

# Trainers' Competences within Euro Mediterranean Youth Work

A quality approach to training



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#### **Preface**

SALTO-YOUTH EuroMed on occasion of the "International Conference of Active Trainers within EuroMed framework" that took place in Antalya, Turkey 6-10 October, 2013, decided to conduct a research about training competences needed for working in EuroMed framework. In spite of the vast bibliography about the trainers' competences in the EU framework, there is not enough reflection about the specificities of being a trainer within the framework of EuroMed.

During the latest edition of TOTEM (Training for Trainers in EuroMed), this reflection was about the trainers' competences within the field of EuroMediterranean area, based on the experience and feedback from participants.

In this new study, SALTO-YOUTH EuroMed would like to deepen the perspective and to encompass the last 10 years of experiences in an overall study to be able to provide the following elements: a first approach to quality in EuroMed activities and the role of trainers' competences.

This study takes into account the following background publications:

- TOTEM training of trainers in Euro-Mediterranean Region;
- Train EuroMed Multipliers;
- Supporting Learning: Long term training course in EuroMed;
- Training Active Trainers in EuroMediterranean Youth Work, TATEM;
- and the report about TOTEM II;

but also the mapping exercise developed by other institutions in the field of ETS (European Training Strategy), along with the survey conducted to inquire about adaptability and applicability of ETS in the EuroMed Region, and other relevant publications found by the researcher.

We are also pleased to introduce 3 non-formal learning (NFL) tools to tackle the issues covered in this publication:

- **1.** EuroMed Trainers' Personae: A tool to help trainers reflect on their leading roles, and share ideas and perceptions about their roles.
- **2.** C-Power Cards: A practical peer-learning approach to recognising and improving trainer's competences in the EuroMed youth field.
- **3.** Mind the Map in EuroMed: A collaborative concept-mapping activity to explore, inquire and share information about the specificities of being a trainer in the EuroMed youth field.



#### This publication is organised as follows:

#### Section 1

Introduction - EuroMed youth work in context
An introduction situates the study within the context of youth
work, non-formal education and training and the related policy
fields within the EuroMediterranean framework.

#### Section 2

#### Quality and Minimum Standards in EuroMed

The second section explores the concept of quality in non-formal education and training in the youth field in EuroMed. Based on pedagogical approaches, on practice and on existing concepts of quality, it outlines a set of minimum quality standards for trainers in EuroMed.

#### Section 3

#### **Towards a Competence Profile for Trainers**

Section 3 discusses different approaches to competences by considering the literature in the youth field, the latest development in the European Training Strategy and the Survey on trainers' competences within the EuroMediterranean Youth field. The outcome is a proposal for a competence profile for trainers in the field of EuroMed youth work.

#### Section 4

#### **EuroMed Training Specificities**

The last section reviews the specificities (geopolitical, cultural, etc.) of being a trainer and train other trainers within EuroMed.

#### Section 5

#### Conclusions and Recommendations

Finally, the study draws a number of conclusions aimed to help to train others and to develop training for trainers within this framework. Ideas and pending issues for further research are also addressed.



#### 1. Introduction - EuroMed youth work in context

#### A brief background - The EuroMediterranean framework

The Barcelona Process is the result of the political will of originally 27 partners to provide a framework for strengthened dialogue and comprehensive cooperation in the Mediterranean region. This process was initiated by the member States of the European Union, and 10 Mediterranean partner countries: Algeria, Egypt, Israel, Jordan, Lebanon, Morocco, Palestine Territories, Syria, Tunisia and Turkey.



The Barcelona Process, which started in 1995 stressed that "youth exchanges should be the means to prepare future generations for a closer cooperation between the Euro-Mediterranean partners. A Euro-Mediterranean youth exchange cooperation programme should therefore be established based on experience acquired in Europe and taking account of the partners' needs."

In response to the above need the EuroMed Youth Programme, a regional

programme set up within the framework of the third chapter of the Barcelona Process entitled "Partnership in social, cultural and human affairs", promotes the mobility of young people and the understanding between peoples through three types of actions: Youth Exchanges, Voluntary Services and Support Measures.

This third chapter of the declaration proposes a permanent dialogue between young people from the Euro-Mediterranean partners countries.

This helped to foster mutual understanding among the people of the region, to integrate young people into social and professional life, and to contribute to the process of democratisation of the civil society.

## **EUROMED YOUTH training in context Evolving priorities, aims and strategies**

In September 1998, the first EuroMed Youth programme was adopted by the European Commission and the Euro-Mediterranean (MED) Committee.

Since then, EuroMed Youth Programmes have taken place with well-defined goals and objectives. Therefore, by looking at 4 phases of EuroMed Youth, it is possible to track the evolution of training quality aspects.

The EuroMed Youth Programme of the European Commission was set up in 1999 and was based on the shared concern to combat prejudices and stereotypes that prevail across the Mediterranean area and persistently determine mutual perceptions.

This programme since its inception represented a concrete initiative prompted by the Euro-Mediterranean partnership. It also meant an extension of the Youth programme's activities within the European Union. It involved three actions of the EU YOUTH programme: Youth Exchanges, Voluntary Service and Support Measures.

The Commission defined some thematic priorities especially focused on the Mediterranean needs. Projects tackled the following subjects:

- 1. Combating racism and xenophobia;
- 2. Active citizenship and the development of civil society;
- 3. The role of women in society;
- 4. Minority rights;
- 5. Protecting the environment and cultural heritage.

In November 2001, a second phase of the EuroMed Youth programme was adopted.

The EuroMed Youth Programme II stressed the importance of quality and training by prioritising the strengthening and improvement of the supported activities. These were considered important for the development of the national human resources to guarantee the duration of the activities and the diversification of the priority themes (e.g., women's role in the development of society). This ensured a better involvement of all partners.



This was reflected by the creation of a SALTO Resource Centre EuroMed to support the implementation of the programme through training activities not only focused to beneficiaries but also to National coordinators, national agencies and Commission.

The EuroMed Youth III (2005-2008) programme was decentralised to the 9 Mediterranean partner countries (Algeria, Israel, Jordan, Lebanon, Morocco, West Bank and Gaza Strip, Syria, Tunisia and Turkey). The decentralisation aimed to adapt the Programme to diverse national youth systems and encourage a closer relationship with the beneficiaries. The focus was turned on actions promoting active citizenship and fostering a sense of solidarity among the participants.

The general objective of the current Phase IV of the programme (and the extension phase) is to support and strengthen the participation and contribution of youth organisations and youth from the Euro-Mediterranean region towards the development of civil society and democracy.

#### The role of SALTO EuroMed Resource Centre

The SALTO EuroMed Resource Centre is part of the European Commission's training strategy within the Youth in Action Program and Erasmus+. It aims to support the National Agencies. Its activities focus on 5 axes:

- Training
- Networking and support to networks
- Organisation and support to specific events
- · Production of educational materials
- Partnership with different European institutions

#### What is youth work?

The term 'youth work' is used to describe a diverse range of activities, topics and measures provided by a range of actors in assorted fields and settings. However, at the heart of youth work there are three core features that define it as youth work distinct from other policy fields:

- a focus on young people,
- personal development, and
- voluntary participation.

Not all countries have a formal definition of youth work and amongst those that do, there is a variety of definitions.<sup>1</sup> Youth work that happens mostly in non-academic environments (youth centres, extracurricular activities at schools and colleges, parks, streets, etc.) helps young people learn about themselves, others and society through activities that combine enjoyment, challenge, learning and achievement as a developmental process for individuals and groups with a societal outreach. Although youth work does not

 $<sup>^{1}</sup>$  European Commission (2014). Working with young people: the value of youth work in the European Union.



necessarily involve learning (as it may be devoted to leisure and free time activities, only), learning in youth work is based mostly on non-formal learning methods.

