



Institute for
**Public Safety
Crime and Justice**



Evaluation of BeLeave

February 2020

Authors

Valentina Lugli, Sarah Armstrong-Hallam

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Introduction

Introduction

In 2017, Spurgeons commissioned researchers from the Institute for Public Safety, Crime and Justice (IPSCJ), University of Northampton (UoN), to provide external evaluation for their gang-related intervention programme 'BeLeave', and to consult on the data gathering processes implemented for the programme. This is the final report, and builds on preliminary findings presented in our initial interim report disseminated in June 2018 and our second report divulged in October 2018. We synthesise quantitative and qualitative data for the whole cohort of participants, also presenting interviews with both parents and girls and young women (GYW) and a staff interviews. Further, we observe three case studies, considering each case in the context of the whole dataset for all three cohorts. In addition, we make recommendations for Spurgeons' future evaluation activities to ensure that processes are as streamlined as far as possible and have the capacity to generate rich and meaningful data.

We analyse the data obtained by Spurgeons in relation to BeLeave's anticipated exit outcomes:

- **Outcome 1:** GYW and their families take responsibility for the problems associated with gang-related harm, and the solutions
- **Outcome 2:** Stronger, more supportive family relationships
- **Outcome 3:** GYW have higher self-esteem and aspiration

These outcomes come from the Theory of Change adopted by the BeLeave Project, which is illustrated in *Figure 1*.

The Theory of Change develops on four practical or theoretical levels of change, with the whole overarching outcome being that **girls affected by gangs or at risk of gang**

involvement are able to identify and avoid harm.

The first level consists of **activities** that are carried out during the run of BeLeave by staff members with the girls in different contexts.

As observable in *Figure 1*, BeLeave's range of activities does not solely include one-to-ones with the GYW and their families, but looks systemically at the broader social context that the girl are enmeshed in.

Some of the delivery actions include involving girls in groups, either **experience-based**, where the young women decide what type of activity they would like to do, or **theme-based** learning groups, focussed on issues affecting the young women. These groups are organised on a regular basis, they are led by the girls and young women themselves. This ensures a co-productive environment where girls and young women are involved firsthand in the decision-making process and develop a sense of agency, feeling valuable members of BeLeave.

Other than group activities, the young women partake in one-to-ones, a safe space to discuss their feelings, thoughts and behavioural patterns, as well as somewhere where they are supported in gaining a better understanding of child criminal exploitation and related concepts. More so, the one-to-ones ensure the development of an alliance with the key worker, which might help fostering a change in mindset.

Finally, alongside one-to-ones with the young woman only, BeLeave delivers **one-to-ones with**

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the young woman and one parent, as well as **whole family sessions**, which are reflection-based and focus on relationship building.

The theory of change illustrates how the aforementioned deliverables are backed by **assumptions of change** of the girls' perceptions, awareness levels and behaviour, which are to be achieved throughout the sessions, in order to successfully reach the outcomes.

An example of these **assumptions**, observable in *Figure 1* in blue, is that thanks to the activity-based groups, the GYW will experience a positive group experience that will prompt the young woman to safely test out a different social identity and make new positive friendships. This will release tension, and the GYW will find new ways of satisfying their "buzz", looking at new hobbies and interests that will increase their self-esteem.

Throughout the programme, the girls and young women achieve intermediate **steps to the outcomes** that are to be seen as first indicators of change. The **steps** are the following, and are achieved through the different delivery methods set up by BeLeave:

- thanks to signposting the girls know where they can go for support and who to talk to;
- thanks to positive group activities the girls are more motivated to seek support
- The theme-based activities give the young women tools to be able to relate cause and effect;

- Assessment and one-to-ones ensure that the girls feel heard and are therefore able to trust and build new professional and personal relationships
- The increased trust creates a more trusting environment for young women and families to access support
- Family and individual sessions ensure an increase awareness of the young women and their families around gang related risks and signs and have more techniques and strategies at hand;
- The whole system set in place by BeLeave ensures a change in mindset in the family who now believe in change.

Eventually, throughout the activities, the acquired knowledge, and the support provided, it will be possible for the GYW to reach the **exit outcomes** posed as goals at the beginning of the intervention, namely higher self-esteem and newly found aspiration; stronger family bonds; and a sense of responsibility for the problems associated with gang-related harm and their solutions

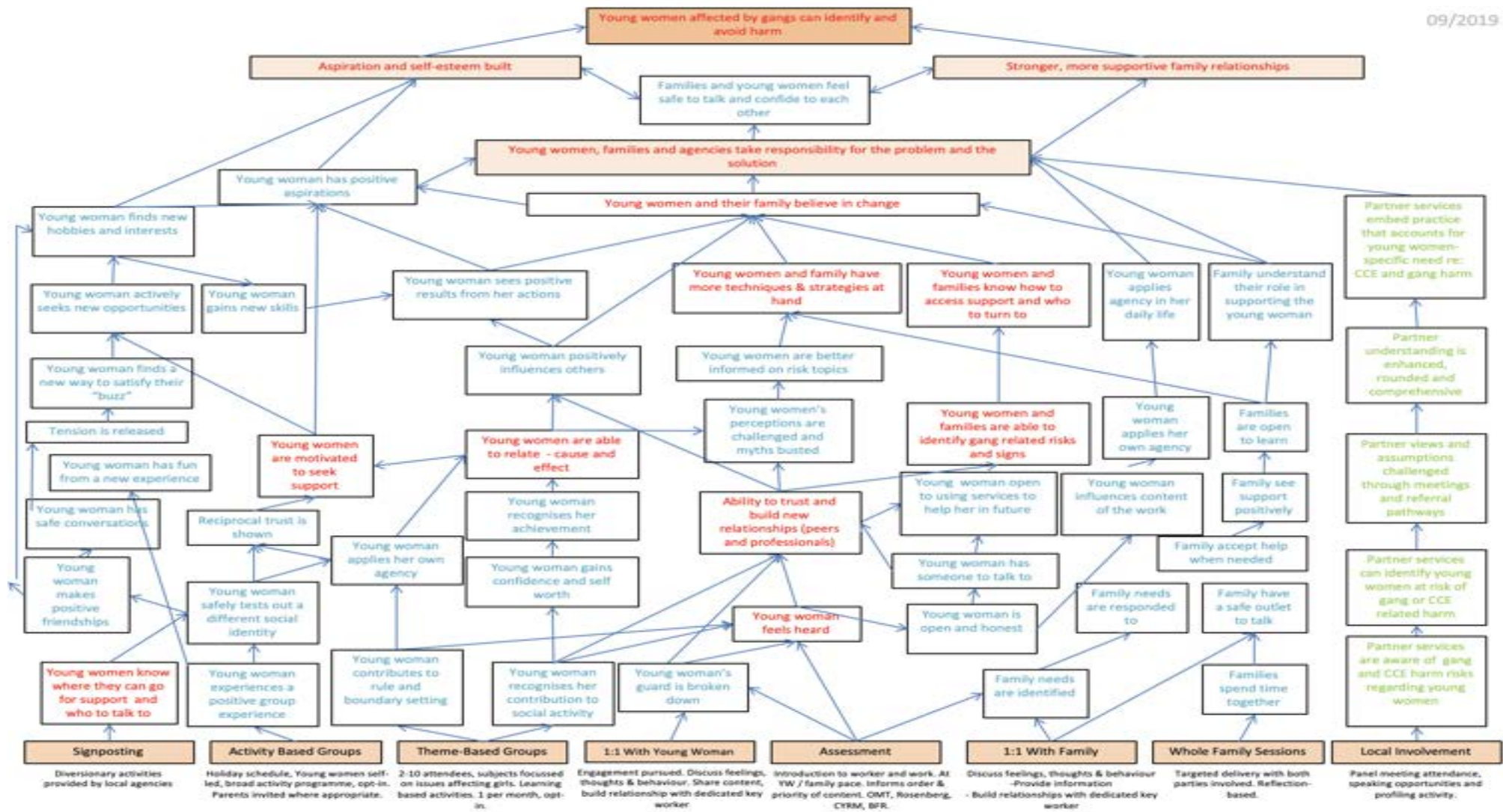


Figure 1. Theory of Change

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- Overall, the girls and young women's feedback was largely positive. The levels of expectation from the girls and young women was quite low initially, possibly due to an overexposure to social workers and other social services; the girls and young women's families also provided a positive feedback.

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- Findings obtained through qualitative and quantitative analyses, confirm that the first outcome has been successfully met, with most girls and young women's level of risk of criminal exploitation having decreased when compared to the initial referrals, and with their awareness around child criminal exploitation and gang-related harm having increased instead.
- Rosenberg's self-esteem scale and participant's feedback suggest that the participants, overall, are significantly more confident and have a higher sense of self at completion compared to baseline.
- An increase in aspirations and resilience is harder to evidence based on the data collected, however the comments from the outcome tools and interviews suggest that there are individuals who have benefitted in these areas of development.
- The third outcome has also been achieved: the Brief Family Relationship Scale, the Outcome Measurement Tool, and interviews with participants suggested that the family relationships of the girls and young women who attended the programme have positively been benefited by BeLeave. The intervention seems to have been especially useful in enhancing family bonding and communication, which in turn has also decreased the risk levels for child criminal exploitation for the girls and young women.
- Measures exploring the caregivers' feelings of family relationships indicated a higher perception of family conflict on behalf of the caregivers which was not backed by the girls and young women's results. This might be the result of an increased communication and openness in the household, that might be perceived by the caregivers as conflict instead of expression of the girls and young women's personal views and opinions.
- Two key elements of the programme that are consistently reported by both staff and service users as predictors of positive outcomes are:
 - Consistency in key-workers, to build productive relationships with participants;
 - Flexibility, tailoring not only the programme but also individual sessions to respond to the immediate and longer term needs of each of the girls and young women and their families.
- After the initial development of BeLeave due to a co-management approach, a more direct management was established through the programme. The fact that BeLeave is now directly managed by the children service's lead has guaranteed a level of continuity in data collection and provision of service.
- Staff's training is excellent, and BeLeave management regularly reviews opportunities for additional relevant training, which is partially limited by the lack of an adequate training provider

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for child criminal exploitation.

- The team are proactive and committed to a continuous betterment of the programme. This shows in their recent visit to Cape Town, which prompted new ideas to be implemented for future runs of BeLeave.
- Staff members appear to thrive in their posts thanks to the person-centred approach used in the intervention, which is reflected in their professional practice, encouraging and supporting them in the development and trial of new ideas.
- All tools required for staff to complete their jobs have been provided, and when needed professional support as well.
- The programme is well managed in terms of referrals: this has been ensured by through the work to expand the network of relationships with relevant stakeholders. This produced more awareness of the programme as a whole, which has translated into a consistent number of referral throughout 2019.
- Initial barriers to referrals included non-engagement of the families due to lack of information around the purpose of the programme. The family support worker now conducts pre-visits at the families' home, to explain the nature of BeLeave and the reason behind the referral.
- Another hindrance to referrals was the misleading name of the programme, which lead services and families to believe that the project was aimed at girls and young women already in gangs. Following consultation with the young women already involved in the project, the name changed to BeLeave and it is now more indicative of an early intervention.
- Improvements have been made during the run of the project: the focus of the programme is now not only on the twelve sessions with the girls and young women, but it also includes follow-up sessions and further chances to stay involved with the organisation, such as theme-based group sessions and working opportunities.
- A person-centred, solution-focussed type of intervention has allowed the girls and young women to take more responsibility and decide for themselves what topics to work on during sessions and activities. This has promoted a culture of co-production where girls and young women take matters firsthand and are the principal decision-makers of their own involvement in BeLeave.

Executive Summary

Literature Review

Chapter 1 – Literature Review

1. Definitions

A single, unified definition of what a gang is does not yet exist. One of the most commonly used definitions to describe gangs and their members is the one set out in the Government's Ending Gang and Youth Violence report, adapted from the Centre for Social Justice's report "Dying to Belong" (2009), which states that a gang is:

"...a relatively durable, predominantly street-based group of young people who: 1. see themselves (and are seen by others) as a discernible group; 2. engage in criminal activity and violence; and may also 3. lay claim over territory (not necessarily geographical, but can include an illegal economy territory); 4. have some form of identifying structural feature; and/or 5. be in conflict with other, similar, gangs." (HM Government, 2011)

This definition partially derives from an earlier definition by Miller (1980) which considered youth gangs as:

"...a self-formed association of peers, bound together by mutual interests, with identifiable leadership, well-developed lines of authority, and other organizational features, who act in concert to achieve a specific purpose or purposes which generally include the conduct of illegal activity and control over a particular territory, facility, or type of enterprise"

Moreover, a few key points over what gangs look like are listed in a 2018 article by Howell and Griffiths:

1. The group has five or more members;

2. Members share an identity, typically linked to a name and often other symbols;
3. Members view themselves as a gang and are recognized by others as a gang;
4. The group associates continuously, evidences some organization, and has some permanence;
5. The group is involved in an elevated level of criminal activity.

Studies around gang engagement and youth violence in general too often avoid providing a clear definition of what they consider a gang to be and what criteria they have used to define a gang in the study itself.

The US National Gang Centre provided a definition of the meaning they attributed to the concept of gangs in the National Youth Gang Survey:

"A youth gang is a group of youths or young adults in your jurisdiction that you or other responsible persons in your agency or community are willing to identify or classify as a 'gang.' DO NOT include motorcycle gangs, hate or ideology groups, prison gangs, or other exclusively adult gangs."

This definition looks at gangs from a more community-based perspective, also providing some exclusion criteria for organised groups that do not fit in their specific idea of gangs.

Factor, Pitts, and Bateman (2015) have provided some useful definitions of levels of gang involvement:

- **Gang Associated** – Interacting socially with gang members, through shared

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location, hobbies or pastimes, friendships or family links.

- **Gang Involved 1** – Not a constituent member of a gang or necessarily subscribing to its norms and values but intermittently co-opted to participate in some of its illegal activities.
- **Gang Involved 2** – Not a constituent member of a gang but coerced rather than co-opted into illegal activity.
- **Wannabees** – Aspirants who, whilst subscribing to gang norms, values, dress code, signs and signals, have not been accepted into the gang and are not involved in its illegal activities.
- **Gang Affiliated** – A constituent, lower status member of a gang, subscribing to its norms and values and participating as a “foot soldier” in its illegal activities.
- **Gang Member** – Core members with high status, subscribing to gang.

These definitions are only theoretical and it is to be taken into account that there is no one set of definitions that applies in all areas and contexts and descriptors may change over time.

2. Characteristics of Youth Gangs

Klein (2006) argued that youth gangs vastly differ from other kind of gangs and especially from their stereotyped view projected by the media and largely influenced by the US context.

Involvement with gangs appears to be short-lived and volatile (Esbensen et al., 1993; Thornberry et al., 2003). Law enforcement data

supports the stereotyped idea of a gang as composed predominantly of males from ethnic or racial minorities that live in large cities (Esbensen *et al.*, 2011). On the other hand, different surveys have challenged this information indicating that, in the US, approximately one third of all gang members are female (and the number is rising), that gangs are also a reality in more rural areas, and that the racial composition of a gang tend to be proportionate to the rate of minorities in the local area (Esbensen *et al.*, 2011).

2.1 Gender

Recent research has highlighted how there is less male dominance in gangs than that had traditionally been assumed (Pyrooz *et al.*, 2014; Howell, 2007). Empirical research has addressed whether the effect of gang membership is moderated by gender, mostly generating findings that show

“that, in general, girls in gangs commit far fewer offenses than boys in gangs, and that this gender gap is most pronounced for violent crimes” (Belknap *et al.*, 2016, p. 217).

Watkins *et al.* (2018) posits that males in gangs are involved in a greater number of crimes as well as being victims of crime at higher levels. However, the impact of gang membership on serious crime, interpersonal violence, and risky weapon carrying was greater for females than for males (Watkins *et al.*, 2018).

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Overall, data as recent as 2016 report how females typically represent <15% of gang members (National Gang Center, 2016; Chesney-Lind *et al.*, 1994; Klein, 2009). For example, the percentage of gang members who were female ranged from 25% to 35% in a school-based sample of students in grades 6 to 12 (Gottfredson *et al.*, 2001, p. 36), in the NLSY97 national community-based sample of youth initially ages 12 to 16 (Pyrooz *et al.*, 2015, p. 416), and in the Add Health national school-based sample of adolescents initially in grades 7 to 12 (Bell, 2009). Auyong *et al.* (2018) conducted a study with a sample of girls in Britain and their results indicated that ‘48.3% of gang-involved youth were girls’ (p.15). Like Belknap *et al.* (2016), they also suggest that while girls in gangs are less likely to commit offending behaviour than their male counterparts, they commit more crime than girls not affiliated to gangs. While this might be translated in practice and intervention as a need to focus on males in gangs over and above females, Auyong *et al.* (2018) maintain that the possible costs to communities of female gang-members’ offending behaviours should remain a focus of attention.

