Executive Summary including summary of evaluation findings

Introduction

The Way Forward Project was set up in January 2013 as a prototype approach aiming to identify and engage with girls and young women who were slipping between existing offers of service provision and who would otherwise enter adulthood with severe and escalating levels of disadvantage. The project is located within the WomenCentre, Halifax a provider of gender specific services based in the voluntary sector. This report presents the findings from an evaluation of The Way Forward conducted by the Centre for Health Promotion Research, Leeds Beckett University. It presents evidence about the project’s journey, young women’s needs, the outcomes for young women as a result of engagement with the project, the operation of the project, multi-agency working and overall learning from the project.

Background

It has been argued that women’s centres produce improvements in wellbeing and can be a viable and effective setting for providing mental health interventions to meet client needs (Nicholles and Whitehead, 2012, Hatchett et al., 2014). Moreover, evidence suggests return on investment in women’s services, in terms of social value and savings from reduced demand in areas of health, reoffending and housing. Women’s community services can support clients in making positive changes to their lives, reducing demands on other service such as police, courts, offender management whilst improving outcomes for their children (Nicholles and Whitehead, 2012). This evaluation will contribute to this evidence base about the work of women centres by exploring The Way Forward Project’s approach to identifying and engaging with girls and young women and by assessing the extent to which the project has met its aims and objectives.

Evaluation aims and objectives

The evaluation used a mixed method approach including data from focus group discussions with young women, focus groups and semi-structured interviews with project staff and stakeholders and desk-based analysis of monitoring data. The evaluation sought the views and experiences of Way Forward staff, stakeholders and service users, in order to address the following 5 objectives:

Firstly to investigate how and in what ways The Way Forward has made a positive difference to the life trajectory of the girls and young women encompassed within its remit;

Secondly, to identify the ways in which The Way Forward operates and delivers its provision, identifying the factors that are important in developing and supporting progress. This included an assessment of the importance of the engagement worker role;

Thirdly, to examine how The Way Forward works within a multi-agency setting, and to ascertain what this means for the success of the project including
how the project informs local decision making and commissioning arrangements.

Fourthly, to examine the economic case for The Way Forward, tracking contributions in relation to added value and examining sustainability.

Finally, to map the potential replication of The Way Forward as a model that could be applied within other areas.

**Key Messages from the Evaluation**

1. The Way Forward is an example of effective, gendered, personalised, preventative approach with young women at risk.

2. Young women using the Way Forward Project have trust and confidence in it.

3. Young women using the Way Forward have high levels of need and distress that are not recognised or do not reach the thresholds for other services.

4. The Way Forward leads us to consider how many fewer women might be in abusive relationships if young women developed resilience and self-esteem through projects such as this; and how many fewer children would be involved in child protection proceedings or in local authority care if young women were supported in their own right and not just in relation to parenting abilities/capabilities.

**Overall summary of evaluation findings**

- The Way Forward Project has succeeded in identifying and addressing unmet need for 165 young women.

- The Way Forward Project provides a good example of preventative, early intervention work with young women from which critical success factors can be identified. These are:
  - Its person-centred, flexible and adaptable approach
  - The gendered approach
  - The skill, commitment, empowerment and supervision/support of the Engagement Worker
  - The embedding of the project within the voluntary sector based WomenCentre, with a specific holistic ethos, high levels of knowledge and expertise in relation to issues for girls and women, and strong local operational and strategic links.
The Way Forward has put young women at the heart of the project. It exists solely to offer effective support and encouragement to young women at times of vulnerability and the original expectations of the project have had to give way to the experience of the contact between the Engagement Worker and each young woman. This central position of young women themselves has produced publicity and language for project publicity that speaks to other young women. It also kept the whole project committed to the reality of the lives of each individual young woman, resisting the management temptation to oversimplify or constrain for ease or control of service delivery.

The Way Forward was developed and continued to hold a cross borough perspective. It remains concerned with the lives of young women across the communities of Calderdale who fail to find the help they need at critical times. The Project therefore attends not only to the situations and needs of those engaging with the project but also to those who have not been reached or have failed to engage successfully.

The cross agency involvement in the Project has been fundamental to maximise reach as well as enabling organisations to learn together about the needs and lives of young women at times of vulnerability as well as the current local service availability and response.

The Way Forward Project has benefitted and been dependent on the flexibility of its funders, the Paul Hamlyn Foundation and Lankelly Chase, to enable it to keep true to its core intention to firstly get to know about the needs of young women and then to respond to these as helpfully as possible. The Project’s understanding of the nature of its work has been growing throughout and the Project continues to learn and adapt.

The Project has enabled staff within WomenCentre to observe and analyse the lives and experiences of young women at times of risk and crisis, to begin to explore patterns beneath the widely diverse nature of each young woman’s experience. The Project has not been able to develop any greater level of depth of understanding at this stage but is continuing to analyse project data and investigate possible patterns further.

The Way Forward Project has shone a light on the experience of young women in relation to other services and the systems within which these operate. For example it has enabled an initial view of the journeys of young women from a first point of contact with services and their experience from this point onwards. Points of referral into the Way Forward Project are from a wide range of agencies, thus The Way Forward has in particular provided more generalist follow on support for young women exiting from Youth Offending or CAMHS.
intervention. The Engagement Worker has sometimes found difficulty in supporting young women into other, more specialist services.

- Listening closely to the experience of young women at a time of need has enabled the Project to understand the impact of the current system on their lives and can clearly see so many missed opportunities. This is an area that may benefit from further focus.

**Learning from the Way Forward**

- Learning captured by the WomenCentre team in the delivery of the project shows that some of the young women who engage with the project have no obvious referral routes i.e. the young women discuss their needs and their way forward can be identified however there is not an organisation/agency that can provide self-development and emotional support in relation to confidence, self-esteem, reassurance, coping strategies and resilience building. Herein is the value of The Way Forward in providing gender-specific, holistic support to young women in need.

- Threshold criteria cited by other agencies is a barrier to engaging with young women who clearly have high levels of unmet need. Young women under the remit of The Way Forward were falling through the gaps if they did not meet statutory threshold criteria. Some were also unable to work with other agencies in terms of accessing provision and some were not held by other agencies, which were also perceived negatively by the young women. This reflects that existing service provision is not meeting the current needs of vulnerable young women, and that wider statutory provision is failing in its remit to support vulnerable young women. However, as The Way Forward is a generic project without any threshold criteria it has a much broader scope and thus can meet the gender-specific needs of young women.

- The critical factor of the qualities of the Engagement Worker are central to the success of the project, (see Jones 2014) as she is able to develop trust and provide support in a solution focused approach to meeting the needs of young women, without being too focused upon outcome measures. Thus the distance travelled is considered as more important for young women, rather than specific targets that need to be met. This is related to the overall project approach in which permanence for young women is understood as crucial. This project is based around long term gain and not short term fixes.
• Learning from the project also shows the importance of the flexibility adopted in relation to the project development and delivery mechanisms. This level of flexibility and adaptability enabled the project to respond to young women’s individual need and experiences. The funders of this project were also important in enabling this approach.

Issues for consideration

Whilst the Way Forward has successful established an effective approach to engaging with young women with a variety of need and successfully working with them to improve their life chances, this evaluation has raised some issues which can be considered in relation to future planning. These are discussed below:

• Whilst evidence of short-term impact on participating individuals has been demonstrated, it is important that the medium and longer term impacts are captured over time. Nevertheless, it will be challenging to capture such data given the nature of the project and its work.

• Whilst stakeholders have reported positive perceptions of The Way Forward, evidence has shown that the project is working in a twin track manner both as an early intervention approach and as a holding point. The project is early intervention in the sense that it is acting as a mechanism to capture young women before their needs escalate into demands upon adult services and thus has a preventative focus. The project is also ‘holding’ young women and offering case work in instances where other provision is not available. This flexibility of delivery may not possible within all gender-specific services.

• The sustainability of continued delivery needs attention given the short-term nature of the funding cycle, and the issues with referring young women on. If The Way Forward ceases to exist, what will happen to the young women currently being ‘held’ given the difficulties raised in referring on, and the issues associated with threshold criteria specified by other agencies?

• Further research needs to be considered in relation to two key areas:
  o Firstly, the impact of the Vanguard approach upon The Way Forward requires exploration.
  o Secondly, the economic and social impact of The Way Forward requires a more robust and detailed analysis.
1. The Way Forward Project background

WomenCentre is a provider of gender-specific services, based outside of statutory service provision and located within the voluntary sector. WomenCentre was established to deliver such holistic and empowering services to all women within the Halifax and Huddersfield localities in West Yorkshire in 1985. The gendered nature of the work done by WomenCentre focuses upon prevention, holistic service provision and is driven by an individualised needs-based approach.

It is within this context that The Way Forward Project was established by WomenCentre, Halifax in West Yorkshire in 2012. The Way Forward Project is a prototype approach with a remit to identify and engage with girls and young women who are slipping between existing offers of service provision and who would otherwise enter adulthood with severe and escalating levels of disadvantage. The Project located within and led by WomenCentre, aims to address the marginalization of girls and young women, work with them in ways that statutory agencies are unable to due to service restrictions and enable them to have a central and empowered place within the project itself. The project aims to make a significant positive difference to the lives of 200 young women with high levels of unmet need and vulnerability over a 3 year period, October 2012-October 2015. The project is based upon a key worker model (the Engagement Worker) and is located within strong multi-agency partnerships. The location of the project within an existing organisation provides the ethos and understandings that underpin it, namely the value of gendered approaches for girls and women with vulnerabilities, empowerment and self-determination as the core attitude and the ability to operate in the dual structures of children’s services and adult policy and provision.

The Way Forward project aims to involve all relevant local agencies to identify and engage with girls and young women who are slipping between service provision and who would otherwise enter adulthood with severe and escalating levels of disadvantage. The Project is led by WomenCentre to address the marginalization of girls and young women and statutory restrictions within current universal provision and to support girls and young women themselves to have a central and empowered place within the project.

The Way Forward Project is embedded within a multi team service area of WomenCentre in Calderdale. Other teams include domestic violence services, including those for families and young people and an advice service. The whole service works to CAADA Leading Light standards and receive high standards clinical and casework supervision and robust guidance in relation to partnership structures and safeguarding practice. The organisation as whole provides the ethos and understandings that underpin this project.

