

REPORT

PROJECT
FUTURE ▶

Centre for
Mental Health



Unlocking a different future

An independent evaluation of Project Future

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Executive Summary

Research consistently shows that material, social and racial disadvantages increase risk of poorer wellbeing and mental health problems, and the risk of offending. Young people in the youth justice system are three times as likely to have an unmet mental health need. Yet mental health and social care for these young people is limited, short-lived and often via criminal justice or acute care (e.g. compulsory admissions). Young people rarely have access to the help they need, and when they do it tends to be pathologising and temporary, creating further barriers to accessing support.

Project Future is a community-based holistic wellbeing and mental health service commissioned to address some of these inequalities. It aims to improve young people's wellbeing, access to services, and education, employment and training opportunities with the long-term aim of reducing marginalisation and offending. Project Future is situated in Haringey in one of the ten most deprived wards in the UK, with high rates of inadequate housing, homelessness, crime, children living in care, unemployment and mental health difficulties. Project Future has been funded by Big Lottery Fund to work with young men aged 16-25 with experiences of the criminal justice system, specifically those exposed to serious youth violence or labelled "gang-affiliated". Project Future has been coproduced alongside young men in the community, underpinned by the ethos that they are experts in their own lives and are best placed to know what would support their community.

Centre for Mental Health evaluated the project for three years and this report details our findings.

What affects young people's wellbeing?

The way young people are treated by the media and society as "criminals" and exposed to racial and class prejudices undermine their wellbeing:

"Society sees you as a gang member. Everyone sees you like that. Like I was walking home and I had my hood up because it's cold and you walk

past a woman and she, like, clutches her bag tighter. Like I'm not going to do anything, but that's the way society looks at you."

This was consistently described in school, criminal justice, council and mental health services, where help was often poorly resourced and short-lived, leaving people feeling judged, unsupported, labelled and unsafe:

"If you say to a child 'you won't amount to much', they'll go home thinking that and they'll start believing it. They won't be anything - the teacher's said that and they are older and have more knowledge so you've crushed them..."

Young people described the daily and normal nature of violence and threat to safety in their community, resulting in living in "high threat mode", "paranoia" and "trauma":

"A lot of young people have PTSD but this only gets associated with soldiers...but I've seen friends bleed out in front of me and they've seen me bleed out in front of them and it's traumatising but it has to become normal otherwise you'd have a breakdown."

Young people described the importance of their family and friends in providing support and love, their experiences of losing them through death and imprisonment, and constantly seeing their family struggle to make ends meet:

"I hated the environment I was in. Seeing my mum work two jobs, missing meals, it made me sick and I wanted better for myself..."

Many talked of feeling stuck, powerless, judged and hopeless:

"Young people are looking for a way out. You don't want to keep walking down the road watching your back or walking down the road with a knife. You want to be able to go to a shop on your road to get milk and feel comfortable. People don't want to be in this situation, but they were put in this situation because of the area they were born into..."

Despite these obstacles, young people described their resilience in navigating this complex and dangerous world:

“I don’t think some people could walk in my shoes, I think a lot of people would crumble going through what I have...”

What impact did Project Future have?

198 young people have worked with Project Future over three years and the following outcomes have been observed:

Mental health and wellbeing: The young people who accessed Project Future faced multiple and complex challenges, which affected their mental health and wellbeing. Throughout the course of this project, there was a striking and statistically significant reduction in needs that relate to mental health and wellbeing. This reduction in needs was more pronounced for young people who had been accessing the project for the longest period of time.

Access to services: Two-thirds of the young people accessed another service via Project Future, including the Department for Work and Pensions (DWP), housing, Citizens Advice, sexual health, primary care, mental health and benefits services.

Access to education, employment and training: Half of the young people are currently accessing education, employment and training. Three-quarters have accessed support from Project Future for this, primarily around job searching and applications, business support, career development, and interview preparation and attendance. Employment and volunteering opportunities through Project Future were perceived to provide ‘stepping stone’ experiences of work.

Reducing offending: Community and criminal justice stakeholders reported perceived reduction of offending amongst young people attending Project Future. Young people report the importance of Project Future in providing a safe space, routine, purpose and opportunities, and in actively addressing risk factors (e.g. support to get their driving licence reducing their need to walk and carry a weapon), in reducing offending.

Working with systems: Stakeholders reported shifts in their perceptions of the young people, which influenced how they approached interventions with this group.

Why is Project Future perceived to work?

Project Future was perceived to be an environment that made young people feel safe, respected, accepted, provided with opportunities, empowered, special, supported and listened to. This enabled young people to see themselves in different ways, access new opportunities, and envision and work towards a “future self”.

A supportive and holistic space, where young people are genuinely cared about, and helped through tailored support:

“They are genuinely interested in what you want to do. I was doing one-to-ones and they would ask me ‘What do you want to achieve? How do you want to achieve it?’, asking questions to find out what would work for me... finding a tailormade plan for me...”

A safe space, where young people are psychologically and physically safe because of the discreet location, peer referral system, and confidential and transparent support:

“Project Future is a safe space that has an impact on your wellbeing, and from safe you can advance and do what you wanna do ... until you’ve got the basics met, you can’t advance ...”

A family and community space, where young people are made to feel special, valued, looked after and like they belong:

“... It’s brought everyone closer together as friends. Before it used to be...all of us close as a gang but this has brought us more close as friends. I don’t feel like I’m part of a gang, I feel like I’m part of friends. Feel like a community...”

An accepting and respectful space, where young people are not judged or seen as problems, shifting how they saw themselves, allowing for different thinking and interactions to take place:

“If you’re treated like a little boy, you’ll act like a little boy. If you’re treated like an animal you’ll act like an animal. Here you’re treated like a man, so you act like a man...”

A legitimate space, where young people feel productive, a sense of achievement and see the project as opening doors to a future where

they can be “legit” by providing different experiences and opportunities:

“...it put a smile on my face...this is meant to be for me, this is my life, these are my dreams, I can be successful in a legit way. I never thought I’d be doing that...”

An empowering space, where young people’s voices are listened to across multiple areas of their life:

“It made me feel important, like I do have a say in the community. I’ve never really presented to anyone above me before...so for them to be listening to it and find an interest, it put a smile on my face.”

Recommendations

- Project Future requires long-term investment to effectively meet the community's needs and to address intergenerational poverty, inequality and violence.
- Local authorities, NHS commissioning bodies, Police and Crime Commissioners and others should pool budgets to offer long-term funding to projects designed to engage and support marginalised young people.
- Every NHS Sustainability and Transformation Partnership should include at least one project built on Project Future’s principles to reach its most marginalised communities.
- Mental health service providers and commissioners should develop services for young people using the key principles of Project Future.
- Schools need to be ‘psychologically informed’, with staff who are trained in understanding and addressing trauma, stress and distress, and ready access to mental health practitioners to provide help to children with behavioural difficulties.
- The Department for Education should embed ‘life lessons’ into the PSHE curriculum and consult with young people to find alternatives to school exclusions.
- Police forces need resources to invest in recruiting, training and supporting officers to understand and address the complexities in young people’s lives.
- Prisons need a profound culture shift to prioritise wellbeing and rehabilitation in order to stop the cycle of offending: this should include equipping staff to deal with young people’s complex needs, providing psychological support universally, and supporting young people with education and employment ready for when they leave.
- Probation services need the resources to build relationships with young people and provide more joined-up support to reduce their risk of reoffending.
- Sustainability and Transformation Partnerships should provide effective employment support for young people, embedded in community services built on Project Future’s principles.
- The Department for Work and Pensions should review and seek to reduce the extent of employer discrimination against people with criminal records.

Chapter 1: Introduction

Research consistently demonstrates how individuals experiencing material, racial and social disadvantage and discrimination face poorer life chances, including risks to their mental health and becoming caught in cycles of offending (Wilkinson & Pickett, 2010; Sheppard, 2002). Black and Minority Ethnic (BAME) communities experience some of the greatest disadvantages in terms of life opportunities, housing, employment, education and access to services (Sheppard, 2002). Knudsen (2006) posits that social injustices associated with gender, ethnicity, age and class “intersect” on multiple and simultaneous levels, having an accumulating effect on outcomes. The associations between inequality, deprivation, mental health and offending are well evidenced (Public Health England, 2015). Research indicates that young people who encounter the criminal justice system (CJS) are three times more likely to have an unmet mental health need. It also demonstrates links between marginalised groups and depression, anxiety, loneliness, low self-esteem and social withdrawal.

Marginalised groups have poorer access to services throughout life (Khan, 2016). Access to services tends to be reactive, short-lived and at crisis point (Guerra and Slaby, 1990) and often at the acute end (e.g. compulsory admissions, A&E). Black men are disproportionately represented in compulsory admissions as well as in mental health services accessed via the CJS (Barnes *et al.* 1990). Experiences of “help” are often pathologising, punitive and temporary, which Reger and Fredman (1991) posit has a damaging impact on “relationship to help”.

The INTEGRATE Model

The INTEGRATE model, developed by MAC-UK, provides mental health and wellbeing support in a flexible and accessible way (Zlotowitz *et al.*, 2015). INTEGRATE was originally developed to engage and support young people involved in, or at risk of becoming involved in offending and gang-related activity. Originally developed

in Camden, the INTEGRATE model takes mental health professionals out of clinics and into local communities to coproduce a service with young people to meet local need. INTEGRATE piloted four sites: two in Camden, one in Peckham, and finally one in Haringey. Project Future has drawn upon principles from INTEGRATE, further adapting and evolving the approach to create their own ground-up model based on practice based evidence, with young people’s input. Developing Project Future’s approach has been an iterative process based on interviews, focus groups and workshops with young people and staff throughout the course of the project.

Project Future

Project Future is a community based, youth led mental health and wellbeing project in Haringey, that seeks to transform mental health delivery to young men aged 16-25 who have experiences of offending and serious youth violence, often labelled as “gang-affiliated”. In partnership with Barnet, Enfield and Haringey NHS Mental Health Trust (BEH), Haringey Council and MAC-UK, the project intended to improve wellbeing, reduce offending, increase access to education, employment and training, and bridge young people into local services. Project Future adopts a multi-agency, holistic, integrated approach based on the understanding that no one agency has the solution for the complex needs that these young people present with. It is primarily a wellbeing service in which evidence based psychological interventions are delivered in adapted and accessible ways, within interactions and environments where young people feel comfortable and safe. Young people at the project chose the name Project Future, as they wanted to co-create a constructive and transitional space in which young people could create and take positive steps towards their preferred futures.

The project is staffed by a team of clinical psychologists, specialist youth workers and local young people, “community consultants”, who provide a supportive and nurturing

environment for young people to thrive in by addressing their mental health, wellbeing and occupational needs. The service provides bespoke interventions that are tailored to the individual needs of young people, to ultimately improve wellbeing, facilitate rehabilitation and reduce the risk of future offending. At Project Future, young people are positioned as the experts in their own lives and in the community, and have coproduced a service that best meets the needs of them and their peers. The team adopts strengths-based psychological approaches in which young people are not viewed as the ‘problem’ but rather as capable and resourceful young men who can identify the solutions to the challenges they face.

Project Future is situated in the top 10% most deprived wards in the UK (Haringey Council, 2012). The community experiences multiple disadvantages, with higher rates of inadequate housing, homelessness, children living in care, crime, unemployment, mental health difficulties and suicide than London and UK averages (Haringey Mental Health and Wellbeing Framework, 2015). Poor health and social outcomes are particularly concentrated in the east of the borough, for example male life expectancy is 4.1 years lower than the UK average. Access to services is in crisis and tends to be associated with poorer outcomes (Haringey Mental Health and Wellbeing Framework, 2015). Project Future was set up to work with young men from the local community. This has primarily been young black British, African or Caribbean men.

Setting the policy context

The mental health of young people in the criminal justice system has increasingly been a focus in national policies over the last decade. *The Five Year Forward View for Mental Health* (Mental Health Taskforce, 2016) calls for services to be better integrated, recognising the relationship between mental, physical and social needs. It also recommends coproducing services with people with lived experience to develop services that best meet their needs. The previous year, the Department of Health’s strategy *Future in Mind* (2015) set its priorities for children and young people’s mental health, calling for early intervention and for services to be built around the needs of children, young people and their families. *Future in Mind* recommends partnerships between CCGs, local authorities and the community/voluntary sector to develop joined-up care. It prioritises accessibility, in particular making mental health services more accessible to vulnerable or marginalised young people.

A recent national policy review provided more evidence of the link between poverty, inequality and poor mental health, calling for greater investment in the most disadvantaged areas (Joseph Rowntree Foundation, 2016). The Prime Minister has committed £1.3 billion extra to be spent on mental health by 2020/21 (The Guardian, 2017), prioritising young people and specifically preventative work with schools to ensure that needs are met early. The Government is soon to be releasing a green paper on mental health and schools, which will mark its priorities in this area.

The Youth Justice Board and Ministry of Justice's records (2017) show that the number of young people in custody reduced between March 2015 and March 2016. Despite this, the Lammy Review (2017) demonstrated that the number of young people from BAME groups offending, reoffending and in prison has increased. The Lammy Review (2017) reported that in prison, BAME groups are less likely to be recorded as having poor mental health or learning difficulties, indicating that needs are not being met. The Lammy Review (2017) calls for the criminal justice system to become more transparent and focus on trust, by embedding open decision-making and having greater diversity across the police, prison officers, governors, magistrates and judiciary. The Lammy Review (2017) recommends working in partnership with communities, specifically better integrating aspects of the criminal justice system into community-based work.

The Mayor of London's Knife Crime Strategy report also stresses the importance of partnership approaches, calling for a whole systems approach, working with schools, communities, councils and the police to overcome violence caused by knife crime. The report stresses the importance of community-based initiatives and prevention work, building toolkits alongside schools and communities (MOPAC, 2017). Nationally, probation has experienced dramatic changes, with the emergence of Community Rehabilitation Companies (CRC) alongside the National Probation Service (Transforming Rehabilitation, 2013).

In a recent speech, the HM Chief Inspector of Probation (2017) raised concerns that probation reforms had not delivered the benefits set out in Transforming Rehabilitation and that CRCs were struggling to provide quality care.

Chapter 2: Methodology

Project Future was commissioned between November 2014 and November 2017, with a six-month extension until May 2018. Work with young people began in March 2015, and between then and October 2017 the project worked with 198 young people. Centre for Mental Health's evaluation ran for three years from November 2014, with the last data collection in the summer of 2017.

The independent evaluation of Project Future had three main objectives:

1. To define the intervention and how it works;
2. To evaluate the impact of Project Future at an individual level;
3. To evaluate the impact of Project Future at a community and organisational level.

At the individual level, we explored the impact of Project Future on engagement and help-

seeking, mental wellbeing, re-offending, access to mainstream services, and education, employment and training (EET) outcomes.

Centre for Mental Health used both qualitative and quantitative techniques to measure the project's impact and explore its process of change. Full details of the methodology can be found in the table below.

Four young people were employed as ongoing peer researchers to co-deliver the research and evaluation alongside Centre for Mental Health's researcher. The peer research has been a vital part of this evaluation in ensuring young people's voices are truly heard, ensuring the research process is engaging and respectful, and the findings reflective of their experiences. There have been important lessons from this process, described later in the report.

Methodology	Detail	Measuring
Interviews and self-reporting measures with young people	<ul style="list-style-type: none"> Conducted every four to six months with a sample of 20-30 young people to provide an in-depth focused analysis. Questionnaires were completed as part of the research interview: <ol style="list-style-type: none"> 1. The Mind Resilience Framework (Robinson <i>et al.</i>, 2014) 2. General Help-seeking Questionnaire (Wilson <i>et al.</i>, 2007) 3. EET and stability survey 	Impact and process
Clinician-rated measures	<ul style="list-style-type: none"> Two clinician rated measures: Threshold Assessment Grid (TAG) (Slade <i>et al.</i>, 2000) and Health of the Nation Outcome Scale (HoNOS) (Wing <i>et al.</i>, 1999). Collected every six months for a sample of core young people that Project Future staff know well enough to make an informed assessment of. 	Impact
Reflective chats with staff	<ul style="list-style-type: none"> Unstructured reflective interviews with staff. Each member of staff was interviewed at least once every four to six months. The intention of these is for staff to reflect on their work; strengths, challenges and learning, and the underlying clinical thinking. 	Impact and process

Methodology	Detail	Measuring
Peer-led research	<ul style="list-style-type: none"> This was coproduced with young people. Included a short film based on peer-led interviews; surveys measuring impact of the literacy project; community interviews and focus groups; and a coproduced wellbeing tool. A short report outlining the peer research at Project Future has been included (see chapter 9). 	Impact and process
Database	<ul style="list-style-type: none"> Staff recorded data on contact, i.e. length, type, location, focus of interaction. This provided quantitative data for every young person who was in contact with the project. 	Impact and process
Participant observation	<ul style="list-style-type: none"> The researcher observed project activities such as mappings, sessions and community events. 	Impact and process
Interviews with stakeholders	<ul style="list-style-type: none"> Interviews were held every six months to one year with stakeholders working in the community and local services. 	Impact and process

Evaluation findings are based on the analysis of:

- 90 interviews completed with 45 young people and community members engaged in Project Future (23 of these took part in more than one interview);
- 90 outcome monitoring surveys completed with 45 young people and community members engaged in Project Future (23 of whom completed a survey at more than one time-point allowing us to track shifts on a small sample in wellbeing, resilience and help-seeking);
- Analysis of the clinical database, with outcome information recorded for 198 young people;
- Clinician-rated tools completed with 60 young people engaged in Project Future;
- Peer-led focus groups held with 30 young people;
- Peer-led and researcher-led interviews with 24 stakeholders working in the local community and wider services including mental health, criminal justice and the local authority. Eight of these stakeholders took part in more than one interview;
- A focus group held with 10 community members;
- Ongoing interviews and reflective chats with nine Project Future staff;
- Two process of change workshops held with Project Future staff;
- Participant observation of weekly sessions, clinical mappings and multi-agency meetings;
- One process of change workshop held with 12 young people;
- Bi-weekly meetings with peer researchers;
- A peer-led piece of research resulting in a short film.

Methodological challenges

Self-report outcomes were tracked using the Mind Resilience outcome measuring tool (Robinson *et al.*, 2014), which measures wellbeing, social support and self-efficacy. Centre for Mental Health had previously discussed the pros and cons of self-report tools with youth experts from other INTEGRATE sites. The youth experts recommended that any self-report measure was built into the interview. Some young people reported difficulty in completing these surveys as they found them too “tick-box like”, asking for responses that

“depend on the situation”, and felt that the statements did not always feel relevant to their lives. In addition, it is likely that initial stigma and mistrust affected comfort in completing surveys. We addressed these challenges by coproducing a wellbeing tool with young people at the project to accompany the existing surveys.