2.2 Risk factors

Young people who become involved in group-based crime and anti-social behaviour are likely to do so as a result of a complex set of personal circumstances and risk factors. The risk factors are in most cases multiple and most likely interconnected. Gang members will not have the same background or life circumstances, and

will have been exposed to a lesser or greater degree to different risk factors, but there are some commonalities which are outlined below.

Environmental risk factors:

- **Peer-pressure:** Peer influence is a major factor in the decisions made by young people to join gangs or to offend (Lenzi *et al.*, 2015; Young *et al.*, 2007; Smith & Bradshaw, 2005; Duffy *et al.*, 2004). Most research conducted confirms the idea that young people need to impress their peers and become a respected member of the group, and this is in some instances the reason behind their offending and weapon acquisition (NCH, 2008). Research has also indicated that many girl gang members have friends and siblings in gangs, as do boys in gangs (Chesney-Lind, 2013). Overall, rejection by prosocial peers has been observed as one of the most robust predictors of affiliation with delinquent groups and gangs (Howell, 2012).
- **Poverty and social exclusion:** Because of low family income, young people who experience poverty are often living in deprived areas in which the crime rates and the fear of victimisation are higher than average (Fitch, 2009). This often enhances the need of self-protection through weapon acquisition and through the formation of groups. Moreover, a heightened exposure to antisocial behaviours normalises crime and therefore enhances the probability of offending youth in deprived areas

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(Young *et al.*, 2007; Campbell *et al.*, 2000).

- **Fear and experiences of crime:** according to existing literature, the most common reason for the formation of youth gangs is the feeling of danger that many young people experience, together with their need to feel safe (NCH, 2008). Turner *et al.* (2006) found that:

“respondents explained [that] gangs were less likely to attack someone who was in a group, and that friends could offer support or run for help if something happened”

The likelihood of young people entering gangs is also affected by their own personal experience with being a victim of crime (MORI, 2004). Overall, it appears for some groups, the collective risk of offending is heightened where individual members have experienced risk factors associated with poverty and social exclusion (Young *et al.*, 2007).

- **Lack of positive stimuli:** Young people may seek excitement and companionship from peer groups as a result of boredom (Margo, 2008). The provision of positive, diversionary activities has successfully been used in the past to limit the amount of offending by children (Fitch, 2009).

Family-level risk factors:

- **Poor attachment relationship with caregivers:** as it has been observed multiple times, a disorganised type

pattern of attachment has been linked with cases of abuse, neglect or abrupt separation, as well as mental health problems and substance abuse in the child (Home Office, 2013). Failure in the development of a secure attachment with the caregiver will bring in the child general insecurity as well as an impairment in social and emotional development (Home Office, 2013).

- **Domestic violence:** children who are or have been victims of domestic violence might be more likely to resort to violence themselves whilst in their youth and all the way into adulthood (Day *et al.*; Margo, 2008). Children who have been victims of physical abuse are more sensitive to the detection of emotional cues in facial expressions (Bunn, 2006). Such children are more likely to have a “hostile attribution bias”, tending to infer greater hostility in other people’s behaviour, and to more readily resort to violence (Fitch, 2009; Crick *et al.*, 1994; Bradshaw *et al.*, 2004).
- **Neglect and abuse:** a child or adolescent that has experienced neglect, physical abuse, or sexual abuse within the family system is at greater risk of becoming delinquent (Shader, 2004). When children observe parents being violent or abused by someone else, they often utilise violence in problem-solving (Kim *et al.*, 2008). The need for acceptance within the peer group might lead them to start offending, which may have been prevented if they had had a significant

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parental figure as a present role model (Young *et al.*, 2007).

Individual risk-factors:

- **Alcohol and substance abuse:** research has shown that alcohol leads to higher levels of offending and risky behaviours (HM Government, 2007). Home Office (2007) figures demonstrate that frequency of drinking and volume of offending by young people are strongly connected. Drinking on a regular basis is likely to have an adverse effect on school attendance and performance and may increase the likelihood of permanent exclusion (HM Government, 2007), which in turn increases other risk factors.
- **Personal resilience:** according to Fitch (2009), in the face of similar risk factors, whether or not young people get involved in crime and anti-social behaviour will depend on their personal resilience, and much of this will depend on their aspirations and chances of success in life. Young people that end up not offending tend to have much higher aspirations compared to children that commit crime, and are less likely to turn to crime if they feel that they can have a positive and successful future (Fitch, 2009). According to Utting *et al.*, 2006, the use of mentoring and role models is a successful resource to prevent young people from offending by keeping focussed, and establishing positive social bonds (Utting *et al.*, 2006; Smith, 2006). Further, according to Utting *et al.* (2006):

“children who are temperamentally outgoing and friendly will tend to form positive social relationships at home and at school more easily than others, increasing their sense of self-esteem and self-efficacy” (Utting et al., 2006).

2.3 Protective factors

Research on protective factor in youth gang membership is still scarce, having developed much less than the investigation of risk factors for joining gangs (Howell & Egly, 2005).

Hall et al. (2012) have defined protective factors as *“attributes, characteristics, or elements that decrease the likelihood that violence will be perpetrated”*. In 2010, Krohn and colleagues have distinguished further between promotive and preventive factors, considering the first as contributors to a reduction of violent behaviour for those at higher risk of violence, and the second as acting on the entire population. Because of personal experiences, different protective are more or less helpful according to the background of the individual and their offending trajectory (Krohn et al., 2010).

The Early Intervention Foundation (2015) provides an overview of those protective factors that have been identified regarding youth violence, breaking them down by domain. The lack of information on protective factors specifically towards gang involvement was predicted by the lack of research on the matter. In *Table 1*. below, a list of protective factors against youth gangs is presented, as created by the Early Intervention Foundation (2015).

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Domain	Protective Factors
Individual	<ul style="list-style-type: none"> • Belief in the moral order • Positive/prosocial attitudes • Low impulsivity • Intolerant attitude towards deviance • Perceived sanctions for transgressions • Low ADHD symptoms • Low emotional distress • High self-esteem
Family	<ul style="list-style-type: none"> • Good family management • Stable family structure • Infrequent parent-child conflict • Supportive relationships with parents or other adults • Parents' positive evaluation of peers
School	<ul style="list-style-type: none"> • Academic achievement • Commitment to school • School recognition for involvement in conventional activities • High educational aspirations • Bonding to school
Peer	<ul style="list-style-type: none"> • Friends who engage in conventional behaviour • Low peer delinquency • Prosocial bonding
Community	<ul style="list-style-type: none"> • Low economic deprivation • Neighbourhood interaction • Neighbour support

Table 1. Early Intervention's Foundation 2015 protective factors

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The third section findings come from the analysis of quantitative measures which assess variables that triangulate as risks for child criminal exploitation. Interview notes from participants and staff are also used, as well as the practitioner’s notes.

The report focusses on all three cohorts who took part in BeLeave, from September 2017 to November 2019. The report is divided into three main sections, exploring the implementation of the project, the level of functioning of the process, and the outcomes achieved in the past 26 months.

The first two sections are mostly drawn from the staff focus groups, interviews with three girls and three caregivers, and qualitative assessment measurements.

The approach is only partially randomised, as the participants to interview have been selected depending on the scores they have obtained in the quantitative measures both before and after participation in the programme. This is valid for the participants interviewed from the first two cohorts, and the purpose was to enable the reader to observe in the first two reports both a negative and a positive outcome of the programme via case studies. The participants interviewed from the third cohort were randomly invited to participate.

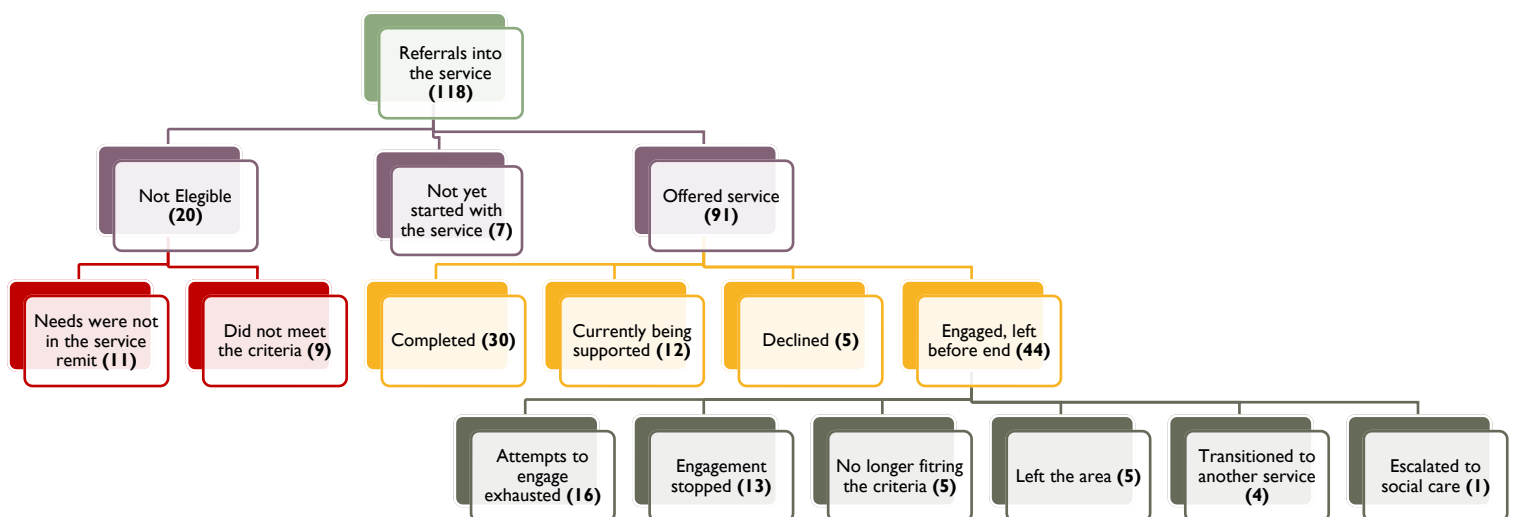


Figure 2. Breakdown of referral outcomes

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1. Participants

To date a total of 118 girls and young women have been referred into BeLeave. Of those, 91 have been offered the service, whereas in 20 cases the girls were not eligible either because they did not meet the criteria, or because the needs were not within the service remit. In 7 instances, the case had not yet started at the time of the study.

Of the 91 girls and young women who have been offered the service, 44 have engaged but left before the end; 30 have reached completion; 12 are still on the programme at the time of the report; and 5 have declined the service (See Figure 2).

More specifically, out of the 44 participants who have engaged and left before end, 16 were excluded because of a lack of successful contact with the families; 13 stopped engaging; 5 had relocated and were no longer within the area of service; 5 no longer fitted the criteria; 4 were transitioned to another service; and 1 was escalated to children's social care (see Figure 2).

The average number of days participants were a part of the programme was of 166 for completers and of 73 for those who engaged but left before end (see Figure 3).

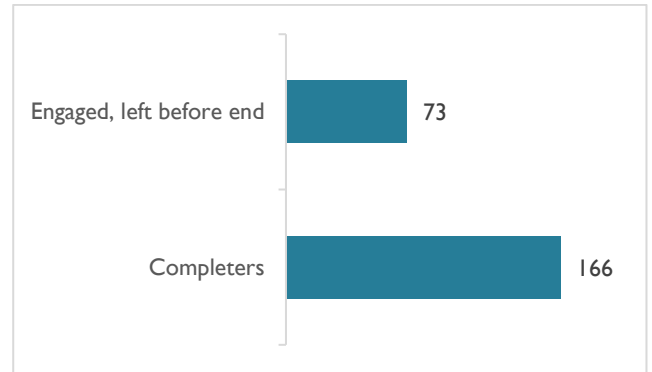


Figure 3. Average number of days participant remained involved in the programme

2. Quantitative data

Quantitative data includes pre-intervention and completion data for four measures: Rosenberg Self-Esteem Scale (Rosenberg, 1965) (also administered mid-intervention); Child and Youth Resilience Measure (CYRM) (Resilience Research Centre); Child and Youth Resilience Measure – Person Most Knowledgeable (CYRM-PMK) (Resilience Research Centre); and The Brief Family Relationships Scale (BFRS) (Fok et al, 2014). Measures have been administered by Spurgeons' case workers to GYW (and their families) participating in BeLeave at two time points (at the start and at completion). Rosenberg's Self-Esteem Scale has also been administered to the second cohort of participants as a mid-point assessment of self-esteem. Introducing a mid-point assessment was suggested as a recommendation by the IPSCJ team in the first interim report, in order to better capture the progressive development of the GYW, as the end-point scores might not always reflect the GYW's journey completely.

Whilst a mid point measure is useful to demonstrate critical points for change, in this instance it was found to be too onerous and

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therefore unsustainable for this client group. For this reason, the mid-point assessment has not been taken into account for the purposes of this evaluation. Anonymised data has been inputted into a spreadsheet and shared by Spurgeons with the University's research team.

As part of the quantitative data, demographic information has also been shared with the IPSCJ and utilised to observe the reach and breadth of participation.

3. Qualitative data

3.1 Outcome Measurement Tool

Qualitative data takes the form of the Outcome Measurement Tool, in which are inputted notes around different dimensions before and after the girl or young woman (GYW) has participated in the programme. The Outcome Measurement Tool has changed between the second and the third cohort, when decisions were made to modify it to make it more effective.

The initial Outcomes Measurement Assessment Tool was divided into the following categories:

1. Ability to identify risky/exploitative behaviour
2. Association with risky peers/adult
3. Family (significant others/carer) and the young woman's relationship
4. Change is possible
5. Confidence
6. Self-Esteem in the young woman

The assessment finishes with an overall professional judgement comments column. Each of the categories was divided into sub-columns in which was stated the opinion of the

girl, her family, and the key worker who was assigned to the case.

In the new Outcomes Measurement Assessment Tool, the column dedicated to the overall professional judgement was removed. The other categories were renamed also:

1. Gang related harm and CCE: Generally what is your understanding of criminal exploitation and gangs?
2. Family (significant others and carer) and the young woman's relationship: How would you describe your relationships with your family?
3. Emotional Wellbeing: Confidence and Self Esteem: How would your/your child's self-esteem and confidence?
4. Change is possible: Have you noticed any recent changes to parts of your / your child's life?

These categories better reflect the deliverables initially agreed. The rationale behind this strategic decision was to enable a more efficient, accurate and accessible format for practitioners, girls and young women and their families.

At the same though, reducing the number of categories from six to four, also meant that valuable variables such as confidence and self-esteem were now not individually assessed, and that there was no longer a qualitative tool allowing for reflection on the actual level of risk of the girl associating with risky peers and/or adults.

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3.2 Interviews and focus group

In order to obtain a professional opinion around implementation, process and outcomes of BeLeave, we asked the staff to participate in a focus group. Staff members were Spurgeon's Children Services Lead, the family support worker, and the administrator of the project. The aim of this was to discuss their overall perceptions and experiences of working with the project, considering the delivery of BeLeave activities alongside the set outcomes and how useful they perceived it to be for the GYW participating in it. The interview schedule is available for this consultation in *Appendix A*.

The interview used for the GYW and their family is also available in *Appendix B*, and follows the same format as the staff one, to explore the same concepts from different perspectives and to look at different ways in which the project was experienced.

A total of six participants were contacted for the interviews. Three of them were selected by the IPSCJ as they were chosen for case studies in the interim reports. Three others were part of the third cohort, and were randomly chosen.

All contacts were made with both the GYW and their primary caregivers, with the hope of interviewing both, separately.

Overall, 3 GYW participated in interviews and 3 caregivers. As for the others, 1 family was not traceable, 1 caregiver could not be interviewed due to a language barrier and others were either busy or not available up to the 4th attempt to arrange a call.

Our initial report analysed data for seven clients from the first cohort to have completed

BeLeave, and the second report centred on the 5 clients from the second cohort to have completed.

In this report we consider the three cohorts together as one: this is helpful for obtaining statistically significant results, to more effectively assess the impact of BeLeave on the GYW and their families.

4. Ethics

Our evaluation was granted ethical approval from UoN's Faculty of Health and Society Research Ethics Committee. Spurgeons were responsible for obtaining informed written consent from their clients, inviting each family to complete a fair processing consent form to enable client data to be shared by Spurgeons for the purposes of audit and evaluation.