As we can see, there are several perceptions and understandings about it. Some approaches are more linked to community life, and the variety is very large, especially if you look at it from a global dimension. Nowadays these societies are dynamic and changes are taking place in various fields of activity, including the area of education. Non-formal learning activities increase the process of developing attitudes and competences and contribute to the development of society as a whole.

According the "Supporting Learning" handbook published by SALTO EuroMed, "non-formal learning is oriented to individual needs, contributing to personal development, using clear learning objectives as well as to social aspects, facilitating communication, intercultural dialogue and social learning."<sup>2</sup>

Non-formal learning can be characterised as follows:<sup>3</sup>

- Non-formal learning and education, understood as learning outside institutional context (out-of-school) is the key activity, but also the key competence of youth work. Non-formal learning/education in youth work is often structured, based on learning objectives, learning time and specific learning support and it is intentional.
- It typically does not lead to certification, but in an increasing number of cases, certificates are delivered, leading to a better recognition of the individual learning outcome.
- It can be undertaken by the individual or be part of an organised activity that occurs within the workplace or community.
- Non-formal learning is intentional from the learner's perspective.
- It promotes mobility within and beyond the EU borders, non-formal learning and intercultural dialogue, and encourages the inclusion of all young people, regardless of their educational, social and cultural background.

#### What is a trainer in the EuroMediterranean youth field?

As far as we can see, if youth work is a concept still evolving according to the context and the country, the definition of trainer in the youth field is also in progress. It goes without saying that a trainer is someone that conducts a training activity and, in this case, within the framework of EuroMed.

According to the Estonian National Agency for the Youth in Action Programme,<sup>4</sup> a "trainer in the youth field is the designer and implementer of educational activities based on the values and principles of youth work, who

 $<sup>^2</sup>$  SALTO-YOUTH (2011). EuroMed Resource Centre, Supporting Learning: Long term training course in EuroMed.

European Commission and Council of Europe (2011). Pathways 2.0 towards recognition of non-formal alearning/education and of youth work in Europe.

Estonian National Agency for Youth in Action Programme (2011). Competence Model for Trainers in the Youth Field.



creates conditions that promote the learner's diverse development and shape the knowledge, skills and attitudes necessary for youth work in a targeted learning situation." The above definition considers the role, the field of work and values, and the function and competences. Therefore, we cannot tell precisely what constitutes a trainer in EuroMed without listing and describing a set of attributes and competences that any trainer must have to be regarded as such.

Bernard Abrignani, coordinator of the SALTO EuroMed Resource Centre, in TOTEM I defines a trainer as "(someone) who should be a designer (developing the concept of a TC), an animator (providing the spirit and the dynamic of the TC), an expert in the field (Non Formal Education and EuroMed)".<sup>5</sup>

TOTEM II also addressed the concept of a trainer and recreated the three personae or roles identified by Abrignani.

- Designer: ability to develop a concept of his/her own to answer the learning needs of the group;
- Animator: The trainer gives the spirit of the training to the group to create an atmosphere favourable to the learning process and the group dynamic;
- Expert: skillful in at least one specific topic tackled in the training.

Three roles that any trainer in EuroMed should have and therefore could be considered the first steps towards a minimum quality standard profile, as defined by SALTO EuroMed.

#### Conclusions

This section offered a brief but rich account of the EuroMed historical background related to youth work and non-formal learning. Evolving priorities and aims were clearly reflected in the continuing development of the strategies with a shift in the governance of the programme from Europe to an increasing responsibility on EuroMed hands. When looking in detail to what constitutes a trainer in the youth work field, the specificities of the EuroMed region stand out: cultural, geopolitical, religious aspects, etc. A trainer is not a mere designer and implementer but also an expert and an animator.

In the next section we will discuss the focus on quality at the different training of trainers in EuroMed, and how this quality strategy relates to the trainers' competences.

 $<sup>^{5}</sup>$  SALTO-YOUTH (2006). EuroMed Resource Centre, TOTEM training of trainers in Euro-Mediterranean Region.



#### TOOL: EuroMed trainer's personae

A tool to help trainers reflect on their leading roles, and share ideas and perceptions about them.

#### Aims

- To support self-reflection on trainer's different roles
- To discuss trainers' roles and related attributes
- To introduce trainers' competences in EuroMed by means of a sharing activity

#### Material

- A4 sheet in different colours (1 per pax.)
- Markers (assorted colours, 2-3 per pax.)
- Scissors (to be shared)
- String (30 cm per participant)
- Sello tape (5 rolls)

#### Duration

60 minutes

#### Step by Step

#### 1. Introduce the meaning of the word "Persona":

A persona (plural personae or personas), in the word's everyday usage, is a social role or a character played by an actor. The word is derived from Latin, where it originally referred to a theatrical mask. The Latin word probably derived from the Etruscan word "phersu", with the same meaning, and that from the Greek  $\pi \rho \acute{o} \omega \pi o v$  (prosopon). Its meaning in the latter Roman period changed to indicate a "character" of a theatrical performance or court of law, when it became apparent that different individuals could assume the same role, and legal attributes such as rights, powers, and duties followed the role. The same individuals as actors could play different roles, each with its own legal attributes, sometimes even in the same court appearance.

#### 2. Explain that in the EuroMed Region a trainer needs to combine different roles:

- A designer and implementer (developing the concept and delivering a TC),
- An animator (providing the spirit and the dynamic of the TC),
- An expert in the field (Non Formal Education and EuroMed-specific topics).

Thus, as trainers, we play different roles or personae, though we usually have a leading one.

<sup>&</sup>lt;sup>6</sup> Extracted from Wikipedia - article "Persona" http://en.wikipedia.org/wiki/Persona retrieved 10.01.2014



- **3.** Ask participants to make a mask that features the attributes of their leading persona. They need to show on the mask what makes them a designer, animator or an expert in a creative way. Distribute the materials. Allow 20 minutes for making the mask.
- **4. Invite them** to wear the masks and to discuss with their peers about the most relevant features and the reason they have chosen that persona. 10 minutes.
- 5. Divide the participants in small groups (max. 5 persons) wearing the same mask to find 5 similar features for that type of trainer. Ask them to write them down for a presentation by a speaker appointed by the group. 10 minutes.
- **6. Ask them to find participants** with a persona that they would like to play. They need to exchange masks and the information about each persona focusing on learning about the different roles.
- 7. Adaption: invite the participants to act out their personae and present them within their groups. They can also alternate roles to find out how it feels to switch to roles they are unfamiliar with or would like to work on.
- 8. Afterwards, lead them to a debriefing activity in plenary.

#### Debriefing

- Why have you chosen that trainer's persona?
- Which are the main features you have identified?
- Do you always wear the same "mask" in your trainings?
- Have you found many similarities when you checked with people with similar masks? And differences? What are the reasons for those similarities/differences among similar roles?
- Which was the second persona you chose? Why?
   Is there an aspect you want to improve?
- What did you learn when you became the other persona? Was it easy?
- How difficult is it for you to combine different roles in a training activity?
- Would you be happy to try different mask (roles) in your trainings?
   Which would be the most challenging one?





#### 2 - Quality and Minimum Standards in EuroMed

For any organisation there needs to be clarity about what will be considered quality in their training activities. In most organisations there is agreement about using particular evaluation standards and/or ethical guidelines to guide the training and evaluation and to implement and evaluate it.