The project is overseen by a multi-agency steering group established at the outset, which meets every two months. The Steering Group has a core membership of 6 key organisations (Youth Offending Team, WomenCentre, Calderdale Young People’s Participation Worker, Calderdale Housing, Branching Out Drugs Service and Young People’s Services). Others have kept a more distant involvement (Police, Probation, High Schools, and Neighbourhood Teams). The engagement worker attends and provides regular updates and discusses cases when necessary.
The Project delivery has been largely undertaken by the Engagement Workers who takes referrals, makes assessments, provides supportive engagement and links with other agencies for signposting and referral. The scope of her work is diverse, challenging and unpredictable as she proactively seeks engagement of some referrals, builds a trusting relationship within which she supports girls and young women to share and look for options within their situations, works with other agencies for on-going referral or moving on opportunities and connections and deals with urgent situations that can make significant difference to a young woman’s life. Table 1.1 shows the referral numbers from each agency until July 2015.
Table 1.1 – Partners involved in the referral of young women to the Way Forward

<table>
<thead>
<tr>
<th>Referral Source</th>
<th>Figures at 10-7-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adoption team</td>
<td>2</td>
</tr>
<tr>
<td>CAMHS</td>
<td>1</td>
</tr>
<tr>
<td>Calderdale Carers</td>
<td>1</td>
</tr>
<tr>
<td>Children’s centre</td>
<td>3</td>
</tr>
<tr>
<td>Children’s Home</td>
<td>1</td>
</tr>
<tr>
<td>Contact Team</td>
<td>1</td>
</tr>
<tr>
<td>Children and Young People’s Services</td>
<td>1</td>
</tr>
<tr>
<td>Domestic Abuse Partner</td>
<td>1</td>
</tr>
<tr>
<td>Education Welfare</td>
<td>1</td>
</tr>
<tr>
<td>Early intervention panels</td>
<td>24</td>
</tr>
<tr>
<td>Family Support</td>
<td>7</td>
</tr>
<tr>
<td>Family &amp; Friends</td>
<td>16</td>
</tr>
<tr>
<td>Family Intervention Panel</td>
<td>1</td>
</tr>
<tr>
<td>Families matters</td>
<td>1</td>
</tr>
<tr>
<td>GP</td>
<td>3</td>
</tr>
<tr>
<td>Health Visitor</td>
<td>2</td>
</tr>
<tr>
<td>Halifax Opportunities Trust</td>
<td>2</td>
</tr>
<tr>
<td>Housing</td>
<td>2</td>
</tr>
<tr>
<td>Lifeline</td>
<td>3</td>
</tr>
<tr>
<td>Mental Health</td>
<td>2</td>
</tr>
<tr>
<td>Nurse</td>
<td>1</td>
</tr>
<tr>
<td>Police</td>
<td>3</td>
</tr>
<tr>
<td>Safe Hands</td>
<td>1</td>
</tr>
<tr>
<td>School</td>
<td>28</td>
</tr>
<tr>
<td>Self-referral</td>
<td>16</td>
</tr>
<tr>
<td>Social services including Family Intervention Team &amp; MASST</td>
<td>16</td>
</tr>
<tr>
<td>Specialist Midwife</td>
<td>5</td>
</tr>
<tr>
<td>Valley Youth Project</td>
<td>1</td>
</tr>
<tr>
<td>WomenCentre</td>
<td>10</td>
</tr>
<tr>
<td>Youth Offending Team</td>
<td>2</td>
</tr>
<tr>
<td>Young carers</td>
<td>3</td>
</tr>
<tr>
<td>Young Parents</td>
<td>1</td>
</tr>
<tr>
<td>Youth Workers</td>
<td>1</td>
</tr>
</tbody>
</table>

By 10th July 2015, the project had dealt with 165 referrals in total. An analysis of the project monitoring data until July 2015 showed that the majority of young women whose ages were recorded (162 of the 165 referrals), were aged 18 and under.
Table 1.2 Ages of young women within The Way Forward Project

The April 2015 steering group meeting reported an increase in referrals of young women aged 23 but despite this the general pattern shown above was still evident in that most referrals were for young women in younger age ranges, particularly aged 14-18.

Analysis of other demographic data held showed that the majority of young women within the remit of the project were White British (163 referrals had a recorded ethnicity).
In terms of sexual orientation those that identified themselves with a particular category were in the main heterosexual. 163 had recorded their sexual orientation.

Table 1.4 Sexual orientation of young women within The Way Forward Project
The monitoring data held by the project also showed the areas in which the young women were living, with clear trends emerging in terms of the project drawing from specific postal codes. The HX1, HX2, HX3 and HD6 areas had the largest numbers of young women (153 postal codes were recorded).

Table 1.5 Postcode data for young women within The Way Forward Project
1.1 Principles of the Way Forward

The Way Forward has a specific approach in working with young women, and the key facets of this are:

1. A women-centred ethos underpins the approach - the value of gendered approaches for girls and women with vulnerabilities underpins the entire approach and is the ethic upon which The Way Forward was established;

2. Client-led, individualised support – the project is flexible in working with a range of young women and works with a variety of needs (see section 1.3)

3. Lack of thresholds – the project does not use or apply any criteria for referrals of young women into the service (see section 1.3), which is a different approach to other local agencies (see section 3.2)

4. Engagement and empowerment - the project works to empower and develop self-determination among young women as the core attitude (see section 4, making a difference and section 5.1. the role of the Engagement Worker)

1.2 Project Journey

1.2.1 Changes in the project approach

The original project design has changed during the evaluation time-scale. There is flexibility in the on-going delivery of the project: the project is not what it set out to be and it has transformed through an organic evolution into a model that works in practice in terms of what is needed locally. This also resulted in re-defined project targets because the nature of the engagement carried out has proved to be more time-consuming than originally envisaged. The Way Forward currently monitors project progress against outcomes such as the number of girls/young women referred, the number of girls/young women with high level of unmet need show positive outcomes, the number of girls/young women taking active role in project review and development and the number of girls/young women who demonstrate improved relationships with partner agencies.

The initial design of the project was focused upon the use of in-house panels as a mechanism for referral. The project initially aimed to engage young women and then identify their main areas of unmet need. Following on from this first piece of engagement, the project aimed to launch a mini panel run in-house involving the relevant agencies to link into the identified unmet need e.g. housing and drug services. However, early intervention panels were launched by the local authority to improve multi-agency working, information sharing and future planning for families on the continuum of need at the start of The Way Forward. Consequently, to avoid a clash of panels The Way Forward team decided not to operate via a mini panel approach. Given these changes, the Way Forward developed a more flexible approach based upon the centrality of girls and young women needs rather than a panel evaluation.
The second diversion from the original plan was a broadening of the role of the Engagement Worker in order to respond effectively to the needs of the young women being engaged. The engagement process has proved more complex and varied than anticipated, with some girls taking months to engage after initial contact and others needing higher levels of intensive intervention before being ready to develop their Way Forward Plan and moving on to other agencies or activities, as demonstrated in the interview data from the Engagement Worker:

“We’re persistent, constant texting, phoning, not giving up, perseverance, so that young woman knows that we’re there. You know we’re not one of these that says well we’ve rang twice so that’s it so I think it’s still important to mention about this project that engagement is crucial” Engagement Worker

Analysis of the monitoring data also shows the variety of contact work that has been carried out by the Engagement Worker. Table 1.2.1 shows that the Engagement Worker’s role is varied in terms of the types of contact she has with young women and with other agencies on their behalf.
Indeed, analysis of the referral patterns demonstrated that whilst the project was established as early intervention, a variety of need across a range of levels can be seen by the young women included within the project. Where data was available 66.67% of the young women fall into tier 3 or above, in which young women already have a range of emotional and behavioural difficulties. Tiers 4 and 5 are the level at which a young woman is considered as requiring child protection. Young women at tier 2 are classed as early intervention. July 2015 figures show that 38 of the total referrals are at level 2 (23%) thus the project has a twin-track approach of reaching those in need of early intervention, as well as working with more serious levels of need.

A further change that was experienced on the project journey is that in some instances moving the young women on is not an option therefore The Way Forward ‘holds’ young women and does case work. This is different to the original project design in that the planned process was going to be to engage and then refer on to appropriate agencies. This was again emphasised within the interview data with the Engagement Worker;
“The role has changed because we’ve identified that there is no follow-on services and we’re holding cases and meeting that need ourselves through lots and lots of different routes by delivering more of a service as oppose to just engagement. There’s no ultimate service that will offer the needs that we’re finding.” Engagement Worker

“So we’re doing engagement plus delivery” Engagement Worker

The monitoring data also shows the length of time that young women have been held in the service. Table 1.2.3 clearly illustrates that The Way Forward is serving a holding function with many young women remaining in the project for lengthy periods of time.

<table>
<thead>
<tr>
<th>Completed</th>
<th>Still in the service</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>No. of days</td>
<td>No. of days (up to 1st Nov 2014)</td>
</tr>
<tr>
<td>Max</td>
<td>Max</td>
</tr>
<tr>
<td>568</td>
<td>941</td>
</tr>
<tr>
<td>Mean</td>
<td>Mean</td>
</tr>
<tr>
<td>192.5</td>
<td>334.9</td>
</tr>
<tr>
<td>Min</td>
<td>Min</td>
</tr>
<tr>
<td>7</td>
<td>22</td>
</tr>
<tr>
<td>Total</td>
<td>Total</td>
</tr>
<tr>
<td>12128</td>
<td>16409</td>
</tr>
</tbody>
</table>

Further analysis of the monitoring data related to the days that the young women remained in service showed that

- 1 individual was in the service twice but is no longer using it: 89 and 133 days.

- 1 individual is currently in the service for the third time: 68, 268 and 39 days (up to 1st Nov 2014).

- 1 individual is currently in the service for the second time: 118 and 22 days (up to 1st Nov 2014)

This demonstrates that in some instances young women are returning to The Way Forward Project so that cases are not always referred on, and do not necessarily remain closed. In some cases, young women are able to return to the service because they have built both confidence and trust in the project. In some instances The Way Forward have successfully and appropriately referred young women onto other services however, for a variety of reasons young women return. For example, the limitations associated with some services i.e. only being offered 6-8 sessions can result in the continuation of unmet need, in some cases young women have reported not being able to connect or work with other staff.

As a result of this change in delivery, capacity and isolation issues for the Engagement Worker were identified as a key concern within the Interim Evaluation Report (Warwick-Booth et al 2013). Therefore, the project recruited a part-time support worker for the final year of its duration in order to that provide
emotional support including some longer term follow up to which will help share the work-load. The complexity of need presented by the young women who have become involved with the project, also had an impact upon the way in which the project has worked in that cases have been more time-consuming than initially expected:

“Most of the cases are very complex cases. The referral may come is identified as low need depression anxiety, not attending school but when we unravel it and get to the root core, we open up a whole can of worms and identify much more complex needs” Engagement Worker

The multi-agency steering group has also functioned in a way that was different to expectations. The initial project design envisaged involving a wide range of organisations and services to support outcomes for those engaging. In reality it has been a small number of agencies who have been involved with the steering group, offering advice and support in relation to specific cases through conversation with the Engagement Worker and wider project team.