Given the nature of the intervention, the number of young people participating varied at each time-point as new individuals engaged in the project and joined the evaluation, and others moved on. This meant that the sample size was small for those completing surveys and interviews at more than one time-point. To address this, multiple data collection methods were used to ensure there was data for all young people. This provided in-depth analysis both for young people participating in interviews as well as quantitative analysis for the wider group, with findings being triangulated.

Due to the confidential nature of Project Future and importance of trust, it was not possible to measure offending using official records. This means that the evaluation relied on stakeholder, staff and young people’s perceptions of offending.

Definitions

Project Future was commissioned to support the mental health and wellbeing of young men affected by “gangs” or serious youth violence. Government policy uses the Centre for Social

Justice’s definition (Antrobus, 2009) of a gang as a relatively durable self-identifying structured street-based group, who engage in criminal activity and conflict with other groups. These are controversial terms and these “top-down” categories of young people are not how they see themselves or their peer group. Furthermore, the stigma and stereotypes that accompany these labels govern young people’s lives, affecting how they are seen and treated, and restricting the types of help available to them (e.g. “gang interventions”).

Similarly, traditional definitions of mental health can be associated with mental illness or ‘mental health disorders’, creating enormous stigma around accessing services. Recognising this stigma, Project Future took young people’s advice that wellbeing, which everybody saw themselves as having, was more helpful because it encompassed mental health as well as other aspects of their life. Moncrieff *et al.* (2011) posit that definitions of mental health need to move beyond medical, diagnostic models to a frame that considers social, cultural and historical factors that impact distress and ask the community what they see as important to their wellbeing. It is important to consider how these stigmatising categories, when used in commissioning and setting up services, can become themselves key barriers to access. The terms used in this report are shaped by the language used by the research participants in order to try and stay true to their experiences and what is most helpful to them.

Chapter 3: Setting the context – what affects young people’s wellbeing and opportunities?

To assess the impact of Project Future it is important to first discuss the context in which young people have grown up, the inequalities they have faced and how these have contributed to poor wellbeing, barriers to accessing help and getting caught in cycles of offending. It will highlight what young people describe as “hurdles, barriers and L’s – losses” that they have faced growing up, drawing on their perspectives as well as existing evidence and literature. Project Future is underpinned by the view that young people become stuck in cycles of offending and have poor wellbeing due to the complex interplay of racial, social and health inequalities that operate across different levels of their lives. This section will explore how such inequalities have impacted

young people as they have grown up, using the Bronfenbrenner ecological systems model (1977), which looks at how the different levels that surround a young person (e.g. society, services, community, family and the individual) interact, “mount up” and impact their lives.

This section will explore what young people perceive to affect their mental health and wellbeing. Taking a rigid, predefined view of what is meant by mental health or wellbeing can result in services failing to meet needs. When young people define what is important for their own wellbeing, however, services, commissioners and policymakers can begin to understand and shape services around what is wellbeing-enhancing.

How does context affect young people and opportunities?



Based on Bronfenbrenner's ecological systems diagram, 1977

Society

As part of the contextual setting, we explore the society-level impacts and how these shape young people's opportunities and wellbeing as they grow up.

Media stories and political rhetoric

Young people commented on how news headlines and political rhetoric (e.g. about young black men, people not working, or people living in poverty) have demonised their community. Portrayals of young black men associated with crime, violence and gangs create negative dominant narratives for young people about black culture. A review of media content, which monitored national and regional news over 16 weeks, found that 66.9% of national print and broadcast news about young black men was related to crime (73% when referring to print news only) and 3.8% were positive stories, such as achievements or community work (Moore *et al.*, 2011). Young people reflected on this:

“My friend put something like ‘black man’ into Google and the first things to come up is crime stuff, robberies, burglaries. Nothing positive, like about black history. So that’s what society sees; where are the good stories about young black men?”

“If you’re not working you are looked at as scum and if your skin is black you are looked on as a trouble maker, there’s big stereotypes... it makes you feel like, if they think I’m going to do it then I’ll go and do it. But it shouldn’t be, you should be able to walk down the road and feel free...”

We heard that media representations only tell the parts of the story that are relevant to the “criminal” narrative, cutting out details that make the young person “human”, e.g. that “they were a person who laughs, had things they cared about, people who loved them”. Media accounts of violence towards young people in the community tended to reduce them to “statistics” or be omitted from the news.

“I had a friend that died and the media painted him as this gangster, saying he was gang this, gang that. His family had to see so much that

they didn’t need to see... they painted him as a gangster so it wasn’t a normal person that died. It gives less reason to care because he was bad, everyone will just think ‘oh another gangster’... and they miss out parts of their story, that he used to help people in the community, buy food... but that’s irrelevant to their [the media’s] story...”

“It’s not in the news because they don’t want to worry people, they just leave everyone to battle and cancel each other out. Try to hide it from the rest of society so they don’t worry about what’s going on in that community. It’s a stain there. This stuff needs to be covered because the numbers are scary...”

Young people described the detrimental impact of these dominant labels on their wellbeing and sense of self-worth and identity; feeling frustrated, angry and trapped, powerless to change anything, and like “these are labels that will never come off”:

“You start to think this is who you are, this is the truth, you are no good and there’s nothing you can do about it, so you fall into their description...”

Societal narratives around “criminals”

A related theme was the experience of these stereotypes of “criminal” and “gang member” permeating across different levels of young people’s lives. This was evident in the way that young people were treated in and out of their communities:

“Society sees you as a gang member. Everyone sees you like that. Like I was walking home and I had my hood up because it’s cold and you walk past a woman and she, like, clutches her bag tighter. Like I’m not gonna do anything, but that’s the way society looks at you.”

“You can’t even go into a shop without being watched and followed like you’re a criminal...”

Young people described experiences of life-long friendships being stigmatised and only seen as gangs, thus ignoring the support and community that such groups provide. Young people discussed how once an individual has a criminal record or has been linked to a “gang”, that becomes how “you are defined” - “you

are reduced to just a criminal.” For example, employers do not look past the offences and the majority of available help is the result of an offence, i.e. probation or a “gang exit programme”.

“Once you got a criminal record it’s so hard, you lose their confidence, no one is going to employ you or trust you.”

Living with the knowledge that society viewed them in this way was described to negatively impact wellbeing, affecting sense of self-worth and identity, further marginalising young people and contributing to feeling stuck: “...It makes you think you’re worthless, so you think fuck it. What can I do?”

Racism

Both overt (e.g. racial bullying) and subtle (e.g. differential treatment) racism had been experienced across multiple levels of a young person’s life. Young people discussed experiences of being bullied at school and targeted because of race and nationality. Young people described their experiences of being treated differently in the criminal justice system and mental health services (e.g. greater targeting, access to mental health via criminal justice). The subtle nature of this differential treatment made it harder to “call out” (complain) and young people described feeling powerless and fearful in “standing up for their rights”. Young people described the impact of racial abuse throughout their lives on their sense of identity, self-worth and feeling angry. They reflected on experiences of being bullied because of their ethnicity, leading to “bottling up so much anger”.

Khan *et al.*’s recent report (2017) supports these young people’s experiences. It discusses the “wear and tear” effects of racism on mental health, such as the constant stream of negative media representations of black men and everyday experience of discrimination and “micro-aggressions”, all perceived to impact identity, self-belief and confidence. Meta-analyses have demonstrated statistically significant links between perceptions of

exposure to racism and psychological distress (Priest *et al.*, 2013). Priest *et al.* (2013) noted strong relationships between exposure to racial discrimination and adverse effects on mental health, wellbeing and behavioural problems.

“You start to think this is who you are... you are no good and there’s nothing you can do about it, so you fall into their description...”

Services

Public services such as school, community services, criminal justice and mental health have played a significant part in young people’s lives and have affected their wellbeing, opportunities and relationship to help.

School

Several young people discussed their experiences at school. Some described positive experiences at school where teachers were responsive, supportive and understanding of a young person’s context. There was recognition that many teachers were doing the best they could with poor resources, and it was frequently mentioned that their schools did not have the resources to take a more individualised approach: “they don’t have the time to be child-centred”. This often resulted in young people feeling left behind, not pushed or finding it difficult to focus in the classroom. Several young people reflected on the shaming experiences of asking for help and being “humiliated” in front of the class for “asking stupid questions”, perceived to reduce the likelihood of asking again.

Commonly described was how young people felt targeted and labelled at school as “a bad kid”, “you’ll be nothing”, a message that was internalised with “lasting consequences”:

“If you say to a child ‘you won’t amount to much’, they’ll go home thinking that and they’ll start believing it. They won’t be anything - the teacher’s said that and they are older and have more knowledge so you’ve crushed them...”

These early labels (“you were split into good, salvageable and lost”) affected how young people were treated, for example “being removed from class”, getting excluded and sent to a pupil referral unit. One young man explained:

“You kick me out of school and put me in a unit and class me with all the bad kids. And we’re all bad kids in a unit, now who can be the baddest in a unit? Because we’re all trouble so who can be the most trouble? But if they could have just sat down with each child, and talked to me, don’t take each child as every child. Just try to find out other schemes to help that child. Maybe he can’t go to school, maybe he has to go to somewhere else. So you find a way to push him in that direction...”

The experience of being “kicked out” and punished for “challenging behaviour”, rather than having the time taken to “find out what was going on” and support a young person, led to young people feeling unwanted and voiceless, as well as unable to communicate difficult feelings:

“Exclusion is basically saying we don’t want you no more. It sends that message. You’re too much trouble. We can’t help you, there is nothing we can do for you, you are endangering our good students... when you act out, which is a cry for help, the school is saying we can’t help you. That’s what it says to you. That’s the message. It’s subconscious. It makes you bottle things up...”

Frequently discussed was how school did not address the reasons why young people were “acting out”, or acknowledge the reality young people faced of struggling to make ends meet and stay safe:

“School needs to support you through life, what people go through, possible struggles and how to get through them, like finances, you’re experiencing it anyway, seeing your parent not being able to buy food, that’s finances... seeing someone get stabbed, you’re young but you’re seeing it and there’s no space to talk about it, get it off your chest...”

Part of this was failing to recognise how unsafe young people were - “a knife was part of the uniform” - and misunderstanding the measures young people took to protect themselves as “bad behaviour”:

“There’s times I’d bunk because people are waiting outside the school but then you get in trouble because it’s misunderstood and seen as naughty...”

Through these experiences young people described feeling further excluded and having internalised messages that they “won’t amount to much” and should “stop dreaming”. Young people described the impact of these experiences as creating mistrust towards professionals. In addition, young people described how school exclusion increased time out on the streets and exposure to offending and violence, starting young people in “a cycle” and “priming them for prison.”

Evidence demonstrates that marginalised young people face worse educational outcomes and a recent review from the Institute of Public Policy Research reported that permanent exclusions were highest among young people with mental health needs, learning difficulties, from BAME groups or lowest socio-economic families (The Guardian, 2017). Black pupils from Caribbean backgrounds are markedly overrepresented in pupil referral units (The Guardian, 2017). Research has indicated a link between school exclusion and later involvement in crime or prison, and a study tracking 4,000 students found that those excluded from school were 12 times more likely to be jailed as an adult (McAra and McVie, 2010).

“Exclusion is basically saying we don’t want you no more.... You’re too much trouble. We can’t help you, there is nothing we can do for you...”

Criminal justice system

All of the young people we interviewed had some form of contact with the criminal justice system. In interviews, young people recognised that individuals had to take responsibility for crimes committed, but had found that the systems in place did not support them in making the necessary changes in their life. Young people described experiences that negatively impacted their opportunities and wellbeing across the criminal justice system, discussing accounts with the police, police cells, sentencing, prison and probation. Echoed across interviews was how the young people experienced prejudicial treatment across the system, e.g. stiffer sentences, more likely to be held on remand, compared with young people not associated with “gangs” or from a Black community. The recent Lammy Review (2017) confirms this disproportionality, finding that the odds of receiving a prison sentence for BAME individuals for a drugs offence are 240% higher than their white counterparts. Young people reflected on this differential treatment:

“It’s sad but us being the minority, Black, foreign background, we have to try harder automatically. If you are young, in a hoody, with friends, then the police will stop you. You don’t have to have a criminal background...”

Everyone commented on the difficult historical relationship with the police, with young people experiencing being targeted from childhood, of being “aggravated”, having police “handcuffing Mum at home” and experiences of powerlessness in their interactions with the police. Young people described the experience of being stopped and searched both as a child and now as one which made them feel powerless and frightened.

“No-one thinks the police are scary but you don’t have to have done anything wrong but when they stop you, your heart’s beating...”

“I was a young teenager and the police stopped me outside my house... I was on my way home from school, and they stopped me for mistaken identity. I was by myself and I was frightened because I didn’t know what to do. I didn’t know my rights, what I could and couldn’t do and

I’ve got these two adults, two officers violating me in front of my house on my way home from school...”

Several young people discussed implications of the Gangs Matrix, developed by the Metropolitan Police to identify and monitor individuals deemed “harmful gang members” using police information (Mayor of London, 2014:30). This was perceived to result in harsher targeting for these young people, who discussed how it easy it was for an individual to be registered on the matrix (e.g. by going to hospital for a stab wound, being referred by another service) and how hard it was to come off. The Gangs Matrix has been shown to result in greater police targeting and stiffer sentences, as well as having implications for family members (e.g. heightened risk of eviction) (Williams and Clarke, 2016). Information on the Gangs Matrix is shared with agencies such as the Department for Work and Pensions. The Lammy Review (2017) reported that 86% of individuals on the Gangs Matrix are from BAME groups.

Experiences of being in police cells were perceived to have a detrimental impact on mental health:

“People have been stuck in there for three days and it fucks with your head, affects you psychologically. When you’re in the cell you feel dirty, sick, anxious, it makes you want to vomit.”

Many of the young people had experiences of Youth Offending Institutes or prison, described as having detrimental effects on their wellbeing:

“It’s a mental thing going to prison, going inside such a small space can make you mentally ill. All that time just looking at walls can send you nuts...”

Young people highlighted how the lengthy periods of time isolated and in their cell meant they were left with lots of time thinking and playing over traumas that had happened. Several young people described how, in prison, they were not seen or treated as humans: “you feel like an animal put in this cage”. Young people discussed the impact of prison on their family in exacerbating stress and pressure.

On release from prison some young people had very positive experiences of probation and Youth Offending Team (YOT) workers who provided important sources of support. There was recognition of how stretched probation services are, which often resulted in a “tick box” experience: “you’re in and out”. Young people reflected on the hurdles they had to overcome when leaving prison, e.g. trying to find work, sorting out housing and the lack of support available:

“Probation knows that everyone who goes to probation has a bad situation because they’ve just come out of jail so they know it’s not going to be easy. All they tell you is to sign on...they don’t help you find a way to make money...”

For many young people, engagement in probation was shaped around compliance, “fear of being recalled” and “being seen and judged as a criminal”, making it difficult to build trust or feel as if their probation worker cared:

“They try and force you to do things you really don’t want to. And your life is in their hands, your freedom, and if you don’t comply they’ll recall you...it’s a constant threat...”

The criminal justice system were the services young people had the most contact with and were often a gateway to other sources of help (e.g. mental health, employment support). However, the current system was perceived to “keep you in trapped in a cycle”, impacting young people’s mental health and leaving them feeling hopeless, demonized and not helped.

Mental health services

Out of the 45 research participants, nine reported having previous experience of mental health services, which had primarily come about through behavioural concerns in school or later through prison:

“When I got caught for this crime I got sent to a psychiatrist because they didn’t understand how I was capable of it...”

These services had often been experienced as unhelpful because, firstly, young people described how they had been referred because they were a “problem” and the help appeared

to be concerned with what was wrong with them. Secondly, young people reflected on how they had been expected to open up to a complete stranger in a room “you don’t feel comfortable in”, which meant the “help wasn’t on your own terms”. Young people consistently described how they felt that the mental health professional was “not able to relate”. They described how reports were shared from the police and school with mental health services, resulting in a lack of trust. In addition, community members commented on how Black people’s entry to mental health services is often through being sectioned and medicated, creating further mistrust in seeking support. One young person reflected:

“...Once you talk to those types of people, you don’t know how they’ll take it, they might deem you unwell and section you and then medicate you...”

These experiences of mental health services deepened the barriers and stigma associated with accessing psychological interventions, further excluding young people from this type of support. Research supports these concerns, demonstrating that black people are more likely to enter mental health services under a section of the Mental Health Act, receive medication rather than be offered talking therapies, and be overrepresented in high and medium secure units and prisons (Mental Health Foundation, 2017).

Services in the community

Young people consistently discussed the lack of services available to them in the community. Most described positive and supportive experiences of a youth club when younger, but these services tended “to come and go” due to funding cuts:

“When you have services that come and you build trust, you start sharing confidential things and then they go, it gets your hopes up...”

“It messes up your mentality when something goes. People don’t have positive experiences so they cherish it. When services go it changes your mentality and makes you not like them because they will leave...”

Accessing services such as the JobCentre or housing advice tended to involve “complex processes”, “being passed from service to service” with negative consequences (e.g. “losing your benefits” and “fines”) “if you get it wrong”. It is important to note that young people were going through stressful situations when trying to access services – “you got too much in your head” – and often their experience of this exacerbated distress:

“You just don’t want to be judged when you’re going through a difficult situation, they’re like ‘how could you have done this, how could you get yourself into this mess?’”

This was all perceived to impact a young person’s relationship to help, contributing to mistrust and a sense of hopelessness in asking for help, with a detrimental impact on their wellbeing:

“I couldn’t trust anyone, I’ve been through a lot of hurt and pain and I didn’t want more future pain and stress because when I’ve done it before it’s hurt. So you clench up and hold back, you don’t talk, and that causes even more stress and worry...”

Employment

Echoed across interviews was the lack of job opportunities for young people and how the few available tended to be low pay or zero-hour contracts:

“When I got arrested last time, I had one zero-hour contract, so I didn’t really have enough work...”

Several young people described participating in short-term employment courses, which did not result in a job at the end. Several young people raised concerns about how their safety prevented them from taking available job opportunities:

“Say you worked in Tesco’s and every second a bus goes by or college kids walk in, you’ll be thinking who’s that, who’s that?”

Employment support had often focused on getting young people into any job and this lack of realistic job opportunities contributed to keeping young people in an offending trap:

“The priority has been to get kids into any job, Sainsbury’s, Tesco’s, and they’ll be alright. But once you take a few steps into that, you’ll come straight back. It’s like, hang on, I was making more on a day on the streets than I am here in a month. Do I really want to sacrifice all that money? My mum is eating, my little brother has new school shoes, I’m looked after...”