However, for youth work activities 'quality' is a fuzzy term and it gets even fuzzier when dealing with quality in training activities. The common element of the business definition of quality is that the quality of a product or service refers to the perception of the degree to which the product or service meets the customer's expectations. According to the American Society of Quality, quality is a subjective term for which each person or sector has its own definition. In technical usage, quality can have two meanings: 1. the characteristics of a product or service that bear on its ability to satisfy stated or implied needs; 2. a product or service free of deficiencies. According to Joseph Juran, quality means "fitness for use;" according to Philip Crosby, it means "conformance to requirements."

#### Quality in training activities in the youth field

The Council of Europe's Directorate of Youth and Sport (DYS) has extensively researched the quality factor in European level training activities. According to the DYS, "quality in training and education is about minimum standards and definitions related to the essence or type of activities. It refers to what should be in certain activities and also relates to how they are prepared, delivered and evaluated." <sup>8</sup>

Quality concerns the whole spectrum of context, partners, people, methods and stages of the activity or project. It is defined implicitly or explicitly, but a minimum common understanding of what it entails has to be secured, the minimum being the quality standards referred to in the aforementioned document. The document also states that the notion of quality is socially, institutionally and culturally marked and, therefore, not always understood by all partners in the same way.

The cited document builds on previous research and proposes a list of minimum quality standards in education and training activities of the DYS.

American Society for Quality, Glossary - Entry: Quality, http://asq.org/glossary/q.html retrieved 20.01.2014.

<sup>&</sup>lt;sup>8</sup> Council of Europe (2007) Quality standards in education and training activities of the Directorate of Youth and Sport of the Council of Europe.



### Quality standards in training activities as defined by the education and training unit of the DYS are:

- 1. A relevant needs assessment;
- 2. Concrete, achievable and assessable objectives;
- **3.** The definition of competences addressed and learning outcomes for the participants;
- 4. The relevance to the Council of Europe programme and DYS priorities;
- 5. An adequate and timely preparation process;
- 6. A competent team of trainers;
- 7. An integrated approach to intercultural learning;
- 8. Adequate recruitment and selection of participants;
- **9.** A consistent practice of non-formal education principles and approaches;
- 10. Adequate, accessible and timely documentation;
- 11. A thorough and open process of evaluation;
- 12. Structurally optimal working conditions and environment;
- **13**. Adequate institutional support and an integrated follow-up within the DYS programme and its partner organisations;
- 14. Visibility, innovation and research.

Among the minimum standards listed in this document, a competent team of trainers is described by means of a competence profile.

Learning and competence development, as well as the intercultural learning process, rely heavily on the competences and abilities of the trainers responsible for the activity. The DYS bases its educational offer on multicultural teams of trainers and facilitators, with complementary roles and competences, recruited through a transparent process and accountable to all stakeholders. It general terms, minimum quality standards in training activities have been always defined in regards to specific programmes or organisations within one country or region. Minimum quality standards such as the above for the Council of Europe, aimed at youth activities serve as a model for other international organisations in Europe and neighbouring countries that wish to create an encompassing set of quality standards for their youth training activities.



#### Quality as trainers' competences

Hendrik Otten in his seminal study on trainers' competences (2003)<sup>9</sup> states that "high quality occurs when the youth work offered is situation-, subject-and object-appropriate." Quality and therefore its evaluation responds to subjective constructs in regards to each trainer's learning and professional needs. The author sustains that only when individual competences have reached an inter-subjective consensus, will they be regarded as quality standards. So far, competences can be considered as "menus" or lists of desired skills, knowledge and attitudes, from which trainers can chose and be chosen depending on the topic, context, qualifications and individual traits. Thus, according to Otten's study, quality consists of personal aspects ('necessary' trainers' competences or basic attributes), measure-related aspects (strategic, method, and subject and field competences), and assessment systems for the necessary competences that have been defined.

The document of the European Training Strategy on which our competence profile is based considers both the Total Quality Management (TQM) approach and a more holistic one. Both consider the transformative process involved in learning in spite of the classical one related to the specific aims and objectives of each educational activity. This set was not meant to be a profile of trainers' competences but a framework to be adjusted to different training activities much in line with Otten's approach. Nevertheless, it still maintains an open definition of quality in training activities, which needs to be narrowed and self-contained in order to draft a set of minimum quality standards common to most EuroMed training activities.

## A first approach to trainers' competences towards quality training in the EuroMed youth field

As explained by Bernard Abrignani, training is an essential component of the diffusion of the EuroMed programme: "Moreover there is a specificity of training within the EuroMed context, which has to do with the meeting of two civilisations, the encounter of three different religions, the different role that non-formal education plays in EU and in MEDA countries, the political relevance of this moment in history of the programme itself, the use of the training venues, and much more. It is therefore of paramount importance - in order to ensure quality - to have trainers well prepared to face the specific challenges related to training activities within EuroMed." <sup>10</sup>

Training of trainers within EuroMed has taken place in several stages with objectives that aimed to meet and define the quality needs of the aforementioned realities of the region.

Ouncil of Europe (2003) Study on trainers' competencies necessary for developing and implementing high-quality European level training activities in the youth field.

SALTO-YOUTH (2006). EuroMed Resource Centre, TOTEM training of trainers in Euro-Mediterranean Region.



#### Evolution of quality focus in training of trainers in EuroMed



Quality through qualification in the context of the EuroMed region

Improvement of quality, based on the acquisition of training skills and competences

Further development of competences with a focus on a EuroMed common learning approach

a. TATEM (Training for Active Trainers in EuroMed - Nov 2004 - Nov 2006) This multi-phased training was aimed to:

- A real need for qualified trainers in the field of Euro-Mediterranean co-operation for the activities of the Council of Europe and the European Commission;
- The need to strengthen the quality of the support given to national agencies and co-ordinators in the EuroMed Youth programme, and also to the other organisations active in EuroMed training;
- A sustained effort by the EuroMed Salto Resource Centre and the Partnership to build on the youth activities and experiences in the Euro-Med area in order to take advantage of the added value and knock-on effect of the skills developed;
- The effort to guarantee and assume the specificities of EuroMed training;
- The lack in the Meda countries of adequate training possibilities for trainers that meet the requirements of the EuroMed Youth programme;
- The needs to take into account the different educational approaches and training "schools" by trying to develop specific EuroMed approaches.

b. TOTEM (Training of Trainers in EuroMed - March 2005 - March 2006) TOTEM was designed to respond to the increasing need for capable trainers in EuroMed, trainers who are not only well-prepared in training methodology but also in terms of general knowledge on a number of relevant issues: history and civilisation of the Mediterranean area, political framework of the programme, different religions.

Again, the intercultural element is paramount as a specific factor of the region. TOTEM has provided participants with a reflected intercultural experience, thus fostering their growth in terms of "intercultural attitude", another extremely important requisite for trainers in this field.



Reflecting on Quality

- Think of a trainer delivering quality and describe it
- Can you transfer this practice to your trainings? How?



#### Needs and objectives

More specifically, TOTEM responded to the need of developing specific EuroMed-related competences in the field of training and tried to address a specific target group of candidates, as part of a broader strategy which encompasses also other initiatives such as TATEM (Training for Active Trainers in EuroMed) by the EU-CoE partnership and the ToT for European Youth Projects by the National Agencies of the Youth programme. TOTEM responded to the increased need of transferability of training concepts and experiences, dedicating part of its implementation to the self-reflected acquisition of the necessary competences.

TOTEM was designed to respond to these needs, hence strategic and learning objectives were set to achieve throughout the TOTEM long-term training course.

#### Strategic objectives:

- To contribute to the improvement of training activities' quality in the EuroMed;
- To contribute together with TATEM, to the development of a network of trainers on a Euro-Mediterranean level contributing to the quality of training activities in the Euro-Mediterranean context based on the acquired skills and competences;
- To contribute to the effective and bi-directional transfer of training experiences between new EU member countries and MEDA countries, with specific attention to possible similarities and differences in the socio-economic background of these two areas.