Finally, WomenCentre has been working with AdviceUK, which uses the Vanguard Method to help leaders in voluntary sector services and others to understand their work as a system and re-think its purpose from a service user perspective. Vanguard uses specific principles such as citizens setting their own priorities in terms of delivery (working alongside people to find out what matters to them, and learning how to deliver exactly and only that) and deploying best resources on the frontline (learning how to respond first time to predictable demand and how to quickly connect service users with the person or people who will fix their problem), see https://www.vanguard-method.com/. Part of this process resulted in the Engagement Worker reflecting upon her own role, and producing an analysis of how she views the project operating. She sees girls and young women experiencing distress and in need help however, if the issue is non-specific or not serious enough to reach service thresholds then these young women face a brick wall or alternately will slip between any existing service offers. The Way Forward then acts as a service net, catching these girls and young women who fail to get the service they need or who engage with services for a limited time but still need further support. The Way Forward can also direct girls and young women to appropriate services when their needs become specified through the engagement process. This is represented diagrammatically in figure 1. This work was conducted separately from the evaluation and whilst the evaluation team were able to learn about the approach and share some information, the impact of the Vanguard approach upon the Way Forward Project was beyond the scope of the evaluation remit itself. Therefore the evaluation team recommends that further research is commissioned which examines and documents the learning from the use of this approach in relation to The Way Forward.
The Engagement Worker also described her role as assertive outreach focusing upon interactions with young women to gain understanding of them, and to make them feel involved within decision making in their own lives by allowing them to be heard, working alongside them, being with them and not for them, helping to make a difference. She described the uniqueness of her role within an overall the holistic approach, working closely with internal well-being, self-esteem, identity, self-acceptance and worth as ultimately one of the projects strongest points. This runs alongside some of the more practical work carried out such as advocacy, mediation and building bridges between family members.
1.3 Young women’s needs

Another area in which the project has learned has been in relation to the nature and scope of young women’s needs. At the outset of the project, the team anticipated working with young women with a range of unmet need and whilst this has been the case, many of the young women coming into the project have complex social and emotional problems and a broad variety of need. The project team and the Engagement Worker have faced the challenge of dealing with a variety of need along a continuum of seriousness, without any particular patterns being evident. This was evidenced through the stories of the young women as well as stakeholder and engagement worker reflections. The table below uses selected case study examples to illustrate the range of issues experienced by young women in the project, described in their own words:

Table 1.3.1 – Detailed examples to illustrate the complexity of young women’s needs at the point of engagement (taken from focus group discussions with the young women)

<table>
<thead>
<tr>
<th>Young Woman</th>
<th>Description of her needs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sarah</td>
<td>“I was in a really horrible place, horrible school life, self-harm, no one to talk to, I had a and still do have a horrible relationship with my mum. Now we’re okay ‘cause like not...things aren’t great but plodding on. On my way to university which is where I want to be, I want to be in a stable home and I do want a decent relationship with my mum. It’s still cloudy but there’s not as much rain like it’s up and down, sort of general umm but there is now someone to talk to which I’ve got so”</td>
</tr>
<tr>
<td>Ruby</td>
<td>“I was, I had a violent relationship with my mum, like social services were lined up, police were getting involved. I got kicked out and almost were like homeless. I was suffering from really bad depression and a while ago I was living with an un-medicated bipolar person that was part of my family which was the hardest thing I’ve ever done.”</td>
</tr>
<tr>
<td>Ebony</td>
<td>“Mine started from when I was younger, from getting abused and then carrying to getting grooming online and hear voices in my head, self-harm, and trying to commit suicide but stuck in a relationship that I was confused by ‘cause my boyfriend thought he was gay and then he thought he wasn’t gay and then thought he was gay again. Now I’ve got like a massive burn on my... ‘cause of self-harming.”</td>
</tr>
<tr>
<td>Vicky</td>
<td>“I’ll just say where I was. I wasn’t sure how I was ever going to continue, I couldn’t look to the future, I was just trapped where I was; even though I have a close family and we’ve always been close, I just felt alone, I couldn’t talk to them, I was confused, I didn’t really understand what was going on.”</td>
</tr>
</tbody>
</table>
Anna

“Well I attempted suicide ’cause I’ve watched my mum in a lot of abusive relationships. I used stupid acts (referring to risky online actions and risky sexual behaviour) to meet people and feel better about myself. I was raped last year, it’s coming up to a year now. I recovered from my abusive relationship myself of 3 years…battling depression still but I’ve got medication for it now and I was bullied by my dad a lot, he used to be horrible like physical and mentally just a horrible person. Yeah he was just…like watching…I used to go to college with like alcohol, drunk all the time and I was moving from my mum’s to my dad’s to my gran’s back to my dad’s – horrible.”

The issues experienced range from problems abusing alcohol or drugs, to complex family problems and caring responsibilities, to abusive and controlling relationships, to having been in care or having their own children taken into care, to severe mental health and emotional health challenges to ‘very complex relationship and wellbeing issues’ (Engagement Worker).

“Some of these girls are absolutely desperate when they arrive at the project…by the time [the EW] gets a relationship built with them, their needs are just enormous” Stakeholder

Indeed, some of the needs were reported as being different for the young women dependent upon their age range:

“I think when they get to a certain age once they’ve come out of school and hitting the 16 upwards, I think that’s where we struggle even more because between 16 and say 19 that’s when chaotic behaviour starts happening, they’re very vulnerable, they’re not an adult but they can be classed as an adult and there’s nobody there. There’s nobody there to guide them” Engagement Worker

Key findings – project journey

- The Way Forward operates with specific principles underpinning the delivery of the work. Firstly, a women-centred ethos, secondly client-led; individualised support, thirdly a lack of thresholds and finally engagement and empowerment as the central core of the work with young women.

- The original project design has changed during the evaluation time-scale in a number of ways:
1. Planned referrals changed upon project establishment and this resulted in changed referral pathways into The Way Forward.

2. The role of the Engagement Worker became broader to deal with the variety and scope of contacting young women and engaging them and thus also became more time-consuming.

3. The project has also 'held' some young women and done case work with them rather than simply referring them on. This is necessary because other services are not available and withdrawal of support at this point would not support the project's objectives of early prevention and holistic care.

4. The steering group has also operated in a supporting/advisory capacity with a small number of organisations committing to this role.

- The project has dealt with a range of needs amongst young women under its remit. These are complex and various and exist along a continuum of seriousness without any specific patterns.
2. Findings: Making a difference: improvements in the girls and women’s life chances

One of the aims of the evaluation was to explore the impact that the project had in relation to the young female participants. The immediate impact of the project upon the young women was clear from the discussions with the stakeholders:

“Yeah, which I think is really good because otherwise they are invisible, they just tend to drift and it’s not until much later down the line when things are much more serious that anybody notices them I suppose” Stakeholder

The young women involved in the focus group discussions were also able to very clearly articulate the impact that being involved in The Way Forward had made to their lives:

“I have been very very very miserable, Like, when I met [EW] I was not in a good place at all but I’m getting there now and I know I have got support…I feel like I am getting somewhere.” Young woman

“I started working with [EW] last year and she came up with millions and trillions of ways she could help me with everything because I got in really bad debts and got myself in a bit of a pickle and all sorts of stuff” Young woman

“…help me sort everything out and supporting with everything under me so it was a lot easier just having someone there because half the time you feel you’re on your tod (local slang for being alone) and that everyone is ganging up on you.” Young woman

The young women in discussing the ways that the project had helped them emphasized the importance of having emotional support, the ways in which they were listened to and ‘heard’ and the different style used by the Engagement Worker which was based upon trust and a holistic approach. Reported project impacts related to soft outcomes for many of the young women and the stakeholders. For example, knowing that someone is there to help and take a personal interest in the young women was seen as important which in turn led to a positive impact on confidence and self-esteem:

“For some it’s helped with their confidence, their self-esteem and for others it’s actually made a real difference to their day-to-day functioning because they’ve felt like they could function at a very practical level much better because they’ve got the support they needed. So it’s had an impact in very different way from just simply better choices and to move on with themselves. But for others there there’s been so much practical and overview support at a very hands-on level, I think it’s made a difference in that sense as they’ve been able to see a tangible real difference in that very practical day-to-day way” Stakeholder

“I think somebody to just listen is so vital to these young women. Somebody to listen, who has the knowledge of what’s out there to help to the next stage. I think that’s the crux of it” Stakeholder
During the focus groups the young women were invited to produce a story board to record their journey through the project, and they were asked to talk about what they had produced relating to the impact that the project had upon them. Their stories reflected many positive changes, and examples from the perspective of the young women about how the project had helped them to be able to cope with their problems, or at least to start to address their problems. For example:

“"But I’m stopping drinking. I’ve been drinking too much and I don’t want to end up like my mum, it got to the point where I was just using it as a release of my problems and it’s not healthy so I’ve decided to stop drinking for a bit until I get myself sorted. Probably get some counselling and stuff like that” Young woman

The young women’s discussion of their journeys illustrated the positive changes that had happened in their lives since they had become involved in the project. Given the variety of needs presented by the young women, their journeys are all different with a range of outcomes. Despite this, the impact of the project for the young women was seen in the changes that they had been able to make (with Engagement Worker) support which ensured that there had been improvements in their near future and shorter term plans.

One young woman’s journey (depicted below) through the project started with her being in debt. Describing herself as feeling very miserable at having experienced the care system herself and then with having her own son removed from her care, she then discussed the result of her involvement with the project as positive. At the time of the focus group discussion she was able to see her son on 3 days each week, and the Engagement Worker had been able to accompany her to meetings.
Another young woman reported a different journey through the project, depicted again in her storyboard (see below). When she began the project she described herself as experiencing a range of emotions such as being angry, not caring about anything, feeling depressed. She had also experienced the care system and described herself as ‘cuckoo’ in reference to her own unstable emotional position. She has engaged in risk-taking behaviours such as running away, taking drugs and using alcohol. After support from the Engagement Worker, she described herself as being happy, relaxed and calm which is a very different emotional position. She said

“I had a lot of problems which is like being on a low day so that’s why there’s a picture of a woman trying. I was low and depressed which led to self-harming a lot more. Now I have short hair, got a new house, new people, new town (demonstrating positive changes)” Young woman
Further storyboard images are available in appendix 2.