Young people described how when they applied for jobs they were repeatedly rejected, often finding that they were not even given a chance:

“The problem is an employer won’t come and pick people in here... they’ll pick people in college or uni. But if they came here and gave people the opportunity, we have been hard workers. We’ve worked hard for ourselves and spent 12 hours on the road shotting [dealing] with all sorts of people...”

Criminal records were a huge barrier to getting into work. For example, one young man described how despite having the right qualifications and experience, his criminal record seemed to “outweigh” his C.V. Another young man explained:

“The fact that I want a job means that I don’t want to be a criminal anymore, but they won’t give you it because of your criminal record – it keeps you in a constant trap. It makes you feel like what’s the point? There’s none, so you have to be a criminal again, because you can’t get a job...”

The lack of employment opportunities and continually facing job rejections contributed to young people feeling stuck and frustrated. However, many young people described their resilience in keeping going after each rejection and making the most of every opportunity that came their way. The evidence demonstrates how young people are disproportionately more likely to be employed in lower paid work and on zero-hour contracts (Office of National Statistics, 2017). Research conducted by Institute of Education (UCL News, 2017), tracking over 7,000 25 year olds, found that zero-hour contracts were linked with poorer mental and physical health outcomes. Having a criminal record is associated with higher levels of unemployment and one study found

that three-quarters of employers admitted to discriminating against applicants with criminal convictions (The Guardian, 2015).

Community

Growing up facing poverty and inequality in the community shaped young people's opportunities, offending and wellbeing. Additionally, their lack of safety governed their lives, shaping where they could go and the opportunities they could take. The traumas they experienced were perceived to undermine their mental wellbeing, which often went unrecognised.

I was making more on a day on the streets than I am here in a month... My mum is eating, my little brother has new school shoes, I'm looked after..."

Inequality and poverty

Young people described the inaccessibility of facilities in the local community. For example, sports clubs, major shopping centres and council buildings were often situated in rival areas that were not safe for them to travel to. Young people described how their community was not looked after, e.g. how estates had bullet shots through broken windows, the stairwells smelt like urine, there was rubbish everywhere, and high levels of drug misuse and homelessness. In addition, several young people commented on the "regeneration" coming to the area and how families were getting pushed out, which contributed to the community feeling unwanted. Young people said their community got differential treatment to other areas, for example:

"If someone gets stabbed in central London the ambulance comes straight away. If someone gets stabbed here the ambulance isn't coming for 45 minutes - 1 hour. This area hasn't got the same treatment as other areas..."

Data from London Ambulance Service supports this, revealing that Haringey response times were consistently below average (London Ambulance Service, 2017). The messages

internalised from these experiences were that the community and young people were not cared about, which "makes you feel like...you're worthless..." Young people commonly described how the inequality they experienced led to them feeling mentally "stuck" with no option to move forwards in life. Several young people described this experience of mental imprisonment:

"If you're always stuck in the same place, it's like prison, prison will wind you up. You're in the same spot and the minute you come out it's like you're in prison again. Stuck in the same places, you're still in prison... imprisonment in your mind. You don't have to be in prison to be in prison. You can be out here and be imprisoned. Why do you think the same area, the majority of kids from poor areas keep going back to jail? They're imprisoned already. So prison to prison, it's a cycle..."

Young people reflected on how risks to safety were heightened in poorer areas, with greater exposure to crime, violence and drug abuse and how their parents (often out working) were not always there to protect them:

"Most people around here, their parents have two jobs, meaning you're not going to see your parent most of the time, meaning you're going to have to do certain stuff by yourself, which means you're more vulnerable to stuff in an area, when you're already vulnerable...it just adds things together..."

"In a wealthier area you might get picked up after school in a car so you're protected. But here when you're walking home, lots of things can happen, you can see anything and anything can happen to you. You're not safe..."

Safety and violence

Another aspect of community life perceived to affect young people's wellbeing and opportunities was the severe level of violence they were exposed to, which had a significant impact on their feeling trapped, afraid and traumatised. For many young people, being "born into a life on road" meant they were involved from a young age because of where they were from and who they were affiliated with:

“You don’t want to be but because of your brother, cousin, you’re affiliated. They’ll be like ‘that’s my little brother, leave him alone’, and the other side who has problems with your brother will be like ‘he stabbed my cousin last week, let’s get his brother’...”

Young people described daily threats to safety – “everyone I know has been stabbed or shot at” – and feeling fearful for their own future:

“It can be me tomorrow, it can be anyone and it’s so fucking scary. It doesn’t matter how brave you are or if you have a knife, you can be outnumbered...”

“I don’t know what to expect. Bare [lots of] things have been happening and going on... Someone close to me died... It makes me think that life is crazy...”

Young people discussed how powerless they have felt to improve their safety: “This area will always be like this, you just have to get out...” This exacerbated the risk of offending in order to protect themselves. Young people discussed not being able to walk and needing to travel via taxi, drive (either legally or illegally) or protect themselves with a weapon. One young man explained:

“All of that made me start driving with no licence, and then I got caught. I’d rather get arrested for having no licence, than getting stabbed or something. I don’t want to be walking around, I could be driving. I know I’m doing something wrong but at least I’m safe. Like most people, when I used to walk with a knife, I was never starting trouble, it was because I know there’s people out there with bigger knives who could potentially stab man [me]. You need to protect yourself. It’s not like you walk out of your house with the intention to stab someone. No one wants to be walking with one. But you need to be safe. Out here is not safe, so you need to make it safe...”

The impact of feeling powerless to effect change resulted in “violence having to become normal to keep going...what option do we have?” “Letting it get to you” could lead to “mental breakdown” or “turning to drugs” so it “has to become normal”. As one young man explained:

“The first time I saw someone get stabbed I must have been scared, but by the fifth time, it’s normal. I’ve seen friends die. And seeing it so much makes it easier for you to do something if someone is coming at you and you’ve seen so many people get stabbed...”

Violence has had a significant presence throughout young people’s lives (“I was a child the first time I saw someone get stabbed”) and across multiple levels (e.g. in the community, in war-torn countries, on the news), reinforcing it as normal:

“There’s violence everywhere, some of us come from overseas and have seen shootings, bombings, you see nuclear war on TV and think this is how the world goes, so stabbing is minor...”

Young people also reflected on the role of violence in their community in initiating change when they had no voice, e.g. the riots were described as a communication of distress and anger by an oppressed community and a way of getting voices heard:

“To feel like we can make a change, and even though we did it in a violent way, but if we had someone to lead us in the righter way...”

“People weren’t getting heard so it had to come to that. People can only be quiet for so long, so you need a voice. If you don’t have a voice, how can you get heard? People have to communicate somehow...”

Violence and trauma

Young people discussed the impact of exposure to violence on mental health and wellbeing, “constantly having to look over your shoulder” which prevented “you from ever looking forwards in life...” They described constantly operating in high-threat mode to keep themselves safe:

“You have to walk out with that paranoia. You have to equip yourself with paranoia so that you stay on point. Paranoia keeps you alive. You are watching every car, every driver, and [if] you do that you’re gonna see people roll on you and [you’re] gonna be able to get out of every situation because you’ve noticed it. If you’re not

paranoid you're relaxed and then people jump out at you and you get shot..."

In addition, young people reflected on the level of "pain" they went through, akin to a "soldier's" experiences, which is rarely recognised or supported:

"Because we go through some serious shit over here. Traumatic shit. Shit that some people won't even go through in their lives. They'll probably die from a heart attack to go through one day that we go through... It's borderline stuff that soldiers go through... we're like soldiers at war... a lot of young people have PTSD but this only gets associated with soldiers, but I've been stabbed and it was traumatising, and I've seen friends bleed out in front of me and they've seen me bleed out in front of them, and it's so traumatising but it has to become normal otherwise you'd have a breakdown."

Young people discussed how society and services construct them as either a victim (i.e. good) or a perpetrator (i.e. bad). This is an unhelpful distinction because the boundaries between victim and perpetrator are more complex, fluid and dependent on the context. For many young people, violence had permeated their life and was extremely entangled and difficult to escape, forcing them to operate in high-threat mode, feeling trapped and uncertain for their future. Living in an unsafe area is a known risk factor for poor wellbeing (Patalay and Fitzsimons, 2016). Garbarino's (1995) research into inner-city environments in the United States found similarities in levels of trauma symptoms between children living in war zones and children living in inner cities. Trauma can impact on other aspects of functioning including struggling with concentration, behaviour, becoming desensitised or overreacting to traumas, as well as operating in hypervigilant states of alertness (Bell and Jenkins, 1991).

"The first time I saw someone get stabbed I must have been scared, but by the fifth time, it's normal. I've seen friends die. And seeing it so much makes it easier for you to do something if someone is coming at you."

Friendship and family

The next layer of context, friends and family, was seen by many young people as a hugely significant source of support, characterised by warmth and love, and perceived to be key in building resilience. Young people described the importance of friendships in providing support and strength through hardships, often unacknowledged by surrounding systems.

"You talk about what you go through with your friends and you get closer and closer and it's called a gang. But they are my close friends..."

Young people also discussed the experience of losing peers through death and prison, and the impact of grief and loneliness, often with little support to process the loss:

"My closest friends are all in jail on long sentences... friends are very important because I can't lie, since they've all been in jail it's been lonely. It's stress, I can't wait for them to come out..."

The strong relationships and support at home were seen as hugely important in helping a young person to "keep going" through hard times such as prison.

Commonly described were the financial pressures and stress faced by families who juggled responsibilities to make ends meet, and the implications for young people in needing to make money themselves:

"Your mum's working and it's not enough to cover so you go without, do you pay your rent? Fill the gas? She can't afford a bus pass, so she's walking to work, always deciding what to go without... and then you get a letter from the bailiffs and you panic; how are we going to pay? Then you get a phone call and you're panicking, so scared that you're going to get evicted..."

Young people talked about how their parents, working multiple jobs, struggled to meet basic needs, as well as the need to "fend for yourself" and "grow up quickly". The need for money in a community with limited opportunities meant that drug-dealing and offending became the viable option:

“I hated the environment I was in. Seeing my mum work two jobs, missing meals, it made me sick and I wanted better for myself...”

Several young people described the experience of being bullied or singled out because they could not afford new school shoes, “the latest trainers” or “Nike bag”:

“For me personally, when I was growing up before I made my own money I didn’t have no clothes. My trainers were from the market whereas my friends always had a fresh pair. I had a single parent and we didn’t have no money. I was too young to work but when someone gives you some money, to do something, then I decided to do the road. If you gave people options... and I saw, maybe a guy in a suit jumping in a nice car, I might have asked him ‘what do you do?’ But I didn’t...”

The impact on young people

Throughout young people’s lives the multiple risk factors described above have all interacted and had a compounding impact on their opportunities and wellbeing. Young people described how these “hurdles and barriers” in their environment reduced their options, becoming trapped in offending:

“You need to understand someone’s background and environment, that is 80-90% of what’s going on, it’s not the person. The person you are arresting, don’t focus on them so much, focus on where they live. They are not the problem, the problem is the environment... imagine yourself in that person’s shoes: you are a kid, growing up in an area with gangs, it’s all you see, the only option is to go to school, do sports or gang life...”

The dominant messages about how society sees them are filtered across multiple levels of a young person’s life. They have been internalised and have become their lived reality: “you believe that you are no good and start to accept your destiny”. What has been consistently illustrated throughout this discussion is how stuck young people have felt due to being “born into life on road”. This means living in a marginalised community with no opportunities

to “get out”, feeling unsafe to walk down the road or take any opportunities of help or work, constantly “checking over your shoulder”, and feeling “chained” to the dominant narratives surrounding young Black men. The impact of all these risk factors was perceived to have a cumulative impact on young people’s wellbeing, identity and self-worth, exacerbating their feeling of being stuck, powerless and hopeless:

“Young people are looking for a way out. You don’t want to keep walking down the road watching your back or walking down the road with a knife, you literally don’t. You want to be able to go to a shop on your road to get milk and feel comfortable. People don’t want to be in this situation, but they were put in this situation because of the area they were born into. They want a change, they want to be the one to say ‘Mum let’s move somewhere else, a better area’...”

“All this makes you fall short and you’re afraid to dream. Everyone had dreams, they wanted to be this and that, but they learn they couldn’t be...”

“It makes you not want to be yourself. If everyone is looking at how bad you are, no matter what you are doing and you are really trying and you are still looked at as bad. It just makes you feel like you’re trapped, that’s who you are and there is no other option out. You don’t have any power, it makes you grow to hate or feel like the world is against you...you’re being held down by chains.”

Moreover, young people described how these experiences had taught them to bottle up traumas and associated feelings, and from a young age “cries for help” were met with discipline. As one young man described:

“A lot of people don’t feel like they can display their emotions or the only emotion they can display is anger. That’s the only release that they know that is acceptable in their community, because if you cry you get called a bitch. I’m crying for help, I have issues that I don’t know how to display and I don’t know how to release my emotions effectively. So, in the community and as a man in society you can’t show emotion. It’s a double whammy.”

This meant that there was little space to communicate how they felt and the only acceptable portrayal of emotion, both in their community and in society as men, was anger. Young people described bottling up anger from multiple and continuous difficult experiences, for example, seeing their mum go hungry, being racially abused, bullied and told by teachers “you lot are such wrong’uns, you’ll end up in jail...” One young man described the impact:

“It means you take it home or you take it to the streets. Bottle it up at home, or some people take out their frustrations at home. There are examples of that. Or take it to the streets, you end up robbing someone that day because you’re angry...”

In addition, these experiences of feeling judged, punished, misunderstood, unsafe, unworthy, let down and set up taught young people from early on “to fend for themselves” and to not rely on or trust professionals and services. This made it difficult to ask for help, resulting in young people having “no one to talk to” or help them through difficult situations, with potentially detrimental effects on their mental health:

“It makes you feel trapped, alone, like you have no one. You start using your own thoughts as advice and bottle it up, playing it over and over, or you become mad and angry, it can make you flip...”

“I don’t think some people could walk in my shoes...”

What helps young people to overcome these barriers?

Resilience

Despite all the obstacles that young people have faced, they have demonstrated resilience and resourcefulness to navigate and survive this “dangerous world”. Young people consistently discussed picking themselves up “after another loss” and “keeping going, what other option do you have?” The untold story is the resilience of these young men to overcome adversity, e.g. to find ways to make sure their families are fed, keep going after a friend gets stabbed and apply for job after job after multiple rejections:

“I don’t think some people could walk in my shoes, I think a lot of people would crumble going through what I have. They don’t know what I’ve survived and you don’t get no credit for it, no credit for going through what I’ve been through. People want me to be better but they don’t know what I’ve been through, they don’t know the half. It ain’t been easy, every day is a day we have to survive. I could be gone tomorrow but they don’t see that...”

“You always have to come back stronger, if you get knocked down you have to try again, try a different way...”

Young people reflected on the importance of keeping going, of having faith in themselves and faith that their lives would change: “every day I wake up and say, in a couple of years, the situation I’m in will be different...”

Chapter 4: Project Future approach

Project Future is a community-based mental health and wellbeing project, which has been coproduced with young men aged 16-25, clinical psychologists and specialist youth workers. Psychological approaches sit at the heart of the project and are used in ways which are accessible to young people and shaped around their needs and preferences. The team consists of a full time project lead and deputy project lead (both clinical psychologists), a senior mental health practitioner (clinical psychologist), youth interventions specialist, assistant psychologist, employment specialist and part time clinical administrator.

This section details the components of Project Future that comprise the intervention:

- Therapeutic relationships;
- Reframing the problem;
- Holistic wellbeing;
- Coproduction;
- Partnership;
- Clinical thinking;
- Team approach.

Therapeutic relationships

Project Future's fundamental approach is the therapeutic relationship, where the whole team provide an experience of consistent and genuine care. Each young person who enters the project is treated with curiosity, care and respect, and staff prioritise building a relationship that suits and is led by the young person. Young people consistently report on the welcoming, non-judgmental and friendly staff as the reason why they keep coming back: "there is a lot of love here..." The therapeutic relationship is underpinned by psychological approaches, which are adapted to make them safe and comfortable. This creates an informal and comfortable space, which allows relationships to develop in a way that one-to-one clinic style appointments do not:

"... we don't have appointments here like where we have to check in and speak about our life. It's less formal and it's at your own time, there's no pressure ..."

At Project Future, relationship building is rooted in attachment principles that having caring, consistent relationships are vital for human development and growth (Bowlby, 1988). The vast majority of the young people accessing Project Future have had adverse experiences early in life, and difficult experiences of services, which has meant that it often takes a long time to build trusting relationships with professionals. The project posits that every person deserves and thrives from another person taking the time to get to know and care about them. Young people are able to build relationships with staff without having a diagnosable problem, which is perceived as different from mainstream mental health services. In traditional services, the primary purpose of building a therapeutic alliance is to help the client overcome an identified or diagnosed problem and there is an expectation to engage in some form of help. Instead, Project Future posits that help-seeking should be determined by people as and when they need and want it, drawing on ideas from psychoanalyst Donald Winnicott (1989).

The team use their clinical skills to attune to each young person, taking their lead on what relationship is most helpful to them. Every young person, regardless of how they are accessing Project Future, is someone of value and made to feel special, e.g. receiving a birthday card and cake. Consistent and transparent boundaries are a key aspect of the approach in creating a containing and safe relationship. As well as building a therapeutic relationship, a key part of attachment at Project Future is creating a safe physical space to meet basic needs (e.g. comfy sofas, discreet location, equipped kitchen, access to WiFi). Prioritising this attachment relationship created a therapeutic environment where over time young people felt safe to express the more vulnerable parts of their lives and to access support. This safe relationship aims to provide the space to seek help from a professional and have a restorative experience of accessing support.

“This space allows you to have those conversations, e.g. about what violence has meant in your life. You can bring all the mixed emotions relating to it...”

Reframing the problem

Project Future operates a peer referral approach based on the INTEGRATE model, where friends invite friends with the intention of keeping the project safe and accessible (Zlotowitz, *et al.* 2015). From the outset of a friend referring their peer to the project, accessing Project Future is not shaped around being or having a problem, but rather the focus is on development and growth. Young people explain the project to friends as somewhere they can come and develop themselves, plan their future, achieve their goals, access support, chill out and have fun. The dominant stories that young people describe experiencing throughout their lives, e.g. school (“you’ll never amount to much”), society and the media (“feral thugs”) have all positioned them as the problem. In contrast, Project Future’s focus on development and growth enables young people to overcome the stigma and shame of accessing a mental health/wellbeing service and challenges the idea that they themselves are the problem.