Spurgeons password protected and securely transferred data to the research team where it was stored securely on the IPSCJ's encrypted SharePoint. To ensure participants' identities remain anonymous, names, locations and other potentially identifying characteristics have been omitted from our dissemination.

5. Data Analysis

We conducted a statistical analysis of quantitative pre-intervention and completion data for participants of all three cohorts combined. Moreover, we have produced a qualitative and quantitative analysis of the overall outcomes, which provides generalisable results to assess the programme's impact.

All quantitative data has been analysed using the scoring instructions for each measure, and

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statistical testing has been run with the Statistical Package for Social Sciences programme (SPSS).

We selected three cases who have completed BeLeave based on the examples they provided across the dataset of a 'typical', 'extreme' or 'intrinsically interesting' case (Denscombe, 2006). As in previous reports, a case study approach has been adopted (Denscombe, 2006; Robson, 2003; Miller & Brewer, 2007), drawing together quantitative pre- and completion data from girls and young women and their caregivers and practitioners' case notes from each case. This approach allows us to build a picture of GYW's journeys through BeLeave as well as the opportunity to consider the possible impact of BeLeave at an individual and a family level.

Chapter 3 – Case Studies

Case Studies

Chapter 3 – Case Studies

CASE STUDY 1 – CHARLIE



- **Age: 12**
- **Referrer: School**

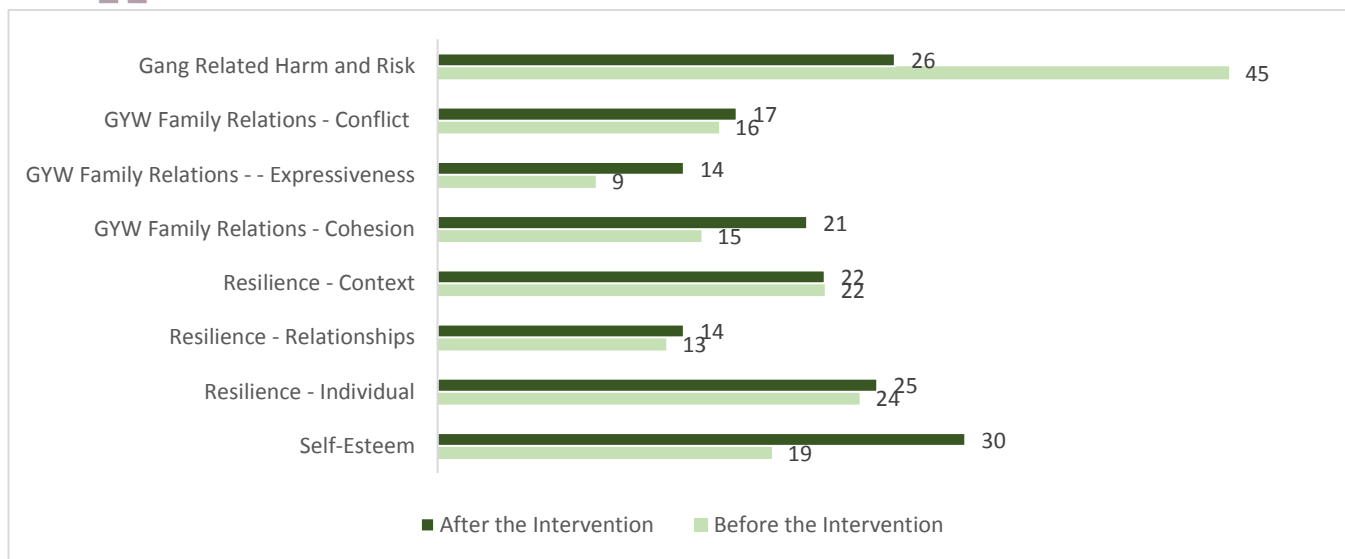


Figure 4. Charlie's scores before and after the intervention

Charlie's self esteem score increased by 11 points from baseline to completion, which might indicate an improved internalised sense of self-worth. When compared to other participants, her scores take her from a lower than average rating of self-esteem to a very high rating.

Charlie's home environment appears to have improved by the end of the programme. This is shown by the Brief Family Relationship Scale (BFRS), which shows higher improved **cohesion** (impact= +6), as well as a better environment at home, with a stronger **communication** between family members (impact= +6). **Conflict** has also slightly increased (+1), which reflects a trend seen in the whole BeLeave population, and which might indicate that an increased dialogue within the family might highlight differences in opinions, which are perceived as conflictual.

An increase was observed in the constructs constituting the Children and Youth Resilience Measure. Charlie scored higher at completion in **individual resources and skills** (impact= +1), and **relationships** (impact= +1) compared to baseline. This might indicate more positive family relations, which is also backed by the BFRS.

The GYW presented a high level of risk of **gang-related harm** before the intervention. At completion, such risk de-escalated to medium (impact= -19).

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BASELINE

- “The girl indicated that she is aware of gang members in the park where she goes but did not elaborate to what extent and if she had any direct involvement. The girl stated that she has smoked Cannabis and I will ascertain if this is still the case during my intervention and try to unpick what the young woman means by the terminology “Its Helped””
- “Mum said that the Young Person does talk to her but only really talks about school stuff and no mention of friends.
Mum feels that the Young Person is scared to trust others and explained that the Young Person had been bullied in her previous school and expressed that because of this the Young Person will make friends too easily just to have friends and feel excepted.”
- “The young woman played the [musical instrument] until the last year of Junior school and often played solos. This stopped when the young woman started high as it wasn't really cool. The young woman said that she used to enjoy horse riding sessions although has not wanted to go.”

COMPLETION

- “The young woman said that she stays away from the park and the back [school] gates. The young woman informed me that she no longer smokes or uses cannabis and states this is because she doesn't see the point.”
- “The Young Person demonstrates that she feels more comfortable talking to her Mum and sees her being a support network. The Young Person seems to have a new supportive friendships where she feels comfortable. Family - Mum and Dad have shown that they can parent collaboratively to support the Young Person and have appropriate boundaries in place.”
- “The young woman is now part of the school netball team and says that she enjoys going. The young woman said that she is thinking about piano lessons in school.”

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CASE STUDY 2 – RIA



- **Age: 13**
- **Referrer: School**

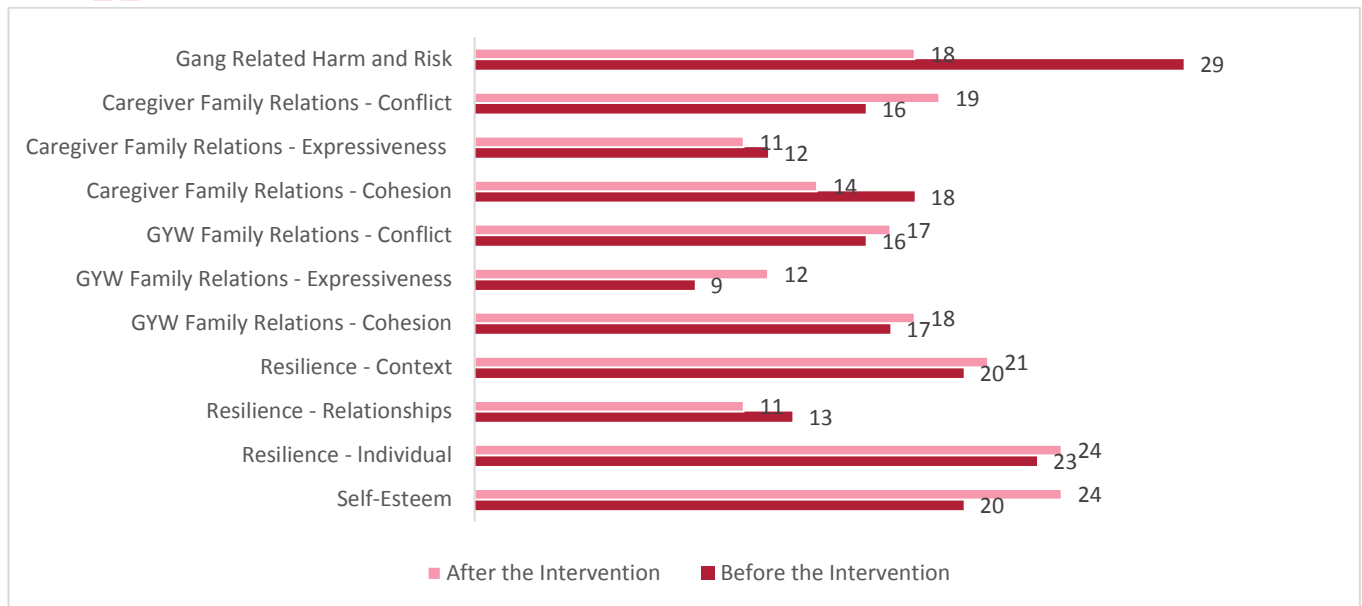


Figure 5. Ria's scores before and after the intervention

In line with the general data, Ria's self-esteem level, measured with Rosenberg's Self-Esteem Scale, has improved, going from a score of 20 to a score of 24 out of 40.

Ria's resilience seem to have partially improved after taking part in the programme: where the scales assessing **individual** and **contextual** skills have increased at completion (impact= +1), the scale assessing the **relationship with the caregiver** has instead decreased at end-point (impact= -2).

The results observed in the Resilience Scale are backed by the Caregiver's responses to the Brief Family Relationship Scale: Ria's mother believes that, at completion, there is less effective **communication** (impact= -1); less **family cohesion** (impact= -4); and more **conflict** (impact= +3). Ria also perceived more conflict in the house at completion compared to baseline (impact= +1), but also more **communication** (impact= +3) and **cohesion** (impact= +1). This might mean that an increased communication and openness between family members create new settings for verbal exchanges that, despite being positive in terms of communication, are perceived as conflictual.

The GYW presented a medium level of risk of **gang-related harm** before the intervention. At completion, such risk de-escalated to low (impact= -11).

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BASELINE

- **“Mom does not seem to think young person is at any risk. I don’t fully agree as I think she is quite vulnerable at the moment, being isolated from her friends at school and she may be looking for somewhere to belong..”**
- **“Young woman speaks more too friends than family as does not want to be a burden. The last time Young Person felt happy was a few days ago watching Netflix with her Sister and Mother and spending time as a three.”**
- **“There have also been occasions in which Young woman has neither been at school nor home. This is something I would like to work with Young woman about as this could have serious harmful consequences as well panic for Sister and Mother.”**
- **“According to Sister, young woman does have self-esteem issues but it doesn’t affect young woman’s life.”**

COMPLETION

- **“Young woman states that they have changed who they surrounded by and feel much more able to say how they feel and think without being judged so much as before.”**
- **“Mother shared that they will always have different opinions on things but generally they are working more together.”**
- **“The young woman feels she still has the power to make her own choices but this is done with more thinking and not just reactions to things or people.”**
- **“Mother and Sister shared seeing an improvement with the young woman in that they are focusing on how they are doing and speaking more about positive feelings about themselves and others.”**

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CASE STUDY 3 – TAYLOR



- **Age: 14**
- **Referrer: School**

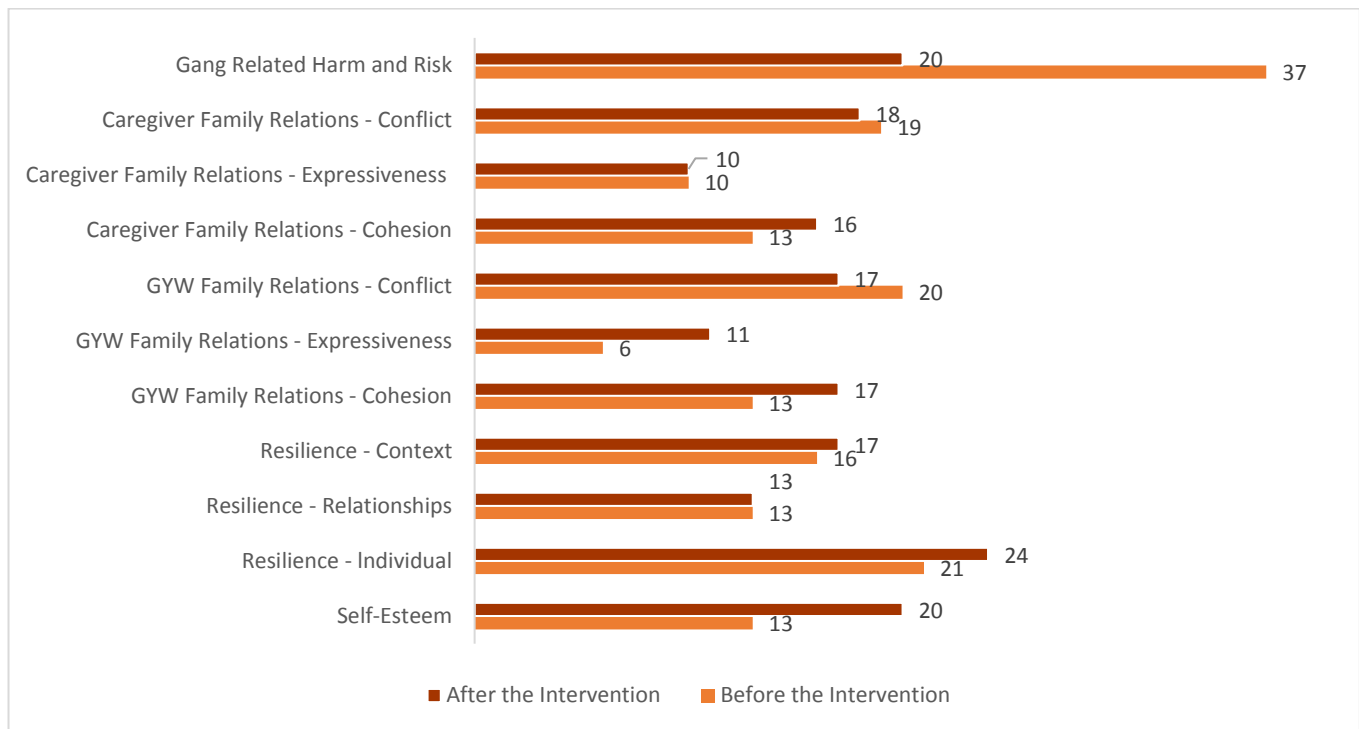


Figure 6. Taylor's scores before and after the intervention

Taylor's self esteem score increased by 7 points from baseline to completion, which might indicate an improved internalised sense of self-worth. When compared to other participants, her scores take her from a lower than average rating of self-esteem to medium sense of self-worth.

An increase was observed in the constructs constituting the Children and Youth Resilience Measure. Taylor scored higher at completion in **individual resources and skills** (impact= +3), and **context** (impact= +1) compared to baseline. This might indicate that Taylor is now more grounded and integrated into her environment, with a more positive perception of herself within the society, which is backed by Rosenber's self-esteem scale's results.

Taylor's home environment appears to have improved by the end of the programme. This is shown by the Brief Family Relationship Scale (BFRS), which shows higher improved **cohesion** (impact= +4), as well as a better environment at home, with a stronger idea of **communication**(impact= +6), as decreased **conflict** between members (impact= -3). The same is reflected in Taylor's caregiver's answers to the Brief Family Relationship Scale.

Taylor presented a medium level of risk of **gang-related harm** before the intervention. At completion, such risk de-escalated to low (impact= -17).

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BASELINE

- “Mom does not seem to think young woman is at any risk. I [social worker] don’t fully agree as I think she is quite vulnerable at the moment, being isolated from her friends at school and she may be looking for somewhere to belong. Mom told [social workers] about an incident that occurred this time last year. Young woman got into a fight and the police became involved. Police told Mom at the time that young woman was actively involved in a gang.”
- “Young woman doesn’t communicate with her family and said she doesn’t really speak to anyone about how she is feeling. She said her mom tries to speak to her but she doesn’t like talking to her.”
- “It seems like young woman can see when changes need to be made, but I [social worker] am concerned that something as serious as the Police involvement wasn’t enough to prompt the change.
- “Young woman feels confident when she has make up on and feels her confidence comes from her appearance more than anything. She said she didn’t feel she was good at anything but also wasn’t bad at anything either.”