Much of the impact of the project related to the future aspirations of the young women, they had a future focus and goals that they hoped to achieve despite their complex needs upon engagement. Thus, the project had an impact upon longer term vision for some of the young women. One young woman said simply,

“*I’ve got where I hope to be*” Young woman

Table 2.1 illustrates the hopes that some of the young women had in relation to their future, following involvement with The Way Forward

<table>
<thead>
<tr>
<th>Before the project</th>
<th>Where they hope to be</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. At school, always crying,</td>
<td>Forensic scientist,</td>
</tr>
<tr>
<td>had no control of my life,</td>
<td>Want to go to university,</td>
</tr>
<tr>
<td>dad is an alcoholic and has been sectioned,</td>
<td>Have no children, no marriage, just</td>
</tr>
<tr>
<td></td>
<td>want to focus on myself and not</td>
</tr>
<tr>
<td></td>
<td>worry about family.</td>
</tr>
</tbody>
</table>
feel as if ‘the lights were on but no one was home.’
mum is ill,
have a very controlling boyfriend

<table>
<thead>
<tr>
<th>2. Rollercoaster,</th>
<th>Family,</th>
</tr>
</thead>
<tbody>
<tr>
<td>Up and down all the time,</td>
<td>settle down,</td>
</tr>
<tr>
<td>Scared of failing my GCSEs,</td>
<td>stability</td>
</tr>
<tr>
<td>Had a meltdown in a school toilet cubicle, feel like everyone wants a piece of me,</td>
<td>control</td>
</tr>
<tr>
<td>My mum is an alcoholic and she has been in a critical condition in hospital twice.</td>
<td>to be a better version of me,</td>
</tr>
<tr>
<td>Referred through school.</td>
<td>good grades,</td>
</tr>
<tr>
<td></td>
<td>to go to university</td>
</tr>
</tbody>
</table>

Further changes in one young woman's longer term future aspirations are illustrated in the storyboard below. When asked to talk about her storyboard the young woman commented,

“I've got the word ‘destination’ because I want to feel like I am going to one place because I feel like I'm on a journey and I want to settle down and that’s why there’s a family as well. I think because I’ve had a dysfunctional family, I want stability, I want to settle down. And I want to get control and to be a better version of me.”

Young woman
Young Women consistently articulated their hopes and dreams. Young Women produced this dream cloud independently from the evaluation team, and displayed it at a conference in which they described the importance of the project from their point of view.
The Way Forward also used their own internal questionnaires to review the progress of young women through the project (see appendix 1 for a copy of the initial review and moving on review). Analysis of the distance travelled from the point of view of 30 young women within the project, reflects positive improvements in the majority of cases as illustrated in table 2.2.
There were some minor areas in which young women reported that they had found progress difficult, as reflected in table 2.3. However, this is unsurprising given the complexity of needs being dealt with by The Way Forward.
In general changes resulting from involvement within The Way Forward were positive. Indeed, these positive changes reported by the young women themselves in terms of the impact of the project were also echoed by stakeholders:

“She’s confident, she works on a Saturday now, when I see her she’s much more bubbly. She said to me, I would never have this without your help” Stakeholder

### Table 2.3 – Overview of young women’s perception of progress

<table>
<thead>
<tr>
<th>Review Question Topics</th>
<th>Mean Increase</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have a voice</td>
<td>2.9</td>
<td>2.9</td>
</tr>
<tr>
<td>Confidence</td>
<td>2.4</td>
<td>2.4</td>
</tr>
<tr>
<td>Knowledge of services</td>
<td>2.4</td>
<td>2.1</td>
</tr>
<tr>
<td>Relationship with family</td>
<td>2.3</td>
<td>1.6</td>
</tr>
<tr>
<td>Ability to take positive actions</td>
<td>1.7</td>
<td>1.5</td>
</tr>
<tr>
<td>Ability to make decisions</td>
<td>1.7</td>
<td>1.0</td>
</tr>
<tr>
<td>Issues re. risky behaviour</td>
<td>1.3</td>
<td>1.6</td>
</tr>
<tr>
<td>Issues re. alcohol/drugs</td>
<td>1.0</td>
<td>1.0</td>
</tr>
<tr>
<td>Awareness of dangers of alcohol/drugs</td>
<td>1.0</td>
<td>1.3</td>
</tr>
<tr>
<td>Involvement in education</td>
<td>9</td>
<td>0</td>
</tr>
</tbody>
</table>

**Young Women’s Perception of Progress Made with Way Forward**

(Mean increase and range)
"When I went she was cheery, I could tell in her voice and in her body language, she was so much better and she said she was really grateful" Engagement Worker

"Giving girls an opportunity to have much more control or sense of control but also with that control comes a sense of responsibility within their lives" Stakeholder

The Engagement Worker, when asked to comment upon the changes experienced by the young women when they had been involved with the project said:

“We can save lives and I think some of my young women have said literally that September their involvement with the Way Forward has saved their lives. You provide them with a safety net, you can reduce the amount of drinking and drugs they are taking, they’re not as at risk, you’re providing more safety, you find them housing, all that kinds of stuff. But I would say ultimately the impact is you can save lives because they can be a rock bottom point can’t they?” Engagement Worker

Again this reflects a variety of journeys for young women travelling through the project, with a range of issues being focused upon too. Commenting further upon the outcomes that young women report the Engagement Worker outlining the importance of empowerment and resilience building as a base for working with young women with such complex and variable needs.

“So I think yeah we encourage them, we empower them, we create resilience as well which is what the project is about – it’s about building resilience. It’s about helping them cope with what they’re going through and we’re never going to mend it, we’re never going to change it…sorry we’re never going to…we can change how they are at the moment, we’re never going to change what’s happened to them so we can just help them build strategies around their traumas and things” Engagement Worker

The Engagement Worker also suggested that another way in which the project was having an impact was in relation to prevention, suggesting The Way Forward prevented harm, reduced pregnancies and involvement with the criminal justice system:

“If this service wasn’t here, without the work that we’ve done we maybe have more crisis around mental health with more self-harming, more girls displaying risk of behaviour or putting themselves at risk or harm, the crime rate could go up, further sexual exploitation, pregnancies, working girls, all of that and then we hit the criminal justice system.” Engagement Worker

The positive outcomes reported already are further reflected in the testimonies provided by some young women who were confident enough to talk about their experiences at a Conference held by WomenCentre in September 2015, disseminating the work it carries out.
Testimony – Julia

The Way forward has helped me because Anne-Marie and Mel are different due to the help that they give. I feel it is not as formal as it would be if I was assigned a ‘counsellor’. By that, I mean we are able to have a chuckle and a giggle about certain things that have happened and dip in and out of irrelevant things if needed. I feel I can also get upset if I need to let my emotions out and am not judged, other organisations have. I have felt in the past I haven’t been able to talk to people for this reason and my emotions have been all locked up inside.

There have been a few things that have got me angry in the past and one of these are; when people judge me because of what’s happened in my life, for example when I was younger my mum got herself into a lot of debt and this affected me, when I have told people this in the past they have looked down on me, that’s not fair my mums actions are not my fault.

In the past I have found that people struggle to understand me as a person due to my happy smiley nature yet having so much going on at home and on the inside. Mel and Anne-Marie understood me straight away and we clicked. Mel and Anne-Marie could see if there is something wrong straight away and always ensure that I knew they were there for me to talk to if I needed to.

They understand what women and young girls need for a start, whether it is professional help from the police or social services or just a friendly face (which in my experience Anne-Marie and Mel are always there to offer). The WomensCentre do not offer specific times for the help that they offer, you can ring them whatever time if you need a chat even if it is 10 minutes after your appointment. They are always there! The things that are difficult are; women over-think, not many people understand this especially if they are older or male! The WomensCentre is there to help and put your mind at rest when you need it.

I think it’s very important that ‘the way forward’ is a gender specific project, this is because women are the weaker gender at a young age (14-25) mentally, they have got a lot more going on (hormones), and if there is any problem with relationships then it tends to be the women that gets upset. I feel that girls and young women are more likely to fall out with parents at this age because of hormones and the imbalance around emotions.

Julia’s testimony reflects the importance of emotional support and flexibility within The Way Forward Project.
Testimony – Frances

As teenagers and young women, we are constantly made to feel we’re inadequate, through the media, our peers and a society where feminism has become a dirty word. And if the people, who are supposed to support us, such as our partners and family, do the same, it can be impossible to see that we’re not. That’s why I believe it’s so important for young women to have places like the women’s centre and projects like this one, to be empowered and educated by other women, by people who get it! Especially those of us lacking a female role model ourselves.

And the Way Forward does exactly that. I have been given the tools to see not only what I am capable of but what I have already achieved, just how resilient I am and most importantly how I deserve to be treated.

When I was first asked what made the Way Forward different I didn’t know where to start. Before I became involved with the project my life was chaos, I was helpless and desperate. Then Anne-Marie came along and suddenly it was like somebody had hold of me and they weren’t going to let me fall again. I was never judged or told what to do, never pushed and unlike other places I wasn’t passed from pillar to post, she was there to stay.

From day one she treated me like an equal human and not a statistic, she cared and went above and beyond the call of duty to ensure my safety. From not letting me off the phone till she knew I was ok, to working late to move me somewhere safe and so much more. That’s what makes this project stand out, the people involved. Having somebody who refuses to give up on you no matter how tough it gets, who is your voice when you cannot speak but who never puts words in your mouth.

France’s testimony demonstrates the central role of the Engagement Worker and the trusting relationship that has been at the core of the project, seen in France’s statement that the Engagement Worker was ‘there to stay’. For her the gender-specific focus of the project was also very important.

Key findings – making a difference

- The young women report a variety of different outcomes as a result of their journey through the project including, being able to make decisions independently, feeling better emotionally, being more empowered, improvements in their confidence and feeling able to cope with their problems because they are listened to. Some young women also reported reducing the risky behaviours that they were participating in.
• The project is impacting upon young women by focusing upon their life chances and by helping them to focus upon their future aspirations via future planning and encouraging them to realise that they do have a future.

• At the point of contact the project is able to identify complex needs and provide a service which offers support to a range of young women with a variety of needs.
3. Findings: Project operation and delivery of provision

3.1 The role of the Engagement Worker

The Engagement Worker’s role has already been highlighted as crucial in relation to the impact of the project upon the young women from their perspective. The intricacies and skills involved in the provision of the Way Forward were clear from the qualitative data gathered. At the outset of the project, there was clear commitment to the role with the Engagement Worker taking ownership in a positive way in order to appropriately support young women with various needs:

“All my girls”; ‘when I get a chance to reflect on my cases……I was holding onto all of my ladies…my women, I call them my girls” Engagement Worker

The Engagement Worker role is varied but involves advocacy and giving young women a voice:

“Link them into the agencies that are there and try and bend or fight your way through some of the barrier that agencies… and I think it’s putting up a case for these young women as well”. Engagement Worker

 “[The EW] has had to take on practical tasks but also, like an advocacy role. Much more than we thought we were going to have to do…making links and being an advocate and helping that young girl or woman to have a voice…for somebody to actually listen to what they were saying and take it seriously and them make changes. So that very real advocacy role of reaching the right people” Stakeholder

In addition to the young women’s discussion of the importance of the Engagement Worker, the 12 detailed case notes analysed bear out a range of issues experienced by each young woman – there are common themes across these such as complicated, unsupportive family relationships, problems at school, drug and alcohol dependency (in the young women and the parents themselves), self-harm as well as mental health issues such as low mood and anger management. Often the young women have complicated circumstances that vary – spiralling out of control can been seen frequently within the case notes. Thus working with the young women is a ‘moving feast’, they can report being fine/stable in one meeting with the Engagement Worker and then text her a few hours later after experiencing a crisis.