This is not to deny or avoid problems, and a large extent of Project Future’s work is on intensive therapeutic interventions relating to the complex and multiple challenges young people face. However, Project Future argues that these challenges and problems are the result of multiple and overlapping health, social and racial inequalities, rather than the young people themselves. This stance is embodied in the way the team explain Project Future’s objectives to new young people, acknowledging that young people become trapped in cycles of offending due to the stark multi-levelled inequalities they experience growing up. Project Future draws on ideas from narrative therapy, whereby problems are seen as external to and separated from the person (White and Epston, 2004). Narrative therapy posits that seeing the problem as external to the person empowers them, giving them freedom and a sense of agency in their life (White and Epston, 2004).

“This is one of the only spaces where it doesn’t matter if you’re an offender and that allows conversations and openness. We offer a normalised and non-judgmental view of drug dealing. It’s a big aspect of people’s lives and it’s been traumatic and you need to process it, but it’s been blocked off and not spoken about...”

Project Future also draws on the basic tenets of systemic therapy of non-judgmental and non-blaming approaches, which seek to understand behaviour and interactions in a relational context (Burnham, 2002). Linked to the above comment, this provides a space to bring difficult emotions and experiences with no fear of judgment:

“This space allows you to have those conversations, e.g. about what violence has meant in your life. You can bring all the mixed emotions relating to it and it’s tolerated and considered...”

Core to the narrative approach at Project Future is recognising the strength, resilience and resourcefulness young people have demonstrated throughout their lives. Young people have navigated and survived multiple challenges, and are seen and treated by Project Future as agentic and resilient young men. Through taking interest in the multiple stories that somebody has about themselves and their life, i.e. their strengths, problems and goals, Project Future holistically works with the “whole person”.

Holistic wellbeing

Thirdly, Project Future is a holistic approach, recognising how positive wellbeing requires connecting the different aspects of a young person’s life. This approach has recognised that there are multiple components that affect wellbeing and although a focus on mental health is key, it is important to attend to other aspects of wellbeing too. For example, young people reflected on how their physical health and fitness impacts their wellbeing and so healthy eating, sexual health and a gym and swim project have all been incorporated.

In attending to all aspects of a young person's life (e.g. their interest in cooking, business aspirations), Project Future retains a sense of fun because young people can seek out staff for a specific problem and then spend time playing Fifa with their friends, cooking and chilling out. This has meant the project can provide serious therapeutic support, e.g. relating to trauma, psychosis and severe substance misuse, but remain a positive and therapeutic environment, not wholly fixated on problems.

Young people report that they can bring any request or idea to Project Future and it will be taken seriously. Project Future then seeks to link young people with the wealth of expertise and resources in the systems around them. Over time, on young people's request, services such as sexual health, the JobCentre and criminal defence advice have been brought into Project Future. This approach is also about connecting young people to the network of services and resources around them to improve overall wellbeing.

As well as seeing a young person as a whole, the project also sees each individual as part of a wider network – their friendships and community. Project Future consistently seeks to connect all these different aspects of a young person's life, drawing on social connectedness and belongingness theories and evidence, which posit that human beings need social relationships to thrive (Baumeister and Leary, 1995). Project Future is described as both a family and community space, which celebrates the young person as part of a collective and fosters friendships, discussion, shared activities and fun. It therefore works with the whole peer group and increasingly the community (e.g. mums, girlfriends, siblings), drawing on systemic therapy ideas which seek to work with the wider network surrounding the young person (Burnham, 2002).

Coproduction

Fourthly (and derived from community psychology and INTEGRATE concepts), Project Future draws on the principle of coproduction, postulating that young people are experts in their own lives and know how best to meet

the needs of their community (Zlotowitz *et al.*, 2015, Durcan *et al.*, 2017; Orford, 2008). From the outset, young people have been employed as community consultants with the role of co-creating the project, i.e. how the space should look, the activities and trips to run, and how to keep the project safe. Part of this has been through INTEGRATE's peer referral approach, where young people identify who would benefit from using the service (Zlotowitz *et al.*, 2015). Drawing on community psychology, Project Future seeks to shift the balance from power traditionally being held by a service, to genuinely giving young people a voice, eliciting a sense of agency (Walker *et al.*, 2012). This experience of having a strengths-focused relationship seeks to enable different types of interactions where young people feel valued and empowered.

It is important to highlight that coproduction at Project Future is a nuanced process where staff remain attuned to a young person's experience and development. Rather than everything being coproduced, young people and staff work together on discrete and structured pieces of work, e.g. planning a trip, designing a schools programme. Project Future works on the basis that coproducing a project or piece of work requires scaffolding (attuning to an individual's developmental needs and providing the necessary support for them to achieve their goal) (Wood, 1976) for it to be helpful, genuine, achievable and wellbeing-enhancing. It is important to note that clinical expertise is an integral part of coproduction, and young people still form help-seeking relationships with professionals at Project Future. It would be a mistake to see coproduction as everyone having an equal and shared role, and the clinical expertise is core to the project's effectiveness.

Working across multiple levels

Core to Project Future's approach is that agencies need to work together to address the multi-level risk factors and bring about sustainable change. Project Future works with the different systems around young people, including both the community and wider services. The project works together with community members to intervene at the

community level in different ways, e.g. with mums, schools and older adults. The project also works with the systems that surround young people (e.g. criminal justice and mental health) and seeks to develop partnerships that will join up work and bring about change. This includes training and providing consultations to schools, hostels, NHS, prison and council services about adapting approaches to best support the needs of the group. Project Future regularly presents at conferences and council meetings, on issues such as serious youth violence, mental health and inequality, seeking to shift how wider systems perceive and work with young people. A significant part of this approach is building relationships with probation and working alongside them to ensure that young people have robust and joined-up support when leaving prison.

Partnership

Project Future is a partnership approach between Barnet, Enfield and Haringey NHS Mental Health Trust, Haringey Council and MAC-UK. Staff have been realigned from the local NHS trust, council and MAC-UK, creating the potential for cross-sector learning. The partnership was formed before Project Future began and key stakeholders coproduced shared visions and goals (“we discussed our hopes and fears”), perceived to be helpful in creating a robust partnership. Project Future benefits from the expertise of the senior and very experienced partners who sit on the operational and strategic management boards, contributing to a safe, robustly governed and well-connected service. To achieve the best quality of care, project staff consult professionals from partner organisations regarding the needs of young people. The partnership means the project can draw on the different resources in the network to develop a bespoke intervention which supports young people to access services they previously had not. In addition to this, partnership working has provided many opportunities for the staff and young people to engage in meetings, conferences, training, presentations and consultations, to contribute to systems change locally and nationally.

Clinical thinking – formulations

The Project Future team consider and interact with each young person using clinical skills underpinned by evidence-based psychological ideas, predominantly narrative (White and Epston, 1990), attachment (Bowlby, 1988), systemic (Burnham, 2002), community psychology (Orford, 2008) and AMBIT mentalisation approaches (Bevington *et al.*, 2013). Although the project is radically different to traditional mental health services, all interventions are underpinned by robust clinical thinking. Psychological formulations are a core part of psychological work, which move away from a diagnostic model to one that considers people in their context (Johnstone, 2006). Clinical formulations, or ‘mappings’, occur weekly with the whole team. At the outset, staff state their intention, e.g. “to learn more about a young person”, “to think about how best to engage a young person”, “to think about a recent change in behaviour”. Mapping involves reviewing the young person and the systems surrounding them; the young person’s journey in the project; highlighting examples of the different narratives they might hold about themselves; and reflecting on what has and hasn’t worked. Through mapping, the team draw on theory and evidence-based approaches to develop the most suitable intervention. The whole team is involved in mapping meetings to ensure that “everyone is on the same page” and young people receive “cohesive support”. In addition to the mapping meetings, the team constantly thinks about young people in more informal mappings between team members, supervision and “thinking together”, an AMBIT technique (Bevington *et al.*, 2013).

Team approach

Project Future is a team approach, meaning that each team member can work with every young person. A ‘keyworker model’ ensures that every young person is held in mind by two members of the team but the whole team can and will work with each young person. Young people experience a whole team supporting them as well as the opportunity to access different people for different things. The team comprises

a range of professional and personal expertise, e.g. psychologists, specialist youth workers and employment specialists alongside graphic designers, “a great sous-chef”, giving young people a choice of access to the support they seek. The positive team dynamic also provides experience of a united and cohesive support system. An important part of this team is the community consultants, young people from the local area who have been employed to help set up and run the project. Their involvement has

been described as crucial in initially engaging young people in the project and acting as “a bridge to the support that young people are entitled to but not getting”. The team approach is a departure from mainstream mental health services where a practitioner is primarily responsible for their own clients and cases. Given that the work requires a great deal of mental and physical juggling of tasks, staff report that the team approach prevents it becoming “overwhelming”.

Tyrone's journey through Project Future

Tyrone was 19 years old when he first came to Project Future. He was introduced by a friend, who had a job at the project as a Community Consultant. Initially, he spent most of his time playing computer games with his friends and engaged minimally with staff. He spent the first few months observing activities and did not want help from any staff other than the Community Consultants. A few months following his first engagement with the project, Tyrone agreed to join a go-karting trip the Community Consultants put on for their peers. During the trip, Tyrone became frustrated whilst signing in as he struggled with literacy and felt ashamed asking for help with this. One of the staff team quickly noticed and offered to help Tyrone in a thoughtful and discreet way. As a result of this interaction, Tyrone began to slowly trust this member of staff to help with other challenges in his life.

Over the course of the next few months, Tyrone shared that he lived in the local area with his mum and three younger siblings in a one bedroom flat. His mother had significant mental health problems following multiple experiences of domestic violence, some of which Tyrone had witnessed as a small child. Tyrone had spent two years in care as a result of this. Tyrone had a difficult relationship with his dad, who was in and out of a forensic prison. Tyrone’s dad has a diagnosis of paranoid schizophrenia. Tyrone had recently served a year-long sentence at a youth offending prison for carrying a knife. He reported always struggling at school, and was excluded from a pupil referral unit at the age of 14. He started dealing cannabis to make money to support his mum to buy food for the family, and started to carry a knife to protect himself on the streets.

Tyrone started to participate in a variety of activities at Project Future, including cooking, football and the music studio. As Tyrone got to know staff better, he shared that he was often mistrusting of professionals based on his previous experiences of being taken away from his family. Tyrone shared that he had struggled with severe anxiety, low mood and managing his anger since childhood. He developed an addiction to cannabis to help manage his mental health difficulties and to cope with his traumatic experiences of violence and isolation in prison. His addiction got in the way of daily living and his motivation to find work, making his moods worse. Tyrone shared with staff how difficult it was for him to be able to share some of his mental health difficulties, as it was shaming for him to identify and share his vulnerabilities, and because he preferred to see himself as resilient.

Tyrone was keen to work with staff to manage his mood and addiction as he felt very stuck. Staff were able to provide adapted, evidence based mental health interventions during activities such as cooking, playing pool and recording music, and in a more traditional one to one

context, allowing Tyrone to receive an intervention that felt comfortable and appropriate. Staff worked closely with other professionals in Tyrone's network such as his probation worker to support Tyrone manage relationships effectively and let other professionals know about some of his difficulties.

During the course of his intervention, Tyrone increasingly took on more responsibility within the project to help run activities for other young people. He was keen to set up a literacy programme at the project for young people such as himself who did not have their basic qualifications. Tyrone was offered a part time paid youth employee role to set and up and support a literacy project for his peers. As part of this project, he was required to plan the activity, source a tutor, enroll his friends and help with administrative activities in the running of the project.

Tyrone was supported by staff to set up and deliver the literacy project, scaffolding tasks so that he was able to gradually develop literacy, numeracy, time management, planning, communication, typing and telephony skills. Tyrone noticeably became more and more confident during the course of the literacy programme, developing his professional identity and challenging himself in a therapeutic and nurturing environment. He reported how his peers and family began to view him differently, motivating him to stop smoking and think about his future as he could now believe in himself. Tyrone's mother suffered a mental health breakdown during this time, and he was able to use his employment at Project Future to prevent him from taking up smoking cannabis as a way of coping. He was able to seek out specific one to one mental health support to help him cope in more adaptive ways. Tyrone was able to stop dealing cannabis, as a paid employment at Project Future allowed him to earn money legitimately.

Tyrone has become one of the project's most reliable youth employees, taking part in meetings, recruiting staff, organizing trips and supporting with hosting events at the project. He has facilitated access and engagement for other marginalised young people with unmet wellbeing and employment needs. Tyrone has achieved significant improvements in his mood, self-esteem, use of cannabis and offending, and an improved relationship to help seeking. His experience of a youth employment role at Project Future has supported Tyrone to explore his future career goals, enabling him to apply for and sustain an apprenticeship in painting and decorating.

This case study was provided by Project Future. 'Tyrone' is a pseudonym for an amalgam of experiences at the project.

Chapter 5: Process of engagement

This section outlines the journey through Project Future and the perceived mechanisms of engagement, i.e. what has enabled young people to engage, build trust and access support.

Process of engagement

Young people discussed that, before the project could make a difference, trust had to be established: “there’s the trust building and then there is the actual work.” Young people have observed that predominantly, services are set up with the expectation that people will seek help straight away. However, poor experiences of services and of accessing support have made it difficult to ask for help. Data on “asking for help” reveal that young people at Project Future took an average of 7 months (a range of 3 to 15 months) before they felt comfortable to trust staff and access support. Young people repeatedly reported that this was the first service that they had felt comfortable to be “open with”, trust and engage in support.

What enabled young people to “walk through the door”?

Project Future had been vouched for by a trusted youth project in the community, perceived to make it safe to first meet with the staff. Project Future was offering something very different where young people were courted as experts “who knew what young people need” and as having something of value to contribute: “they approached me saying you’ll be a good fit for this project...” A number of young people were employed to help set up the project, which involved designing the space, referring friends and taking a lead on activities. This approach was seen as key to why young people were initially interested in becoming involved, enabling a strengths-focused foundation to the relationship rather than the problem-saturated narrative that young people had predominantly experienced.

Young people recalled how, in setting up the project, they were listened to, taken seriously and empowered: “words became actions”; and

how enthusiastic they felt as the project took shape: “I was excited to see how the studio was going to look ...” The coproduced nature of the project meant that young people were genuinely involved in decisions, from what furniture to buy, activities to run, staff to hire and the project name. This coproduction approach attracted the wider peer group to the project as they saw how their friends were being valued and empowered:

“Project Future works with my friends and they don’t just tell them what to do; she’s saying ‘what do you think of this?’ That’s a big thing because it makes us feel more involved. It makes us want to take it more seriously ...”

Thirdly, peer referral was key to engagement because the project had been endorsed – “my friends were working here so it came highly recommended”, which made it safe. Explained to friends as “their workplace”, where “you can socialise and it’s welcoming” with “lots of good opportunities” meant that Project Future was framed as a place of development. This made it clear to young people that Project Future was treating them differently:

“No one else would offer him a job or give him that chance, so when he got this job I didn’t know people who would do that ...”

Peer referral also meant that young people had the opportunity to watch their friends accessing support, which in turn made it easier for them to ask.

What enabled relationships and trust to be built?

Young people reported that they genuinely felt as if they were cared about at Project Future and how every time they walked through the door there was a “warm hello... how are you?”, and an offer of “something to eat”. Frequently being told, “Let us know if there’s anything we can help with”, made it easier to ask. Young people described how the project demonstrated care in concrete ways, such as “waiting for hours at a train station for the young person” and “paying for travel to get to an appointment”.

Secondly, young people described how they were taken seriously at the project, demonstrated by staff following up conversations with actions: “They’ve shown me they’re serious and my words mean something. They mean what they say...”

“They take your dreams seriously...”

Early help-seeking tended to centre around education, employment and training (EET) and other practical matters (e.g. passport applications) and, during this stage, project staff demonstrated how seriously they took young people’s requests, e.g. “calling up my college with me”, sending emails with job opportunities. One young person said:

“At first, I didn’t want to ask in case things didn’t happen; when I did they sorted it straight away and so it means you can come back and ask again ...”

Several young people discussed how in this early stage they “tested the waters” to check out staff responses when they asked for help:

“I told them a bit of what I was going through to see how they reacted and as I told them bit by bit, I built a relationship and broke it down and told them everything...”

Thirdly, perceived as key to building trust was how young people did not feel pressured to speak to staff but that it was at their own pace “when they were ready”. Staff were described as consistent and “available”, giving young people time and space to “observe”: “they did not push it on anyone, it was at my own pace...”, “no-one forces you to trust, we chose to...”

What enabled help-seeking?

These initial experiences of getting help through Project Future and feeling empowered, genuinely supported, taken seriously and not pressurised were perceived to contribute to young people being able to access support

around “more personal things” in times of crisis and stress, e.g. relating to finances, offending, family, substance misuse and mental health. Two young people commented:

“The trust is built and now more personal things can come. That wouldn’t have happened before...”

“Mental health is a big issue that gets shoved under the carpet because people don’t want to talk about it... Here, because there is trust, you can open up, it’s confidential and it means you can break out of your mental health issue and get the emotional support...”

During this first experience of help, the team provided intensive support, with multiple team members involved, seeing the young person every day and involving trips out (e.g. to court). Young people described how they were not confined to “appointments” or even “locations” but could access support in a way that is helpful to them as and when they need it. Young people described how the psychological support was made more accessible because of the informal environment and how it was framed differently to other mental health services: “they’re not sitting there with a notebook, trying to dissect you”. This first experience of support where young people experienced genuine care was a restorative experience of help-seeking: “I didn’t know people cared like that”. This was perceived to increase the likelihood of young people asking for help again, as well as feeling more resourced to deal with obstacles. It is worth noting how much quicker more recent peer referrals have been to access therapeutic support, and young people reflected how Project Future has become known as a helpful place. Young people who have moved on (e.g. into employment) discussed how their involvement with Project Future reduced but it helps them “maintain” their work and wellbeing, meaning they will occasionally pop in for a catch up.

Chapter 6: Process of change

This chapter explores how, once trust is established, Project Future is perceived to enhance wellbeing, access to education, employment, training and services, and to reduce offending.

Exploring the “mechanisms of change” underpinning Project Future (i.e. why it works) will help in considering what it is about the project that enables change. From interviews, it would appear that Project Future relationships and the context where wellbeing is attended to in multiple ways have created a therapeutic “positive and calm” environment. The interviews reveal that Project Future has challenged and worked in opposition to the multi-level hurdles and oppression that young people face, providing a different context to previous experiences. From interviews, it appears that this space enables young people to play out different versions of themselves, access new opportunities and for doors to open, enabling them to move from a feeling of being stuck and powerless into thinking and living a “future self”.

Young people described what they saw as the components that created Project Future’s environment and indicated that the project is perceived to have an impact through being:

- A supportive psychologically informed space;
- A holistic space;
- A safe space;
- A family and community space;
- An accepting and respectful space;
- A legitimate space;
- An empowering space.