#### Learning objectives:

- To support the participants' deep comprehension of the Euro- Mediterranean context with all its cultural, historical, political, and emotional implications;
- To improve and deepen the specific training competences of the future TOTEM trainers to competently be able to design, implement, and evaluate youth worker training activities in this context.



#### Should there be a minimum standard for trainers in EuroMed?

- Trainers should have experience
- Democratic and Human rights and a hands-on intercultural & international communication experience
- International experience
- Knowledge of French and English
- Experience in EuroMed
- Balance (not taking a position)
- Overcoming personal barriers
- Neutrality and empathy
- Understanding of own abilities
- Openness towards change and self-development
- Sensitivity about each other situation
- A minimum standard would deliver the following impact:
  - Guarantee effective work
  - Quality in youth work and projects
  - Educational/learning process
  - Spread impact on political level
  - Establish common understanding of institutions involving youth policies

Answers from participants at the "International Conference of Active Trainers in EuroMed Framework" (October 6-11, 2013)

#### c. TOTEM II (Training of Trainers in EuroMed II - 2011-2012)

TOTEM II was launched in 2011 and was established and planned with the applied learning from the previous EuroMed training experiences. TOTEM II's aim was designed to support the learning of those youth workers and youth leaders - already experienced within EuroMed Youth Cooperation - who wanted to develop their competences as trainers in this field.

#### Strategic Objectives:

- To contribute to the quality improvement of training activities in EuroMed;
- To contribute, to the development of a network of trainers on a Euro-Mediterranean level and to be an active actor in the field of EuroMed Youth Cooperation.

#### Learning Objectives:

- To support the participants deep comprehension of the Euro-Mediterranean context (with all its cultural, historical, geopolitical, emotional implications);
- To improve and deepen the specific training competences of the course participants (future trainers in EuroMed) for them to be able to competently design, implement and evaluate training activities;
- To support a common "educational approach" within the learners.

From quality in training to trainers' quality Based on the quality criteria in EuroMed training of trainers along with the "Competencies for DJS external trainers," and integrating the various aims and objectives developed throughout the training activities for trainers in EuroMed, we can draft a list of minimum quality standards for international trainers within EuroMed:

Competencies for DJS external trainers: Profile of a Junior Trainer. Retrieved 12.12.2013 http://www.coe.int/t/dg4/youth/Source/Training/Quality\_NFE/competencies\_junior\_en.pdf



#### Draft Proposal for Minimum Quality Standards for EuroMed Trainers

- 1. Experience as a trainer and /or member of a team of trainers in international and intercultural youth work
- 2. The ability to actively contribute and assist in the preparation, running and evaluation of the training activity
- **3**. Possession of certain education background related to the topic or the methodology of the training activity, either formal or non-formal (educational, pedagogical background, training of trainers, proven record of participation in training activities, etc.)
- 4. Ability to work in an intercultural and multinational team of trainers
- 5. Language and effective communications skills to work in an international team and according to the activity requirements
- **6** . Knowledge about the differences in educational approaches between EU and MEDA countries
- 7. Being aware of and familiar with youth activities and experiences in the EuroMed Region as a member of a youth, government or educational organisation
- 8. Knowledge of the socio-economic background of EU and MEDA regions
- **9** . Comprehension of the EuroMediterranean context with all its cultural, historical, political, and emotional implications
- **10** . Ability and willingness to develop specific EuroMed approaches
- 12. Ability and willingness to work on the self-reflected acquisition of the necessary competences
- **13** . Ability to implement a bi-directional transfer of training experiences between EU member countries and MEDA countries
- **14**. Ability to support a common educational approach within the learners in the group

#### Conclusions

In this section, we have defined quality in training in the youth field making the leap from the European context into the EuroMediterranean realm. The term quality shows an evolution throughout the last 10 years of the training strategy in EuroMed. We have reached a point where a common EuroMed educational approach can only be attained by looking back at the experience we have acquired and decide the next steps towards a common educational strategy in EuroMed.

A consensus on minimum quality standards can reduce ambiguity and offer directions and criteria in the future training strategy. It will also enable trainers and organisations to align their objectives and policies accordingly.

In the next section, we will attempt to approach quality from the trainers' competences side and integrate them into a competence profile for EuroMed trainers.



#### Section 3 - Towards a Competence Profile for Trainers

#### What is a competence?

Human Resource apractitioners and educators use the word competence in various ways. In general terms, competences are "written descriptions of measurable work habits and personal skills used to achieve a work objective" (Green, 1999; Burke, 1989). Some scholars see a "competence" as a combination of knowledge, skills and behaviour used to improve performance; or as the state or quality of being adequately or well qualified, having the ability to perform a specific role (Tuxworth,1989; Boyatzis, 1982).

The European Centre for the Development of Vocational Training (CEDEFOP) defines a competence as the ability to apply knowledge, know-how and skills in an habitual and/or changing work situation.<sup>12</sup>

#### Why do we need competences?

#### Recruitment and selection

Competences are applied in any job search. We use competences as part of job profiles or job descriptions. Competences are derived from the organisation's framework and applied to a specific job profile. Competences when clearly described show the way an organisation wants to employ a trainer who can perform in a specific way. A competence profile helps people to understand what is expected of them and also how to achieve it. Any job description should include the competences that are expected and required for the job. When a call for a trainers is posted, a similar process has taken place by defining a job profile for the trainer along with certain competences that the trainer should be able to apply. Nevertheless, it usually happens that those competences differ from job to job within the Youth in Action and EuroMed Youth programmes. The rationale behind those differences is that in intercultural learning and youth work, training competences are specific to training activities, environments, and contents.

Thus, selection and recruitment relies heavily on the preparation activities and profile required by the organisers.

Tissot, P. (2004). Terminology of vocational training policy: a multilingual glossary for an enlarged Europe (pp. 70, 76, 112). Cedefop (Ed), Luxembourg; Office for Official Publications of the European Communities. Retrieved 15.11.2011.



#### **Evaluation**

Competences are used to measure performance. For most organisations, and especially in learning organisations, it is crucial to identify what works well. Formative evaluation is the standard in formal education, whereas non-formal education and learning rely on qualitative data and appraisal methods. Competences can be measured, or at least people's perceptions of their behaviour or lack of it can be appraised. A set of competences can help to create a yardstick, an instrument to measure, monitor and track improvement. This helps us, as trainers, to achieve our objectives and those of the organisation we are working for.

#### Training

Competences are used to identify any difference between the required standard in the job profile and what currently happens. Individuals are assessed (or assess themselves) in regards to a set of competences to identify individual training needs, give them a certain priority and create a personal development plan. A set of competences provides a check-list of quality elements in a training needs analysis. Trainers in their persona as active learners need some sort of compass to locate themselves and set a path for professional development. Competences are applied in different learning activities both for the trainees and in response to specific learning and development needs of the trainers themselves. We can mention many competence-based learning programmes, activities and methods, such as tutor-led programmes, competence coaching, learning resources and tools, experiential learning, among others. Needless to say, the link between the learning intervention and the desired competence must be straightforward, with clear objectives and an adequate evaluation.

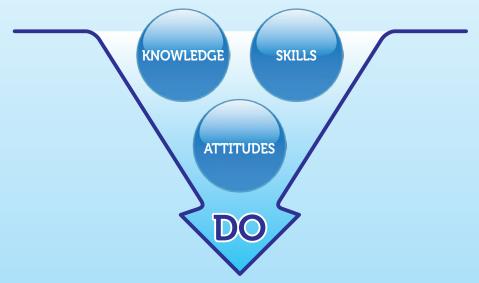
#### The competence framework in the youth field

According to the European Commission, key competences for lifelong learning are a combination of knowledge, skills and attitudes appropriate to the context. They are particularly necessary for personal fulfilment and development, social inclusion, active citizenship and employment. Key competences are essential in a knowledge society and guarantee more flexibility in the labour force, allowing it to adapt more quickly to constant changes in an increasingly interconnected world.<sup>13</sup>

<sup>13</sup> Recommendation 2006/962/EC of the European Parliament and of the Council of 18 December 2006 on key competences for lifelong learning [Official Journal L 394 of 30.12.2006].