“It’s like when you go to a GP and it’s on a scale of 1 to 10 you know that they’re doing solution focus, well that young girl might come in today and 10 be a good day, she might come in tomorrow or Friday, something can happen in that 24 hours and we’re back down at 1. So we can never say we can go on a role and we think everything’s okay and then we’re pulled straight back in because we’re nearly at closure thinking it’s been going along good and then within 24 hours it can just be turned upside down.” Engagement Worker

These complexities highlight the importance of not using a needs based assessment criteria in this area of work because the needs of the young
women cannot be classified as static or stable. However, due to the nature of this work and the role, it is sometimes difficult to disengage from the young women and move them on:

“It’s then difficult to move them onto someone else even when we have identified somebody else who could take on some of the delivery role. It’s been quite difficult to move them on to have trust with another worker so yes, some of the girls and young women have stayed perhaps longer than we’d intended”. Stakeholder

The Engagement Worker in this post recognised that the process of working with the young women often does not have a clear end point, and needs to be offered outside of traditional service barriers:

“All it takes is a phone call and I’ll start doing visits again even after a case has been closed” Engagement Worker

“She [EW] even came to see me on a Saturday because I was really, really depressed, and she came out of her way to see me. I felt a bit tight.’ Young woman

It is this approach to the work that is seen as different from the perspective of those delivering it;

“The unique selling point of my project was my level of engagement and I felt that’s why it was working because I was texting them every couple of days, I was ringing them every couple of days’ Engagement Worker

Analysis of the case notes show different needs in the young women accessing the project both in scope and severity, ranging from cases where supportive conversations are provided to much more complicated cases in which a variety of agencies are involved over a longer-period of time. This demonstrates the Engagement Workers varied role within the Way Forward provision and supports her question in relation to the other provision on offer locally – can other agencies provide this level of flexibility in support? In case 7, there were no referral pathways due to the lack of significant issues/needs according to other threshold criteria, the impact of the engagement worker is positive.

Table 3.1 – The impact of the Engagement Worker in case 7

<table>
<thead>
<tr>
<th>Issues experienced</th>
<th>Engagement Worker support</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Case 7:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Young woman already working with student social worker but her placement was ending, so young woman referred into Way</td>
<td>Meetings with young woman</td>
<td>Continued support, listening and advice role for a young woman who does not meet other agency criteria</td>
</tr>
<tr>
<td></td>
<td>Contact with parents – discussions with mum</td>
<td></td>
</tr>
<tr>
<td>Forward. Also family support worker referral had been made.</td>
<td>Young woman had sexual intercourse at age 14, parents were aware and had concerns about her vulnerability and child sexual exploitation.</td>
<td>Young woman said that she just needed someone to talk to and that she is aware of her own risky behaviour.</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Young woman had sexual intercourse at age 14, parents were aware and had concerns about her vulnerability and child sexual exploitation.</td>
<td>Engagement worker reported that the step-father was very strict – no longer allows young woman to go out of the house – strained relationships.</td>
<td>Young woman reported issues in the relationship between her mother and step-father.</td>
</tr>
<tr>
<td>Parents not engaging with the social worker/family support worker.</td>
<td>Young woman reported issues in the relationship between her mother and step-father.</td>
<td>Parents not engaging with the social worker/family support worker.</td>
</tr>
<tr>
<td>Young woman said that she just needed someone to talk to and that she is aware of her own risky behaviour.</td>
<td>On-going issues with parental relationship - mum allows her to go out and meet friends behind step-dad's back, step-dad grounds her for kissing a boy.</td>
<td>Young woman said that she just needed someone to talk to and that she is aware of her own risky behaviour.</td>
</tr>
<tr>
<td>Young woman made improvements in terms of her behaviour, being honest with parents and her parental relationship also improved with step-dad relaxing more – allowing her a mobile phone and being less strict.</td>
<td>Young woman doing well educationally and was happier in mood – case closed.</td>
<td>Young woman doing well educationally and was happier in mood – case closed.</td>
</tr>
</tbody>
</table>

In case 8, the Way Forward worked as it was designed to do – linking a young woman into other agencies/support systems and then closing the case after short term engagement; however, despite this, the young woman’s situation did not improve and the young woman expressed her wishes to work with the
Engagement Worker again and was able to discuss her emotions after requesting this support. This is reflective of the trust built up in the relationship during the engagement period, which was also discussed by the Engagement Worker when she was reflecting upon her own role:

“I’ve had a young woman come in today and says to me that, it may take her a while ‘cause it’s the first time I’ve seen her, it may take her a while because she struggles with trust and I have said to her ‘fine it takes you as long as it takes you’ and I think that, they are out, they suess you out, they test you, they’ll challenge you, they’ll push boundaries, they might not turn up and they’ll do that to test ‘cause they’ll say “right I wonder if she’s going to contact me, I wonder if she’s going to text me when I don’t turn up for a visit or is going to be the last time I see her”. So there’s all that kind of thing about trust, trust is huge, and if they’ve never been able to trust anybody to build up trust is really difficult.” Engagement Worker

The approach used by the Engagement Worker is very much focused upon flexibility in working with young women – cases may be closed but then have to be revisited/reopened depending upon changing circumstances. The young women are also given lots of opportunities to work with the project, which is a different approach to what is offered by other service providers:

“Another thing as well that the impact is allowing them to, not allowing them to fail but allow them to make mistakes and allowing them to be human and say ‘right you didn’t turn up on Wednesday but hey ho let’s get on with it’ and not victimise them and say ‘you haven’t been to your last 3 appointments’ – can you imagine if we did that?” Engagement Worker

Further analysis of the case notes demonstrated that the young women within The Way Forward are treated on a case by case basis which is a key strength of this project. The Engagement Worker provides tailored individual support depending upon what the young woman need and ask for. Support is often issue related e.g. discussing staying safe, safeguarding issues or dealing with mental health problems and is focused upon building resilience via supportive and open communication with the Engagement Worker. The Engagement Worker reflected upon her own practice in terms of working on a case by case basis:

“It’s about being quite creative as well. So it’s about being innovative in your approach to work you know, which again comes to the no criteria, you know just try and think about it from a like a normal human being and think what do we need to do?” Engagement Worker

The case notes also reflected the different types of support offered to the young women, with case 8 showing the importance of emotional support within the relationship between the Engagement Worker and the young women.
Table 3.2 – The impact of the Engagement Worker in case 8

<table>
<thead>
<tr>
<th>Issues experienced</th>
<th>Engagement Worker support</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Case 8:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family relationship issues – step-mother perceived as not liking the young woman by the young woman herself, and young woman’s dad drinks alcohol every evening with friends at home, but he is verbally supportive of her going back to college, and reports that he has tried to manage unsupportive peer relationships</td>
<td>On-going meetings with young woman</td>
<td>Continued support, listening and advice role for the young woman</td>
</tr>
<tr>
<td>Dad reported concerns about cannabis use in young woman to engagement worker. Dad also reports feelings of depression himself</td>
<td>Meetings with Dad and other workers such as parent link worker</td>
<td>Young woman attended project challenge</td>
</tr>
<tr>
<td>Young woman reported for drinking alcohol and anti-social behaviour – often involved in situations that are problematic related to peer group</td>
<td>Further meetings with other workers to discuss issues being dealt with, ways to manage and improve the situation</td>
<td>Once additional support was in place from other agencies, closed the case but due to multi-agency context found that situation had worsened despite the other agency support – young woman expressed support to work with engagement worker again so re-opened case</td>
</tr>
<tr>
<td>Young woman reported not eating for long periods of time to engagement worker</td>
<td>Conversations with young woman about anti-social behaviour, alcohol use, consequences of behaviour e.g. related to arrest and peer group, cannabis use and longer-term implications, sexual relationships, social circles she is part of</td>
<td>Young woman attending college</td>
</tr>
<tr>
<td>Young woman reported not having things to do/occupy her time</td>
<td>Linking young woman to project challenge</td>
<td>Young woman attending WomenCentre office to meet engagement worker</td>
</tr>
<tr>
<td>Young woman misses mum who left the family home several years ago – reports</td>
<td>Liaison with college regarding her re-engaging with course</td>
<td>Young woman engaging with substance misuse support worker</td>
</tr>
<tr>
<td></td>
<td>Referral to Lifeline (Substance Misuse Service)</td>
<td>Young woman attending Orangebox (Young People’s Resource Centre)</td>
</tr>
<tr>
<td></td>
<td>Work with Early Intervention Panel – referral to a young person’s support worker to provide help with house conditions. Youth worker</td>
<td></td>
</tr>
</tbody>
</table>
lacking motivation and being low in mood
Young woman self-harms
Young woman not engaging with college course
Young woman arrested for arson and other police involvement at various points related to anti-social behaviour – police considering ASBO
Young woman admitted cannabis use to engagement worker

involvement followed on from this
Referral to WomenCentre counselling service (after the case was re-opened) and liaison to ensure counselling session was arranged
More time spent with engagement worker discussing emotions – at the request of the young woman
Further meetings and emotional support provided to young woman

The case notes demonstrate that a key area of support given is emotional - the engagement worker is someone who provides independent support for young woman, a ‘listening ear’ thus emotional labour is a key aspect of the engagement worker role. Emotional labour is used as a mechanism to develop resilience.

“They get to feel comfortable around us. We do the nurturing side of it as well as the you know we still hold the professional side of keeping the boundaries but we do the nurturing side because we have identified there is a lot of family breakdown and so they need the guidance.” Engagement Worker

“I think it’s because they know that it is a safe place. They know that there will have that voice and they will be listened to and I think that’s where we’ve got the breakdown with some of the services that we are trying.” Engagement Worker

“With us doing the emotional support, we’ll take them for a coffee and some of them have never had that, some of them have never been for a coffee yet and they don’t even know what to order when they go in. You can see their face, they’re so excited.” Engagement Worker

The importance of this type of support was cited as being a unique aspect of The Way Forward Project, and one of the centrally important components of working with the young women.

“It’s a unique service; they’ve not had that support from another agency of what we deliver, not you know saying that we are absolutely wonderful, but I think it’s the time and the listening skills that we’ve got and they know that the eye contact, listening to them; they can feel it as
much as, they can feel it as much as we can feel it and they know that if we say we’re going to deliver, if we say we’re going to support then we do do it.”

Engagement Worker

In case 9 the young woman said that she enjoyed the visits from the Engagement Worker and did not want the case to be closed despite improvements reflecting the importance of this approach to the work, as well as the trust developed.