A supportive, psychologically informed space

Young people reflected how they felt genuinely cared about at Project Future, evidenced in the way staff treated them:

“Every time you walk in there’s a smile, there’s an enquiry to how you are, if life’s not going the way you want it to, you can go into a room and chat about how to get back on track...”

“They always ask me did you eat well, did you get your sleep, how was your weekend? It’s really nice to know someone is caring for you and you can pick up the phone...”

Young people discussed how genuine care had been demonstrated in concrete ways, e.g. paying for travel to get to a job fair:

“There’s times I’d said I was going to come and not come before I realised you was serious... I had them waiting for two and a half hours. I couldn’t believe they waited that long. I didn’t think they were serious, I didn’t think they would waste their time for me. Knowing that you have someone willing to waste their time, come and meet you, help you with life... a lot of people don’t do that. I was shocked...”

An example of this support relates to education, employment and training (EET) where young people described how staff would take the time to sit down and learn about a young person’s priorities and their work preferences, as well as their longer-term goals and aspirations:

“They are genuinely interested in what you want to do. I was doing one-to-ones and they would ask me ‘what do you want to achieve? How do you want to achieve it?’, asking options, asking questions to find out what would work for me, what would be easy for me to remember, finding a tailor-made plan for me...”

Young people recounted that the EET support demonstrated how “seriously” they were taken, and the EET coordinator would acknowledge their interests, undertake specific research and report back different options. They reported how EET opportunities were “advertised all over the place” at Project Future and how project staff would link them up with the relevant professionals and organisations to help them achieve their goals. Young people commented on how project staff supported them through the obstacles of looking for work, helping them “to keep going” when facing rejection and coping with poorly paid work: “They help you keep the faith when you’ve been rejected by say eight jobs, they help you to keep going.”

Young people also reflected on the importance of being able to explore with Project Future staff what makes it difficult to access or take up an opportunity, discussing their concerns and worries. They described how Project Future broke down both practical barriers (e.g. getting help with topping up their Oyster card) and psychological barriers (e.g. worrying about “being judged”):

“Where I have so much in mind I wouldn’t go to these places but having them sort it out with me means that I can go...”

Young people described how the tailored support meant it was flexible and looked different for each individual, e.g. one young person described how they liked being “pulled aside” during the session for a quiet conversation whereas other young people preferred to book an appointment. An example of this flexible support is the prison-based work, which is outlined in the box adjacent. Several young people described how the flexible and responsive nature of the support meant that “the help actually helps”. This supportive space also means that young people get a different experience of help, described as reducing the barriers in accessing support, providing a restorative experience of professionals and impacting their access to different services. Feeling cared about was internalised: “I didn’t care until they made me care...” and perceived to impact a young person’s wellbeing, affecting their self-worth and value.



A safe space: Project Future main space.

Photo credit: Project Future

Prison support from Project Future

Project Future supports young people in prison, involving three key transitions: supporting young people as they prepare for prison, complete their sentence, and transition back into the community. Project Future is also working with the wider prison system in thinking about how mental health services are delivered in prison. Before prison, Project Future staff have worked with the young person and their family, providing both practical and emotional support. Young people talk about the importance of the support from Project Future whilst preparing for and going to court, where the staff liaise with solicitors, provide references letters, advocate for a young person and visit them if they are held on remand. Young people reflected on “how much it means” to have that support and the knowledge that somebody cares. Several young people discussed how their involvement with Project Future and the staff’s support influenced the type of sentence they got (e.g. suspended sentence) because the judge saw the “steps they were trying to make”. Project Future staff regularly visited young people in prison, providing ongoing wellbeing support and linking them with services and opportunities in the prison (e.g. education and employment). Young people discussed the importance of these visits in “helping you keep going, keeping your chin up” and “staying out of trouble”.

“Whilst I’ve been in here they have still kept me involved in what’s going on. Come to see me regularly. Showing me support, telling me what to do, like keep my head down... it means a lot. It’s nice to know that there is someone out there who still cares about you, checks you and looks after you...”

Young people described how Project Future supported them in prison and “just because you’re not at Project Future you’re still thought of”. One young person reflected the importance of receiving letters, visits and a birthday card from the project:

“I got letters on my birthday, a card on my birthday with everyone signing it. It’s not just for now, it’s even when you’re gone...it helps to receive those things in prisons”.

The project has also provided ongoing support to the families of young people in prison, supporting them emotionally as well as practically, e.g. debt and employment support. This draws on ideas from systemic therapy, which seeks to work with and strengthen support in the young person’s network.

In the lead up to a young person’s release the project provided intensive help to ensure they have support in place as they leave prison. This has included building relationships and liaising with probation workers, supporting the young person with housing and employment options. Of note is how probation services have started to include Project Future in their licence plan:

“Probation has put this on my sentence plan, and so in the system’s eyes Project Future has been seen as something good. This helps you to find work so it helps. So Project Future helps with the relationship with the [criminal justice] system...”

Once a young person has been released, the project provides ongoing regular therapeutic and employment-focused support, e.g. one-to-one weekly appointments, perceived as key in supporting a young person “to keep moving forwards in life”. There have also been young people who were in prison when Project Future started and have been referred by friends on release. They have commented on the lack of support with transitioning to outside and the barriers they have faced in getting employment, which increases the risk of reoffending. However, they described how their referral to Project Future and subsequent support has been key in preventing reoffending through supporting them to find work and providing wellbeing support.

A holistic space

Young people consistently described Project Future as an “all-rounder”, attending to all aspects of their life:

“Knowing you can come here, there’s just so much support in lots of areas: emotional support, you can complete your driving test, jobs, music, cooking, if you reoffend, somewhere to come and clear your head if you’re stressed out...”

The project responds to and shapes itself around the young people’s needs, situation and goals, e.g. sitting down and applying for a passport, cooking and celebrating Jamaican food, socialising with friends or intensive one-to-one therapy. One young person explained:

“Even if he comes here for three years and sits here, he is getting something out of it. A lot may be going on for him, we don’t know that, he may not have slept last night, so having a hot meal, internet, roof over his head, it may look like he is doing nothing but it’s meaning something, he’s getting asked how he is, he may not get asked elsewhere, and so when you leave you feel better. So you come here for your up, for normality. You feel depressed or down but come here and feel better...”

Echoed across interviews was how the project connected the different parts of a young person and their life, e.g. understanding the importance of physical health for wellbeing demonstrated through activities like the gym and sexual health project: “they’re even thinking about our sexual health...” One example of this holistic approach to wellbeing was the support that young people accessed around debt and paying off court fines. Several young people reflected on how that support had reduced stress and worry, improved their wellbeing, reduced chances of being recalled to prison and reduced the risk of needing to offend to get the money.

Part of this holistic support was an introduction to different sources of help, breaking down barriers to accessing services such as sexual health, criminal defence law and employment

specialists. Regular drop-in sessions were embedded into Project Future, and young people knew that this “meant you get to access services you hadn’t before...”

Young people felt that the project recognised how the combination of different parts of their life affected them and worked across multiple levels to try and effect change. Recognising the importance of “joining the dots”, Project Future was seen to work across multiple levels and partner with other services to ensure that young people got the best support available.

Young people described how this holistic experience had meant that different parts of their lives were attended to and issues causing stress were addressed, positively affecting their wellbeing. Introducing different expertise via the project reduced barriers to help-seeking from other services, and young people increasingly had positive experiences of multiple professionals.

A safe space

“Because Project Future is a safe space, that has an impact on your wellbeing, and from safe you can advance and do what you wanna do... until you’ve got the basics met, you can’t advance...”

Young people consistently discussed how unsafe they were: “people could get killed, go to jail, anything can happen...” and how having a space where they felt comfortable, relaxed and didn’t “have to think about the negativity outside” made it possible for them to think about their lives and futures. Project Future was described as a “neutral zone” where “issues” were put to one side and “everyone just focuses on positivity, like what they want from life”. The project was described as physically safe through its discreet location and peer referral approach. One young person explained:

“If you know about this place it’s because someone has told you... if you come and someone hasn’t told you it can put you in danger... if they are telling you and you know it’s safe to come because it’s safe for them and they know who is gonna be there...”

Project Future was also described as psychologically safe because of the trust and supportive relationships built between staff and young people. Young people discussed the importance of the consistent, transparent relationships they had with staff, and the time and opportunity they were given to “observe” and build trust at their own pace. Part of this had been observing staff advocate for them and their friends, e.g. at court or in professional meetings, which demonstrated that “staff are there to get you out of trouble, not into it...” Young people described how these trusting relationships had contributed to feeling safe.

A family and community space

The idea of Project Future as a family and community space was also considered to be core. The project was consistently described as “homely”, “a third home” and “like a family...” Young people discussed how “it looks after you and not everyone looks after you” and helped to meet basic needs such as getting fed:

“There’s days I have no money but I can go to Project Future and get something to eat!”

“That Christmas, I don’t think I’ve seen any of the mandem [my friends] together sitting down at Christmas at a table. I’ve never seen that before. And to some people that may not seem like much, but everyone is sitting down and eating together for Christmas, some people haven’t had that experience...”

We noted that instead of being demonised, their friendships were valued and encouraged at Project Future. Young people reflected on how Project Future provided opportunities to have fun with their friends and participate in joint activities that they missed as children, such as trips:

“I liked that trip because we all got out of London, so there was no stress, no issues and we were all together. And we could feel like kids again...”

Young people described helping each other out with business ideas and how they initially got

involved with Project Future to see “if I could be any help”. Several young people reflected on how this community feel broke down barriers to help-seeking because they could come and have a good time with friends, feel relaxed and access the support they needed:

“I can come here and be productive and also be laid back and socialise...”

Young people described how they felt a greater part of their community since coming to the project: “I’ve told a lot of people about this place, which has helped them so it’s made me feel more part of the community”. One young person described how it was a space where people were able to explore their culture and community and feel proud of their heritage, e.g. to discuss and cook traditional dishes. Several young people reflected on how the project had changed their relationship to their peers and how they felt closer as friends in a community:

“...It’s brought everyone closer together as friends. Before it used to be...true, say it was a gang, but it used to be all of us close as a gang, but this has brought us more close as friends. I don’t feel like I’m part of a gang, I feel like I’m part of friends. Feel like a community. People my age in the community as friends...”

“And with us lot we are a family under the context of what we go through, so it felt like a family thing, and there was no street element to it, just pure unfiltered family thing...”

Project Future was seen to be increasingly reaching wider parts of the community, with mums, siblings and partners now accessing the project for therapeutic and employment-focused support. Young people attended community meetings, e.g. with pensioners and about regeneration, where they met with other community residents, which was perceived to improve community relationships.

“Project Future is a safe space, that has an impact on your wellbeing, and from safe you can advance and do what you wanna do...”

An accepting and respectful space

From the point of first walking in, young people discussed how they felt accepted by Project Future:

“You’re accepted here and nowhere else you are”

“The first time I came I was talking to a staff member and they were a really good listener and I could tell they weren’t judging me. I can tell if someone is judging me, I don’t want you round me, but the team don’t treat me like that, they treat me like I treat them, with respect, honesty...”

Young people described that rather than being seen as “gang members” and “criminals” they were treated with “love”, “respect” and as “equals”, “young people” and “professionals”:

“Outside everyone sees us as a criminal but you lot see hope in us and that makes me feel good and that’s why I come back. You lot treat us with love and that’s why I come back...”

“You don’t get treated like a hoodlum or a gangster but you get treated as a separate individual...”

Young people discussed how respect was evidenced in the way that they were trusted in the space, e.g. “no doors were kept locked” and how that meant that young people were able to trust and respect the project. Young people discussed their surprise that when someone was arrested Project Future did not ask “lots of questions” and judge them but rather worked out how best to support them:

“When they were arrested they didn’t say ‘why have you done this?’ They started working out how they can support them. There was no judgment there. It was ‘What can we do to help?’”

Similarly, young people described Project Future’s response to their criminal record as helpful rather than judging:

“When they saw my criminal record, they didn’t ask millions of questions like other places. They were like okay, what’s next? How can we help, like, with court, or interviews – ways to overcome speaking about your criminal record?”

“The streets was my reality for a very long time... coming to a place like this you see there’s more out there.”

As well as not being seen as “problems”, young people discussed how project staff always commented on the strengths and skills they have. It was of high importance that the project recognised how young people had navigated difficult life experiences and demonstrated their “survival” and resilience:

“To get that feedback that they were amazed at what I had achieved, it made me think differently about myself. It made me feel good about myself...”

A consistently described observation was how this context where young people were treated differently allowed them to feel and be different: “you can be who you want to be”. Young people described the imprisoning effect of multiple environments seeing them as problems, “criminals” and “bad”, and the contrasting and “freeing” impact of being treated as someone of value. Being treated differently was perceived to allow different interactions, e.g. young people described as “troublemakers” at school were seen as “the most responsible” at Project Future. One young person said:

“If you’re treated like a little boy, you’ll act like a little boy. If you’re treated like an animal you’ll act like an animal. Here you’re treated like a man, so you act like a man...”

Young people described the impact on their wellbeing in terms of shifting how they saw themselves and their sense of worth, as well as how they could be, allowing for different thinking, interactions and behaviour to take place.

A legitimate “legit” space

Echoed across interviews was how Project Future was a space where young people felt productive, a sense of achievement and the ability to envision a different future for themselves. Young people described how Project Future had enabled them to feel as if there were different options:

“The streets was my reality for a very long time and I had plans but didn’t know how to get there...coming to a place like this you see there’s more out there.”

Young people described how they had begun to feel like there are other worlds which might be accessible to them, evidenced through having “different” conversations with staff: “with the staff because they’re not road, outside that’s all you talk about, so this is different...” Project Future was consistently described as “opening a door that one day I might be free and legit”. One young person explained:

“I feel legit, I feel like my life is actually becoming something. You know like a caterpillar, it takes him so long to become something, to become a butterfly. We’re taking so long to hit the legit life but everyday Project Future pushes it forwards with us. It’s a long journey and there’s a shit-load of obstacles in the way being thrown at the caterpillar, there are so many obstacles hitting you, but Project Future is the one thing pushing you, saying don’t stop, keep going...”

At the project young people discussed how they sat down with staff and were asked about their goals, aspirations and dreams, seen to “broaden your horizons that you couldn’t see, or if you could see, it breaks down the many barriers in the way of getting there...” Young people consistently described how involvement with Project Future enabled them to envision and work towards a future they wanted. Young people described how the experiences and opportunities they had at Project Future had opened up “different worlds” that they had not seen themselves in before:

“This made me think I’m here for a purpose, it put a smile on my face...this is meant to be for me, this is my life, these are my dreams, I can be successful in a legit way. I never thought I’d be doing that. Something I’d never have – a proud moment...”

Young people reflected on how these experiences enabled them to feel differently about themselves, e.g. as “legit”, “articulate”, “intelligent” and “confident”. Several young people felt that employment opportunities

through Project Future contributed to seeing themselves in a different way – as a professional – and how this affected their sense of self and wellbeing:

“Being a professional makes me feel good, it makes me feel wanted, it makes me feel needed. This makes me feel useful...”

The project was consistently described as a space where “you feel legit” because it was productive and purposeful: “I’ve achieved things that I never thought I would achieve in my life...” Young people reflected on the routine Project Future had put in their lives and how it provided the resources to put their skills and strengths into practice: “It’s not that I couldn’t do it, I just hadn’t had the opportunity to before...” One example of this is how young people brought their business ideas to Project Future and worked with friends and staff members to develop their plan. Young people discussed how this enabled them to work towards a future that they wanted and “which didn’t sell you short”:

“When I mentioned the ideas to the colleagues they saw a really good interest in it and I thought it could happen. They took a real interest and I got that encouragement to start... that was something big for me to start that idea...”

This legitimate space shifted how young people saw themselves, working towards a future that they wanted, which they perceived to have a huge impact on their wellbeing.

An empowering space

Young people perceived that ‘having a voice’ and ‘being heard’ were key to what made Project Future work. Being heard was evidenced across multiple interactions, e.g. being listened to and validated in one-to-one therapeutic conversations; buying lasagne ingredients because staff had remembered that a young person had said they would like to make it; or involving a young person in community discussions about regeneration and presenting at a conference. This all creates an environment where a young person has power, is valued and has a voice:

“That’s a good thing, a positive thing. That’s one of the key things that makes it about being here. That makes this place stand out. You have a voice. The ones that are in the community, it benefits them more because that’s the whole point of why they are here. This is somewhere people can most likely express themselves and let their voices be heard.”

Young people felt empowered at Project Future as they were involved in decision making and their expertise was genuinely valued. For example, young people recalled sitting on interview panels for new staff or working with the project team to manage risk. In conversations with staff, they were positioned as equivalent: “colleagues” or “professionals” rather than “service users”. Young people described how experiences at the project connected them to their strengths and “what you can do”, with a sense of agency. Young people discussed how the project connected them to their skills, resources and goals, which helped them to perceive themselves differently.

One young person reflected on a conversation with staff where they discussed his dreams and hopes for his life, and how it had made him think differently about what he could achieve: “she asked me what I wanted to be when I was young ... what my ideal job was ...” Working with different services provided platforms for young people to be heard on both issues and solutions that affected their lives. Young people reflected on the impact of having a voice and seeing action being taken: “that day I was speaking to the people in power and I felt like a king...”

“It made me feel important, like I do have a say in the community. I’ve never really presented to anyone above me before. I’ve never really presented nothing to no one, so for them to be listening to it and find an interest, it put a smile on my face, I’ve really achieved something today. It was something they needed to hear and they listened.”

Chapter 7: Impact of Project Future

Reviewing the outcomes of Project Future for individuals, the community and services, it is important to acknowledge the interrelation between outcomes in different areas of a person's life. In interviews, both young people and staff described how interconnected the outcomes are and how they influence one another. For example, setting up a sexual health project can affect a young person in many ways: the setting up of a project has been perceived to positively impact confidence, self-esteem and lead to developing transferrable skills. It can give young people a positive experience of another service. The testing provided can reduce health anxieties. The education element can increase the use of contraception and reduce the likelihood of pregnancy. Fifth, by preventing pregnancies, young men are able to avoid the pressure of becoming a father with limited resources which reduces the risk of offending to make ends meet. While recognising the relationship between outcomes, the report will present them separately in the following order:

1. Engagement
2. Mental health and wellbeing
3. Education, employment and training
4. Accessing services
5. Offending
6. Systems change

Engagement

Between March 2015 and October 2017 there were 198 young people engaged in Project Future. Of those 198, 100 young people accessed Project Future regularly (weekly or fortnightly), accessed support and engaged in multiple aspects of the project. Project Future initially worked with young men aged 16-25, most of whom identified as Black British, African or Caribbean. The peer referral system meant that young people referred other community members and over time the project has worked with men up to age 35-40, females (friends, partners and mothers) and a small younger group (aged 15). The work with the

wider community has tended to be one-to-one therapy and employment support. Contact with the project is frequent, with a high proportion of young people being at the project more than once a week, indicating the frequency and intensity of the support. Out of the 198 young people, 188 (94.9%) had accessed some form of support at Project Future, relating to stability, EET, offending or mental health.