COMPLETION

- “Young woman is aware of local gangs but has no involvement. Young woman is very aware of abusive/exploitive behaviour as she unfortunately experienced this first hand where she was bullied and physically attacked in the local community and surrounding areas. She doesn’t hang out on the streets but stays in at her friend’s house.”
- “Young woman shared with me that she has more respect for her Mom since having joint sessions. This was due to her Mom becoming emotional regarding an historical situation which she had not known about. Young woman has recently become close to her older sister since discovering she is suffering from depression.”
- “Young woman has made lots of positive changes in her life; she’s changed her friendship group, where she hangs out and her attitude at School and home. These changes have resulted in her coming off School report, having a better relationship with her family and keeping out of trouble in the local area.”
- “Young woman was able to tell me that she likes the person that she is and puts a lot of value on this, resulting in her having a healthy self-esteem.”

Implementation

Chapter 4 - Implementation

In this section of the report, the focus will be upon the initial development and implementation of BeLeave. The findings will be mainly drawn from the focus group with staff members, and supported by participants' interviews and practitioner's case notes.

Overall, after an initially challenging start, the programme is perceived to be running well. The initial flexible approach of the programme was perceived by staff members as unclear, lacking structure and direction. For those with less experience in some areas that's sessions needed to address, this translated to a sense of low competence which in turn impacted in confidence.

However, this was early in the programme and a change of management and a different mindset towards the programme, in particular ways of interacting with clients and the development of toolkits that inform sessions without creating fixed content. The staff consider the programme to have now developed very good communication and flexible forms of interactive methods. This is supported by the participant's perceptions of it, which were overall also very positive.

Further, members of staff all feel widely supported both by their team and by their line managers. They also feel like they have received, or are about to receive, all the training necessary to effectively execute their roles.

1. Expectations

When asked about their expectations around the programme before starting, and whether these had been met, most of the interviewees answered positively.

Staff members reported that their initial expectations were mostly met. In one instance, the initial feeling was of concern in terms of being able to take on the job, which came from staff having supporting experience only. The uncertainty was mainly driven by the very flexible nature of the programme, which is now considered by the staff member as the main strength of BeLeave instead:

"A lot of it came from... so my previous manager, he helped quite a lot because we don't have a generic set intervention, because at the end of the day every child is different - so we don't have any set intervention. I like that, that was the one thing that I thought, it was difficult at the beginning for me because... I didn't really know how to run sessions because I had never done it before, I had only done it in a supporting capacity."

"The tutor (manager) sort of said to us – you have free range within reason, it was quite nice in the end."

Another member of staff, however, pointed out that for them expectations around data provision were not met at the point in time in which they joined the team, and that this created some technical issues that were cumbersome to deal with:

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“For me it was around the expectations [not being met], so what we expected we had we didn’t have. So that is in terms of data. I knew what we could achieve and where we were going to go, so I was alright with that... It’s just that I didn’t realise the struggle, what had happened in the early days with the data and that it would impact us now.”

These issues presented themselves following staff turnover, some of whom developed the programme and ran the first cohort. However, a change in management prompted a more effective way of dealing with data collection, which also motivated a change in the administrations of some of the assessment tools:

“In terms of the packs of tools and assessment tools, they have changed quite a bit. The names of the tools and the tools haven’t changed, how frequently we use them is what has changed. There is no middle assessment anymore, because it was a bit of a struggle to fit them in. It is also not useful information because it sometimes repeated and from a research point of view is no information is not useful but actually we were finding that it didn’t really show the impact that we wanted to see. So now we are only doing the start and finishing measures. We have streamlined our own Outcome Measurement Tool that we have designed in Spurgeons to support the more internationally known like Brief Family Scale and that sort of thing.”

BeLeave participants report that their expectations have been met. In one instance, especially, the girl’s expectation have been exceeded, showing how staff member are able

to create a non-judgmental and safe environment that fosters trusting relationships, one of the desirable outcomes of the programme:

“I was like scared, because they would judge me for how I look and who I am.”

“It was different [to that], they treated me well.”

On the other hand, another client mentioned an issue, raised by members of staff too, to do with an initial lack of confidence in the programme due to an overexposure to social service figures and other social care bodies:

“Erm, I never had any really because I had quite a lot of workers before that and they kept changing me.”

Her opinion of BeLeave eventually changed thanks to the consistent presence of the family support worker throughout the weeks, which fostered some feelings of hope:

“It was good that I could do different things every week with the same person, I was happy she came around and it was good that I could take part in it.”

2. Tools and training

All three staff members agreed that the tools and procedures they use were readily available when they joined and that they are up to date:

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“In terms of whether that is up to date, I think it is, because we’re keeping it so person-centred and so specific for the individual, that for me is keeping it up to date.”

Moreover, despite not being well implemented at the beginning, processes of data storage have also quickly changed as soon as the project administrator joined the programme, making filing data easier:

“In terms of the tool when C. started in July we had a look at setting up different folders so for example a set folder for self-esteem, a folder for the criminal exploitation stuff.”

The team all agreed that there is, within the field, still a gap in the tools to be used for child criminal exploitation.

“There is no child criminal exploitation assessment tool. So what we are hoping – we are trialling how the Brief Family Relationship Scale, the Self-Esteem Scale work, we have seen that they will often triangulate in some way or form, and that could be one way to unifying different assessment tools.

Training was also provided to the family support worker at the start of their employment:

“We did a lot of solution-focussed stuff. But that for me was sort of a massive, massive help at the start and so is now. We still use it now; it has developed a lot tools that we use now, because you just adapt it to different things, so it can be around anger, it can be around self-esteem It could be around actual exploitation so that really helped.”

“Everyone has had solution-focussed therapy training and then in addition there has been more practice-led training around criminal exploitation. Again, consistency.. there are smaller training that some of us go on.”

One issue that came across whilst reflecting on the provision of training during the staff focus group concerned the scarce supply of training directly covering child criminal exploitation and gang involvement. This issue, which is most likely due to the complexity that the concept of child criminal exploitation brings with it, makes it difficult to gain new knowledge around the topic:

“There is not a lot for child criminal exploitation, I think it is still a quite relatively new, it’s still a bit of a buzz word. So we tend to go on them and there is very little sometimes that you get out of it, because it is already stuff that you have worked on or that the kids have told you or what not. But this is because it is so up and coming and so relatively new in comparison to for example child sexual exploitation.”

As there is no direct training provider for gang-related services, it proves difficult to translate the knowledge acquired during workshops and conferences, into strategically-led, manualised, tools to use in practice and that are evidence-based:

“A lot of the trainings we go to, so for example some of the LGBTQ+ training we have been to have been very practice-led but there is not a lot that you can then apply, so there is nothing very specific strategically on how we work with criminal exploitation. This just shows the gap –

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there isn't a training provider like for child sexual exploitation. Whether that will happen – it needs to but I think maybe because it is so up and coming people are not really sure how to train other people.”

3. Support

Members of staff who took part in the interview all agreed that they feel supported in their work, both by staff and management. It is evident that staff members work proactively in their job to ensure collaboration, both with each other and with relevant partners. The climate is one of proactivity, which encourages the continued development of BeLeave, and supports personal development of staff. Rather than staff member working in isolation in their own role, the organisation's culture promotes inter-partnerships and collaborative working. This positive working environment has developed as a result of a change in management:

“ I feel supported by my manger, my manager has changed whilst I have been here, I have always felt supported and now the conversation around BeLeave is sort of - do what you feel is right and see what can be possible, and I think before I think it wasn't given this sort of quality and attention.”

“Now it feels like we are working more cohesively together, we had a BeLeave day when there was a change of management, just to put all the cards on the table, see where the mess was and where we needed to clean up. My manager, she is of the same mind, she sees

how it's been very messy, and now it seems a lot clearer. “

“ I think we are a great working team, I feel very supported, the lines of communication are always open and I feel comfortable. I think as individuals what we bring into it is that we are all dedicated to the project and that is why we work well together, I think that really shows. I think because of that dedication it works really well together and we do support each other all the time, from making resources to brining in ideas. And we bring those ideas to life, it's just really great.”

Strategically, supervision is provided both at a group level, and individually for each staff member with their line managers:

“[...]we have got group supervision started, so we do that to enhance reflective practice and group dynamics within the staff team, and it's been going well. And we also have one-to-ones so [staff member 1] will have supervision with me every 4 to 6 weeks, same with me and my line manager, and [staff member 3] has it as well.

4. Conclusions

Reflecting on the BeLeave project as a whole, it is possible to observe the evolution of the programme management and structure. New projects often take time to stabilise and develop. The initial co-management approach

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may have prevented it from getting the bold executive direction needed at the initial stages of implementation. Staff opinions were that this had led to a lack of quality and attention, that were also noticed by the research team at the IPSCJ in the first interim report.

Midway through the programme, a new leadership for the programme was established, and the fact that BeLeave is now directly managed by the children service's lead has guaranteed a level of continuity in data collection and provision of service.

The new staff have all received the necessary training to deliver the intervention, and the organisation is regularly reviewing opportunities for additional training, which is partially limited by the lack of an adequate training provider for child criminal exploitation. The proactivity of the team shows in their recent visit to Cape Town, which prompted new ideas to be implemented for future runs of the programme.

Moreover, all current staff members seem to thrive in their posts thanks to the person-centred approach used in the intervention, which is reflected in their professional practice, encouraging them to develop and trial new ideas.

Expectations have mostly been met both for staff and for the participants. Specifically, all tools required for staff to complete their jobs have been provided, and when needed professional support as well. The GYW's feedback was mostly positive. The levels of expectation from the girls and young women was quite low initially, possibly due to an overexposure to social workers and other

social services; the girls and young women's families also provided a positive feedback.

Two key elements of the programme that are consistently reported by both staff and service users as being positive are the consistency in key-workers, to build productive relationships with participants; and flexibility, tailoring not only the programme but also individual sessions to respond to the immediate and longer term needs of each of the GYW and their families.

Process

Chapter 5 - Process

The following chapter will look at the processes in place and their level of functioning within BeLeave. Focus will be centred on the referrals process, and on the BeLeave team's relationship with relevant stakeholders.

Moreover, considering more operative challenges, the present chapter will reflect on the flexibility of the programme both for staff and participants, as well as longer-term support and re-engagement opportunities for the GYW and their families.

1. Referral process

A total of 118 individuals have been referred into BeLeave by a variety of routes.

Of these, the most frequent referrer (55) were schools, whereas the second most frequent referrer were children's services (27) (see *Figure 2*, below.).

Smaller numbers of referrals were made by the Police (10); Family Support and Safeguarding (7); Young Carers (3); Charities (1); the Health Services (1); the Phoenix Project (1); and social care (1).

For 6 people, the referrer source was not reported, and 6 referrals came from "Other" sources.

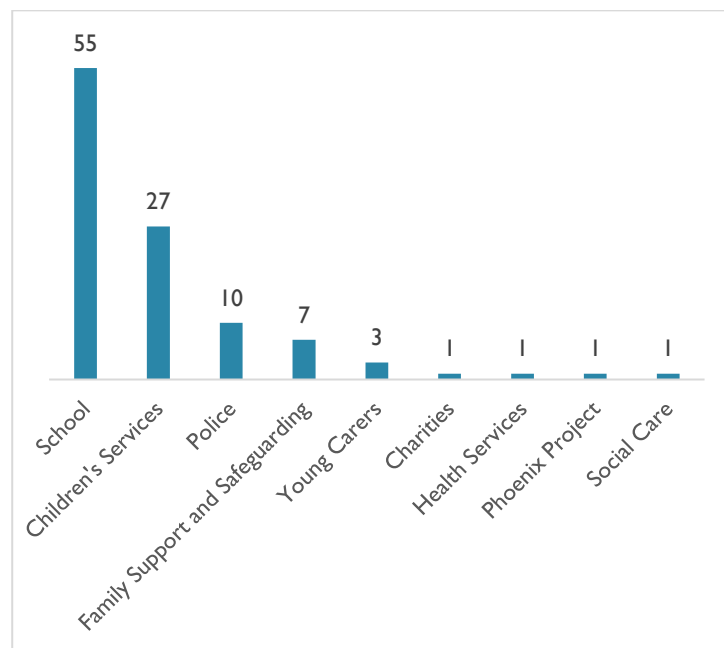


Figure 7. Total frequency of referrers

These figures are supported by the reflections of GYW and families when asked if they knew or remembered who referred them to BeLeave:

"My social worker referred me to them"

"I think it was [person]. He was the head of Self-harm worker. I can't remember. [Person] was family support."

The main reason behind referrals was an **identified risk of involvement in a gang/gang activity** (88).

Other, less frequent motivations behind referrals included: current indirect impact of gang association (22); routine and boundaries (3) risk of self-harm (2); current direct involvement in gangs (2); and self-harm (1) (see *Figure 3.*, below).

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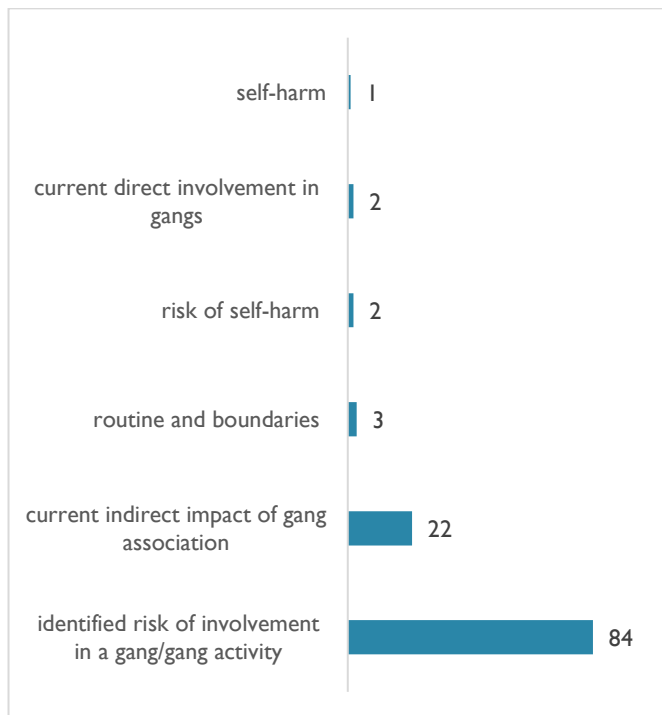


Figure 3. Frequencies of reasons behind referrals

When interviewed the girls and young women and their caregivers were able to explain the reasons for their referral, confirming the open communication between programme participants, delivery staff and referrers.

“Erm it was to do with [my daughter] and anger, putting herself in harm’s way.”

“Because she got attacked by a boy and his sister. She was doing the same thing – coming home late, and a social worker referred us to these people and were there for about 6 months.”

“I was coming home late, my behaviour had changed.”

Staff members have commented on how the referral process has evolved overtime, and in particular introducing partnerships with other relevant stakeholders. Initially only accepting

referral from school panels, the recruitment process has gradually expanded and improved over time:

“Our main partner originally was the schools panel. Initially, that was quite disruptive and did not really work the way we had hoped and expected it to work. The whole idea was that we would meet and referrals would fly in and it would be very seamless. “

As referrals were not being made consistently enough by the school panels, the team has developed new relevant relationships with a variety of stakeholders, to ensure a more seamless stream of referrals:

“Now we also focus on other ways to get the referrals. A few referrals do come from there but we now see more coming from schools, and we are talking more to centres... the churches are now aware of us. More with the Police and the units, they have particular sub-units that know about us. Charities, we are trying to work more nationally but also localised with charities, to sort of see how we could work together a bit more. Social workers are referring to us, so predominantly Children Social Care, Birmingham Trust.”

Despite the recognised need for support for girls and young women as risk of gang activity referrals were not received in the numbers anticipated. In response the team has modified the inclusion criteria for referrals, expanding the range of girls and young women that can be supported by the BeLeave programme.

Chapter 5 - Process

“Our criteria changed, you wouldn’t have a referral from social workers because our criteria was different, we opened it up.”

“Before if you were a Child Protection Plan or a Child In Need Plan you could not refer to us, because we were really holding close to this idea of early intervention, and if you are on a Child Protection plan you were not technically early, but we opened that back up. The only point where we do not go forward now is if there is a court order, so we have really pushed it right to the end. “

Changing the criteria has meant accepting more difficult, complex cases, but has also opened the programme to an extended age range, which staff members are now looking into expanding further:

“The criteria changed but we also started working with teachers a bit more closely and they told us that we were not on the right line with ages, we were sort of 10 to 18 whereas they have gone down to 8 to 18 now. “

“I think the hope for the future is to open it up to 25, but that then is sort of more of a risk with the charities and how that works.”