Table 3.3 – The impact of the Engagement Worker in case 9

<table>
<thead>
<tr>
<th>Issues experienced</th>
<th>Engagement Worker support</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Case 9:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Young woman with substance misuse; both drugs and alcohol</td>
<td>Meetings with young woman</td>
<td>Continued support, listening and advice role for the young woman</td>
</tr>
<tr>
<td>Young woman reported the ending of a relationship, and her experiences of a termination (without follow-up support)</td>
<td>Supportive conversations with young woman related to substance misuse, dangers, safety, follow-up support after the termination (young woman did not want this at the time it was suggested)</td>
<td>Reported improvements in parental relationships with both mum and dad</td>
</tr>
<tr>
<td>Young woman reported issues within the family home – parental separation, dad has a new young girlfriend who the young woman doesn't like, she also feels that her mum is unsupportive</td>
<td>Texts to dad to discuss situation</td>
<td>Young woman explored course options at college but then decided not to pursue</td>
</tr>
<tr>
<td>Young woman’s peer group potentially negative e.g. discussing/focusing upon social anxiety</td>
<td>Conversation with mum around trust (mum checking Facebook and twitter), relationship with dad, suggestion of family mediation</td>
<td>Reported behaviour change by young woman – detaching herself from risky situations, not going to the houses that she was previously, less drug use</td>
</tr>
<tr>
<td>Mum reports concerns about daughter drug use, inappropriate sexual behaviour and relationships (in one instance with a much older man), lies, honesty between both parties and lack of trust;</td>
<td>Further support to young woman and mum following row at the family home</td>
<td>Much less evidence of chaos seen by the engagement worker</td>
</tr>
<tr>
<td></td>
<td>Referral to Lifeline (Substance Misuse Service)</td>
<td>Engagement worker closed case due to improvements although young woman said that she didn’t want the case closed as she enjoyed the visits and working with the engagement worker – text contact maintained</td>
</tr>
</tbody>
</table>
mum checking Facebook and twitter | compromise, taking time out, showing each other affection, being non-judgemental in relation to the termination
| Supportive conversations with young woman about her future – college and work

The impact of the Engagement Worker could be seen in the case notes in relation to outcomes such as improved circumstances, less chaos, links into other services/appropriate provision, focus on the future e.g. uptake of college and improved attendance at school. These are quantifiable and related to the holistic approach taken by the Engagement Worker in which the role looks at all areas of the young women’s lives and works with them to try to find solutions and make improvements.

In some of the cases, it was clear that the Engagement Worker spoke to other workers internally for advice/guidance and this supportive environment is mentioned in interviews with stakeholders when they were discussing the delivery of the project. Despite this supportive environment, it is clear that the role of the Engagement Worker is demanding because it involves so many aspects:

“It’s not just about going out and visiting because then you’ve got to try and reach out to all the professionals about who may be working with them or you might want to refer onto, so there is all that information sharing, there is attending meetings, there is doing the hands on visits. And a lot of the time when you visit them, you are actually reacting to chaos.” Engagement Worker

3.2 Project operation and delivery

These findings are organised in relation to the cross-cutting themes that emerged from both the interviews and focus groups with steering group members and referrers.

Organisational components for success

Across the data gathered, participants mentioned several ‘ingredients’ that were critical for the success of Way Forward.

The positioning of Way Forward in the non-statutory sector

Both referrers and steering group members suggested the benefits of the project being based in the voluntary, rather than statutory sector. The flexibility and responsiveness of Way Forward was mentioned, although being ‘distanced’ from the perceived stigma of social workers, social services and other statutory bodies was seen as an advantage to engaging young women:
“A lot of the times, you know, young people come to you and the last thing they want to do is work with a Social Worker. You know, they’ve had enough of that thank you very much. They have no trust for adults in their lives: parents, teachers, you name it, we’re all no good as far as they’re concerned, and yet I think that the engagement workers can come in on a different level that we have been able to.” Referrer

The importance of consistency was also discussed. Those individuals currently providing statutory provision discussed the challenges within the sector and the way that young people may be passed from professional-to-professional. The Way Forward project, however, was suggested to offer the young women a consistent point of contact (the Engagement Worker) where trust and rapport can be developed and nurtured:

“The door’s always open. Now that’s something that a lot of young people have not experienced, consistency of worker. It isn’t necessarily something we could always promise because in every sector people have to move on, but within the statutory sector, it’s designed to throw people and children, young people, from professional to professional.” Referrer

The limitations on professionals’ time and a lack of capacity within statutory services were noted across the data. Moreover, there was an expectation that professionals within the statutory sector ‘moved on’ their client base to other services (a ‘tick box’ culture as one participant described it). This often meant that despite professionals’ best intentions, they were unable to dedicate the time, energy and resources that the Way Forward Engagement Worker was able to with the young women:

“If only, if only I had that time and that space!” Thankfully, the Engagement Worker can fill that gap.” Referrer

“They [Way Forward] were able to give the more detailed work that I wasn’t able to do in my current role.” Referrer

However, the location of the project within the voluntary sector also meant that there were additional challenges for the staff:

“Yes and also because we’ve started from scratch. I think the big thing to think is we’ve no backing….if you work for probation you’ve got like the criminal justice system to back yourself up, you’ve got their own evaluation tools, you’ve got their own risk assessments, you’ve got their own planning, how they want it. We have none of that, we kind of made up our own, our own ways of working” Engagement Worker

Despite these limitations the location of the Way Forward Project within WomenCentre was highlighted as being important for the operation of the provision:

“The WomensCentre is so experienced…and I think that’s down to excellent supervision that’s enabled this – for me it is anyway. If I didn’t have (line manager) supervising I think I would have been quite wobbly by now but she’s experienced ‘why don’t you try this, why don’t you try that?. This being a new project, we have no comparison or ways and approaches to interpret into how we work. What we did have is the last thirty years of
Womencentre providing an effective and holistic approach for women and through intense supervision been able to continue some of this approach and build on new organic methods of support that are effective and incorporate gender specific working at all times applicable to young women and meeting their needs.” Engagement Worker

Ethos and values

The underpinning ethos and values of Way Forward was a prominent theme to emerge from the data. This was regarded as a critical component of the project’s success to date. A discourse around ‘commitment’ and to women-centred ways of working was clear and, moreover, working principles such as: listening and caring; working with young women on their terms; and being available at any time, was clearly articulated by participants:

“We are fortunate, in that the Engagement Worker is superlative, but also, she is supported by the ethos of the women’s centre which is non-judgemental, utterly dedicated to service users, to meet them on their terms, and to show that other people might have let you down, but we’re not about that.” Referrer

A viewpoint also reaffirmed by the young women themselves:

“But when you’ve got [the Engagement Worker] sat there in your corner, it’s just so much easier.” Young woman in FGD

Operating under statutory thresholds

Participants were adamant that the Way Forward project was addressing a gap in service provision and able to address the needs of young women who may not meet the criteria for statutory service provision. Many statutory services were reported to only work with individuals demonstrating high levels of need, with thresholds often too high for many individuals to access.

“Thresholds for statutory services are such, and demands for statutory services are such, that a lot of young people, young women with needs are not getting those needs met.” Steering group member

Participants suggested that the Way Forward project was essential in working with young women who did not meet the criteria for statutory provision, but who still had health and social need. Child and Adult Mental Health Services (CAMHS) were often cited as an example where young women with low-to-moderate level mental health issues were unable to access professional support:

“You’re battling against thresholds and criteria of organisations such as CAMHS or mental health services generally.” Steering group member

“I know the services but they have one agenda, they have strict criteria” Engagement Worker
“There just isn’t a place for young girls and you know the girls that we’re picking up from school and things, how do they know at 13, 14 what journey, where they want to go, what they want to be, who they want to be and if there isn’t a life umm the home life that other people have, who do they share that with? Where can they go, who can they talk to?” Engagement Worker

Referrers and steering group members appreciated the way that the Way Forward project was able to work with young women who may not meet the entrance criteria for other services. This was particularly beneficial for young women who may not display high-level need, but require early intervention and support:

“Statutory services have got a very high threshold to be able to access that kind of thing… for a lot of the young people, there’s a lot of stuff going on for them, but there’s nothing that tips them over into meeting the threshold for statutory services. So to be able to go “well, actually, I am worried about you. I can’t put my finger on exactly what it is. I can’t evidence specifically, but I know I don’t want you floating about on your own without something.” So, to be able to have a service that you can kind of signpost to is just really good.” Referrer

In addition to this positive approach to threshold criteria, The Way Forward does not operate with cut off points, and as shown earlier (see Table 1.2.3), young women stay in the service for varying lengths of time and can access more than once if necessary. Comparatively, other services have guidelines for the length of provision available, or a maximum number of contacts limiting the support available.

**A holistic approach and intervening early**

The ability of Way Forward to work with young women earlier than many statutory services, meant that there was potentially less likelihood of issues escalating for young women and moreover prevented these women from “falling through the net”. In cases where young women had met the criteria for statutory services, it was often suggested that this intervention was delivered too late to be effective:

“You’ve got this marvellous statutory provision, but there’s this swathe of young women in between who are, they’re going to come to those services eventually, but when it’s possibly too late, and interventions would be ineffective.” Steering group member

One steering group member neatly encapsulated the need for the Way Forward project to intervene early with young women:

“There was a glaring need for a service that had an earlier intervention approach. Trying to reach as early as possible, trying to look at what the need was earlier so that things didn’t become as entrenched.” Steering group member

The Way Forward project was highlighted as focusing upon holistic health and well-being issues.
“We do the whole holistic wrap around service, we don’t just work with mental health, sexual health, housing; we work on the whole, we do deliver the whole wrap round service…it is so intense” Engagement Worker

The Way Forward project was frequently compared against many other services which often had specific remits and functions. The project’s attention to holism was seen as being unique:

“I think the holistic approach of the Way Forward and this early intervention with sort of preventative stuff is really, really unique. It’s fantastic!” Steering group member

Finally, the importance of experience in supporting the establishment and development of this project is worthy of note. The project was delivered by the Engagement Worker who was also well-supported with appropriate supervision. This was important for reviewing complex cases, the provision of appropriate training, development of the Engagement Worker’s skills, case-reflection, and self-reflection. The Engagement Worker reported her need for this level of support and the steering group reflected upon its importance on regular occasions. In particular, managerial guidance was very helpful when the Engagement Worker had to respond to crises and chaotic situations. Within the supervisory process crucial discussions often took place related to safeguarding, child protection, lone working and all key areas of case working.

Key findings – project operation and delivery

- The role of the Engagement Worker is central to the provision and successful operation of the project. The Engagement worker builds trust with the young women, provides one to one support on a case by case basis, advocates on their behalf and then moves them on, if this is possible. The role is initially about engagement, which is then followed by relationship building and trust gaining.

- The role of the Engagement Worker is based upon individual need, without threshold criteria or cut-off points and thus a variety of need is supported within the Way Forward. This entails delivering one to one support to identify/explore/overcome areas of need and referring on. Where there are no referral routes, more direct work is completed by the Engagement Worker herself.

- Participants reported four key ingredients for the Way Forward’s success: the positioning of Way Forward in the non-statutory sector; ethos and values; operating under statutory thresholds; a holistic approach and intervening early.
• There is a women's centre ethos underpinning the model of the project. This is important in terms of delivery with specific values reflected in the approach taken.
4. Findings: multi-agency working

Multi-agency working

At the core of the Way Forward project, was the philosophy of multi-agency working. This was a strong underpinning principle that was apparent in the data collected with steering group members. Perhaps unsurprisingly those passing referrals into the project and the young women receiving support from the Engagement Worker, were unable to comment in any detail on this aspect of the Way Forward project.