Mental health and wellbeing

Accessing mental health and wellbeing support

Of the 198 young people who make up the whole group, 139 (70.2%) have accessed some form of mental wellbeing support at the project. Young people have increasingly sought out one-to-one therapeutic spaces, booking in appointments more akin to traditional mental health services.

Staff at the project assessed that 32% of the 198 young people would attract a 'mild-moderate' diagnosis in a clinic and a further 28% who would attract a 'moderate-severe' diagnosis. It is important to note that there are other young people less known to the team whose mental health needs are unknown. The types of diagnoses that young people would attract based on the most commonly reported mental health needs related to anxiety and depression (21%), behavioural (19%), trauma (31%), and substance misuse (51%). 25% of young people had been reported by staff as presenting with dual or multiple diagnoses. There was a minority of young people presenting with needs indicative of a severe and enduring mental health problem (e.g. PTSD, psychosis).

The General Help-Seeking Questionnaire was used to measure help-seeking intentions and behaviour over time. It asks participants to mark how likely it is that they would seek help for a personal problem from both "formal" (e.g. GPs, mental health professionals) and "informal" sources of support (e.g. family, friends).

Half of the research participants completed more than one help-seeking survey and 35% said they were likely or very likely to ask Project Future staff for help with a personal problem at measurement time one. At measurement time two, this had increased to 60%. Young people also reported being more likely to ask parents for help at time two, which in interviews was perceived as part of maturing and recognising the “unconditional” support at home. This increase may also reflect the work Project Future has been doing with young people in seeking to connect them to their existing support structures. Young people also reported being more likely to ask for help from a mental health professional, describing how their involvement in Project Future had shifted their perception of psychologists and how they could be helpful. There was also an increase in the likelihood of asking for help from a doctor or GP, which may be explained by the work Project Future has been doing to increase knowledge and access relating to primary care, such as supporting young people to register with a GP in an area that’s safe for them to travel to.

Clinical measures of mental health and wellbeing

The quantitative evaluation involved tracking shifts in mental health and wellbeing, and two clinician-rated questionnaires were used to measure mental health and wellbeing.

Threshold Assessment Grid

Threshold Assessment Grid is a clinician-rated tool, which was used to measure the severity of needs relating to mental health and wellbeing, covering intentional and unintentional self-harm (e.g. drink or drug misuse), risk to and from others, survival, psychological and social needs (Slade, 2002). It is measured on a scale of 0 (no) – 4 (very severe) need with a total maximum score of 24 and relates to the previous month.

Threshold Assessment Grid was completed for 60 individuals across at least two time-points and these young people have been engaged with Project Future for 6-24 months. As graph 1 shows, there has been a statistically significant reduction between time point one and two, from

a median score of 15 to a median of 4. Slade (2002) reported that total scores of five or more, or scores with at least two moderate domains are a benchmark for referral to secondary care. At time-point one only one individual’s total score was under five, compared with 33 individuals at timepoint two. This indicates that this group would initially have been referred to secondary care mental health services and that since engaging with the project, this has reduced to under half. This indicates a significant reduction in needs that relate to mental health and an overall improvement in wellbeing. At time-point one, risk, social, psychological and survival needs were all recorded as moderate-severe. At time-point two, they had all reduced to scores indicating no-mild needs.

Separate analysis was completed for 24 young people who have been engaged in Project Future for 2–2.5 years. This showed a statistically significant reduction from a median of 17 to 1.5, which suggests that those who have been involved in the project for longer have seen greater improvements in their mental wellbeing. This group has accessed the most longstanding therapeutic support and perceive themselves to be better resourced and able to regulate emotions than before. Many of these young people have had very poor access to services and so even support with passports and driving licences, perceived as a huge stressor, has had significant impact on wellbeing.

Health of the Nation Outcome Scale

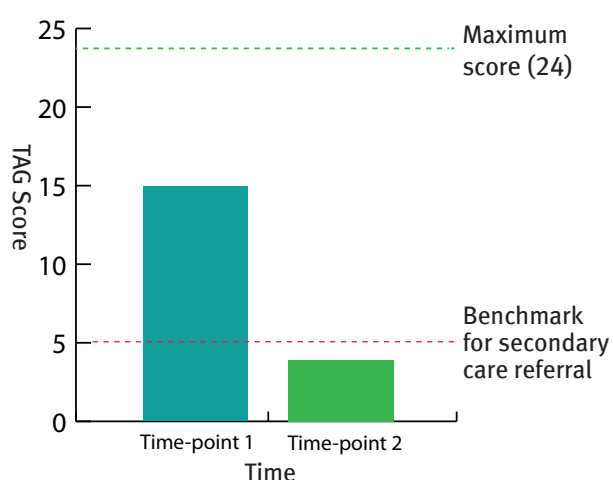
HoNOS (Wing *et al.*, 1999) has been used to measure social and functioning amongst a core sample of 59 young people. HoNOS has 12 items relating to mental health needs scoring from no problem (0) – severe problem (4). HoNOS has some overlap with TAG, but 8 of its 12 items are concerned with clinical symptoms and therefore gives a more detailed rating of an individual’s mental wellbeing. The maximum score is 48.

A statistically significant reduction has been observed in HoNOS median scores over time, from 22 to 5 (see Graph 2). Time point one

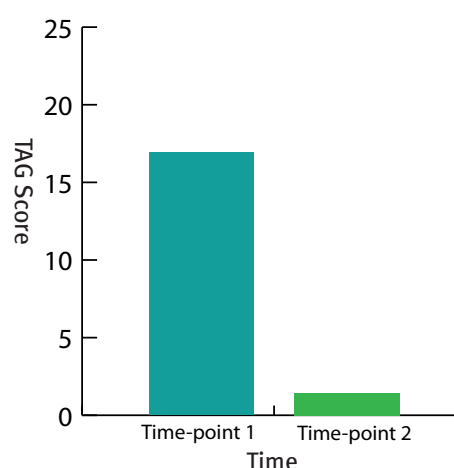
refers to early engagement, when the team knew enough about the young person to make an informed assessment. Time point two refers to the end of the evaluation. Among the 59 young people for whom HoNOS was completed, engagement periods ranged from 6-24 months.

The most marked reductions were observed in relational needs, problems with daily living, living conditions, occupation and activities, and mental health and behavioural needs. Young people at Project Future have used the project to attend to such needs in a safe and containing environment.

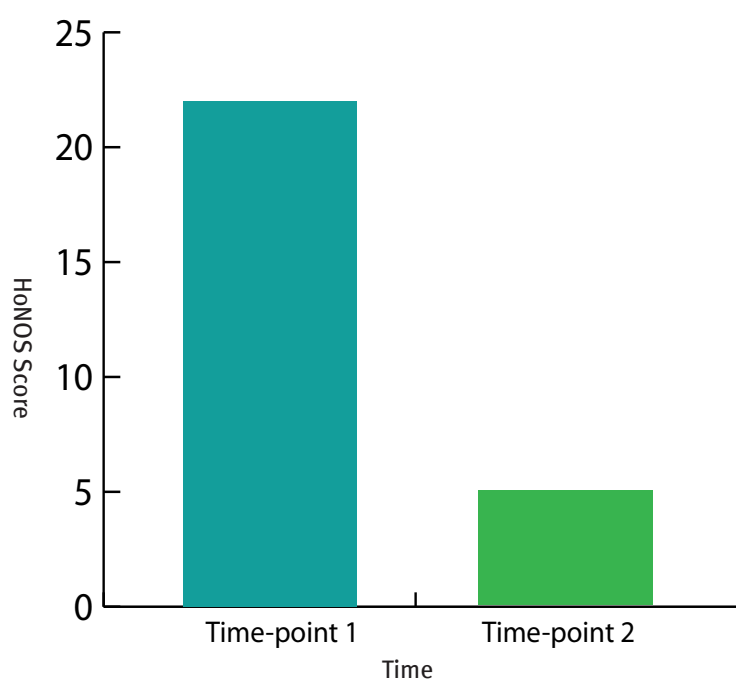
Graph 1: Severity of mental health needs based on Threshold Assessment Grid (TAG)



Graph 2: Severity of mental health needs based on TAG for young people engaging over a longer time period



Graph 3: Mental health and wellbeing based on Health of the Nation Outcome Scale



Self-report outcomes on wellbeing and resilience

The quantitative evaluation involved tracking shifts in levels of wellbeing and social support using an adapted Mind Resilience outcome measuring tool (Robinson *et al.*, 2014), which comprises the three following tools:

- The Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS) (Stewart-Brown *et al.*, 2009);
- An adapted version of the “multidimensional scale of perceived support” (Zimet, *et al.*, 1988);
- An adapted version of the Schwarzer-Jerusalem general self-efficacy scale (Schwarzer and Jerusalem, 1995).

These were administered during early contact and then every six months after until the end of the evaluation. It was difficult to track the same group over time as young people were involved with Project Future for different lengths of time. This meant that sample sizes were small for those completing multiple time-points. All of the research participants completed at least one set of surveys and half completed more than one. The use of standardised surveys did present challenges because they were not designed with these young people in mind and were not always felt to reflect their experiences. All surveys were completed as part of the interview to stop the experience from being such a “tick-box” exercise by being incorporated into a conversation.

SWEMWBS measures mental wellbeing and the data revealed that all young people reported average or above average mental wellbeing at measurement time one, which remained high at measurement time two. It is important to consider resilience levels in this group and how young people have discussed the need to be resilient and keep going in the face of adversity, which may explain the consistently high scores. It is also questionable how well these surveys could have picked up young people’s vulnerability because they were described as difficult to complete. It is likely that stigma and mistrust would have affected young people’s

rating at time-point one, which is supported by young people’s reflections on the time and relationships required to disclose vulnerability. Later high scores could also be a result of greater awareness of mental health and wellbeing through psychoeducation at Project Future. The second and third surveys focused on goal-setting, problem-solving and support networks, and scores were again consistently high over time.

In addition to the standardised surveys, a coproduced tool was developed with peer researchers to engage young people in discussions about their wellbeing (see appendix). In interviews, young people chose 5-6 factors that were important to their wellbeing, discussed how these factors currently affected their wellbeing (on a scale of 0-5) and Project Future’s impact on these factors. The most commonly reported factors were having enough food and sleep, living in a clean environment, physical health, feeling and being safe, having money, family, having things to do, having opportunities in life and having people to talk to. The Project Future environment has been shaped around what young people see as key to their wellbeing and therefore has been perceived as wellbeing-enhancing.

In interviews, young people described the specific impact they perceived the project to have on their mental health and wellbeing, discussing the following:

1. Impact on mental health

Young people described how the support they accessed through Project Future directly affected their mental health. Young people reported, at times, feeling overwhelmed by the stress they were going through and how the support increased their capacity to cope and reduced risk of “flipping out” and becoming more distressed.

“When people have so much going on for them, it piles up and up and anyone can snap...if I had no one to talk to or no one who could help with the situation I’m in, I don’t know what I’d be doing now, probably be like, fuck this, I don’t care about anything...”

“I don’t know how long I could have carried on sweeping things under the carpet, but now I can bring it here and talk about it and feel free, get peace of mind, pour out what I’ve been keeping in for many years...”

Project Future was seen as helping young people to manage the situation they were going through and build resilience, coping strategies and regulate how they were feeling:

“To know you have someone there to go through the stress with you, hold some of it for you, that helps a lot...”

It was clear that involvement in Project Future had reduced stigma relating to mental health and accessing support. It is especially significant to note how young people’s understanding of mental health had changed, considering how what was going on in their life affected them and its link with wellbeing and offending. One young person explained:

“I used to think that mental health is crazy, but now I think it’s what goes on in your head and what can make things go right or left in your head. I never used to see it like someone’s wellbeing can cause them being crazy, basically someone’s wellbeing can be so miserable that they just snap and then they turn crazy, snapping can be you going crazy, turning into a mad criminal...”

2. Impact on identity and worth

From interviews, it appeared that being seen in a different way and treated with care and respect was internalised. Young people described how the experiences of achieving at Project Future, e.g. learning to cook, learning independent skills, using “new long words” and communicating with different professionals were all perceived to impact their sense of identity, seeing themselves as articulate, intelligent adults with skills and contributions to make.

3. Impact on mood and emotions

Young people discussed how the experience of being listened to, validated and able to work

through stresses reduced how angry people felt: “I feel much calmer now”. Young people perceived themselves as better regulating their emotions, able to understand where their feelings were coming from and to “step back from situations”:

“I know how to balance my temper now. Before I used to get vexed when I was having a conversation but now I know how to discuss it...”

The therapeutic environment improved mood and young people felt more positive after being at the project: “it’s my happy hour”:

“Some days I’ll be in a bad mood, but it changes when you step foot in here...it’s the environment...”

4. Impact on relationships

Young people reflected on how they had become more open through their involvement at Project Future, which they directly linked to “feeling happier”:

“I’m more open to people, before I was closed off and isolated. Now I’ll talk to people in a more personal way. I’m happier because of it...”

“The mandem [my friends] are so open, they’ve relaxed and opened up. In other places they’ll still be closed, no one speaking, sitting all hunched up, but here everyone’s mingling, having fun, cooking and that...”

Young people discussed how they felt they began to think about other people more, and consider issues from different perspectives, seen as important in beginning to access support from other services. Young people also described how their involvement in Project Future had strengthened their friendships and support system, which they felt had improved their wellbeing because they had more people “to turn to for support”. Young people said the space had enabled them to find “different ways to resolve issues with friends”, through “discussion and debate” rather than it “getting out of control”, which was seen as linked to reducing risk of violence.

Access to services

Out of a total 198 young people who have been involved with Project Future, 140 (70.7%) have accessed some form of practical support. This has primarily related to applying for driving licences and passports, housing, benefits, insurance, finances, physical health and health appointments, literacy and numeracy. Of the 198, 137 (69.1%) young people have accessed another service via Project Future, including DWP, housing, Citizens Advice, sexual health, GP, mental health and benefits services. The term “bridged out” refers to young people who have used Project Future and moved on into another service or full employment and no longer or rarely access the project support. Out of the 198 young people, 91 (45.9%) have bridged out.

Young people discussed how the trust established with Project Future led to engaging with other professionals and systems, specifically relating to criminal justice, which they had not previously had good interactions with:

“I can now trust the other part of the law, society and the system that I wasn’t interacting with before. This is a system and it made me trust the system more. Before I would never go to a meeting where the police were but trusting Project Future has made me feel comfortable. It makes you feel comfortable to talk to probation, the police, policy people, the system...”

Embedding services into the project had broken down barriers to access. It was perceived to increase the support network and opportunities available to young people, by ensuring they got the right advice (“I’ve never had access to a lawyer who can tell me my legal rights”), as well as providing evidence that other services do care:

“It’s good to know that people out there understand how hard it is for young people and it’s good to know that they are trying to help ...”

Several young people also described qualitative shifts in the relationships they had with other professionals, e.g. probation. Although engagement with probation was compulsory,

the project was perceived to have improved the quality and benefit of the relationship between the young person and probation.

At Project Future, young people were given the time to explore with project staff what made it difficult to access a service, why a relationship with another professional might be strained, the possible intentions of another service’s actions, and to work through these barriers. This space, as well as the joined-up approach (e.g. having three-way calls with probation) was perceived to improve relationships:

“It’s made me build a good relationship with my probation worker. They see I’m doing something productive and good. They give me space now...”

Probation was increasingly seeing the value in Project Future’s support and had been incorporating attending the project into young people’s licence plans on leaving prison.

Access to education, employment and training

Out of the 198 young people engaged in Project Future, 94 are currently accessing education, employment and training:

EET type	Number of young people
Working	60
Studying/training	30
Volunteering	4

Of the 198 young people engaged in Project Future, 143 (73.7%) have accessed education, employment and training support from the project, which has included:

- Literacy project at Project Future;
- Applying for college, university, apprenticeships and work;
- Support with setting up and managing businesses;
- Support with music production and engineering careers;
- Support with youth work careers;
- Support accessing prison education;

- Accessing volunteering opportunities;
- Support with getting a job.

Out of the 45 young people who participated in research interviews, seven (15.5%) were in education, employment or training at the beginning of Project Future. By the end of our evaluation, 29 (64.4%) had accessed employment, education or training since coming to Project Future, demonstrating a 49% increase amongst this group. Research participants discussed how experiences at Project Future had provided opportunities to use and develop key employment skills. For example, 100% of young people reported developing communication and teamwork skills through being at Project Future.

EET support type	Number of young people (out of 45)
Applying for jobs	22
Employment with Project Future	18
Creating CVs	17
Interview preparation	12
Attending interviews	16
Business development support	4
Attending job fairs/ open days	12

It is important to note that the EET work is underpinned by psychological approaches which seek to support young people in overcoming both the practical and emotional barriers relating to EET. A significant part of the employment support relates to helping young people maintain their work and a total of 44 young people have worked with Project Future to help retain their job. This involves regular check-ins both on the phone and in person to work through any challenges and connect the young person to the progress they have made.

Young people discussed how EET support at Project Future had led to increased confidence and knowledge of how “to sell yourself” in job applications and interviews. Young people reflected on skills they had developed at the project, which had helped them with getting

work: “I’m more punctual, I know how to go to meetings, interview people”. Several young people reflected on how their communication skills had increased since coming to Project Future and how they began to use new vocabulary:

“My vocabulary is much better since I came to PF. And my communication, I’ve used words I’ve never said before...I would never have thought I would use those words...”

Several young people reflected that having an EET specialist in the team had been helpful in aiding their journey to employment. Young people liked the “drop-in appointment” style with the EET coordinator, describing it as an “in-house Jobcentre”. Young people discussed that it was helpful to have “someone with know how” because there were many “hurdles in the way”, for example “bare [lots of] men have gone to jail”, “have [criminal] records” or “don’t have the qualifications”.

The EET coordinator’s role includes matching employers, jobs and young people. This involves building personal relationships with employers to broker a relationship with the young person. They research and tailor opportunities based on the young person’s interests and needs, and work closely with the key-worker to support the young person to access them.

Young people discussed that employment and volunteering opportunities at Project Future had provided “stepping stone” experiences of work. One young person commented on how he learnt from the staff at Project Future: “I study the people I’m around...master their reactions...”

