Youth Advisory Board Toolkit

Welcome to the Youth Advisory Board toolkit for PACER Center's Children's Mental Health and Emotional or Behavioral Disorders Project. We're excited that your organization is interested in developing a Youth Advisory Board. This guide will offer key concepts and planning tools, and provide resources to get started.

I. Who we are

About PACER Center

PACER Center enhances the quality of life and expands opportunities for children, youth, and young adults with all disabilities and their families so each person can reach his or her highest potential. PACER, founded in 1977 in Minneapolis, operates on the principles of parents helping parents, supporting families, promoting a safe environment for all children, and working in collaboration with others.

The Children's Mental Health (CMH) and Emotional or Behavioral Disorders (EBD) Project

PACER's CMH and EBD Project works with families to help them support their children and youth with mental health, emotional, or behavioral needs. This project also promotes increased understanding of children's mental health and change in the community to reduce stigma.

One of the ways the Children's Mental Health and Emotional or Behavioral Disorders Project at PACER Center accomplishes its work is through a Youth Advisory Board (YAB) on mental health. This board is comprised of Minnesota youth who have mental health, emotional or behavioral challenges.

II. PACER's Youth Advisory Board on Children's Mental Health

Mission

The mission of PACER's Youth Advisory Board is to educate the public about what young adults with mental health issues experience in the school and community. Members make a difference by:

- Reducing the stigma associated with mental health diagnoses
- Educating the public on the issues that youth with mental health, emotional, or behavioral disorders face
- Influencing children's mental health policy and change
- Providing peer support
- Becoming better self-advocates
- Developing leadership skills

Activities

Youth Advisory Board members operate under the banner “nothing about us, without us.” They meet monthly at PACER Center. The board focuses on developing advocacy and leadership skills to help improve mental health services and increase understanding of what it means to be a youth with mental health challenges.

For members, the board is an opportunity to develop their voice as leaders, provide a youth perspective on mental health issues, and meet other young people who have shared experiences.
This active group has coordinated and participated in a variety of activities, such as:

- Creating a video about stigma that aired at various workshops and events, and is on PACER's Children's Mental Health and Emotional or Behavioral Disorders Project website
- Speaking at PACER workshops and events, including the National PACER Symposium About Children and Young Adults with Mental Health and Learning Disabilities
- Participating in discussion panels on mental health topics
- Poster sessions and hosting resource tables at activities related to children's mental health
- Volunteering at community events to raise awareness, such as the Lion's Club Pancake Breakfast and PACER's Run, Walk, Roll Against Bullying

Basic guidelines

PACER's Youth Advisory Board on Mental Health has basic guidelines:

- Be between the ages of 14 and 19, or up to age 21 if they are continuing in school under a transition Individualized Education Program (IEP) and have a mental health diagnosis
- Have a diagnosis of a mental, emotional, or behavioral disorder
- Submit a completed application and have parental permission to participate if they are younger than 18 years of age
- Be available to meet once a month during the school year
- Be willing to present at conferences, staff trainings, and other public speaking events
- Provide input on articles and publications, and to organizations serving youth with mental health challenges and their families
- Participate in volunteer activities related to mental health
- Communicate with elected officials regarding the mental health needs of youth

Expectations and responsibilities

PACER's Youth Advisory Board members are expected to:

- Attend all meetings and events unless excused
- Serve as an officer or have a project assignment, or both
- Consider holding an officer position from September through August (president, vice president, secretary/treasurer)
- Participate and work on project assignments until complete or for one year, whichever comes first

Other concerns

A Youth Advisory Board comprised of members with mental health challenges raises unique concerns in ensuring the safety of all participants and the facilitator.

- PACER facilitators have plans in place to keep everyone safe. For example, Youth Advisory Board members who are feeling emotionally unstable or whose parents feel they might need more support are expected to have a parent or personal care attendant (PCA) available at all board meetings and events.
- Whenever possible, PACER staff do not conduct meetings or events alone. They also have discretion to contact the parent or guardian if needed to remove a member from a meeting or event for any reason.
- If a mental health crisis occurs during a meeting or event, there is a plan in place to address it.
- PACER carries liability insurance to protect all staff and volunteers.
- The Youth Advisory Board developed a Peer Support Comfort Agreement that is honored at each meeting. The intention of the agreement is to ensure that all members are heard equally, without bias, and are given the opportunity to participate. The Comfort Agreement is reviewed at the start of each board meeting.
Peer Support Comfort Agreement