Multi-agency principles of working were reported to manifest within the project in several ways, although information-sharing between agencies seemed to be mentioned most frequently by participants. Information-sharing enabled the work of the project to be conducted more efficiently; for example, in relation to avoiding duplication:

“I also think the multi-agency approach is, well it’s key because at the point of referral we check with partners, to see if any girls and young women are known. To make sure we don’t duplicate. So we’re really checking from that multi-agency point, because we don’t want to duplicate what’s already happening. So we are checking from a multi-agency point of view, and that’s working much better. We’re more streamlined. We’re checking with our key partners and then we pick up the work where there’s unmet need, where nobody else is picking up that work.”
Steering group member

The multi-agency constituents of the steering group were also seen as being pivotal to the Way Forward project operating efficiently. Bringing together individuals with a plethora of practice-based expertise and understanding of women centred approaches was seen as being helpful:

“I think it helps having a multi-agency steering group ‘cause there are a lot of us from different spheres.”
Steering group member

Some steering group members perceived the multi-agency partnership as being the key to the longer-term sustainability of Way Forward:

“The multi-agency approach to the project is really vital, to the sustainability of it [Way Forward].”
Steering group member

Despite the general consensus that Way Forward was operating successfully using a multi-agency approach some steering group respondents suggested that the composition of the steering group should be re-evaluated given the changing nature of the project from that originally conceived:

“The project’s changing slightly and developing and evolving, perhaps we need different people around that table, fresh new people around that table.”
Steering group member

Despite positive stakeholder comments in general in relation to multi-agency working, the Engagement Worker reported a different view of
working with others, particularly in getting support from other agencies and referring young women into other services:

“We’ve had to knock on many doors to get psychological and psychiatrist intervention to listen and to recognise.” Engagement Worker

Indeed, as mentioned earlier (see Project Journey section) services are not always able to take young women or indeed in some cases they are no longer available. The wider context of changes to other services was highlighted as an issue in the sense that it was having an impact upon the way in which the Engagement Worker operated: she was delivering as well as engaging:

“As we’ve seen a lot of closures and a lot of services go which I think has impacted on the work that we are having to deliver ourselves and the time that we’re spending with individuals because there aren’t services available out there because of cut backs.” Engagement Worker

“And what’s happening is we are or the capacity so in reality we’re on a block because the way it should run is its slowing down because we’re holding them and we’ve got no forwarding agencies so where our gates are not open, we are only the touching the surface.” Engagement Worker

Indeed, other services and partner agencies were seen as problematic in the sense that they were not effectively dealing with young women’s needs:

“…mopping up, that kind of everything that slips through the net we’re catching at the bottom because we’ll just pick up not where they’ve made mistakes but where they’ve probably haven’t got the resource or the capacity to hold” Engagement Worker

Furthermore, from the perspective of the Engagement Worker, other agencies were not easy to refer into, or indeed communicate with.

“We work quite closely don’t we with agencies but I think sometimes they’ll let us take on more responsibility. Communication paths are quite poor with some partner agencies. Once they get an inkling that you’ve got a good relationship with that young woman, more starts coming your way. That’s what I’m getting – could you deal with that ‘cause you have got a good relationship with them?” Engagement Worker
Key Findings – multi-agency working

- Multi-agency working is an important ingredient of the Way Forward project and fundamental to how it operates. Information-sharing and avoiding duplication were seen by stakeholders as practical ways in which multi-agency working provided a more efficient service for young women.

- The Engagement Worker completes lots of multi-agency work, and consequently the project has developed good strong relationships with a range of local agencies. This has increased awareness and raised knowledge locally amongst professionals in relation to the level of unmet need that was not being recognised prior to the commencement of The Way Forward.

- Multi-agency working is supported by the steering group, which offered strategic direction and vision. The role of the steering group is important within the project’s processes, as it draws together a range of local knowledge and expertise. However, its success is in part built upon the small authority area and previous working relationships between professionals, which affects potential transferability in the sense that other potential projects would not have the same context.

- Despite positive perceptions by some stakeholders in relation to multi-agency working there were difficulties reported about moving young women into other services.

- Communication between agencies was not always smooth or indeed easy.
5. Model of projects operation and delivery

This model attempts to capture the unique aspects of the project in terms of a gendered approach.

The young women are at the centre of it. Importantly the project revolves (or fits) around the young women rather than vice versa as indicated by the directional arrows. The nature of the service is that it offers individualised, holistic support at the point of need enabling young women to be (and feel) supported, engaged and empowered. This occurs primarily through the young women’s relationship with one of the Engagement Workers. The nature of the relationship is flexible support, building trust, having space and being listened to all of which are of paramount importance. The relationship develops solely on the young women’s terms which is another key feature of the project enabling the young women to have control. The key mechanism of the project is that provided Engagement Workers as indicated by the central positioning with the model.

Underpinning the project is the ethos of the WomenCentre approach which provides the values and philosophy of a gendered approach to women’s working at its core. This, in turn, supports the multiagency working that is also central to the Way Forward project’s effectiveness in working with vulnerable young women.

The Way Forward project offers support to vulnerable young women who fall through the gaps in existing service provision for different reasons including not meeting statutory thresholds for intervention or where mainstream provision is unable to meet need. In addition the Way Forward project also offers a way to support vulnerable young women into existing statutory services when appropriate if they need specialised support. Figure 2 depicts this model of delivery in a diagram.
Figure 2: The model of The Way Forward Project

Statutory & Existing Services

Co-produced support, engaging & empowering the YW

Reliability, stability & consistency of approach by the EW

Individualised support at point of the YW's need

Flexible approach with the YW in control

Holistic; addressing YW's health & wellbeing

Engagement Workers – supporting the YW

Referred on (if possible) by...

Referred in by...

Multi-agency working

Underpinning WomenCentre Ethos and Values
Replication and transferability of Way Forward

There was general agreement that core features of the Way Forward project model could be transferred and replicated in other geographical areas:

“We know that each local authority is different, but there is that sort of model, the basis of that model, the core of that model could be done anywhere, I think.”

Steering group member

Most of the critical features that needed to be replicated in other areas have been discussed previously (see the previous section: 'organisational components for success') and in addition it was paramount that there was an experienced steering group driving the project and an Engagement Worker with the necessary skill-set to manage the challenges and complexities that young women may present.

It was suggested by a number of respondents that the success of the project in Calderdale had been, in part, due to the smaller geographical size of the area and the ability to network more efficiently and easily with professionals in the district. Several individuals, therefore, suggested that the model may be integrated more successfully in areas similar in size to Calderdale. Some questioned whether the same close-working between agencies and professionals would be possible in larger metropolitan areas:

“I think because Calderdale’s quite a small local authority, that sort of local, sort of, networks, people knowing each other, people talking to each other informally, as well as formally, works really well. That might be harder in a bigger place, say, for example, Leeds or Birmingham or somewhere like that. But I think, you know, it’s quite a small family really in Calderdale, and I think that helps.” Steering group member

<table>
<thead>
<tr>
<th>Key findings – model of delivery and replication</th>
</tr>
</thead>
<tbody>
<tr>
<td>• The success of this project is in part built upon the small authority area and previous working relationships between professionals, which affects potential transferability in the sense that other potential projects would not have the same context.</td>
</tr>
<tr>
<td>• Steering group members felt that the approach could be successfully used within other areas.</td>
</tr>
</tbody>
</table>
6. Findings: economic case for the project, linked to journey mapping

The evaluation findings so far have demonstrated that other local services are not able to support young women in the same way as The Way Forward. This finding has been confirmed by stakeholders, project staff and the young women themselves. The Way Forward Project was able to adapt its delivery mechanism to respond to need and a range of women’s experiences, holding some where necessary for supportive case work, and referring on in other instances. The project monitoring data shows that many young women involved with The Way Forward had more serious needs than originally anticipated when the project first started thus the case for an earlier and more holistic intervention in the lives of these young women can be made. Indeed, the case studies below further demonstrate that The Way Forward was not the first service that the young women had accessed or used. Table 6.1 shows the details of one case in which numerous services were already working with a young woman.

Table 6.1 Annabelle’s Case

<table>
<thead>
<tr>
<th>Date referred to The Way Forward</th>
<th>July 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>What we knew</td>
<td></td>
</tr>
<tr>
<td>Vulnerable 18 year old</td>
<td></td>
</tr>
<tr>
<td>Lived with grandparents</td>
<td></td>
</tr>
<tr>
<td>Recently lost grandma – struggling with grief</td>
<td></td>
</tr>
<tr>
<td>Granddad cannot cope and needs her to move out</td>
<td></td>
</tr>
<tr>
<td>Just learnt that she is pregnant</td>
<td></td>
</tr>
<tr>
<td>Real start date</td>
<td>2000 – Social Services involved since the age of 5</td>
</tr>
<tr>
<td>Demand in context – what's really going on?</td>
<td></td>
</tr>
<tr>
<td>Father is a drug addict</td>
<td></td>
</tr>
<tr>
<td>Mother is an alcoholic</td>
<td></td>
</tr>
<tr>
<td>Domestic abuse and violence triggered social services involvement</td>
<td></td>
</tr>
<tr>
<td>Siblings separated – sense of loss and isolation</td>
<td></td>
</tr>
<tr>
<td>Struggled with grandparents strict rules</td>
<td></td>
</tr>
<tr>
<td>Agencies involved</td>
<td></td>
</tr>
<tr>
<td>Social Services</td>
<td></td>
</tr>
<tr>
<td>Drug &amp; Alcohol Team</td>
<td></td>
</tr>
<tr>
<td>Police</td>
<td></td>
</tr>
<tr>
<td>Probation</td>
<td></td>
</tr>
<tr>
<td>Fostering Service</td>
<td></td>
</tr>
<tr>
<td>Secondary School</td>
<td></td>
</tr>
<tr>
<td>WomenCentre</td>
<td></td>
</tr>
<tr>
<td>Charitable Trusts</td>
<td></td>
</tr>
<tr>
<td>Missed Opportunities</td>
<td></td>
</tr>
<tr>
<td>Parents accessing Treatment services</td>
<td></td>
</tr>
<tr>
<td>Parents in Criminal Justice System</td>
<td></td>
</tr>
<tr>
<td>Family support/fostering</td>
<td></td>
</tr>
<tr>
<td>What Matters?</td>
<td>Safety and Security</td>
</tr>
<tr>
<td>Maintain relationship with siblings and mum (+dad but...)</td>
<td></td>
</tr>
<tr>
<td>Being a good parent</td>
<td></td>
</tr>
</tbody>
</table>
Annabelle’s case shows that several agencies were involved with both her and her family over a long period of years and that there had been several missed opportunities ultimately resulting in further service usage and thus costs. There were many other similar examples of complex service involvement and large scale costs documented by The Way Forward staff. Table 6.2 illustrates Bethany’s case.