Several young people discussed how their friends who worked at Project Future were developing “transferrable skills” through working at the project. One young person explained:

“They get a taste of leadership, communication, organisation skills, lots of transferrable skills to use in the real world...like if you work in a company and you need to organise a meeting. Here you organise a meeting weekly so it’s easy because it becomes a part of you, how to organise a meeting, a trip... you can use the things you’ve learnt here...”

Offending

Out of the 198 young people recorded in the database, 120 (60.6%) have accessed some form of offending support at the project. This has ranged from discussions around what drives offending behaviour and how to minimise these, guidance around legal aid, and active case management. Over time there has been a shift in the type of help young people are asking for, i.e. as well as support in relation to court and current offending, Project Future have been playing more of a role in supporting young people in preventing future offending.

Offending and wellbeing overlap and affect each other. The professional identity that young people had assumed at the project was being carried into their wider life and improving outside interactions:

“Remember we are in a professional space, so you got to act professional and then I can take that to how I act outside...”

The safe environment created at Project Future was hugely significant for wellbeing as well as facilitating beneficial life changes. Young people described how the safety of the project reduced their offending because through becoming safer, they had less need to take measures to protect themselves, i.e. carrying knives, driving illegally. One young person explained:

“These hours we’re here, either someone is getting stabbed or doing the stabbing, while we’re here it’s none of that. Here the straight focus is you and your future. You, what’s going to make you do better in life? Whilst we’re here there’s no stress, you’re not thinking about protecting yourself. While we’re here we know the police can’t come and take us away. Whilst we’re here we tell ourselves we can make something out of yourself...”

Linked with both wellbeing and offending was how Project Future gave young people a sense of purpose in their life, through opening up different opportunities, connecting young people to their strengths and allowing them to play out different versions of themselves. It created a space for them not to be defined by their offending and not to feel stuck or lost.

“It stops offending because we are doing something instead of being lost souls on the street...”

Through supporting young people into employment, education and training, the project was reducing young people’s need to offend and helping them to stay busy:

“There’s people who are now earning money working who might be selling drugs instead...”

Young people described the importance of the project in establishing a routine in their lives, which improved wellbeing and helped them to reduce offending. Particularly in the transition of leaving prison, where young people had come from completely structured days to no routine, Project Future provided them with a structure.

“To actually wake up and have Project Future to go to, it’s a schedule... I don’t really have anything in my day so Project Future puts a routine in my day. Not having a routine is how you get into trouble...”

Project Future was seen as addressing the reasons for offending, for example supporting young people to get their driving licence was commonly cited as making people safer and thus reduce offending:

“My friends got their theory through here and that makes them safer... here if you walk around you’ll get smashed up... so the theory is one of the best things here...”

Young people described the significance of the support at Project Future in reducing offending. For example, support with reference letters, court and liaising with probation meant that young people had been given community sentences, which meant they were able to continue accessing support.

Local stakeholders have reported that they are less concerned about young people known to be attending Project Future than before they came to the project. Stakeholders working in community safety also reported that crime had reduced in the area surrounding the project. Amongst the young people working with the project known to external partners there was a perception of change. For example:

“...The fact that some of those young people are involved and making progress, who we would consider to be high-ranking ‘gang’ members, is ground-breaking...”

“It is 100% making a difference. Not as antisocial ... I don’t hear them pop up anymore. There’s a new cohort coming up so it’s hard to say if crime is going down in the area but it’s not this group anymore...”

Working with systems

Project Future has run several training days with youth clubs, NHS, primary care, and forensic and clinical psychology departments. Stakeholders commented on coproduced training that they attended at Project Future, which was designed and led by young people and staff. The training covered the principles of the Project Future approach, looking at the most helpful ways to work with young people. Stakeholders reflected on the usefulness of the core psychological approaches the project used (e.g. coproduction, narrative) in applying to their own service. Stakeholders also commented on how professional and skilled the young people were in co-delivering the training, shining “an unheard light” on the challenges this group face. Young people and Project Future staff have proposed a schools-based intervention, which will be coproduced and piloted with local schools. It will seek to tackle intergenerational patterns of offending and violence, aiming to reduce crime in the area. A number of stakeholders commented on how the project had provided an opportunity to get to know the young people, changing their perception of this group. One stakeholder recounted:

“Project Future has changed my perception of young people, from a societal view of them being dangerous gang members to actually that they are young people with talent and aspirations...your perception changes when you meet and get to know the young people and see their talent, hear their stories.”

Project Future staff had been providing ongoing consultations to YMCAs and schools where in each session a staff member discussed a case they were worried about. Project Future

supported them to think psychologically about their work. Staff and young people have been invited to local, London-wide and national meetings and conferences to share their perspectives, e.g. participating in discussions about the psychological impact of the Gangs Matrix, and presenting on issues relating to surges in knife crime. Stakeholders discussed how they had been to several events where young people had been presenting on a variety of themes, e.g. schools, safety and mental health, and described how this experience shifted their perception of these young men:

“I knew their offending histories well and if you’d just read about them on paper then you’d build up a certain picture. But to hear them speak and advocate on behalf of this project to senior members of the council, to articulate their stories in their own language. Everyone in that room was extremely impressed because of the message they had, these are our lives and we have the solutions...that message is beginning to come through.”

Stakeholders said that once perceptions of these young people had started changing, services started to shift their strategic approach to working with them, e.g. recognising the impact of trauma and how services had been difficult to access:

“You can see that the negative images are being changed, see and hear it in service responses. Language is changing, senior council members changing, my impression has changed. People are now saying we need projects like this all over Haringey.”

Stakeholders discussed how Project Future had influenced strategies in both the council and the NHS, which were increasingly incorporating coproduction and “service user involvement” into their own models, for example, Project Future’s approach had been discussed as part of the Sustainability Transformation Partnership in the NHS trust. Moreover, Project Future had provided an effective example of how to use coproduction and adapt psychological techniques to meet the needs of this group, providing a template from which to learn and shape their services. The box adjacent outlines the social action work Project Future has done.

All social action at Project Future has been coproduced with young people. 29 young people have taken part in systems change work, creating opportunities for young people

to share their expertise and ideas. The personal skills young people developed through the social action work were then incorporated into their C.V.s.

Social action outputs

Conferences and meetings:

- Haringey Council Young People Wellbeing event
- Division of Clinical Psychology Health and Social Justice – keynote speaker
- British Psychology Society Children and Young People Mental Health Conference – Keynote speaker
- Haringey Council Scrutiny Panel
- Haringey Council Knife Crime Summit
- Haringey Council Health and Community Safety Forum
- Haringey Council Meeting - debate on serious youth violence
- CEO Haringey Council community walk
- Haringey Council Health and Wellbeing service design workshop
- MOPAC meetings and round table for Safer London Consultation - knife crime and gang strategy
- MOPAC meetings
- CRAE focus group on police and young people's legal rights
- London Gangs Matrix Debate
- HMP High Down Prison and Voluntary Sector Meeting
- Stakeholder event
- Film
- Parliament Event
- Art Exhibition
- MOPAC Justice Matters Mental Health Session
- NHS England Policy Document

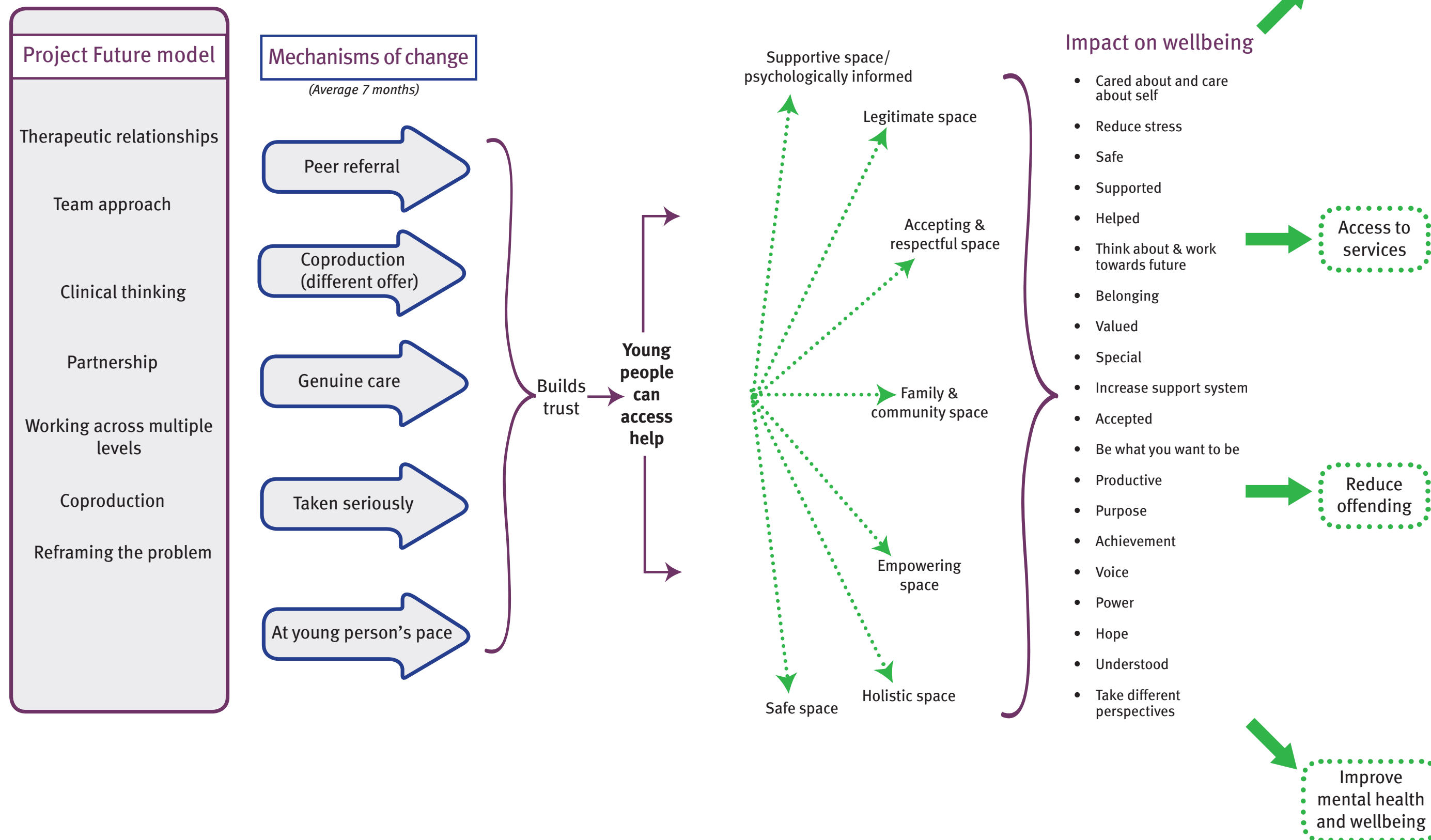
Trainings:

- Barnet, Enfield and Haringey (BEH) medical doctors
- BEH custody and prison staff
- Project 20:20 staff
- YMCA hostel staff
- BEH CPD (mental health professionals)
- Clinical psychology doctorate trainees

Case consultations:

- Primary school
- Probation
- YMCA hostel staff

Project Future: Theory of Change



Chapter 8: Challenges and areas for improvement

Sustainability

When asked what would improve Project Future, the most common theme described by young people, staff and stakeholders were challenges in sustaining Project Future beyond its initial funding streams. Young people reflected on the time it took to build trust with the project and the significant impact the project had once that relationship had been established. 70% had engaged in wellbeing support and a quarter were receiving ongoing therapeutic one-to-one support. These young people face multiple and complex challenges, requiring a long-term and holistic approach to support them across different aspects of their life. Young people discussed the detrimental effect of services that parachute in for a few years and then leave, deepening mistrust and perpetuating beliefs that services do not care. Short-term services suggest that poor wellbeing and offending have “quick fix” solutions, which fail to recognise the complexity and intergenerational nature of poverty, inequality, violence and hopelessness.

A theme echoed across interviews with young people, stakeholders and staff is the need to think about the complex context of offending. Young people growing up in Haringey experience “serious deprivation... some of the worst in the country”, inequalities and discrimination, i.e. poverty, racism, poor service access, school exclusion, physical and health inequalities. Young people, staff and stakeholders criticised the general “short-term” approach to interventions, which continues to place the problem of offending within the young person, rather than society’s inequalities. Young people commented that a “three-year plan isn’t enough”. Two young people commented:

“...if they set something up to help the youths and the plan was three years then the intention was never to make a massive impact. What about the youths who are too young and finish school next year. They’re doing the same things on road...”

“...it’s a long process thing...it won’t change in 6-7 months...it might not even be a success with all these kids because they might run out of time. This ain’t something that’ll run like that...it’s slow steps. It might not work with all of them... it’s not to say they can’t take anything away from here, that in itself would be a good thing”.

Stakeholders discussed how there “needed to be a 10-20 year borough-wide strategy” to make a genuine difference to offending in the area: “there needs to be investment in schools, in social care, housing, youth projects...yet it’s being stripped away...” Young people talked about their younger siblings and cousins who they were “worried would go down the same path” due the lack of options and places to go. Stakeholders commented on the lack of “job options” for young people trying to stop offending, because “a lot of work doesn’t pay”:

“I’ve never had a job. So for me to stop this [offending] and go into employment, who’s paying for my books, my food?”

Meeting the need

As Project Future has gained the community’s trust, the demand has grown and the project is now working with different members of the community, including younger cohorts, females, parents and older community members across locations, e.g. at the project, in the community, in prison. Project Future shapes itself around the individual’s needs and this growing community of service users means the project needs to be incredibly flexible and clinically resourced. It is important to note the significant level of clinical skill required to do this increasingly complex work. Moreover, the approach requires adapting: young people under 16 present with multiple but different needs and are at a different developmental stage, therefore need a more staff-intensive approach. Although essential for keeping the young people safe, it was frequently discussed that other groups of young people could not

attend the service because of its location, and young people and stakeholders recommended developing “Project Futures all over Haringey” as well as further afield:

“...they should have these projects in Enfield, Hackney... then crime would really go down because other young people would be inside too”.

Young people and staff discussed the potential benefits of embedding Project Future within local schools and youth services, developing a preventative arm of the project for younger cohorts. Although the project has been supporting local services, it was suggested that developing this aspect of Project Future’s work, where these principles were embedded into other services, would improve its reach and impact.

Accessing other services and employment

Young people and staff have reported difficulties in accessing a variety of services because the young person does not meet the

threshold for entry. Staff reported supporting young people with referrals to mental health services and housing support but then not meeting the criteria. This has meant that there have often not been services to bridge young people into, which has made it difficult to get certain needs (e.g. safe housing) met. Similarly, ongoing wider challenges regarding the lack of well-paid job opportunities for this group exacerbate barriers to employment.

The work opportunities within the project have provided valuable employment experiences for young people. It would be helpful to develop a structured employment programme to support the career development of youth employees. Project staff suggested creating work experience roles within partner organisations so that young people could have opportunities to work within different systems. It is also important to note the tension for staff of operating as both manager and therapist, which can require very different roles and can, at times, undermine the therapeutic relationship. It would help to be able to separate out management of youth employment and build it into a human resources role.

Chapter 9: Learning from the peer research

The peer researchers worked weekly with the Centre's researcher to evaluate the impact of Project Future, explore its process and the context in which young people live. Their work involved:

- A 15-minute film, which takes the journey of a young person's life and the interacting factors affecting their wellbeing, opportunities and offending, and the impact of Project Future. This was developed by young people interviewing each other, weaving the themes into one narrative and collaborating with a local artist to act, shoot and edit the film.
- Interviews with local stakeholders in the community and services about the impact of Project Future. Peer researchers developed questions, interviewed and analysed themes.
- A short film, which looks at the impact of services that come and go and asks what young people are meant to do when there are no opportunities.
- Writing an article published in a book by the Monument Fellowship, looking at leaving prison.
- Focus groups with peers regarding issues and solutions for the community, schools and criminal justice.
- Articles written about life after prison.
- An art exhibition, which takes the audience on a young person's journey.

Peer research draws on ideas from Community Participatory Action Research, which seeks to challenge traditional research processes, where "expert researchers" hold power. It challenges the idea that only certain individuals or institutions should get to do research and subsequently generate knowledge about the world (Waheb, 2003). In peer research, young people are experts in their own lives and have the opportunity to investigate their own research questions. For example, the young people's research and film looked at how the much broader context interacted and impacted upon their wellbeing and opportunities. Stakeholders, including those working in the police, said they had not heard this side of the story before and how this had significant implications for their own approaches.

Peer research allows young people to research the issues that are pertinent to them. For instance, one peer researcher conducted work looking at the impact of services coming and going, and how it damages trust. This challenges the dominant narrative that young people are "hard to reach" by explaining the detrimental effect of short-term interventions and the consequent need to "fend for yourself". Peer research at Project Future, therefore, has been able to highlight areas which have been overlooked by other researchers. Peer research also ensured that the evaluation was not conducted solely through the lens of one researcher. Young people have been involved in the analysis of the data, through weekly discussions and group workshops to shape the emerging themes so that they reflected and included the nuances of their experiences, e.g. the resilience developed from a life on road.

Sova (2003) argued that peer research allows participants to engage more meaningfully, leading to deeper and more honest findings. This was demonstrated with the peer research film where young people interviewed their friends about their lives to create a narrative. Young people reflected on the importance of peer to peer conversations in feeling comfortable to talk about different aspects of their lives. Peer research also meant that the evaluation was delivered in more accessible and engaging ways. At Project Future, a wellbeing tool was coproduced with young people, shaped around what they described as important for their wellbeing. This was perceived to make it more meaningful than a standardised survey with questions.

Young people described the personal value of peer research as being able to author their own experiences, as well as genuinely feeling

listened to. It also provided opportunities for work experience as well as space to develop skills such as confidence, communication, organisation and working to deadlines. All peer researchers were supported with initial training on ethics and methods, and had weekly catch-ups, training and reviews. The peer research were ongoing paid posts throughout the evaluation.

Peer research at Project Future made the entire research process – something often quite unreachable – accessible and valuable to young people. They have been involved in every step of the research, culminating in how findings should be shared. Young people have organised two dissemination events, a reception at the House of Lords and an exhibition in Soho, developing creative and accessible ways of sharing their messages.