2. Barriers to referrals

When asked around the main barriers to referrals, one staff member pointed out a big issue was the lack of understanding on behalf of

the families, of the referral itself, as the programme was not explained by the referrers beforehand:

“The other issue was also that families did not understand who we are, so referrers were not passing that conversation onto families, they were just saying “this is a service that might be helpful”

This prompted the establishment of “pre-visits”, to be conducted following a first telephone call but before the first assessment. The aim of these pre-visits is to introduce the nature, aims, and working style of the programme, and has proven to be very effective in terms of engagement:

“The main issue is always engaging families, that is the hardest one. The only thing we put in place is the pre-visits. A referral comes in, it gets assessed, and then we will work on a contact a few days after that and then we go out. If they are for example waiting on a waiting list we’ll go out and do pre-visits. The idea is to explain who we are, what we are going to do, if they have any questions and whether they want to consent to this.”

“We literally just explain to them what we do. We will explain obviously the fact that there isn’t a set agenda, you don’t have your box ticking exercise, we will be working on whatever is needed because every child is different.

We always talk about confidentiality, that is the big thing whenever we meet any family they might ask us what to expect

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and we also do their hopes and goals with them.”

Another issue, which has been addressed by BeLeave staff after the initial implementation was around the name of the programme: being originally called “Girls in Gangs”, it was retitled ‘BeLeave’, based on consultation with young women who were invited to take ownership of the service and how it was defined. Their perception was that the name reflected “believing in yourself and leaving gangs”. This also supports the early intervention nature of the service.

“I think the name change was also good, because when it was “Girls in Gangs”, I mean that due to misconceptions we were not getting quite as many referrals because the subjects were not in gangs. I know this happened to me so many times that the parents would just reply “The kid is not in a gang”, and you just sort of think “hmm no she is actually not but she might be at risk” so to me that was a massive, massive barrier for us, because I could see where they were coming from, they were not in a gang.”

The need for a service to address the rise and nature of gang activity involving girls and young women was identified and recognised by school and police staff in the locality. Despite this, once BeLeave was launched, schools were hesitant to engage due to perceived stigma of being associated with the programme and potential damage to the school reputation.

“It was about educating professionals as well as increasing referrals, to recognise the stigma.

Proactively working with the school - we recognised that the response needed to be of proactivity in terms of awareness raising that it is not about the school’s reputation but around a wider system issue.”

3. Issues with the process to be addressed

When asked about any issues relative to all aspects of the programme, from flexibility to content, service users did not identify any areas that they considered to require addressing.

BeLeave staff have implemented different ideas and strategies to ensure the GYS’s engagement and successful participation.

Other than the pre-visits aforementioned, to effectively increase a response from the families, an issue that has been tackled by the team was around transparency.

Specifically, a major issue which impacted on delivery was a lack of communication between the family support worker and the families, which often were not communicating to BeLeave that they wouldn’t be able to make appointments or visits.

This was addressed by establishing a working agreement to ensure that the family would take responsibility on making the appointments:

“You end up going to sessions and you knock on the door and they won’t even answer or they want be in. [...] giving the families a bit more responsibility in terms of the working agreement form as well. You do have that mutual and professional acknowledgement and consent that if you don’t attend a session or if you don’t want to be there, let somebody know and if we were not to turn up we will let you know.”

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Another issue still to be address is around the execution of outreach work carried out by the girls and young women directly to peers. This has been found in other areas to prompt better engagement and outcomes:

“From our Cape Town visit, maybe because it is easier there to do it this way, there was a service particularly that only got referrals from girls and young women, so they found that girls and young women are more likely to listen to other girls and young women, therefore would bring wider cohorts in.”

“So we are trying to see how outreach referrals come along and to see whether if a young woman comes on her own accord whether the impact of the intervention is stronger.”

4. Changes in the process

Several changes have been made in the data collection process. Firstly, the deletion of a mid-point measure being administered, which was thought by staff to be unnecessary to assess changes; and the modification of the Outcome Measurement Tool, which, as explained in the methods' chapter, now has a reduced number of categories.

The assessment process has stabilised thanks to a more structured approach to each case throughout the course of the intervention. This included introducing landing sessions, and follow ups:

“ (How) The whole assessment ... works now is that if a referral comes, and the outcome of that referral is decided (by the team), it is either approved or not. Then the sessions will run and then it will end. And what we are adding in now are landing sessions, or review sessions [...] every child is able to have a follow up or follow ups.”

Moreover, the team is trialling **theme-based groups** and **activities** to develop a long term relationship between BeLeave and the participants, that does not stop at the end of the programme but continues to provide support to the girls and young women and their families when in need:

“We have also started theme-based groups, we look at themes that impact GYW’s lives, so might be child criminal exploitation, it might be sexuality, it might be how to have a healthy relationship. So we trialled this in august and they went well.

We try and keep them tied in and aware and present in our ethos and work so that they can help us with conferences. For example there is one young woman that has helped us with our media content. We are showing them that hanging around is not just a work that they are doing for themselves, but that it can lead to other things and that they could themselves influence a lot of people.”

In this regard, the girls and young women who have been interviewed have also confirmed that they feel like they will be supported longer term. For example:

“Yeah they supported me and invited me to do activities with them. [Most recently] I went bowling and we was planning to make t-shirts.”

Chapter 5 - Process

“They do support (me)... cos I said to them I want to work with them.”

One of the caregivers interviewed also confirmed follow up contacts, whereas another one reported of not being sure, and the another was looking forward to contact continuing. although it was too early to tell:

“Yeah I think they will be. I do have contact, someone called me about a week or so ago.”

“I should hope so, don’t know, hope it will. Time will tell.”

5. Learnings from the programme

Two main learnings have been identified which still have to be implemented to improve service delivery .

The first one is related to the procedure to follow when a child goes missing:

“When a child goes missing it is a major issue, and we have actually looked with girls and young women at a service by GYW for GYW. We have asked this young woman what is the impact of going missing, what has happened when you have gone missing, who does it really impact, what are the consequences and where would you go. That is a massive gap in terms of intervention delivery.”

The issue raised reflects bigger problems across the whole system that still need to be addressed, which impact the delivery of BeLeave and the ability of its staff to support girls and young women during every stage of the process.

The other principal learning gained is around non-engagement, which is impacted by a number of factors. The most frequent remains the family being unable/unwilling to participate in the intervention; but it is also often driven by external factors related to referral agencies and other services, often after a safeguarding issue. For example:

“Another challenge is non-engagement. One family was moved to a different location so that raises issues with us about what local authorities we can contact.”

“And then there is disengagement from like a safeguarding issue, so if they have raised a concern to our staff we have our own safeguarding policy and there is a process, and that put a strain on the relationship, so a young woman disclosing and then us telling people about it, because we have to, so that they and other people are safe. So they get angry with us – and some children are okay working with that tension and anger and they will get through it, some will just start cancelling sessions or start disengaging slowly, that is another barrier.”

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6. Flexibility and ethos

The programme has been developed and delivered utilising a person-centred approach, which has become a crucial aspect in the development of professional relationships with the girls and young women and their families. Adapting the programme to the needs of each young woman means adapting both the themes of the sessions on one side, and flexibility on the timings of each session.

All the service users interviewed agreed that the programme was flexible enough to suit them and their external commitments:

“It did help with flexibility, it did help – I was coming home early, or on time. Mostly stayed indoors.”

Importantly, BeLeave’s ethos has remained unchanged despite strategical and managerial changes. Their aim is to deliver interventions that help GYW long-term, to establish better relationships with their families, enhancing self-esteem and aspirations. This, as part of an early intervention aimed at tackling child criminal exploitation involvement and raising awareness of grooming and other processes used by gangs to entice girls and young women.

The primary aim of the programme is to give autonomy to the girls and young women participating, so that they have control of the interventions and can decide what they want to focus on. This to better help them identify and address the aspects of themselves and their lives that they feel are priorities.

“We do get their voice in terms of the intervention. We say that it is an intervention and that we normally have an average of 12 sessions, but you can dictate that yourselves, so if you feel like that [the goal] has been reached after six, that’s fine.”

“That is that collaborative co-production piece that we are really try to put back in, if we say it is led by the child it really should be led by the child and the way we do it locally is that we manage it in supervision then, so if a child says “I want to finish at six “ and then we are identifying that actually there is X,Y and Z to be worked on, we will say “well, actually...” we will put that out to them, but they still might turn around and say to us “no”.

7. Conclusions

Overall, BeLeave is an effective intervention that provides much needed support to children at risk of gang-involvement, and to their family. The programme is well managed in terms of referrals: this has been ensured by through the work to expand their network of relationships with relevant stakeholders. This produced more awareness of the programme as a whole, which has translated into a consistent number of referral throughout 2019.

The initial barriers to referrals included non-engagement of the families due to lack of information of the purpose of the programme, and the misleading name of the programme, which lead services and families to believe that the project was aimed at girls and young women

Chapter 5 - Process

already in gangs. Both issues were solved – the family support worker now conducts pre-visits at the families’ home, to explain the nature of BeLeave and the reason behind the referral. In addition, the name change to BeLeave and it is now more indicative of an early intervention. The issue around lack of transparency of the girls and young women over the attending of sessions has also been tackled by introducing it in a working agreement.

Effective and positive changes have been made from staff throughout the course of BeLeave: the focus of the programme is now not only on the twelve sessions with the girls and young women, but it also includes follow up sessions and further opportunities to stay involved with the organisation, such as theme-based group sessions and working opportunities. This ensures some form of support to GYW and families even at intervention completion. This was made possible by executive changes in the way assessments are dealt with, which have made the journey through the program smoother and easier to manage from a strategic perspective.

The programme’s ethos has remained unchanged, and the person-centred, solution-focussed focus of intervention has allowed the girls and young women to take more responsibility and decide for themselves what topics they wanted to work on. This change has the potential to achieve better and longer engagement of the girls and young women.

Despite the fact that there are still challenges to be resolved, such as disengagement due to safeguarding and the systemic response to a missing young person, BeLeave has evolved significantly, identifying barriers, reflecting on causes and solutions and implementing

productive and impactful changes on referrals, and the support given to girls and young women.

Outcomes

In the following chapter, quantitative and qualitative outputs have been collected and analysed to observe whether the three outcomes initially established as aims of the intervention have, overall, been met or not.

BeLeave was created with the purpose of increasing the girls' self-esteem whilst leading them to new aspirations; enhancing family bonding and communication; and improving the young people's understanding of gang-related harm.

After an initial section on the demographics of the girls referred into BeLeave, the chapter will focus on the impact that BeLeave has had on different systems relevant in the girls' lives. It will look at the girls as individuals, and at their relationship with their families.

1. Demographics

Demographic information were available for age, ethnicity, and referral outcome.

The average age of participants who were referred to BeLeave by stakeholders is of 14.1, with a minimum age of 9 (1%, 1), and a maximum age of 18 (1%, 1) (see *Figure 4.*, below).

Chapter 6 - Outcomes

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1. Demographics

To create the needs led service BeLeave aspires to be, demographics of the target audience are crucial to inform service design and delivery. Demographic information was collected for age, ethnicity, and referral outcome.

The average age of participants who were referred to BeLeave by stakeholders is of 14.1, with a minimum age of 9 (1%, 1), and a maximum age of 18 (1%, 1) (see *Figure 4.*, below).

Referred individuals were most frequently 14 years old (22%, 26), followed by 13 years old (20%, 24), 15 years old (19%, 22), 16 years old (17%, 20), participants aged 12 (10%, 11), aged 17 (6%, 7), aged 11 (4%, 5), and 10 years old (1%, 1).

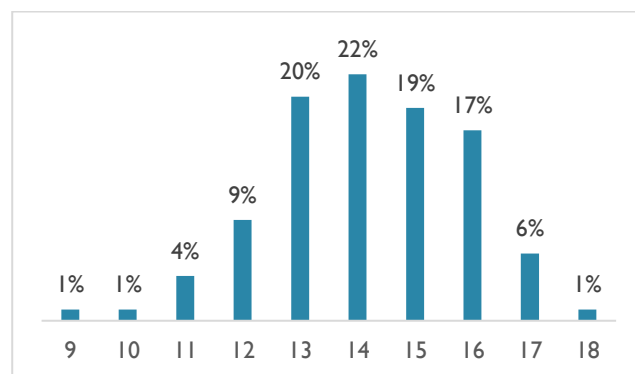


Figure 4. Percentages of different age-range in the sample

Almost half of the referrals were of girls and young women from a white British background (46%, 54).

The second largest ethnicity was Black/Black British (12%, 14), followed by girls and young women from a Mixed background (8%,9).

Asian/Asian British: Pakistani ethnicity counted for 6% (7) of the total, and Mixed: Black Caribbean and White for 3% (4).

Black/Black British African referrals amounted to 3% (3) of the total, whereas Asian/Asian British: Bangladeshi, and Mixed: Asian and White were both 2% (2) of the overall referrals.

Finally, only 1% (1) of the population were respectively: Asian/Asian British: Other; Black/Black British: Other; White: Irish; and White: Other.

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Ethnicity data was not available for 16% (19) of the referrals.

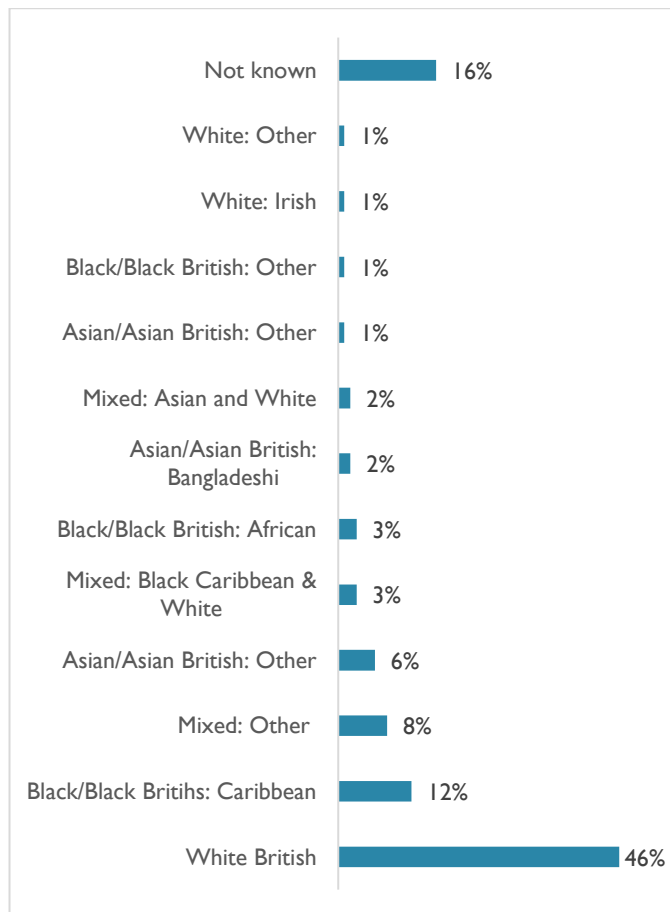


Figure 5. Percentages of different ethnicity in the sample

Of the 118 referrals in total, 25% (30) have successfully completed the intervention and have achieved the set outcomes as defined by the service design and delivery criteria (see Figure 6., below).

However, a further 25% of cases did not achieve a positive outcome due to disengagement. In 14% of cases, the maximum number of attempted contacts with the family was exceeded (16), and in 11% of cases reported the young woman did not engage (13).

At the time of analysis, 10% (12) of referrals

were receiving ongoing support from BeLeave. A further 6% (7) of girls and young women referred into BeLeave were still on the waiting list to be allocated a key worker.

Referrals were rejected for two main reasons: either because the needs of the individual/family were not within service remit (9%, 11), or because the criteria for an intervention were not met (8%, 9).

Other reasons for the outcomes not to be achieved were because the service user no longer fitted the criteria (8%, 10); in other cases girls and young women transferred to another service (3%, 4). Finally, 1 (1%) girls and young women ended up not achieving the outcomes because the referral escalated to children's social services.

2. Impact of BeLeave on the girls and young women

I. Self-esteem

The Rosenberg's Self-Esteem Scale, widely used to measure self-esteem levels in the adult population, is a 10-item 4 points Likert Scale that ranges between Strongly Agree to Strongly Disagree. The data has been collected as participants commence the BeLeave programme and at programme completion.

A total of 59 participants have completed the Scale at baseline, and 30 have been given Rosenberg's Self-Esteem Scale to complete at the end-point.

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The average result at baseline for the participants who have completed both pre- and completion measures is 19. Analysis demonstrates a moderate increase at the end-point to a score of 22 (see *Figure 7*), indicating a positive increase in self-esteem.