- President will inform the board when a topic is open for discussion
- President will recognize each speaker when the speaker raises his or her hand
- President will inform the board if the topic being discussed is part of an ongoing conversation and hands do not need to be raised in order to participate
- Members should not interrupt another member when they are speaking
- Members should respect each other’s opinions and right to speak
- Members will try to follow the rules
- Members can ask to review the Comfort Agreement at any time
- The Comfort Agreement will be read and reviewed at the beginning of each board meeting

III. How to set up a Youth Advisory Board for an Organization

Things to consider

There are many steps to forming a Youth Advisory Board, including identifying the mission and goals, finding a facilitator, recruiting members, managing the application process, and funding the board’s activities. Day-to-day logistics such as securing accessible meeting space and planning for food should also be considered.

Why form a Youth Advisory Board?

The reasons for forming a Youth Advisory Board will be different for each organization depending on the goals that are to be accomplished. Regardless, establishing a Youth Advisory Board ensures a two-way relationship between the organizational staff and the youth it serves or intends to reach.

The benefits to the organization:

- receive new energy and ideas about issues the organization may face
- gain a unique perspective on how best to address challenges and opportunities
- engage future organizational leaders
- increase awareness of the organization among the youth population

The benefits to youth board members:

- express their needs and expectations of the organization
- offer a voice on issues that affect them
- engage in meaningful activities of leadership
- develop problem-solving skills
- form relationships with mentors from the organization or with young people who may have a shared experience

Establishing a mission statement

Every Youth Advisory Board should have a set of goals to understand why it exists and to what purpose it dedicates its time and effort. Each board will define its own goals in accordance with the organization’s mission, and will be based on the issues of interest or concern it has identified for the population it serves. These goals will help the board create its “mission statement.” A mission statement is a written declaration of the purpose and focus of the board.

Finding a facilitator

The ideal facilitator will be passionate about working with youth who are served by the organization. He or she will also be able to give the board members guidance and mentorship, while allowing them to have autonomy and ownership of their projects.
Potential candidates for a Youth Advisory Board facilitator may be:

- organization staff
- organization board members
- volunteers who have experience or training in working with youth

For youth with disabilities, the facilitator should have knowledge and skills related to working with these youth.

**Establishing guidelines**

Each organization will require different guidelines for their Youth Advisory Board. These questions can help determine the makeup of your Youth Advisory Board:

- **Participation**: How many members? What ages? How diverse (gender, race, etc.)?
- **Commitment**: How long will a member’s term be?
- **Scheduling**: How often will the board meet? Will members attend special events?
- **Protocol**: How and when can members speak during a meeting?
- **Roles**: How are roles defined for members, facilitators, and organizational staff?
- **Leadership**: How will members serve as president, vice-president, secretary, treasurer, etc.?

**Recruiting members**

It makes sense to recruit youth who are already involved with the organization or it can be helpful to reach out into the community. When recruiting youth, provide a clear understanding of what is expected of each youth and what their level of commitment will be. For those younger than 18, parental permission to serve may be required.

It’s important to consider how to approach potential youth board members. Make it clear that they are invited to be involved — rather than appointed or elected — and demonstrate the benefits they will receive from the experience.

Suggested places to find potential board members:

- **The organization’s database**. Target outstanding youth who already have an existing relationship with the organization.
- **The organization’s staff**. Ask employees or volunteers to identify potential members within their family or network of friends.
- **Social media**. Put out a call for members with posts from your organization’s social media accounts or blog.
- **Other organizations**. Partner with other organizations that have related goals.

Once some members are in place, ask them to invite their friends to apply. It might also be helpful to target students who have particular skills (website development, audio/visual) that may help the organization reach its stated goals.

**Management and other logistics**

- **Location**. Select a meeting location that is easily accessible to all members, including those with disability-related needs. This could include a room in the organization’s building, or in a community center, library, school, or business.
- **Meeting time**. Establish the meeting schedule early to ensure members are able to attend and discuss the best way to communicate with each member (whether through email, Facebook, calls, or texting).
- **Food**. Include snacks and beverages at meetings that can be an incentive to help youth board members arrive on time and sit through longer meetings. For members with special needs, it might be necessary to plan for frequent breaks or incorporate movement into the meeting. Make sure to be sensitive to dietary requirements and food allergies.
• **Recordkeeping.** Agendas should be prepared before each meeting and, whenever possible, distributed to members in advance. Minutes should be taken at every meeting and distributed to members and organizational staff. The board’s facilitator should summarize key concepts from each meeting and share it with the organization’s leadership.