Peer research; filming 'Sink or Swim'

Photo credit: Project Future



Football community day: physical health and wellbeing

Photo credit: Project Future



Community space: cooking chicken

Photo credit: Project Future

Chapter 10: Bringing about sustainable change

We will require a fundamental societal shift in our current approach to tackling offending and improving mental health and wellbeing if we wish to see sustainable change. We need to recognise and address the material, racial and health inequalities that young people experience. It is no surprise that poor mental health, serious youth violence and unemployment are highest in our most marginalised communities and we need to be prepared to address these inequalities at multiple levels. This includes recognising and changing the dominant societal discourses held about these communities, and acknowledging the impact of these labels on young people being trapped and excluded. This will mean holding the media to account: calling on them to report events more responsibly, and to stop the disproportionate negative reporting of stories about black communities. This will also mean challenging our own ideas and stereotypes about “gangs” and young people who live under this label, as one young person shared:

“I’d like people out there to know that we are not completely lost, we’re not the spawn of the devil just out there on the street. We smile, we laugh, there’s things that make us happy. It’s not us, it’s our circumstances that shape us. There’s more resources that need to be given. I’ve had to drag my way and burst through doors...”

This will also mean a change in the way we set up services, recognising that focusing on young people as problems is a huge barrier to access. We need a shift to more strengths-based models, which are non-judgmental, genuinely caring and underpinned by robust clinical approaches. These findings have demonstrated the significant threats to basic needs such as

safety and material security faced by these men. We therefore need to develop psychologically informed services, which take young people’s lead on what makes a safe space. A more holistic approach to services, shaped around a community’s complex and interlocking needs, is also required. The recommendations below offer stepping stones for a range of public services drawing on the lessons of Project Future.

Project Future and sustainability

Project Future has demonstrated an effective way of engaging and supporting some of the most marginalised young people in therapeutic support. It is crucial for Project Future to receive long-term investment to ensure that the need continues to be met and that sustainable changes are created for these young people. Local authorities, NHS trusts and community partners need to embed the principles of Project Future into their strategies for working with young people.

We need to recognise that short-term services which “come and go” can have a limited effect in tackling the multiple and complex challenges facing these young people. Moreover, short-term projects can perpetuate the idea that services “do not care”. Therefore, we need longer-term and intergenerational investment in communities, taking a preventative approach and working across systems. This will require the Government and funders to invest significant resources into ensuring sustained change. Local authorities, health services, Police and Crime Commissioners and other local bodies in collaboration with communities should pool funds to invest in long term projects.

We recommend that every Sustainability and Transformation Partnership (STP), and Accountable Care Systems as they emerge, includes at least one service built on Project Future's principles to reach its most marginalised communities. These community-based approaches need to become part of mainstream service delivery, given that they address an essential gap in mental health and social care support. These projects need the resources so that part of their role is to provide psychological support and consultation to services within the community (e.g. schools, Jobcentres, criminal justice agencies).

Mental health services

Recognising the success of Project Future in making mental health support accessible to marginalised young people, future services should be developed using these principles:

- Prioritising therapeutic relationships, which adapt psychological interventions to make them comfortable and safe for young people. This involves creating a safe space, taking young people's lead on what is safe to them.
- Not locating the problem within a young person but seeking to understand and intervene in their context, embedding narrative models into practice.
- Holistic wellbeing, seeking to connect the different aspects of young people's lives.
- Coproduction, involving the community in developing the service and seeing young people as experts.
- Working across the multiple levels of a young person's life to create change in the systems around them.
- Partnerships between local authorities, CCGs and the voluntary/community sector, to ensure robust, integrated and flexible care.
- Clinical thinking and evidence-based psychological techniques underpinning the approach.
- Team approach to ensure safe and cohesive support.

Education

Young people consistently described damaging experiences at school: of staff having low expectations of their abilities, not understanding reasons for difficult behaviour, not recognising the severity of challenges faced by young people or the impact of trauma and survival on their wellbeing, with knock on effects for their educational attainment. *Future in Mind* (Department of Health, 2015) recognised the importance of schools in promoting mental health and wellbeing. Centre for Mental Health's report *Missed Opportunities* (2016) stressed how schools are a key location for educational achievement; for promoting social and emotional skills noted to be important for resilience and success in life; for early identification of support need; and for signposting to support. The Government's green paper on schools is soon to be released and with this in mind we recommend the following.

Schools need to be psychologically informed, which involves whole school commitment and understanding as well as training teachers and broader school staff in emotional and mental health, child development, trauma, survival, stress (e.g. 'fight or flight' responses) and the impact of labelling. School staff need to have psychological training to better understand and address "communications of distress" and "challenging behaviour" to prevent issues from escalating and resulting in exclusion. The training needs to include understanding the impact of context on young people's wellbeing and the risks these young people face (e.g. safety in getting to school). One example of this is the Inner World Work, which has developed resources to support primary and secondary schools to understand how the school can help keep young people safe (Thorley and Townsend, 2017). Training should equip staff in strengths-based approaches, in connecting young people to their identity, strengths, skills and resources. Mental health practitioners, young people and schools should be involved in designing the training. In addition, schools need to have readily available information on the network of services and support for young people and their families.

It is crucial to recognise how under-resourced teachers are, with increasing pressure to deliver on multiple agendas in a climate of financial cuts. Centre for Mental Health (2017) reported that schools do not have the knowledge, skills or capacity to meet the mental and emotional needs of children and young people. We recommend, in line with *Future in Mind*, that mental health practitioners are embedded in all schools. This would allow for easier access to mental health interventions for children who display behavioural problems, and thinking spaces for teachers in supporting those children. We recommend that teachers receive ongoing supportive spaces to reflect on their work and its impact on their own wellbeing.

Schools need to be resourced to tailor programmes to meet the needs of children growing up in disadvantaged communities, further enabling them to promote their safety and nurture the strengths and skills in each child. Centre for Mental Health (2017) recommended that Ofsted inspection processes should ensure that mental health is built into the school curriculum. Psychologically informed “life sessions” should be incorporated into the PSHE curriculum, to ensure the needs of young people growing up in marginalised communities are attended to, e.g. social and emotional skills, money management, family financial worries, safety and exposure to violence. The content of these sessions will need to be localised to ensure that they attend to the needs of young people in that community.

This report has found further evidence that school exclusions exacerbate risks of offending and prison and that BAME boys are more likely to get excluded. We ask that the Department of Education consults with young people to find out what they perceive to be contributing to their school exclusion and what alternatives could be put in place. We recommend the minimised use of both within-school exclusion (i.e. where students are not able to study or socialise with peers) and permanent exclusion, given the evidence of how exclusion increases risk of offending and prison. These findings

suggest a need for sustainable funding of effective preventative work which, like Project Future, reaches out to engage young people to reduce the risk of hopelessness, narrowing life choices and subsequent expensive crises (either through placement in pupil referral units, the criminal justice system, custody or in mental health crisis).

Criminal Justice System

Police:

It is crucial to acknowledge and explore the difficult relationship between the police and this community. Young people described experiences of abuse and racism in daily interactions with police. They described hopelessness in having any power to complain or change anything, with a detrimental impact on their wellbeing.

Police forces need the resources to invest in recruiting officers with an understanding of and exposure to the problems faced by a local community. This could improve relationships because a shift in perceptions could lead to a change in interactions between the police and young people. In addition, context-specific training should be provided, which supports police to better understand the complexities in these communities and the array of risk factors facing young people. The training needs to connect officers to young people’s vulnerabilities and present the nuanced reality of violence, which is far less dichotomous than ‘victim’ or ‘perpetrator’.

We recommend that ongoing supportive and training spaces are provided to police officers to support and reflect on the impact of their work on their own wellbeing and their interactions with the community.

The Lammy Review (2017) highlights the disproportionate use of stop and search on BAME communities, and we recommend that stop and search processes are reviewed, specifically looking at why they continue to be predominantly carried out on young black men.

Courts:

Young people remarked on the lack of diversity among the jurors and judges they had come into contact with and we support Lammy's recommendations (2017) that greater effort needs to be made to ensure that juries include individuals from BAME communities, from different socio-economic groups, age groups and from urban areas.

Our findings support Lammy's recommendations that the Trident "Gangs" matrix needs to be reviewed in the way it gathers, verifies and stores data about individuals. The Crown Prosecution Service (CPS) listing an individual as a "gang nominal" in court has been shown to lead to harsher sentences. In line with the Lammy Review, we agree that the CPS should review its approach to "gang" prosecution. Specifically, we recommend that the CPS recognises the problems in how individuals are registered on the Gangs Matrix and uses this information with caution.

Prison:

We need a profound culture shift in prisons if we are to stop the cycle of offending and its impact on wellbeing – from a primarily punitive approach, to a psychologically informed environment, centred around wellbeing and rehabilitation. Part of this is shifting perceptions about the young people who go to prison. Whilst acknowledging the consequences of committing an offence, we need to take a more trauma-informed approach which sees these individuals as young people who have grown up in a context of inequality, leading to complex vulnerabilities and needs. Whilst this may seem ambitious, the financial, social and psychological costs of the current system to young people, their families and society require a radical transformation. Specifically, this needs to include:

- **Recruiting and training staff differently:** Centre for Mental Health (2017) reported that staff numbers must be addressed to achieve this change, and stressed the urgent need for sufficient staffing levels. In

addition, the people being recruited need to genuinely care about the wellbeing of young people and be better trained in mental health and understanding context. Staff need to be better equipped to deal with the complexity and multiplicity of needs young people have, e.g. wellbeing, education, employment, substance misuse, offending. Young people, therefore, need access to a variety of services whilst in prison to ensure these needs are met.

- **Mental health:** prisons need to recognise the potential impact of prison on a young person's mental health and consequently to prioritise wellbeing. Psychological support needs to be universally available, recognising that every young person has wellbeing needs and the potential for prison to exacerbate vulnerability and be retraumatising. Mental health support must not only rely on young people displaying "symptoms" of a particular "mental health disorder". A psychologically informed environment, where all staff are trained in psychological concepts and mental health practitioners are embedded into the system, would ensure that young people's mental health and wellbeing is attended to. One such example is the Diagrama foundation in Spain, which operates re-education centres rather than youth prisons. It takes a socio-educational approach, with qualified therapeutic practitioners providing daily support to young people (Hart, 2011), and is based on creating a nurturing environment for young people to reach their goals (Lemos and Crane, 2016). In contrast to the UK, families are more involved, e.g. families can call twice a day and young people are granted weekend visits home (Hart, 2011). This has demonstrated promising outcomes, including reduced reoffending rates.
- **Rehabilitation:** young people have demonstrated willingness to work and engage in meaningful activities in prison, e.g. working on the wing, completing Maths and English qualifications. Prisons need to employ key-workers trained in psychological approaches, who harness

this willingness and support young people to make long-term goals and plans for their life, which they can work on whilst in prison. For example, if someone has a three-year sentence, this time should be used to ensure that they have the qualifications and skills they need to move towards their goals in life upon release.

- **Employment:** We need to recognise how crucial it is for young people to leave prison with money and a means of making money to prevent reoffending. Employment options in the prison with minimal pay are seen to contribute to why people continued to drug-deal in prison and on release. We recommend that the Ministry of Justice reviews employment processes within prison and consults with young people on the steps needed to ensure that they leave prison equipped for the outside world.
- **Leaving prison:** Employment specialists need to work with a young person before they leave prison, ensuring that they are connected with employment opportunities and on release a tailored work plan is built into their licence plan. Links are needed with external services or projects (such as Project Future and probation) who can support the transition back into society, providing ongoing wellbeing and employment focused support.

Probation:

Probation services need to connect with local community services (e.g. Project Future) that can better aid the transition out of prison and sustain support for young people. Probation services need the resources to build relationships with young people whilst they are in prison to support their transition, helping them to make clear goals for their future. Probation workers should also receive training which demonstrates how the wider risk factors in a young person's context impact their mental health and risk of reoffending.

The group of young people who worked with Project Future, like many marginalised groups, faces challenges that cross many different

sector and service boundaries. Joined-up provision and commissioning are therefore required. Project Future provides a model for how joined-up provision can happen, but more projects require a commitment from commissioners to join up. There are emerging examples of how this can be done on a much larger scale, e.g. in Greater Manchester and the West Midlands, where combined local authorities are working with local NHS and other agencies to provide more integrated support.

Employment

Project Future has an effective employment support approach and we recommend that this is built into the community-based services being developed through STPs. Each service should have an employment specialist who acts like a recruitment agent for a young person. They work with the young person to create their C.V. and cover letter, and discuss the employment opportunities they want. The employment specialist then researches and applies for opportunities, akin to a recruitment agent. Embedding an employment specialist into a therapeutic service allows for mental health practitioners to provide psychological support to young people alongside the practical support.

More reasonably paid career opportunities for young people with offending histories have the potential to prevent young people from falling back into vicious cycles of offending. Such opportunities should ideally provide numeracy and literacy support to allow young people to gain their basic education, whilst learning a skill.

In line with the Lammy Review (2017) we recommend that cases are reviewed by a body (i.e. Parole Board) to decide if a criminal record can be sealed on a job application, e.g. if offences were committed as a child/young person and steps have been made since to make changes. We recommend that Department for Work and Pensions reviews the extent of employer discrimination against people with criminal records and consults with

young people, employers and DWP workers to investigate what would reduce these barriers, e.g. an accompanying reference letter from a professional such as probation/youth worker.

We recommend that Project Future grows its youth employment arm. This would involve a structured programme to support the career development of youth employees and would include work experience placements with local partner organisations. We recommend that youth employment is managed by a Human Resources role to keep management and therapy separate.

Research

This evaluation has highlighted the importance of involving young people in the research process. It has enabled a richer insight into the challenges and how they impact wellbeing and what works for these young men. Future research in this area should ensure that young people are genuinely involved as co-researchers.

We faced challenges in finding self-report measures, which adequately reflect these young men's understanding and experiences of wellbeing. We co-developed one tool at Project Future, which was perceived to reflect what young people saw as important to their

wellbeing. Future research should look at how this tool could be improved to make it more rigorous in tracking changes.

This evaluation has not addressed the cost effectiveness of the Project Future model and London School of Economics is completing a separate economic analysis of this work.

Whilst these are ambitious aims, bringing sustainable change to these young people and their communities requires that we address the inequalities they face strategically and holistically. Project Future has demonstrated what can be achieved when young people are given a context where they are safe, valued, listened to, empowered, supported, respected, accepted, and therefore able to thrive.

“That was something that I’d never think I’d be doing. It was a different day, I felt really special that day, a feeling that I’d never had before. When I got there I felt scared, I felt like the people there are better than me... What we go through is crazy so that day was a day that I never thought I’d have. I was thinking ‘how did I end up in a place like this?’ Made me think I’m here for a purpose, it put a smile on my face... this is meant to be for me, this is my life, these are my dreams, I can be successful in a legit way. I never thought I’d be doing that. Something I’d never have – a proud moment...”

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Appendix: Wellbeing tool coproduced at Project Future

Wellbeing: What impacts your wellbeing?

1. Having enough food and sleep

2. Living in a clean environment

3. My physical health

4. Having opportunities in life

5. Friendships

6. Having people to talk to

7. My feelings and mood

8. Having a job

9. Having a voice

10. Being part of a community

11. Feeling and being safe

12. Having a faith

13. Having things to do

14. Having a creative outlet

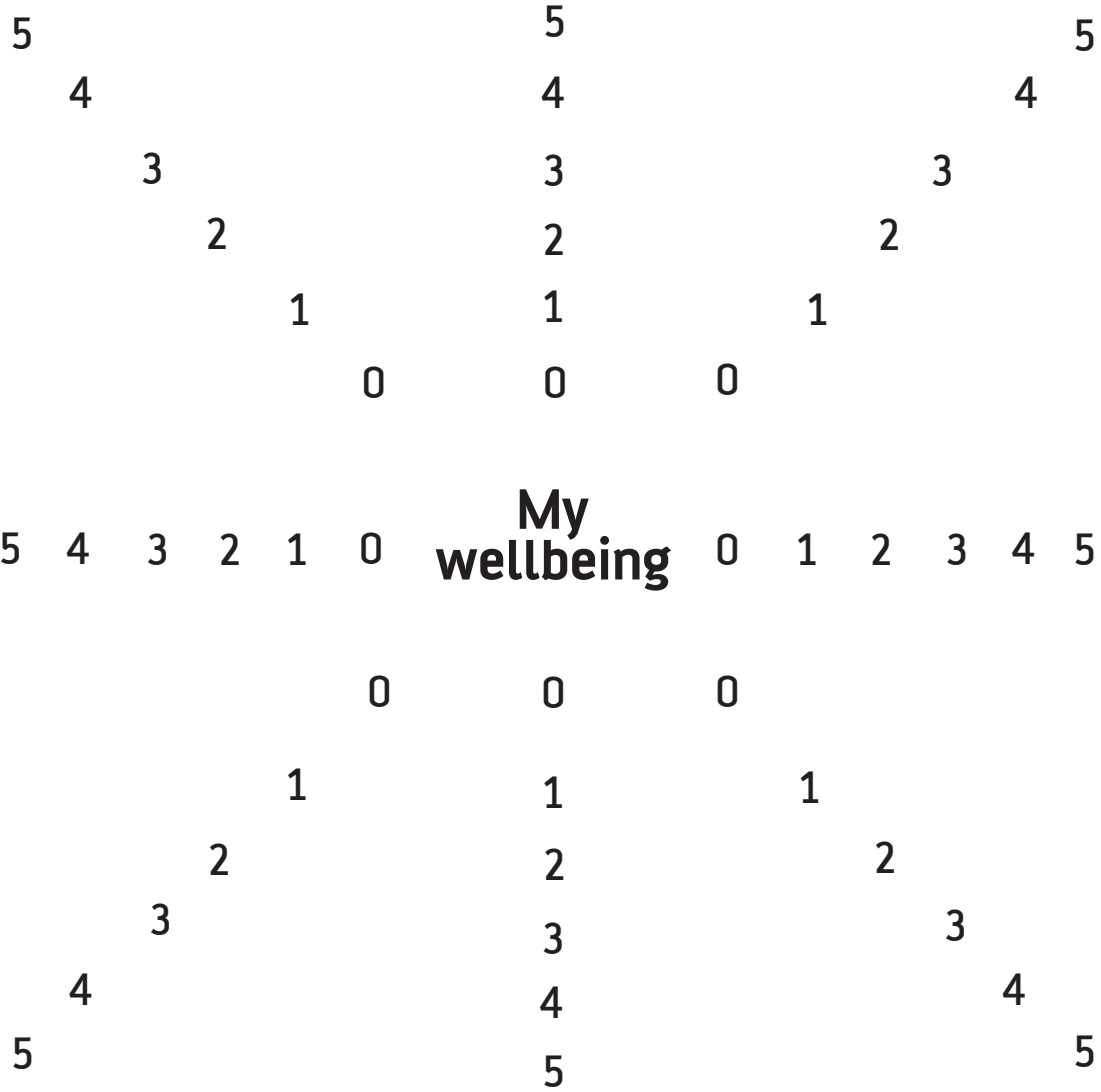
15. Feeling a sense of achievement in life

16. Relationships

17. Having money

18. Family

19. Being labelled



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