#### The SKA competence model in the youth field



#### Competences for trainers in EuroMed in TOTEM I

A list of proto-competences was developed during TOTEM I, aiming at both addressing the tasks of an international youth trainer and at meeting the needs and realities of the still developing EuroMed training strategy.

#### a. Core trainer's competences

- The competence to analyse the needs of the target group of a training activity and to design a quality training programme with appropriate methodologies;
- The competence to create an appropriate and safe learning environment;
- The competence to train and facilitate international groups of youth workers and youth leaders;
- The competence to guide and facilitate (intercultural) group processes, presentation competences;
- The competence to deal effectively with ambiguity and crisis;
- The competence to co-operate and work effectively in international teams of trainers (team competence); intercultural competences (empathy and tolerance of ambiguity) social competences (communication, conflict management...);
- The competence to manage and evaluate a training project as a whole.



#### b. EuroMed-specific competences

- The competence to understand, use and adapt existing training concepts as well as to develop new training concepts, with particular attention to the freshly begun cooperation between new EU member countries and Meda countries;
- The competence to design and implement the methods necessary for EuroMed training activities in the youth/non-formal education field.

#### 2. European Training Strategy (ETS) Set of Competences

Our set of competences as well as the outline for it is based on the European Training Strategy (ETS) document for consultation "Development of a set of competences for trainers" published in 2013. This document aims to describe such competences in a standardised way in order to identify trainers' competences and to support the implementation with material such as quality indicators, self-assessment tools, etc. for a better recognition of youth work along with the improvement of the quality of training activities in the field. It intends to provide a common reference by proposing a list of competences in a flexible manner to be adapted according to training needs and specificities.

"Competences in this context are to be understood as an overall system of values, attitudes and beliefs as well as skills and knowledge, which can be put into practice to manage diverse complex situations and tasks successfully." 14

Reflecting on Quality

- Causality dilemma: competences or quality? What comes first?
- If quality is defined by having certain competences, then how can we ask for quality without defining competences?



#### 3. Competences for trainers in EuroMed in TOTEM II

Competences were also approached during TOTEM II as one of the pillars of the training course with an open perspective. Participants reflected on the competences and skills that the 'ideal trainer' should have. The following taxonomy was introduced:

- Knowledge (set of practical and theoretical knowledge);
- Know-how (behaviours and attitudes expected in a given situation);
- Know-how-to (implementation of a knowledge and practical ability mastered for a specific realization);
- Know-how-to-transfer (transfer the knowledge to other people).

<sup>&</sup>lt;sup>14</sup> SALTO-YOUTH (2013). Training and Cooperation Resource Centre, Development of a set of competences for trainers Document for consultation – revised version March 2013 - European Training Strategy.



To sum it up, the first two categories refer to constituent elements of a competence, whereas the third corresponds to the definition of competence, the know-how-to, and the implementation by putting knowledge, skills and attitudes in action. The last one, know-how-to-transfer, could be considered a specific training competence.

At TOTEM II participants were asked to identify and prioritise the competences in the ETS document according to their perception of the learning needs of a trainer within EuroMed. With the caveat that the ETS profile was not meant to be a must-have list but a possible series of training elements to consider when developing a training course, missing competences were identified. Trainees highlighted knowledge, skills and attitudes that complemented the ETS profile within the framework of EuroMed training:

- **a** . Knowledge, experience and understanding of the geopolitical structures and frameworks of EuroMediterranean youth work;
- **b** . ICT skills for effective communications in the preparation phase over time and distances;
- **c.** Self-awareness, self-reflection and developing an understanding of our own competence development;
- **d** . Trainer's personality, charisma, presence and delivery style.

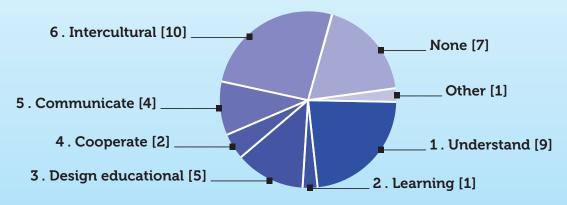
Whereas this exercise provided some missing elements to the existing ETS competences, our survey targeted a broader audience and focused on "add-ons" to the existing ETS competences.

#### 4. Survey on Trainers' Competences within EuroMediterranean Youth Work

The survey was administered during the first semester of 2013 to the trainers, youth workers, youth leaders and National Agencies and EuroMed Unit officials. The inquiry was based on previous studies for the development of a set of competences for trainers within the European Training Strategy (ETS). 39 respondents from EU and Meda countries gave their feedback based on their critical reflection about the applicability of the ETS set of competences within the framework of EuroMediterranean Youth Work considering its geopolitical background and the specificities of the EuroMed region. Gender and region origin were balanced. Two thirds of them worked in youth exchanges and training and networking projects and the other third in voluntary service, and other YiA-related actions. More than half of the respondents took part in projects on participation and active citizenship. Whereas the set of competences was deemed applicable within the Euro Mediterranean context, adaptations and improvements were suggested and integrated within the ETS framework.



#### **Most Positive Impact on Quality**



1. Understand and facilitate individual and group learning processes	9 (	23%
2. Learning to learn	) 1 (	3%
3. Design educational programmes	5 (	(13%)
4. Cooperate successfully in teams	2 (	5%
5. Communicate meaningfully with others		(10%)
6. Intercultural competence	) 10 (	(26%)
7. None (all are relevant)	7 (	(18%)
8. Other		

Most positive impact on quality was attributed to the intercultural competence (26%), followed by "Understand and facilitate individual and group learning processes" (23%).

Relevance was confirmed by similar percentages when inquired about the most relevant competence to EuroMed trainers. 59% agreed that all ETS competences were relevant to some degree.



# Trainers' Competence Profile for international trainers within the framework of EuroMediterranean youth work

The competence profile drafted in this publication builds on the ETS proposal, the competences listed in the first TOTEM course, with the support of the Survey on Trainers' Competences within EuroMediterranean Youth Work, and the exercises done by participants at the TOTEM II.

EuroMed trainers' competences are divided into 4 levels depending on their level of aggregation, scope, purpose and job-specificity.

#### Core Competences

Those highly aggregated with the most general scope that are usually applied to all international youth training activities regardless of geographical region or topic.

## Common Competences

Those other with a common definition accross the international youth training profession. In this case they are subcomptencies of each ETS core competence.

#### Support/ Accessory Competences

Those include the adaptations and additions proposed in the survey and other documents included in the current research. Although they have been identified within this EuroMed research, they are common to other international youth training activities and applied depending on the topic and nature of the activity. We can also refer to them as third-tier competences or supplementary ones.

# EuroMed Specific Competences

Those with a common definition for use in EuroMed international training activities. They are complementary to the other competencies and deemed context-related and necessary for EuroMed trainers.