• **Communication with the board.** Outside of regular meetings or special events, determine how and when the board’s facilitator will communicate with members of the Youth Advisory Board.

• **Outcomes.** Tracking activities can be beneficial for the organization and successes of its Youth Advisory Board. Positive outcomes can be cited in grant applications or in public relations materials. An accurate record of the processes and activities will help with consistency if the board’s leadership will change from year to year. It will also ensure that the board is on track to meet its stated goals.

### Sample Forms
A formal application and interview process will help ensure that candidates are a good fit for the board. PACER has developed a New Member Application Form to be used as an example. Additional sample forms are also included in this document, and may be considered as well:

- New Member Application Form
- Mission Statement Form
- Policies and Procedures Form
- Permission Form
- Photo Release Form
- Video Release Form
- Emergency Contact Form

### Conclusion
A Youth Advisory Board can be a significant asset to any organization that serves a youth population. Board members offer a unique perspective that can be incredibly helpful in developing programming and resources.

The Youth Advisory Board members also receive innovative leadership training and form relationships with mentors and peers who understand their experience. They can use what they learn from serving on the board to influence key decision makers and create positive change.
PACER Center Youth Advisory Board
New Member Application

Name: ______________________________________________________________________________

Address: ___________________________________________________________________________

Phone: ____________________________________ Email: ___________________________________

Birth Date: _________________________________ Grade in School: ___________________________

Diagnosis/Disability: __________________________________________________________________

Please answer the following questions:

Why would you like to be a part of the Youth Advisory Board? _________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

What has been your experience in school as a youth with a mental illness? ______________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

What other leadership activities have you participated in (councils, clubs, boards, groups, peer
mediation, etc.)? ______________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Do you have any experience with public speaking? ___________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
Are you willing to speak in public about your diagnosis or disability?
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

What changes would you like to see for youth who have mental health needs or who receive Special
Education services (i.e., in schools, communities, families, health care, laws, among peers)?
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

What are your interests and talents, or extracurricular activities you are involved in (sports, after school
activities, etc.)?
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Is there anything else you would like to share?
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Do you have any questions about the Youth Advisory Board?
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Please return this completed form to:

Renelle Nelson, Youth Advisory Board Facilitator
PACER Center
8161 Normandale Blvd.
Minneapolis, MN 55437-1044
952-838-9000
PACER Center Youth Advisory Board
Mission Statement

Our mission is to educate the public on what a youth with mental health issues goes through in the school and in the community.

Looking at ways for youth to participate in how services are developed and provided.

We hope to make a difference by:

- Reducing the stigma associated with mental health diagnoses
- Educating the public on the issues youth face
- Influencing the children’s mental health policy changes
- Advocating for better services
- Providing peer support
- Being better self-advocates
- Creating a youth presence in an adult dominated world
- Developing our own leadership skills

Current activities:

- Meeting monthly
- Maintaining and updating the Children’s Mental Health and Emotional or Behavioral Disorders (CMH & EBD) Project website about our youth advisory board with resources for youth with mental illness
- Presenting at conferences, staff trainings, and other public speaking opportunities
- Giving our input on articles, publications, and to youth and family serving organizations
- Participating in volunteer activities related to children’s mental health

Youth having a voice and making a difference!
Nothing about us, without us!
PACER Center Youth Advisory Board
Policies and Procedures

Membership Criteria

1. Must be in 7th to 12th grade, pursuing a diploma, a GED, or in a transition program. After a member has graduated from high school or received his or her GED, he or she is no longer eligible to be on the Youth Advisory Board as a member. However, he or she may be asked to become a mentor to the Youth Advisory Board. Mentors will be able to participate in Youth Advisory Board activities in a limited manner.

2. Must have a diagnosis of a mental, emotional, or behavioral disorder. It is not required that a member have a 504 plan or special education services.

Duties

1. Must attend all meetings and events unless excused.

2. The Annual Youth Advisory Board meeting will take place in September, at which time officers will be elected.

3. Officers will hold their positions from September through August.

4. Each member will serve as an officer or have a project assignment. Members may serve both as an officer and also have a project assignment.

5. Project assignments will continue until the project is completed or after one year, whichever comes first.

Behavioral Expectations

1. All Youth Advisory Board members will treat one another and PACER staff with dignity and respect. Any violent, threatening, discriminatory, or harassing behavior is cause for dismissal from the Youth Advisory Board.