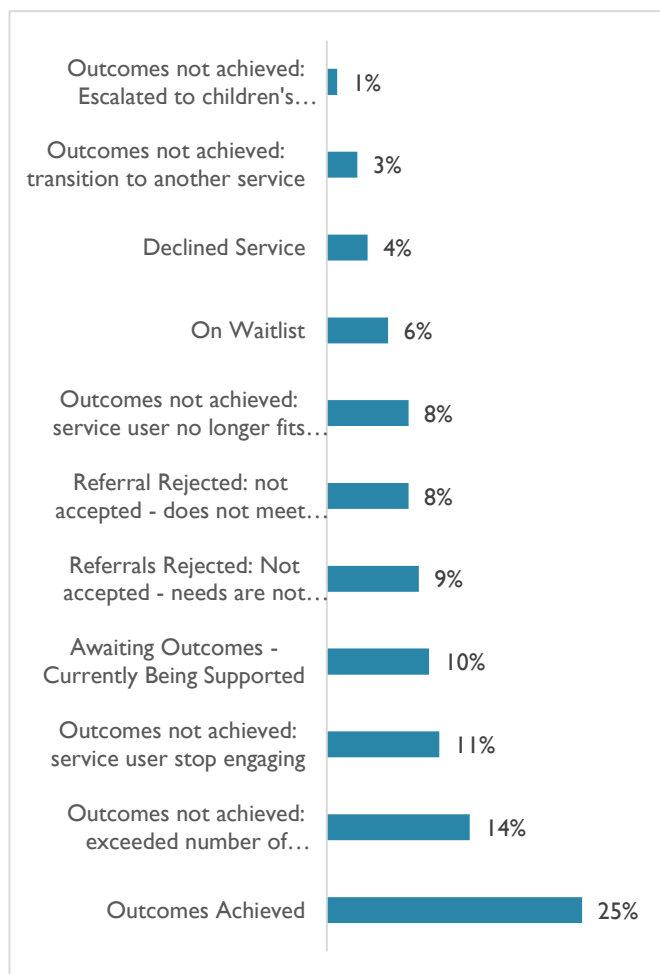


Figure 6. Percentages of referral outcomes

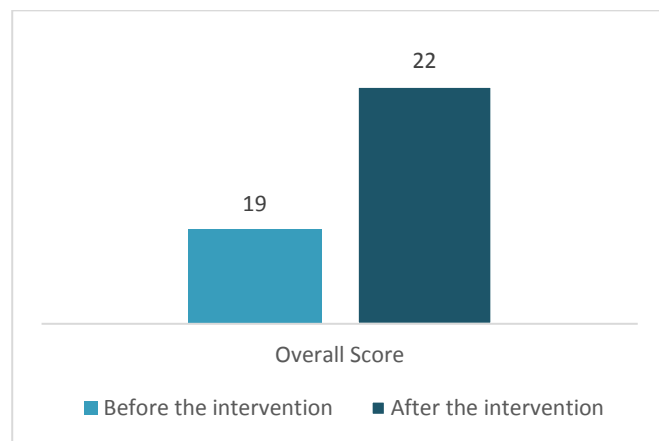


Figure 7. Rosenberg's Self-Esteem Scale average results of those who completed pre/completion intervention

Out of the 30 participants who completed the measure pre intervention and at completion, in 21 cases the score positively increased after the programme's completion.

In 7 cases the reported levels of self-esteem decreased at completion (see table 1, below) and on two occasions the results were found to be unaltered.

In only two cases (Participant no.1 and no.2, see *Figure 7*, below) the self-esteem score at the end of the intervention indicated a level of self-esteem that was still equivalent to "low", determined by an overall score of 15 or less.

The biggest overall change between baseline and endpoint was positive, with an increase in the self-esteem score of 11 points, an increase of almost 50%. (Participant no.30, see *Figure 8*, below).

A paired-sample T-test has been conducted between self-esteem scores before and after the intervention. The results indicate that the measure is significantly different at the two-points in time, with $p < 0.001$. This confirms the hypothesis, BeLeave has overall a positive

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impact on girls and young women at risk of gang involvement.

Participant	Score Before Intervention	Score After Intervention
1	16	10
2	16	14
3	11	15
4	23	15
5	19	17
6	16	18
7	15	18
8	15	19
9	19	19
10	13	20
11	21	20
12	15	20
13	22	21
14	17	22
15	15	23
16	18	23
17	21	23
18	14	23
19	20	24
20	24	25
21	16	25
22	25	25
23	18	26
24	19	26
25	26	26
26	22	26
27	28	27
28	21	27
29	26	28
30	19	30

Figure 8. Rosenberg's Self-Esteem Scale's scores before and after the intervention

According to staff, the best way to promote and enhance self-esteem in the girls and young women during the intervention was to:

"[...] get the girls and young women to have a higher self-esteem that is separated from gang association."

To extend this benefit, the team plan to introduce ways for the girls and young women to meet each other and create new friendships in a context that is far from gangs, and that would develop their self-esteem through positive connections:

"The reason we brought in the theme-based activity, one thing was that we were trying to find other ways of engaging girls and young women, so it was more strategic than one-to-ones. The other and the hope for it, it was to advocate for a different type of group – so if they can hang around positive GYW in a positive space, would that make them feel part of something different but again with other people? Not saying that would instantly get them out of gangs, but it would challenge things, for example where in gangs there is a power imbalance or an expectation to do things, here they would feel as they were equals."

As the Rosenberg scores confirms, this approach, together with the one-to-ones have proven to be helping the girls and young women involved in being more confident and look more positively at themselves.

When interviewed, the girls and young women were able to reflect on the impact BeLeave had on them;

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“It helped me with my family because I had low self-esteem. Now I have more self-esteem and am confident, outgoing, adventurous.”

“Well, to be honest the confidence, I was not really confident. I do feel scared on the inside but I try not to show it on the outside.... it is a bit better.”

Caregivers reiterated the positive changes, although there were situations they recognised where low self-esteem was still problematic,

She tries to be very strong in front of me but I do know she bottles a lot of stuff. I just try not to approach her because then it gets worse for her - If I ask her and she's not in the mood for it. She skips college sometimes. They don't get the full story. I told them on Tuesday she's not happy and she's not in a good place. They said they knew her history. Hopefully they take that on board. It's not a regular thing that she's gonna come in and be happy.”

The results from the Outcome Measurement Tool reflect the significant change observed through the Rosenberg's Self-Esteem Scale. At the end of the intervention, 22 participants reported that their self-esteem was good and that they were confident in themselves, whereas only 1 person declared that she did not think her self-esteem had changed since the beginning of the intervention. However, in 5 instances the Outcome Measurement Tool reported that the girls and young women's self-esteem and confidence had not improved:

“Person lacks self worth. This is apparent whilst completing our self esteem session as well as the closure paperwork (Rosenberg self esteem scale). [...] young woman even faced the wall and placed a pillow over her head whilst relying 'I don't know. I just don't know'. Young woman places a large amount of regret and hate upon herself for getting involved in an allegation of poisoning a teacher.”
(Professional Judgement on young woman's self-esteem after completion)

“I would argue that the young woman still lacks self esteem and tends to look too boost her self esteem in friendships” (Professional Judgement on young woman's self-esteem after completion)

“In my professional opinion I believe that young woman does not actively seek ways to improve her lack of self esteem[...] I believe that young woman does not use any of these techniques due to the fact that she seeks solace in friendships, some of which maybe negative, which help to encourage her self worth.” (Professional Judgement on young woman's self-esteem after completion)

Self-esteem was often linked to the physical appearance of the girls and young women, those who felt more confident were also more satisfied with their image.

“The young woman shared with me that she feels that her self-esteem has definitely improved and that she feels much more

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comfortable with how she looks etc. She said that before she would look for the negatives in her 'physical appearance' where now she sees herself as more than just 'physical', but also for the person that she is. She said that she gets interest of boys which boosts her self-esteem although she has shyness around this. Young woman has started going to the gym since our work commenced which has made her feel better about herself."

"Young woman is happy and confident in how she looks. Young woman does not wear makeup as she is comfortable in her skin. Young woman likes to look good and occasionally wear false nails or have her nails painted."

"Young woman told me that self-esteem to her is the way she views herself. Young woman told me that she likes to look her best all the time but is equally just as confident without it."

In other instances, self-confidence was attributed to other dimensions such as skills, personality, family relationships, and work:

"Young woman discussed during the Spurgeons BeLeave project video promotion that the intervention has encouraged her to feel good about herself and 'made me feel like I belong and I am not worthless'. Young woman gives her all at everything she does of which she

tends to be proud of. Young woman is growing in confidence and self-belief that she lacked in the past. Young woman stated 'I never would have thought I would have achieved what I did'. Young woman felt a sense of achievement after the graffiti session as she was able to develop her artistic skills."

"Young woman said that she doesn't compare herself to others but will admire other people and be able to compliment them. Young woman gets lots of positive attention at home from her family which help to keep her self-esteem healthy."

"Young woman explained that she is confident. Young woman likes the fact that she is kind and loves that she has this trait. Young woman loves being at home with her family and they help her boost her self-esteem."

"Young woman feels good about herself. Young woman attends the gym and this makes her feel good about herself. Young woman makes her own money with a job she worked hard to get. This provides Young woman with a large amount of self-esteem. Young woman does not rely on anyone to boost her self-esteem as young woman is able to do this for herself."

Where self-esteem was not positive, anxiety has identified as a co-factor in many cases,

"I asked young woman how she viewed herself. Young woman explained that she does

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not like talking about herself as it makes her feel uncomfortable. Young woman does not like the idea of people looking at her and being centre of attention. Young woman told me that 'I will always be worried about something'. Young woman explained that she constantly feels anxious that something bad will happen."

Or to feelings of being worthless due to school issues:

"No confidence in myself due to keeping myself to myself due to protecting myself. Young woman does not like speaking about herself positively and at times can feel worthless. Young woman does not actively seek ways to promote her confidence in herself rather than seeking this from other people. Young woman explained to me that school does not help encourage her confidence rather impedes it. Young woman told me that she hates 'RE, Maths and Geography' due to not being able to understand what is going on and 'goes through one ear and out the other'. Young woman expressed that she comes to school because she has to however school makes her feel 'stupid' and worthless."

Or, once more, to issues within the family:

"The Young woman reports that her self-harm has increased due to issues at home. The Young woman said that's she worries about the relation she has with her Mum and

Dad and wants it to improve and for Dad to get help.

The young woman feels confused about what's going on with social services and what will happen. And all of this is effecting how she feels about herself."

II. Aspirations

The approach of BeLeave to strengthen aspirations is needs led, situational and looks to provide opportunities which are of interest to the girls and young women and their family. As a staff member reports, more than being the topic of a one-to-one session with a young woman, it focuses instead on giving the young woman the opportunity to experience new activities, actively creating new interests:

"Session-wise we might talk about it but it is the weakest area. We are pulling in more resources internally to see what is possible to get them to volunteer or participate with us. For example one of the girls and young women wanted to create t-shirts and it is about having that opportunity where we can give them a space to actually do that. It's something for them to feel a part of something and that they are contributing in."

"We have a hopes and goals ladder, these are basic exercises. They can put on not only our outcomes, our hopes and goals, but their own. And they can decide to use it or not, they can just do it through conversations "I cannot believe I used to this seven months ago and now I'm doing this..." they can do all of that [...]."

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BeLeave uses flexible and co-production approaches within the interventions to allow the girls and young women to prioritise the issues to work on during the one-to-ones and group interventions, to maximise the potential impact on girls and young women aspirations:

“[...] but part of the work is – because it is very fluid and we work with whatever comes up, our assessment gives us a structured theme list of what we should be working for, but actually we give it back to them and they decide what to work on.”

As for participant experiences, a young woman reported that BeLeave did not help her in terms of aspirations:

“No, because I always knew anyway.”

In one instance, the programme has instilled into the young woman the ambition to help other girls and young women overcoming gang-related harm, making this her new aspiration:

“Yes, I still want to help. And give supporting hands for people who are my age.”

A caregiver also provided an example of their daughter being enthusiastic about many things, despite still not being able to manage her free time:

“Well actually she wants to – she’s going college, she wants to do this, she wants to do that, lots of things she wants to do. [...] If she had a full time job she’d be happy to do that. When you’ve got free time – she automatically goes astray. If she doesn’t have to be in college she’d wander around town –

not doing anything silly. But it doesn’t take a second for a child to go the wrong way.”

III. Resilience

The Children and Youth Resilience Measure is devised to observe resilience levels through three main variables: individual capacities/resources; relationships with the primary caregivers; and sense of belonging derived from the external context the person is engrossed in.

A higher score will indicate that the variables that form the resilience measure are more present in the lives of participants.

A total of 31 participants completed this measure both before and after taking part in the BeLeave project. As evidenced in *Figure 9* (below), when the scores before and after the intervention are compared, the results on all three subscales administered after the intervention was completed are higher. This indicates a raise in the overall resilience of the cohort that participated in the programme.

Within the subscales for each dimension though, there is one cluster which has worsened, as observable in *figure 10*. The subscale “Peer Support” dropped by 0.1 points, going from 5.5 to 5.4. Due to the limited nature of the phenomenon and because of the limited sample, a small worsening in those clusters does not necessarily reflect a negative impact of the BeLeave Project on those resilience areas in the participants.

A drop in the perception of being supported by their peers on behalf of the girls and young

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women might indicate the loss of contact with peers that no longer represent healthy relationships, e.g, who are already involved in gangs; an hypothesis justified by a new awareness of certain behavioural and emotional patterns occurring in their families; the level of satisfaction with the safety; and the approach to care of their own caregivers, which might have been now subjected to new standards.

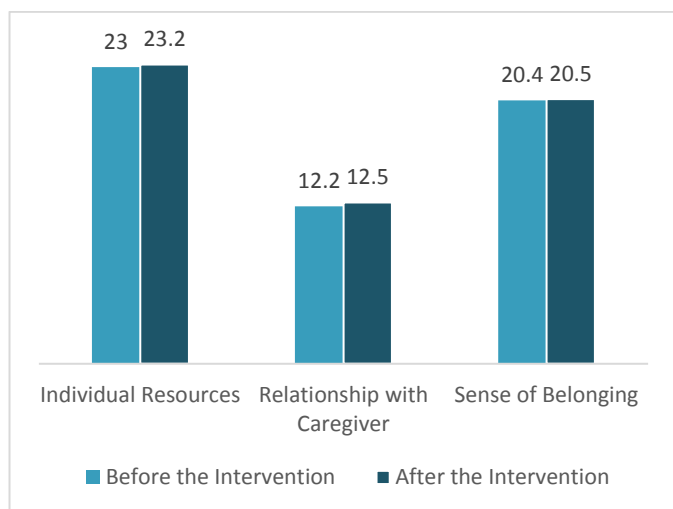


Figure 9. CYRM subscales' scores before and after taking part in BeLeave

The fact that the “Individual” sub-scale has increased at completion compared to pre-intervention correlates with the higher overall

score obtained through the Rosenberg’s self-esteem scale at completion.

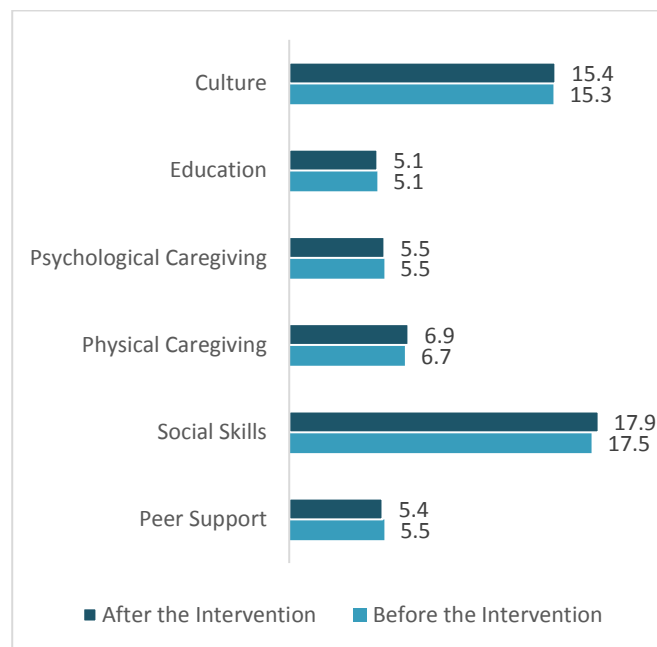


Figure 10. CYRM scores before and after intervention, divided by cluster

An increase of 0.2 in the cluster measuring physical caregiving, despite not being significantly relevant, might indicate that the connection established throughout the BeLeave sessions between the young woman and her parents may have improved.