#### 1. Understand and facilitate individual and group learning processes

CORE COMPETENCE

COMMON

COMPETENCES

- Understand and facilitate individual and group learning processes
- Choosing, adapting or creating appropriate methods;
- Creating an inspiring learning environment;
- Supporting learners in identifying and pursuing their learning needs;
- Supporting learners in overcoming barriers in their learning process;
- Understanding and facilitating the dynamic in a group in a way which is favourable to different ways of learning;
- Stimulating active participation;
- Motivating and empowering learners;
- Ensuring creativity, problem-solving and thinking 'out-of-the-box';
- Strengthening the self-confidence of learners.
- Being ready for ambiguity and adaptation;
- Applying research on areas; of training;
- Identification and analysis of learning needs to apply them in the training design;
- ICT proficiency to provide new approaches to the learning process;
- Ability to strengthen the self-confidence, solidarity and good practices of learners and reinforcing capacities of a team or a group;
- Supporting learners in identifying and explaining their learning outcomes (Youthpass);
- Ability to work with participants' expectations to learn;
- Incorporating coaching and mentoring practices and processes.
- Ability to incorporate the intercultural factor includes:
- Knowing the geopolitical and intercultural dimensions of the EuroMed area in the learning process;
- Understanding the cultural factors to face them in an objective and constructive way;
- Being flexible to adapt to the reality of youth work in EuroMed;
- Being able to take into consideration while choosing a method, the geographic context - knowledge about religious beliefs and political matters - language, etc;
- Ensuring an active intercultural learning environment;
- Supporting learners overcoming barriers based on cultural differences in their learning process;
- Understanding differences and commonalities regarding the terms "individual" and "group".

Support/ Accessory COMPETENCES

EuroMed Specific COMPETENCES



#### 2. Learning to learn

CORE COMPETENCE Understand and facilitate individual and group learning processes

- COMMON COMPETENCES
- Assessing one's own learning achievements and competences;
- Identifying learning objectives and pursue them pro-actively;
- Openness for flexibility and readiness for learning and unexpected learning;
- Identifying and organising appropriate resources to support individual learning.
- Support/ Accessory COMPETENCES
- Developing a clear process with adequate methods in order to help participants in learning to learn - focus on learners;
- Being able to recognise the self-directed learning process and transfer it to one's personal, professional and social life;
- Identifying most effective learning methods for oneself;
- Integrating formal, non-formal and informal education;
- Attending to the needs of young people with fewer opportunities.
- EuroMed Specific COMPETENCES
- Incorporating the cultural element;
- Integrating the diversity of learning methods, ways and rhythms stemming from different cultural and educational backgrounds;
- Taking into account and applying socio-cultural adaptations in the training activity in the EuroMed region;
- Considering educational systems in the EuroMed context.



#### 3. Design educational programmes

CORE COMPETENCE

COMMON

COMPETENCES

- Design educational programmes
- Developing an educational approach based on the key-concepts, values and consolidated practice of non-formal learning;
- Knowledge and understanding of the values and purposes of youth programmes and policies;
- Identifying appropriate ways and methods to address the values and purposes of youth programmes and policies in an educational activity;
- Linking current developments in the policy areas and in society with the educational activity;
- Integrating ICT, e-learning and related tools and methods into the educational activity;
- Designing an evaluation process and impact assessment based on the needs of the stakeholders and the objectives identified, which will also support drawing relevant conclusions from the evaluation outcomes;
- Choosing and designing appropriate ways and methods for collecting, interpreting and disseminating data;
- Explaining to learners the reasoning of a methodology and its various parts and to properly debrief the exercises.

Support/ Accessory COMPETENCES

- Developing clear and measurable objectives of the educational programme;
- Providing a linkage to the community including relevant communication outside the project/activity circle;
- Being able to design and implement dissemination and exploitation of results.

EuroMed Specific COMPETENCES

- Designing the methods and programmes in a way that considers the diversity and sensitivity of the dynamic EuroMed region;
- Integrating the different educational backgrounds, values and realities to apply them in the training activity;
- Considering how learning design is different/similar in Meda countries.



#### 4. Cooperate successfully in teams

CORE COMPETENCE Cooperate successfully in teams

COMMON COMPETENCES

- Contributing actively to the tasks of a team;
- Readiness to take on responsibility;
- Encouraging and involving other team members;
- Learning with and from others;
- Dealing constructively with disagreements.

Support/ Accessory COMPETENCES

- Ability to empathise, understand situations and act appropriately;
- Developing and putting in practice common definitions of teams and team values:
- Incorporating ICT and new media for collaboration;
- Ability to give a proper space to other team members;
- Being able to cooperate with people with different training styles and personalities;
- Dealing with conflict prevention, management, resolution and transformation.

EuroMed Specific COMPETENCES

- Defining the roles in team work and division of labour within a team;
- Ability to communicate continuously regarding amendments, suggestions, urgent matters and solving issues within the team;
- Promoting the dynamic of cooperation and preparing the building of fruitful multicultural teamwork among participants;
- Providing methods and tools for preventing and resolving conflicts considering the specificities of EuroMed region;
- Developing and applying a common concept of disagreement and conflict for the different cultures of trainers and participants.



#### 5. Communicate meaningfully with others



Communicate meaningfully with others

#### COMMON COMPETENCES

- Ability to listen actively;
- Ability to be empathetic;
- Ability to express clearly thoughts, feelings and emotions;
- Sensitivity to gender-related issues.

#### Support/ Accessory COMPETENCES

- Ability to use different effective means of communications;
- Providing methods to overcome the language barriers;
- Being able to give and receive feedback principles and practice;
- Being able to agree on and apply training ethics;
- Ability to use and understand non-verbal communication.



- Language proficiency in at least one of the languages used in EuroMed:
- Promoting sensitivity to EuroMed-related issues (geopolitical, religious, gender, inter-generational, culture in general, etc.);
- Integrating knowledge of gender issues across different EuroMed realities;
- Considering gender issues in regards to culture and religious beliefs but at the same time emphasising universal human rights.



#### 6. Intercultural competence

#### CORE COMPETENCE

#### Intercultural competence

#### COMMON COMPETENCES

- Reflected acceptance of ambiguity and change;
- Awareness of one's own identity;
- Willingness and ability to take on new roles;
- Critically reflecting about and take distance from one's own perceptions and stereotypical constructions of reality;
   Self-reflection and making use of diverse ways and methods to increase self-awareness;
- Ability to apply human rights principles. (NB. Survey responses pointed out that human rights skills should stand by themselves).

#### Support/ Accessory COMPETENCES

- Fostering participants' awareness and importance for integrating an intercultural approach in their youth work;
- Ability to deal with National Agencies and other governmental bodies.

#### EuroMed Specific COMPETENCES

- Enabling participants to prepare and evaluate youth work activities with an intercultural approach;
- Awareness about the different ways people in Meda are educated and to what extent this affects their participation;
- Inclusion of gender issues within EuroMed;
- Developing a deep knowledge about the meaning of all these concepts and ability to think interculturally out of the "European box."

#### Conclusions

Competences are an indication of what is needed to perform well as a trainer. Competences provide criteria for job selection, evaluation and training. Here, knowledge, skills and attitudes for working as a trainer in EuroMed are used to describe what the individual needs to do in order to improve performance. The comparison of this information to competence definitions provides the basis for a meaningful training needs analysis to guide the development of learning objectives. In the next section, we will go through the specificities that must be taken into account in the design and implementation of a training activity in EuroMed.

#### **TOOL: C-Power Cards**

A practical peer-learning approach to recognising and improving trainer's competences in the EuroMed youth field.

#### Aims

- To support self-reflection on trainer's competences
- To identify competences to be improved
- To introduce trainers' competences in EuroMed by means of a group activity

#### Material

- Power Cards templates (10 cards per person)
- Markers (assorted colours, 2-3 per pax.)
- Scissors (to be shared)
- Rulers
- Handout with the competences (2 per team)

#### Duration

90 minutes

#### **Step by Step**

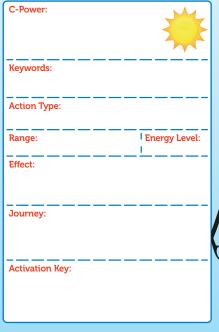
1. Participants should be familiar with the set of competences for EuroMed trainers.