2. Youth Advisory Board members should notify the Youth Advisory Board Advisor of any unresolved conflict among members. Any member can report a conflict. The Advisor will work with the members on a fair and equitable solution to the conflict.

3. All Youth Advisory Board members are required to adhere to a strict no alcohol or chemical use of any kind while participating in Youth Advisory Board activities. The exception is tobacco use if you are 18 and adhere to city and state laws.
Application for the Youth Advisory Board

All applicants for the Youth Advisory Board for meetings and activities. This will include meals during the monthly meetings, transportation to Youth Advisory Board events, meals, materials and lodging when necessary.

Expenses

PACER will pay for all expenses during Youth Advisory Board meetings and activities. This will include meals during the monthly meetings, transportation to Youth Advisory Board events, meals, materials and lodging when necessary.

Liability Limitations

1. Neither PACER staff nor any of its agents shall be held responsible for any emotional or physical disturbance that occurs while at the PACER office, or relating to a PACER activity.

2. Neither PACER nor any of its agents shall be held responsible for any extra charges not specified that may occur while attending a PACER event.

3. Neither PACER nor any of its agents are responsible for any incident preceding or following a PACER event.

4. Youth Advisory Board members under the age of 18 may be asked to leave any PACER event at the judgment of the Youth Advisory Board Advisor. Parents or guardians must be available to pick up their member.

5. Youth Advisory Board members over the age of 18 may be asked to leave any event at the judgment of the youth advisors. In this case, the member is responsible for his or her own transportation to leave the event if they are dismissed.

I hereby agree to the policies and procedures outlined in this document.

____________________________________________________________________________________
Youth Advisory Board Member       Date

____________________________________________________________________________________
Parent / Guardian if Youth Advisory Board applicant is under 18       Date

____________________________________________________________________________________
Youth Advisory Board Advisor       Date
PACER Center Youth Advisory Board
Parent/Guardian Permission Form

I give permission for my son/daughter _____________________________ to participate in the following activity for the Youth Advisory Board at PACER Center.

Date: ____________________________________________________________

Activity: _________________________________________________________

Time: _____________________________________________________________

During this activity I can be reached at the following phone number: ________________________________

If I cannot be reached, and in the event of an emergency, the following person is authorized to act on my behalf:

Name and phone: ____________________________________________________________________________

Relationship to my son/daughter: ______________________________________________________________

LIABILITY RELEASE

I ________________________, the parent/guardian of ________________________________ hereby release PACER Center from any liability related to an accident involving my son or daughter while participating in this activity.

Parent/Guardian Signature: __________________________________________________________________

Date: ____________________________________________________________________________
PACER Center
Photo Release Permission Form

I give unconditional permission to PACER Center, Inc. to photograph me and my child(ren) and to use the photograph(s) for general education about PACER, children and adults with disabilities, and for fundraising purposes.

Name(s) of person(s) in photographs: ______________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Signature of person giving permission: __________________________________ Date: _____________

Address: ____________________________________________________________________________

City:______________________________________State: _________ Zip:________________________

Phone:  _____________________________________________________________________________

PACER: Description of photograph(s):  ____________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

PACER Center is an affirmative action and equal employment opportunity employer.
PACER Center
Video Release Permission Form

I give unconditional permission to PACER Center, Inc. to videotape me and my child(ren) and to use the video for general education about PACER, children and adults with disabilities, and for fundraising purposes.

Name(s) of person(s) in video: ____________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Signature of person giving permission: __________________________ Date: ______________

Address: ___________________________________________________________________________

City: __________________ State: _______ Zip: __________________

Phone: ___________________________________________________________________________

PACER: Description of video footage: ______________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
PACER Center Youth Advisory Board
Emergency Contact Form

Name: __________________________________________

Address: __________________________________________

City: ____________________ State: ________ Zip: ________________

Phone: __________________________________________

Emergency Contact Persons

Name: __________________________________________

Relationship to Youth Advisory Board member: __________________________

Phone: __________________________________________

Name: __________________________________________

Relationship to Youth Advisory Board member: __________________________

Phone: __________________________________________

Emergency Health Care Information

Please provide us with whatever information you feel would aid us in helping you in a medical / mental health emergency. *This is NOT mandatory information.*

Name of doctor or clinic: __________________________________________

Address: __________________________________________

City: ____________________ State: ________ Zip: ________________

Phone: __________________________________________

Allergies: __________________________________________

Special Instructions: __________________________________________

Hospital Preference: __________________________________________

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