The CYRM comes in two versions: the first one aimed at the primary individual whose resilience is to be monitored, and the second directed to their caregiver or the person that is deemed most knowledgeable of the girls and young women’s behaviours and feelings. The questions are aimed at understanding how the young woman copes with daily life and what role the people around him/her play in dealing with daily challenges.

A total of 58 people in the role of caregiver (most knowledgeable) completed the measure before the intervention, whereas only 30 have successfully completed the measure at both

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points, before and after the intervention. Higher scores indicate higher levels of characteristics associated with each of the scales/sub-scales.

Looking at the averages of those who have completed all scales of the CYRM both before and after the intervention, it appears that all sub-scales have worsened at completion.

As shown in *Figure 11.*, the “Individual Resources” sub-scale has dropped by 0.3 points at completion; the “Relationship with Caregivers” one by 0.1; and the “Sense of Belonging” measure by 0.6 on average.

Moreover, the overall CYRM Person Most Knowledgeable Score for the Family has also decreased – from 55.2 out of 69 before the intervention, to 54.1 after the intervention.

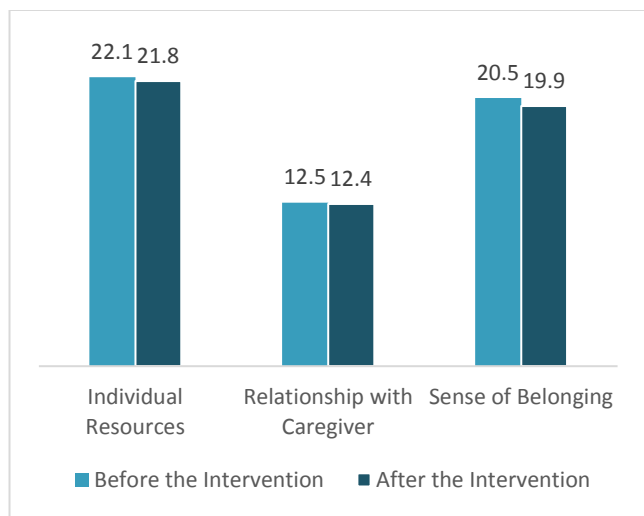


Figure 11. CYRM – PMK subscales' scores before and after intervention

Looking in more detail at each sub-sub-scale (*Figure 12.*, below), all measures seem to have dropped at completion aside from the one measuring peer support, which has instead stayed the same.

These results conflict with the results obtained from the CYRM with the girls and young women, which showed an increase in almost all the scales.

When compared for statistical significance using a paired sample T-Test, the only difference which was significant was the psychological relationship between caregiver and young woman ($p < 0.5$).

There are different explanations as to why this may be the case. Firstly, it is possible that BeLeave does not effectively engage the caregivers at all stages of the intervention and that, once it comes to an end, caregivers are unable to recognise the impact of BeLeave on the girls and young women.

Another possibility might entail an increased awareness of the dangers associated with gang-affiliation, and deeper understanding of the behaviour and of certain risky-behavioural patterns that the girls and young women present, which have emerged during the intervention. In this instance it may be possible that the reduced CYRM score overall, and its specific scores, is reflective of an increased concern of the caregivers for the girls and young women, as well as recognition of their role in protecting against and addressing those issues.

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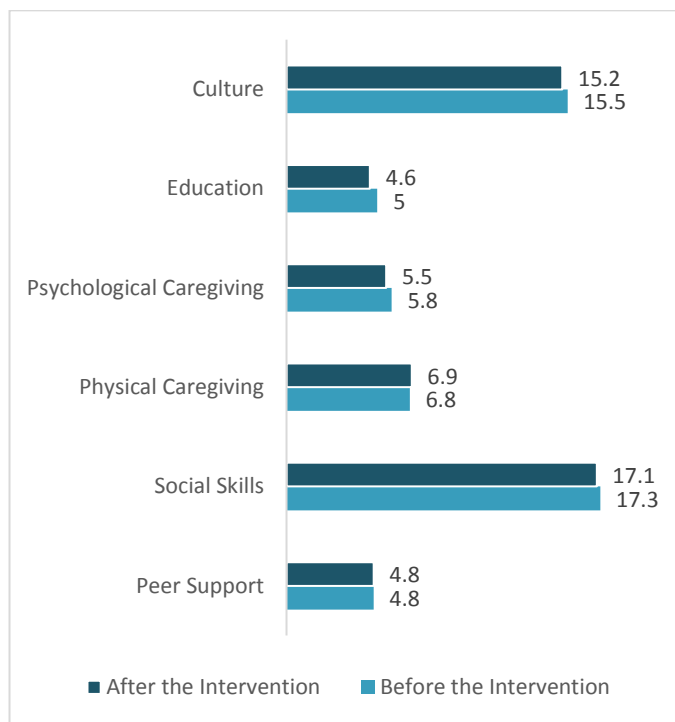


Figure 12. CYRM - PMK scores before and after intervention, divided by cluster

IV. Knowledge around gang-related harm and risk levels

One of the expected outcomes of the programme is that girls and young women and their families take responsibility for the problems associated with gang-related harm, and the solutions.

Information around increased or unchanged awareness around risk/exploitative behaviours and general understanding of gang-related harm was available on the Outcome Measurement Tool. Specifically, the family support worker identified that in 24 cases out of 34 professional records available, the GYW were more aware of grooming and other exploitative behaviours, and that their level of risk had lowered:

“Young woman has a very good awareness of abusive/exploitive behaviour and is able to keep herself safe. During the work young woman has asked advice from me with regards to certain situations and also has both her Mom and Sister whom she can speak with if she has any worries or concerns. Young woman tends to keep to her same circle of friends and remains local to the area in order to stay safe.”

“I asked young woman if she puts herself in risky situations to which she replied 'No, because I am aware of what I am doing as I am more careful'. Young woman and family are able to keep young woman safe and they are aware of what the young woman is doing all the time.”

In a lot of cases the decreased risk was due to better communication with the parents, who were now better able to keep the young woman safe:

Young woman is sharing more about the people and choices she can make in a positive way. Family - Mom and young woman are communicating more and this has reduced the risk of the young woman being at danger. They can share more awareness of risks and dangers pull and push factors.”

“In my opinion, Mom has a very good relationship with young woman, which results in young woman been able to speak to her about most things. Due to this openness Mom is able to monitor who young hangs around

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with and if she is in exploitive/abusive situations.”

“The young woman’s family have improved communication and appear to Parent collaboratively providing appropriate boundaries and consistency. Mum reports that the the young woman has not being missing or late home since our intervention started. Mum feels that the young woman realised that her behaviour had changed and has listened to guidance and advice.”

Sometimes, it was the disassociation with certain friendship groups that lowered the risk of gang involvement, and this was due to a better understanding of gangs and the way they operate:

“The young woman now has a understanding of Mum concerns and her feelings on the matter of not using her phone and being contactable have improved. The young woman now spends free time at organised activities such as the Cinema or Desert bar rather than just being out in the community.”

“The young woman said they have been able to think about their choices they make and identifies safer options and healthier friendships.”

In some cases their focus now is more on school and their future, which results in greater engagement with less risky friendship groups. In addition this creates a foundation for aspirations work to take place:

“The young woman has developed an interest in her school work and is staying behind after school on a Tuesday to take part in piano lessons. It is my opinion that the young woman has now developed in maturity, she has shown that she is able to see things from others points of view and has stronger more supportive family structures in place.”

“I would argue that young woman has made huge changes to ensure she does not associate with risky people nor does she place herself in risky situations. The young woman has engaged very well with our service and I. It is clear that the young woman wants to achieve a lot in her life and has aspirations of working in travel and tourism.”

A total of 8 young GYW who have completed the programme are, at the landing session, still at risk of gang-related harm. The main reasons for this are either association with risky peers and/or not being able to say no:

“The young woman is fairly street wise but still has vulnerability about her. She is a very sensitive young lady and from what she shares with me I don’t think she likes upsetting/offending people. This has posed a problem in the past where the young woman struggles to say ‘No’ to her friend CSM.”

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“I still have significant concerns for the young woman and her safety/well-being when she is out in the community. My biggest concerns are the unknowns in relation to where she is going and who with, together with the fact that the young woman will provide very little information to professionals when spoken to about this.”

Finally, 2 girls and young women were referred into the programme for reasons less explicitly associated with being at risk of child criminal exploitation: smoking and school behaviour, so the impact cannot be assessed as easily. This is not to say that the referrals were not to be accepted: they are part of the early intervention work that BeLeave are carrying out, which does not only concern girls and young women at high risk of gang-exploitation.

V. Challenges to outcomes

During the focus group, staff discussed some barriers to outcome achievements, that are difficult to control for.

The main challenge reflected the idea of working early in the community to prevent gang-infiltration. When the affiliation with criminal peers is strong, and when the GYW are entrenched in the gang culture because it is so prevalent within the neighbourhood, it becomes very difficult to put the girls and young women in a position of safety and change their mindsets:

“The strong affiliation with criminal peers, so if they have got a strong affiliation it is extremely hard to... they will work with us or not work with us, but to bring that change around it is much tougher.”

Other barriers raised were around the need for freedom and independence; family conflict; using social media; and having an identity:

“The dynamics between the families and the young woman is a struggle that sort of never changes and once the works start we will try and bring that up, but it’s never listening to each other or speaking to each other, it’s always speaking over each other. So we try and delve that down a bit.”

“The appeal of having your own freedom is definitely another one of why people might go missing as well. There is definitely an assumption that they can feel like they are in control of their own life. Particularly in this society as well, it’s also a matter of status.”

“I presume having an identity it’s a huge, huge gang. They won’t identify themselves as a gang but they will identify as a group. And when you ask a group of what, they won’t still know – I think these are human, girls and young women who just don’t have secure identities. It’s easier to have a bit more of it in a group.”

Chapter 6 - Outcomes

“We have a lot of girls and young women that tell us about their social media, snapchat and so on, and the thing that they sort of care about is these lads, these grime artists that probably do have a bit of a criminal background... they want them on their personal snapchat... they want them to follow them... you have to have over a thousand followers.”

3. Impact on family relationships

The main purpose of the BeLeave sessions with the family is to strengthen the family bond, which is essential to drive good communication in the household, and therefore support the safety of the girls and young women.

According to the family support worker, the most common feedback they receive from the families is an increased understanding of each other and each other's lives:

“For me the key is strengthening that family relationship. Looking back at some of the information we have had and the child and family feedback, the thing that comes out more is “I understand my daughter more” that has come out a few times.”

“So strengthening not only the awareness of the relationship, but also how to keep each other safe. That is the point of the intervention, it is actually not for the young

woman, it is for the family, and the family might actually have their own take on the programme.”

“I have had a few mums who probably had mental health issues, and it is just understanding that both from mum's perspective and from the young woman's. The mums I have worked with probably don't understand mental health in general anyway, regardless of their own.”

BeLeave have the opportunity to impact not only the girls and young women who have been directly referred but also their siblings and carers, through better understanding of mental health, and mutual recognition and support of feelings, behaviours and challenges that can be exacerbated by mental health difficulties.

“So with this family I have got them to do a self-esteem exercise, where I got them to draw a mirror, and they had to write down what they thought of themselves and it was actually quite nice to see because you saw them looking at each other and what they had wrote. So with that family she the young woman had put something like “stupid” and her sister crossed it out and put “beautiful” instead. It was something as simple as that – as a family you can do something together and also they probably do not say that to each other. She probably doesn't go to her sister and say “you are beautiful”, and that helped mum because they did not communicate at all, and whenever they did they would argue a lot.”

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The three GYWs interviewed by the researchers about the project agreed that the programme had helped them in creating better family relations. In particular one suggested how her family helps her whenever she gets anxious:

“Recently I had been getting flashbacks towards stuff, every time I get upset or something it gets to my mind. I’ve told my auntie everything and she has calmed it down so I try not to think about it.”

Out of the three parents interviewed, one of them said that the intervention hadn’t helped, especially not around the young woman not going out:

“No – her friends just go and she does”

However other parents shared positive outcomes, and in one case they are now more capable of reacting to emotions and behaviours displayed by their child:

“The last two weeks she’s not been in the right place to be honest. Doesn’t matter what we say, do, give her. Doesn’t change anything, it’s just the way she is. She has to understand her own feelings. It’s hard but hats off to her she does really well sometimes. I do see the other side to her as well and I have to avoid it – I do my best with her. I can’t really – I do have a go at her sometimes but I find out the real reason and try and avoid it then. She needs time out.”

“Yeah, [YP] stopped self-harming.”

I. The Brief Family Relationship Scale

This measure is designed to understand the quality of the relationship functioning in a family, as perceived by an individual. The Scale is divided into three sub-scales: “Cohesion”; “Expressiveness”; and “Conflict”. Where a higher level of cohesion and expressiveness mean that the family is perceived as functioning better in those areas by the individual, a higher level of conflict represents a person’s negative perception of the quality of the functioning in his/her family relationship.

As for the CYRM, the Brief Family Relationship Scale is also completed by both the girls and young women and their primary caregiver.

A total of 60 GYW have completed the measure before taking part in the BeLeave session. Out of those, only 30 have completed the measures both before and after taking part in the programme.

When comparing averages of the sub-scales at each time-point, the outcome shows an increase in the two clusters associated with family functioning, and a decrease in the sub-scale for family conflict.

More specifically, as shown in *Figure 13*, the sub-scale measuring cohesion has increased by 1.6 points, going from 16.6 out of 21 to 18.2 out of 21.

The subscale for expressiveness has increased slightly less, by 0.9 points, going from 11.1 to 12.

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These two scales together measure the overall quality of family functioning. Overall, the level of family functioning on average, the GYW perceived grew by 2.3 points (from 27.8/36 to 30.1/36).

Finally, the level of perceived conflict within the family decreased, on average by .3, going from 15.3 out of 21 to 15 out of 21.

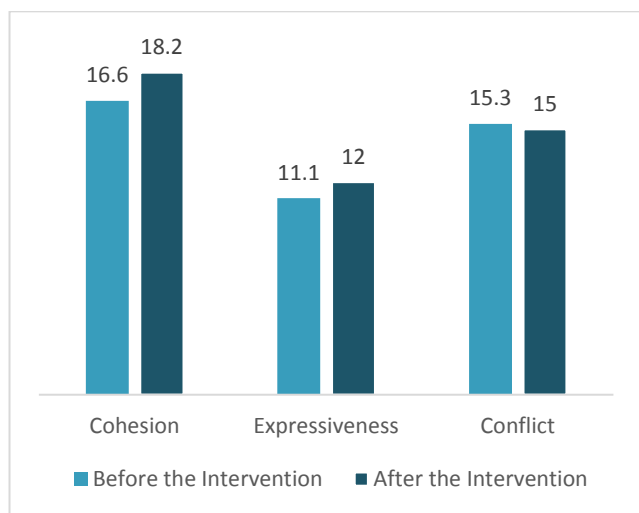


Figure 13. The Brief Family Relationship Scale scores before and after intervention

More specifically, the impact of the programme was positive across the scale, with the majority of participants showing an increase in score for “Cohesion” (18 participants) and Expressiveness (18). The Conflict sub-scale decreased in 15 cases, which demonstrates a positive change.

These figures indicate that BeLeave had an impact on family relationships and family dynamics for most GYW who completed the programme.

When comparing averages for each of the sub-scales for The Brief Family Relationship Scale, the results indicate that the only statistically

significant change in the participant’s responses has been around cohesion ($p < 0.05$).

The Brief Family Relationship Scale has also been administered to the GYW’s primary caregivers.

A total of 55 respondents completed the scale as a pre-measure and 30 respondents at completion of the programme. When administered to the caregivers, this scale produced both some negative and positive shifts in scores between the pre-intervention and the completion. Specifically, both the sub-scale for cohesion and the one for expressiveness increased, shifting respectively from 18.4 out of 21 to 18.9 and from 12.4 out of 15 to 13.1, indicating a higher level of family functioning. The score for conflict however also increased, from 15.2 out of 21 to 15.7, indicating increased sense of conflict in the household. This could be perceived as a negative outcome, conversely that parents and carers have become more active in their role, and able to recognise and deal with conflict rather than avoiding it.

On the other hand, expressiveness levels increased for 14 people, decreased for only 4, and stayed unaltered for 12. This might indicate that, in a lot of instances, the concept of emotional divulgation and of talking about one’s own feelings within the family to increase safety, improve bonding and general functioning, has not been explored enough to make an impact throughout the programme.

Finally, despite overall levels of conflict having increased, on average, it was observed that in most instances the variable of conflict on the Brief Family Relationship Scale has actually decreased (13 out of 30) in most instances. It

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has increased for 11 caregivers, and has stayed the same for 6 individuals.