Distribute handouts of the competences so as to have a list of competences to select

2. Print out and distribute card templates to the participants while explaining that trainers' performance can be changed by playing a game called Competences Power Cards to identify competences, their main features and how to increase its powers. Allow 5 minutes.

You may use the following text to introduce the activity:

The Power Cards are used by the SET (Super EuroMed Trainers) to access a variety of powers. With the aid of special Power Cards, the SET are able to control the earth's elements to use in their help, and also give them access to amazing training moves, hi-tech tools, massive facilitation powers and the ability to combine these powers into holistic competence development to help them perform in various training contexts. Each card holds a different power. Once the card is paired, shared and discussed with other SETs, it will activate the effect of the card.





3. Explain the following card headlines on a flip board (5 minutes):

C- Power	(Choose one competence per card)
Keywords	Use max. 5 keywords to describe its practical application
Action type	What for? Identify a specific training situation
Range	Core - Common - Support - EuroMed-Specific - Other
Effect	What can I accomplish in my training by using this competence?
Present energy level	Assess your competence from 0 to 10
Journey	Which steps will/did you follow to gain this power?
Activation Key	How do/will you know you have gained it?

- **4. Ask each participant** to fill in 3 Power Cards for competences they would like to gain or improve, and 3 more cards for competences they already have. Allow 20 minutes for individual work
- 5. When they have finished creating the cards, tell them to go in groups of 5 pax. max. to share the information in the cards with the competences they already have.
- **6. If necessary ask participants** to switch groups every 5 minutes (2-3 rounds) so that they can meet as many people as possible.
- 7. Once they have checked on the current powers, explain that the task is to find other trainers that have cards with the "Super Powers" they need and get their support to check and organise their future "training moves" to gain that competence. Each person needs to find at least 2 people that could help him/her out to gain the competence on one of the cards (25 min).
- 8. Afterwards, lead them to a debriefing activity in plenary (25min).

#### Debriefing

- Please tell briefly which competences have you chosen? Why have you chosen those competences?
- How many people have chosen that competence? Why? Why not?
- Did you find it easy to describe a competence?
- Why do you think they are relevant to your training practice in EuroMed?



- How can you tell that you have gained that competence? Is it the same for every one?
- Can it be related to other competences?
- Please, suggest other ways we can use the Competence Power Cards.

**Adaption:** This activity can be developed further into a personal action plan by identifying competences and filling in the cards to track, document and validate the learning. The activity introduces the role of the dialogue partners that can be useful in a long-term learning strategy or all the way through the training activity.

**Tips:** This activity is suitable to collect information on indicators for competences by checking on what trainers tell they do to have a competence. It can be applied to reach a consensus on how to recognise and assess competences. It is recommended to focus either on the core and common competences or to work directly on EuroMed-specific ones, according to the learning needs of the group.



#### **Section 4 - EuroMed Training Specificities**

This section aims to explore the specificities of being a trainer in the EuroMed region by looking at the current realities and challenges. The intention is to approach it from a practical perspective to offer trainers a checklist of relevant issues and elements to be taken into account when designing and delivering a training activity in EuroMed. We may be tempted to resort to the concept of culture as a portmanteau word. Culture is not to be neglected as a driving force in the region. However, culture per se is too aggregated and multidimensional. An attempt to isolate some key aspects may prove more helpful to picture these realities beyond the cultural umbrella.

#### What is different/specific about trainer competences in the EuroMed context?

- Understanding the subtle geopolitical issues and cultural background of the participants and the area and being able to adapt to them;
- Intercultural differences in EuroMed with in depth understanding and knowledge;
- Not necessarily different competences, but rather specific competences such as awareness and understanding of geopolitical and social matters as well as cultural sensitivity and the ability to contextualise youth activities;
- Interreligious dimension;
- Specific relevant topics and themes related to EuroMed;
- Policies and framework for cooperation;
- Readiness to be flexible and open minded.

Answers from participants at the "International Conference of Active Trainers in EuroMed Framework" (October 6-11, 2013)

Let's have a look at the various realities that affect the way training activities are delivered. <sup>15</sup>

#### Political Framework

- Lack of official national youth policy for the EuroMed area.
- Generational gap shown between the ruling class and the vast majority of young people with limited access to legitimate channels of political participation.
- Political participation is reflected in the needs and demands of young people during the recent Arab Spring movements.

<sup>15</sup> For more details consult the document SALTO-YOUTH (2011). EuroMed Resource Centre, "Supporting Learning: Long term training course in EuroMed" and "Council of Europe (2010). Mosaic-The training kit for Euro-Mediterranean youth work".

- Absence of an open structured dialogue in Meda countries to canalise the demands of young people.
- Political situation in both MEDA and EU countries has been affected by the economic crisis and the political changes resulting from the Arab Spring.
- Geopolitical issues are inherent to EuroMed where many unresolved historical disputes keep conflicts latent.
- Democracy, participation and human rights have become more relevant in the light of the current situation, though the perspectives and approaches to addressing them may differ depending on the country and current political situation. There is no "one size fits all" formula to deal with these issues.

#### Demographics

- Youth is the largest segment of the population in EuroMed.
- Differences between urban and rural youth have an impact on social development, leading to internal migrations to cities in detriment of rural development.
- Young rural migrants facing similar situation as in Europe with minorities at risk of exclusion as a result of marginalisation from mainstream social values and practices.
- Higher inequality in income distribution between rural and urban youth, and Meda and European youth.
- International immigration between Meda and EU countries has become an important factor affecting societies in EU and Meda countries

#### • Family & Society

- Early independence from family has been curtailed by the economic crisis on both shores of the Mediterranean.
- Strong family bonds serving as social safety nets for young people both in Southern Europe and Meda.
- Clash between traditional and Western values, especially in rural areas.
- Gender roles: women and girls are considered as a vulnerable group subject to discrimination in Meda countries. This discrimination is often supported by local cultures, traditions and educational systems based on patriarchal values.
- Sexual orientation issues and LGBT rights are not publicly discussed in Meda countries. Strong religious and cultural values support heteronormativity. Same-sex sexual relations remain illegal in Meda countries, although the laws are not usually enforced.



#### • Education

- Official compulsory schooling ending at 16-18 years old depending on country.
- High rate of absenteeism/drop-out in Southern Europe, and rural areas in Meda countries.
- Growing number of private educational facilities at the expense of the public education system is affecting equal access to education.
- Gender equality in education, though promoted by the governments it is not always fully enforced.
- Large gap in the use of ICT in education between Europe and Meda countries.
- Understanding of non-formal education is often unclear and depends on the realities of the country. Whereas in Europe it refers to lifelong learning and is considered complementary to formal education, in Meda NFL may be understood as an alternative for those who do not have access to the education system.
- Recognition of NFL activities is still a pending issue. Youth in Action Programme countries have the Youthpass as a recognition tool, but a similar instrument is still missing in EuroMed.

#### Labour Market

- Increasing income gap between Europe and Meda countries, notwithstanding that young Europeans' situation has also worsened due to the economic crisis.
- Serious youth unemployment problem both in Southern European and Meda.
- Similar transition from school to work in Southern Europe and Meda, resulting in higher youth immigration rates, precarious work and unemployment. Unemployment reaching more than half of the youth population in Southern Europe and Meda.

#### • Religion

- Religion permeates all aspects of life in Meda societies and have an impact on the way young people and youth workers interact.
- Although 3 major religions are present in EuroMed, coexistence often represent a challenging and delicate matter that provoke tensions and conflict among different communities.
- Religious diversity is also a relatively new trend in EU countries due to increasing immigration from the South.
- Strong religious values are inherent to social life in Meda countries, conditioning behaviours, relations and the overall community life.



