documented by a staff member.[17]

Step 6: Monitoring and support

Staff should be in regular contact with mentors and mentees to monitor activities, outcomes, relationship quality, and the impact of Mentoring on the mentor and mentee.

This can include contact with a parent, legal guardian and or carer during the relationship to monitor the demeanour and behaviour of the mentee.

All activities undertaken as part of the mentorship will need to ensure a safe and structured environment for the mentee's participation.[17]

Step 7: Closing the match

A formal match closure approach is recommended to be clear about how mentors and mentees exit their relationship and provide guidelines regarding future contact between the two.

It's important to celebrate the successes of the Mentoring relationship and to assist the young person to define next steps in achieving their goals. Exit interviews with all mentors and mentees and, when relevant, with parents or equivalent should be part of the contract.[17]

It is also important to build a network of people who can support the mentee after the formal mentorship is completed.[14] Having a network of responsible and caring people enables mentees to remain supported in the community and means they can seek assistance more easily when required.[17]

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