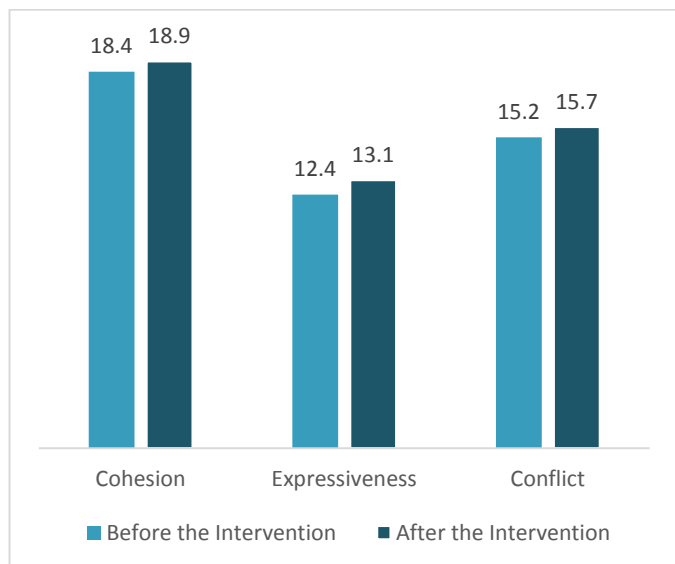


Figure 13. The Brief Family Relationship Scale - Caregivers scores before and after intervention

Finally, the overall levels of family functioning calculated from the analysis of the Brief Family Relationship Scale have overall increased with a shift upwards of 1.8, from 30.8 out of 36 to 32.

The positive increase in expressiveness is the only sub-scale that, subjected to a paired T-Test to compare averages before and after intervention, resulted statistically significant ($p < 0.05$).

It is interesting to note, comparing the Brief Family Relationship Scale's participant averages with those of their caregivers, that in both cases there have been noticeable increases for both cohesion and expressiveness, indicating a perception of a closer bond and of better communication within the household. At the same time, however, just as for the CYRM, it is possible to observe that where the GYW were positive overall, their caregivers were at times more negative. In the context of this measure, the "Conflict" subscale, which indicates family

dysfunction, has decreased for GYW, but has instead increased for the caregivers.

A possible explanation for this might be that increased communication between family members highlights not only the positive bond of the family, but also certain areas of conflict that were not noticeable beforehand.

Another reason for this discrepancy might be the increased communication between the girls and young women and their families: because a communicative bridge has been opened between family and young women where it was closed beforehand, increased tension might have arisen as well. This, because of a newly found voice from both parties, which are now more open about speaking their mind. Constructive discussions might be viewed as an opportunity for a dialogue from the GYW's side, but as increased conflict and oppositiveness from the parent's point of view instead, who now perceive their children as more challenging.

II. Challenges for families to achieve outcomes

When reflecting on the challenges that still make it hard, at times, for staff members to ensure that the families get the best possible outcomes they could from the programme, two main areas seem to raise concern: the first one being the lack of trust that sometimes families have for staff members. This appears to be due mainly to the high number of staff members from different services that the families have often been in touch with/have been approached by:

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“I do worry about trust, and how quickly that gets built with us a little bit, or professionally in general because a lot of these families we work with always have professionals. So how quickly they trust us is really important for how quickly we work.”

“I think that affects our intervention as well because we have a lot of GYW who have always been around , their whole life, and they probably know the system and know what to say. So what you do when sometimes in theory someone ticks all the boxes, but that is because they are programmed to know what to say to get people off their back.”

The other issue raised related to cultural differences and different values and liberty of expressions that families from certain cultural backgrounds have:

“I think you have also got cultural values. I think there is a big issue with that, I see it a lot especially with Islamic families. How GYW are perceived, the fact that they do not have a voice. She is presenting issues that the family feel like they do not know and maybe mum and that have different views and then that feeds into the child, whether they might feel that they can be open with one parent and not so much with the other or such.”

4. Conclusion

From the findings observed through the qualitative and quantitative analyses, it is possible to say that the first outcome has been successfully met, with most GYW’s level of risk having decreased when compared to the initial referrals, and with their awareness around child criminal exploitation and gang-related harm having increased instead.

According to both the analysis of Rosenberg’s self-esteem scale and participant’s feedback, it is also safe to say that the participants, overall, are significantly more confident and have a higher sense of self.

An increase in aspirations and resilience is harder to evidence based on the data collected, however the comments from the outcome tools and interviews suggest that there are individuals who have benefitted in these areas of development.

Finally, the third outcome has also been achieved: looking at the Brief Family Relationship Scale, at the Outcome Measurement Tool, and at the interviews with the participants, it seems possible to conclude that the family relationships of the GYW who attended the programme, and their parents, have positively been benefited by BeLeave. Specifically, the intervention seems to have been the most useful to enhance family bonding and communication, which in turn has also decreased the risk levels for child criminal exploitation for the GYW.

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Overall, it is possible to conclude that BeLeave effectively targets child criminal exploitation in the context early interventions.

If the programme were not to receive further funding, it would leave a gap in knowledge-based and practice-based working with child criminal exploitation, GYW fundamentally, and families that would perhaps be overlooked by other services because marginalised and hard to reach.

Recommendations

Chapter 7 - Recommendations

- **Develop activities that specifically enable Girls and Young Women to recognise and develop their aspirations.**

Aspirations are recognised as key for young people to implement changes in decision making and lifestyle, improving the long term likelihood of positive outcomes in the short and long term.

By developing activities that focus on this area of work, impact will likely be recognised in other change measures such as Self-Esteem, confidence and resilience.

- **Develop activities that enable the development of self-esteem in ways that is not reflected by, or dependant on, physical appearance.**

Self-esteem was reported as increasing in most cases, however the qualitative data suggests that physical appearance is either the driver for a change in self-esteem or the manifestation of self-esteem.

Developing other ways for women and young girls to recognise and enhance their self-worth would foster a more sustainable change in self-esteem and associated factors.

- **Review activities that relate to resilience and measurement.**

The report highlights that being able to recognise and communicate resilience is a challenge for young women and girls. In turn, measuring any change in resilience becomes problematic.

By developing activities and language that enables service users to identify and communicate their levels of resilience, as well as the mechanisms that (can) enhance and maintain it would be useful for the long term impacts of BeLeave.

- **Identify CPD opportunities for staff.**

Staff and management have recognised the strong link between gang behaviour and risk and that of CCE. However a gap in knowledge remains and further training is needed.

Staff have been proactive in seeking opportunities to develop knowledge and close gaps, and are committed to continuing to do so.

- **Development of peer support networks.**

The work done with peer groups suggests that this method of working has significant benefit for young women and girls. Steps have been taken to implement peer mentoring and activities when possible, and a long term strategy to implement a peer support system that is accessible and consistent is required.

Staff recognise that this is dependent on maintaining contact with service users beyond their active participation and requires additional resource, time and energy to implement.

- **Development of volunteering strategy.**

The enthusiasm to 'give back' that service users demonstrate is testament to the impact the BeLeave programme has had on those individuals. The peer mentoring activities (R5) would provide an outlet for these volunteering ambitions, to build confidence, experience and self-

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esteem (R2 & R3).

A volunteering strategy could also address those aspirations identified in sessions (R1) by enabling young women and girls to discover and/or reaffirm their strengths and capabilities.

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Appendices

Appendices

Appendices

Appendix A

Staff Focus Group – Interview Schedule

IMPLEMENTATION

1. Could you describe your role in the BeLeave project and at what point during the run of the programme you have joined the team?
2. When you first joined the programme, what were your expectations of it? Have your expectations been met?
3. Were all the tools and information you needed readily available and up to date?
4. Have you identified any training needs and have these been met?
5. Do you feel supported in your job? Have there been any times when you felt like you needed extra support?
6. Did you have to adapt the way you usually work to ensure good teamwork? Do you feel like your colleagues have been open to change?

PROCESS

1. What did you perceive the engagement of relevant stakeholders to be like?
2. Is the referral process smooth? How could it be improved?
3. Do referral routes meet the needs of the communities?

Appendices

4. Can you identify any barriers to referrals and engagement?
5. Have there been any young people who have not been reached because of the way the programme was designed?
6. Was the programme flexible enough to meet the needs of the YP and their families?

(no. of sessions, topics, time and place etc...)
7. Are there any issues with the process that need to be addressed?
8. Are there any gaps in the programme either at a content or at a process level?
9. Does the programme support girls on the longer term? What is the provision of service and follow up once they have completed the sessions?
10. Is there a process for the YP to re-engage with BeLeave once they have completed?
 - a. If yes, are there any barriers to re-engagement?
 - b. If no, what would it have to look like to be effective

OUTCOMES

1. What was the impact of gang-association in the families you were working with? Specifically:
 - What was the impact of gang-involvement on family relationships?
 - What was the impact on school engagement?
 - What was the impact in the community?

What was the impact the programme had on each?

2. What were the challenges the girls who engaged in the programme presented in relation to gang-involvement? How did/didn't the programme address these and what was the outcome like at the end of the programme?

3. What were the challenges the families who engaged in the programme presented in relation to gang-involvement? How did/didn't the programme address these and what was the outcome like at the end of the programme?

Appendices

4. Do you think the BeLeave Project helps girls in terms of their self-esteem?
 5. Do you think the BeLeave Project helps girls in terms of creating a clear plan for the future (aspirations, hopes, wishes)?
 6. Do you think that, overall, BeLeave helps in reducing gang-related harm and gang-involvement?
 7. Once the BeLeave Project comes to an end, what will be its long-term impact in the community/family relationships/schools? And how would these areas be affected if BeLeave was not longer funded?
- ***Are there any areas of BeLeave that could be improved/changed?***
 - ***Are there any areas that you think BeLeave should address with children/families in future cycles?***

Appendices

Appendix B

BeLeave Interview Schedule (Phone Interview) – Girls

Hi (name). I am (researcher), a researcher from the University of Northampton. I am contacting you in regards to the BeLeave Project – I believe that (BeLeave staff) has already contacted you about an interview?

Is this still a good time for us to talk or would you prefer to reschedule?

That's great. As (BeLeave Staff) has likely mentioned to you, the University of Northampton has been asked to gather some information around the quality of the project, so whether BeLeave was useful to the girls who attended and their families.

Before starting the interview, I just wanted to go through some information with you about how we use the interviews and to make sure you are okay with it and still want to take part.

First of all, taking part in this study is completely voluntary, and you can decide to stop the interview at any time. Secondly, you don't have to answer any questions you do not wish to.

The other important thing is that I will audio record this interview, so that I can make sure to collect all the information correctly and not miss anything along the way. The interview will then be typed up in full, but it will be anonymised completely so nothing that you say could actually be traced back to you.

Are you okay with all of this and still okay to go on?

I'm going to put you on record now.

IMPLEMENTATION

1. Could you tell me a little bit about yourself and your family?

(Prompts – Where did you grow up? Do your family have a good relationship? Do you like school? What

Appendices

would you like to do when you grow up?)

2. How did you come to be referred to the BeLeave project?
 - What were the circumstances for you and your family at the time?
3. BeLeave is aimed at reducing gang-related harm and involvement. Have you/your family been affected by gangs? If so, how?
 - What was the impact on you/your family of gang-related harm?
4. When you first joined the programme, what were your expectations of it? Have your expectations been met?

PROCESS

5. Was the programme flexible enough to meet the needs of you and your family?
(no. of sessions, topics, time and place etc...)
6. Are there any issues with the process that need to be addressed?
7. Does the programme support you and your family in the longer term? What is the provision of service and follow up once you have completed the sessions?
8. Does the programme support girls on the longer term? What is the provision of service and follow up once they have completed the sessions?

OUTCOMES

9. Has the project helped to reduce any harms/negative effects you/your family were experiencing? If so, what/how?
10. Has taking part in BeLeave had any impact on your family's relationship? If so, how?
 - Do you think strong, supportive family relationships are necessary to help girls to avoid gang-related harm?
11. Has taking part in BeLeave had any impact on you personally:
 - On your self-esteem? If so, how?
 - On your aspirations - your plans/hopes/wishes for the future?

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- Has taking part in BeLeave had any other impact on you in your family, home, school or personal life? If so, what?
12. Has BeLeave changed the way you **identify, understand** and **avoid** gang-related harm? If so, how?
 - Overall, how effective would you say BeLeave has been in helping you and your family to identify and avoid gang-related harm?
 13. Are there any areas of BeLeave that could be improved/changed?
 14. Are there any areas that you think BeLeave should address with children/families in future cycles?

Thank you for taking the time to talk about BeLeave. Is there anything else that you would like to add that we haven't already discussed?

Appendices

BeLeave Interview Schedule (Phone Interviews) - Families

Hi (name). I am (researcher), a researcher from the University of Northampton. I am contacting you in regards to the BeLeave Project – I believe that (BeLeave staff) has already contacted you about an interview?

Is this still a good time for us to talk or would you prefer to reschedule?

That's great. As (BeLeave Staff) has likely mentioned to you, the University of Northampton has been asked to gather some information around the quality of the project, so whether BeLeave was useful to the girls who attended and their families.

Before starting the interview, I just wanted to go through some information with you about how we use the interviews and to make sure you are okay with it and still want to take part.

First of all, taking part in this study is completely voluntary, and you can decide to stop the interview at any time. Secondly, you don't have to answer any questions you do not wish to.

The other important thing is that I will audio record this interview, so that I can make sure to collect all the information correctly and not miss anything along the way. The interview will then be typed up in full, but it will be anonymised completely so nothing that you say could actually be traced back to you.

Are you okay with all of this and still okay to go on?

I'm going to put you on record now.

1. Can you tell me a little bit about yourself and your family?
2. How did your child/your family come to be referred to the BeLeave project?
 - What were your circumstances at the time?
3. BeLeave is aimed at reducing gang-related harm and involvement. Has your child/your family been affected by gangs? If so, how?

Appendices

- What has the impact been on your child/your family?
4. Had you accessed support in relation to gang involvement/gang-related harms prior to BeLeave? If so, what support had you accessed and what was your experience of it?
- Are you aware of any other services that provide gang support?
 - Do you think the service provision is enough?
 - What else could be done?/What could be done differently?
5. Has BeLeave helped to reduce any harms/negative effects your child/your family were experiencing? If so, what/how?
6. Have you noticed any impact on your family's relationships from your child/your family participating in BeLeave? If so, what have you noticed?
7. Have you noticed any changes in your child since you/they participated in BeLeave?
- Changes to self-esteem?
 - Changes in their aspirations - plans, hopes and wishes for their future?
 - Has taking part in BeLeave had any other impact on your child in their family, home, school or personal life? If so, what?
8. Has BeLeave changed the way you identify, understand and avoid gang-related harm? If so, how?
9. Overall how effective do you think BeLeave has been in helping you/ your family and your child to identify and avoid gang-related harm?
10. Are there any areas of BeLeave that could be improved/changed?

Appendices

11. Are there any areas that you think BeLeave should address with children/families in future cycles?

Thank you for taking the time to talk about BeLeave. Is there anything else that you would like to add that we haven't already discussed?

Appendices

Appendix C

BeLeave Project Evaluation – Participant Consent Form

I understand: **Please initial each box**

The information collected will be used to inform the BeLeave Project and Spurgeons in regards to the service provision to girls involved or at risk of involvement in gangs;	
Taking part in this study is voluntary and that agreeing to take part or not will have no bearing on my access to the service provided by BeLeave in the future;	
I can stop taking part in the interview at any time;	
I don't have to talk about anything I don't want to;	
I have been given the opportunity to ask questions;	
I am able to stop participating in the study up to two weeks after my interview and I can contact Valentina or Lydia at ipscj@northampton.ac.uk to cancel any information I have provided and the recordings/transcriptions of my interview;	
The interview will be audio recorded for data collection and all interviews will be typed up in full;	
Data collected will be anonymised for reports, articles and presentations so I will not be personally identifiable;	

Appendices

<p>I understand that the researcher will not tell anyone what I specifically have said unless I have told them something that makes them think that myself or other individuals are at risk of harm.</p> <p>In this instance, the researcher will discuss it with myself before reporting it to other relevant authorities;</p>	
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I agree to take part in the study:

Name

Date

Signature

Researcher: I confirm that I have explained the nature, purpose and possible effects of the research study to the person whose name is printed above. They agreed to take part by signing and dating above:

Name

Date

Signature



Institute for Public Safety, Crime and Justice

Portfolio Innovation Centre, University of Northampton,
Avenue Campus, St. George's Ave, Northampton, NN2 6JD

www.ipscj.org