Reflecting on EuroMed Specificities (The work of trainers)..."promotes the essence and spirit of working in the EuroMed programme, when many common and generally comfortable European topics such as youth participation, democracy, citizenship, faith, gender and sexuality can become extremely uncomfortable in the EuroMed context."



Extracted from the conclusions of the TOTEM II final report

Do you agree? Are there unconfortable topics?
 If so, how can a trainer address them?

#### Conclusions

It goes without saying that by trying to find some general trends in EuroMed, generalisation may lead us to falsely assume that what is true of one group of people is true of all people in EuroMed. It is strongly recommended to research on these key factors to reach a deeper knowledge on each country and region, so as to avoid neglecting the personal aspects of individuals in your training activity.

Votes	
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#### TOOL: Mind the Map in EuroMed:

A collaborative concept-mapping activity to explore, inquire and share information about the specificities of being a trainer in the EuroMed youth field.

#### Aims

- To explore the different aspects and realities in EuroMed youth work
- To exchange information from different perspectives
- To find a common understanding about the realities in EuroMed in order to address them in a training activity

#### Material

- Flipchart sheets (1 per team)
- A4 white sheets (2 per team)
- Post-it notes with keywords
- Markers
- Computer with Internet access
- EuroMed publications

#### **Duration**

90 minutes

#### Step by Step

- **1. Divide the participants in small working groups** (4-6 pax) with a balanced number of members from Meda and EU countries.
- 2. Distribute 1 keyword written on post-it note and 1 piece of A4 paper:
  - Young People
  - Language
  - Demographics
  - Education
  - Religion, etc.

- Political Framework
- Financial resources
- Family
- Labour Market
- 3. Ask each team to write 10 questions about the keyword they received in relation to the specificities of being a trainer in EuroMed. (15 minutes)
- **4. Collect the questions** and the post-it notes.
- 5. Prepare a large piece of paper or flipchart sheet with a keyword (either with a post-it or written) in the centre and distribute it to the groups making sure that they receive a different keyword from the one they used to ask the questions
- **6.** Explain that now the activity will explore the connection between the keyword and the specificities of being a trainer in EuroMed using a mind-map (use template below if necessary) and the questions the other groups have prepared for that keyword.
- 7. Allow 40 minutes for them to make the mind maps. Tell them that they have to be as clear as possible and both the connections between the keyword





and the topic and the answers to the guiding questions have to be included. If available, a computer with internet access and some publication can help them to research on the different keywords.

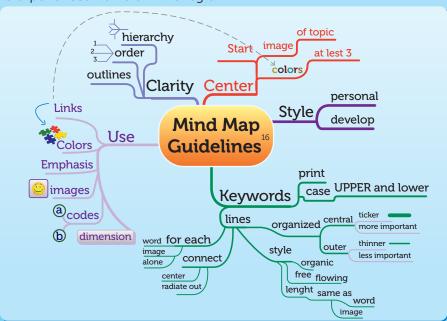
- 8. Invite the teams to share their mind maps. Ask them to take notes of everything that is not clear or about anything they would ask or share.
- 9. Lead them to plenary for debriefing.

#### Debriefing

- What was easier: to ask the questions or to find the connections in the mind map?
- Did you succeed in including all the answers in the mind map? What was missing or remained disconnected?
- Was it helpful to clarify the links and the situation in EuroMed?
- What was the most interesting point in your mind map? Did you get new information about training in EuroMed?
- How can you apply the information you learnt? Is it useful? How?
- What was the purpose of making other groups ask questions? Was it useful?
- What are the conclusions you can draw about being a trainer in EuroMed from the discussions and mind-map exercise?

#### **Alternative**

Instead of asking questions and focusing on one single aspect, distribute all the keywords to every group and ask them to produce a general mind-map. This will provide a more comprehensive, though much complex approach, especially for more experienced trainers in the region.



<sup>&</sup>lt;sup>16</sup> Source Wikipedia. Retrieved 10.03.2014 http://en.wikipedia.org/wiki/Mind\_map



#### **Section 5 - Conclusions and Recommendations**

As far as we have seen, a trainer in the EuroMed youth field needs to be competent to cover the different specificities in this context. Awareness and sensitivity on those issues represent a minimum requirement to perform competently as a trainer in EuroMed. Moreover, these specificities are not only horizontal to any training activity but frequently constitute the core around which the training action is planned.

This can be translated into a series of recurrent guidelines on designing and implementing a training activity in the region:

- Relevance of global situation, policies, and tendencies in defining the training setting and design;
- Awareness about sensitive issues (geopolitical, religious, human rights, gender, etc.) to agree on how to deal with them during the training activity in an ethical way;
- Importance of religion;
- Role played by languages and effective communication during the learning processes;
- Strong need of conflict competences and mediation skills by the side of the trainer:
- Relevance of gender issues and human rights;
- Venues as learning tools to take advantage of the context and cultural environment;
- The effectiveness of experiential learning in guiding the participants into a process of change.

During the "International Conference of Active Trainers in EuroMed framework" participants were asked to give feedback in small groups on how to develop the required competences:

#### What are the best ways for us (trainers) to develop these competences?

- Do training locally and internationally
- To have passion for what we are doing
- Self- assessment and evaluation
- Opportunities to actively participate and run EuroMed projects Work within teams
- Research about matters relevant to training
- Job shadowing and cooperation
- Experiential learning
- Study visits
- Reflect on one's own development

Learning-by-doing approach

- Visiting trainer friends in daily life
- Coaching and mentoring

Personal development

- Specialised trainings
   Publications and research materials
- Performance questions in evaluation forms for participants
- Asking for feedback
- Keep ourselves updated about geopolitical and current situation

Answers from participants at the "International Conference of Active Trainers in EuroMed Framework" (October 6-11, 2013)



The above text box expresses very well the needs and demands of trainers in their dual role as trainers and learners. There is no single way to develop trainers' competences but a combination of learning-by-doing, collaborative learning, coaching and mentoring, and self-directed learning. Common educational criteria, minimum quality standards and a training strategy for trainers in EuroMed were also pointed out during group activities and individual interviews.

So far, we have drafted a set of minimum quality standards along with a competence profile for trainers. The profile requires further practical testing of the competences to meet the following criteria:

- Are they operational?
- Are they robust?
- Are they easily understood?
- Can we use them in our jobs?
- Do they mean the same for all of us?
- How applicable are they in our context?

Once we have validated the above questions, we can say that we have reached inter-subjective consensus on a competence profile. We have already have taken a major step forward from a trait-based general framework towards a systematic, behaviour-based and job-related approach.

#### Final remarks and next steps

In essence, EuroMed trainers do not differ from other international youth trainers. They need to acquire the same core and common competences. However, the context supposes a real challenge if they are not equipped with EuroMed-specific competences. The list of competences drafted in this publication is not carved in stone. It is intended to represent the dynamism and rapid changes that the region is facing. When looking at the competence profile proposed in this publication, it is worth mentioning that it is work in progress that must be put to the test by the trainers.

This will require further adaptation to EuroMed specificities to improve its job-relatedness. Operational definitions for each competence with its indicators are also on our to-do list for the next step. Those indicators will be discussed and examined in focus groups and we will resort to expert consultations if necessary.

This is the first approach to organising and re-constructing the rich training strategy of the EuroMed Youth programme. Although sometimes it was a bit daunting as the different phases of the Programme rendered different policy and training objectives, at the end of the day the rationale behind EuroMed always stood out: to create a shared space for participation, learning and understanding for young people from both shores of the Mediterranean.



Notes



Notes

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