Table 6.2 Bethany’s Case

<table>
<thead>
<tr>
<th>Date referred to The Way Forward</th>
<th>July 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>What we knew</td>
<td>Aged 15 planning to move to London when 16</td>
</tr>
<tr>
<td></td>
<td>Recently come out and in a gay relationship</td>
</tr>
<tr>
<td></td>
<td>Fells isolated</td>
</tr>
<tr>
<td></td>
<td>History of mental ill health including self-harm and overdose</td>
</tr>
<tr>
<td></td>
<td>CAMHS Intervention</td>
</tr>
<tr>
<td>Real start date</td>
<td>2007 - aged 9</td>
</tr>
<tr>
<td></td>
<td>Behavioural change at school and being bullied</td>
</tr>
<tr>
<td>Demand in context – what’s really going on?</td>
<td>Sexually abused by step dad as a child</td>
</tr>
<tr>
<td></td>
<td>Disclosed to mum who did not initially believe her</td>
</tr>
<tr>
<td></td>
<td>Mum reported – court appearance aged 10</td>
</tr>
<tr>
<td></td>
<td>Mum bi-polar – had a breakdown</td>
</tr>
<tr>
<td></td>
<td>Poor school attendance and rebellious behaviour</td>
</tr>
<tr>
<td></td>
<td>School counselling “Your only here to get out of lessons”</td>
</tr>
<tr>
<td></td>
<td>Suicidal thoughts and general low mood</td>
</tr>
<tr>
<td></td>
<td>Contradictory medical interventions</td>
</tr>
<tr>
<td>Agencies involved</td>
<td>Police</td>
</tr>
<tr>
<td></td>
<td>Court</td>
</tr>
<tr>
<td></td>
<td>Child Protection Officer</td>
</tr>
<tr>
<td></td>
<td>Children’s Services</td>
</tr>
<tr>
<td></td>
<td>Psychiatric Unit (Mum)</td>
</tr>
<tr>
<td></td>
<td>Assertive Outreach (Mum)</td>
</tr>
<tr>
<td></td>
<td>High School</td>
</tr>
<tr>
<td></td>
<td>School Counsellor</td>
</tr>
<tr>
<td></td>
<td>Education Welfare Officer</td>
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<tr>
<td></td>
<td>X4 CAMHS</td>
</tr>
<tr>
<td></td>
<td>GP</td>
</tr>
<tr>
<td></td>
<td>Hospital</td>
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<tr>
<td></td>
<td>First response</td>
</tr>
<tr>
<td></td>
<td>Shelter (London)</td>
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<tr>
<td></td>
<td>Youth Group (London)</td>
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<tr>
<td></td>
<td>L.A Homelessness Service (London)</td>
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<tr>
<td></td>
<td>DWP (London)</td>
</tr>
<tr>
<td></td>
<td>LGBT Group</td>
</tr>
<tr>
<td>Missed Opportunities</td>
<td>No support after court appearance</td>
</tr>
</tbody>
</table>
Table 6.2 illustrates a greater range of services being accessed when compared to table 6.1 and in this instance the young woman is only 15 years old, which begs the question of the potential cost to later services as well as the likelihood of positive personal outcomes for Bethany. These 2 examples show that The Way Forward is acting as a safety net in some instances (see Figure 1) and mopping up young women that other services are already involved with. This mopping up, whilst not anticipated illustrates the economic case for the existence of a service such as The Way Forward as a preventative intervention that can hypothetically not only reduce later costs to adult services, but that can also prevent such a large scale use of services which are working to deal with the issues being experienced by young women but not in a holistic way. Further analysis by The Way Forward staff team, illustrated here in the journey map below is confirmation of a similar pattern of wide ranging service involvement for a different young woman.

**Figure 3 – Tara’s Journey Map**

- **2007** – behavioural change at school
  - Mum noticed and went into **SCHOOL**
    - Missed opportunities – No specialist support/referrals or observations
  - 9 Months later incident with step-dad leads to disclose of sexual abuse. Mum didn’t believe Tara at first (no one listening to the voice of the child) causing a delay. Mum then reported this to the POLICE step dad arrested and **CHILDRENS SOCIAL CARE** became involved.
• Tara went to live with aunty and had regular contact with her social worker. Tara struggled with trauma, separation from her mum and self-blame. **GP** became involved.

• Tara gave evidence at **COURT** and had contact with **POLICE, SOCIAL CARE, CHILD PROTECTION OFFICER**

• Tara’s step dad sentenced to 15 years

• Tara was able to return back home – step dad in prison – no emotional/specialist support

• High school – bad behaviour  
  o Did school know about previous abuse/trauma? – Missed opportunity?

• **2010** Tara started to self-harm - **SCHOOL** allocated an **IN-HOUSE COUNSELLOR**, unsuccessful first appointment – quote “Let’s just call it a day. You’re only here to get out of lessons” Soon after Tara stopped attending the counselling.

• **2011** – age 14 – **EDUCATION WELFARE OFFICER** involved – Very little detail/contact recorded anywhere  
  o Missed opportunities – What’s in schools? What could be done? What can’t be done?

• **Overdose of tablets – HOSPITAL, GP, CAMHS**
  
  Art therapy for 18 months – Tara said she “felt like having to go and do silly little drawings”. Mum came for some support but refused family therapy – missed opportunities? Successful? Disempowering? What would have made a difference?

• Still not attending School  
  o Missed opportunities – No proactive reaching out from school
• Mum emotionally available and supportive but is dealing with her own mental health issues/parenting due to guilt

• **2012 – 2nd overdose – CAMHS, GP, HOSPITAL, PSYCHIATRIST**
  - Medications prescribed for Bi-Polar, Anxiety Disorder and Panic disorder
  - Mum and Tara thought it worked

• Mum receiving fortnightly visits from Assertive Outreach Team (Mental Health) – found leaflet/details about The Way Forward. Contacted The Way Forward in relation to concerns over Tara wanting to move to London

• Engagement Worker contacted Tara and arranged a **HOME VISIT**

• Following the visit the Engagement Worker contacted **FIRST RESPONSE CALDERDALE** but Tara didn’t qualify
  - Missed opportunities – could have assessed/offered support package/potential relocation? Trauma being in same house

• Tara went to London –Engagement Worker contacted **LGBT GROUP, THE POINT, BENEFITS**, Tara was then kicked out of the house in London –Engagement Worker involved in 1 hour phone call with **SHELTER**

• Engagement Worker helped Tara with registration at the **GP** for meds and contacted **HOUSING** – this service unable to help as 5th point of homeless required

• After 2 months Tara came home – levelled off – case closed

• After 2 months Tara re-contacted Engagement Worker, regular support and contact with Educational Support and **LGBT** group

• Tara started to self-harm before visits "I don’t want to be in a bad mood when I see you" – Engagement Worker contacted **CAMHS, GP**
and **PSYCHIARIST no 3.** GP prescribed anti-histamine to reduce suicidal thought. Psychiatrist asked Tara why she would talk to the Engagement Worker. “She listens to me, she doesn’t try to tell me what’s wrong with me”

- Engagement Worker phone call to **PSYCHIATRIST no 4** to ask about symptoms etc. – changed dosage

This complex journey map, illustrated in Figure 3 shows that in another case, again confirms that there are many instances of services being accessed prior to involvement with The Way Forward. This journey mapping technique is also used with older women who access the WomenCentre, and therefore The Way Forward team are able to draw a picture of a worst case scenario for some women who are not offered or are not able to access the support that they need early on in their lives i.e. at the point that The Way Forward can work with them. Box 6.1 shows a scenario drawn together with The Way Forward team who have seen many situations such as this one in their professional capacity, so whilst this is hypothetical it is not unrealistic.

**Box 6.1 – Hypothetical Case study: Amy**

Amy is a young woman who has had many difficulties in her life from a young age, and who has to a large extent remained invisible from traditional service provision. Amy has lived in a complicated family situation, with a mother who was in a series of violent relationships which Amy witnessed. There were also issues in the home with alcohol abuse. Amy struggled at school but remained quiet and withdrawn. She was the victim of bullying particularly online but also in school. In one incident of bullying on the school bus, Amy’s hair was set on fire. School were unaware of the bullying which was not obvious on their premises and this remained unchecked.

As a teenager, she avoided going home and engaged in risky behaviour as part of a strategy to feel included. She received no advice about risk and harm, she was not safeguarded and was often in situations in which she was vulnerable to child sexual exploitation. Amy received no emotional support in her early years and her involvement with alcohol, drugs and negative relationships spiralled into adulthood.

She engaged in anti-social behaviour resulting in police involvement, she drank alcohol and took drugs which then required medical intervention following admission to accident and emergency. Amy received some support from social services and the youth offending team, when she became involved in the criminal justice system at the age of 16. However, her drug addiction spiralled and thus she became a working girl, selling herself to fund her drug habit. She was often in dangerous situations, which could have led to the loss of her life. She became pregnant at the age of 17 and her child was subsequently removed from her care. She experienced
mental health issues but was not supported by services because they required her to be ‘clean’ before dealing with her mental health problems.

Amy’s involvement with the criminal justice system continued and she served several custodial sentences always troubled by mental health issues, addiction and thus remained vulnerable and at risk of harm.

Had Amy received holistic support at a young age whilst still a vulnerable teenager, many of these problems may have been prevented, resulting in large savings to a range of service providers.

Box 6.1 shows the complicated nature of the problems experienced by Amy, but also the range of services that were involved with her. From this scenario, it is possible to hypothesise the likely prevention cost savings associated with early intervention in the form of an approach such as the one here in The Way Forward. These cost savings are based upon the use of existing national costs derived from government reports and academic studies. Table 6.3 uses the hypothetical scenario of Amy’s story to illustrate these potential costs savings.

Table 6.3 – Potential costs for Amy, a ‘missed’ young woman (see Box 6.1)

<table>
<thead>
<tr>
<th>Issue requiring service support</th>
<th>Services Involved</th>
<th>Cost/Saving of prevention</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Service Support - Social worker - adult services: cost per hour, with qualification costs</td>
<td>Social Services</td>
<td>£59</td>
</tr>
<tr>
<td>Anti-social behaviour - Cost of dealing with one incident</td>
<td>Local Authority and The Police</td>
<td>£673 – Fiscal cost saving</td>
</tr>
<tr>
<td>Looked after children - Child taken into care - average fiscal cost across different types of care setting, England, per year</td>
<td>Social Services</td>
<td>£52,676 – Fiscal cost saving</td>
</tr>
<tr>
<td>Youth offending - average cost of a first time entrant (under 18) to the Criminal Justice System in the first year following the offence</td>
<td>Criminal Justice System</td>
<td>£3,620 – Fiscal cost saving</td>
</tr>
<tr>
<td>Adult prison time - Prison average cost across all prisons, including central costs (costs per prisoner per annum)</td>
<td>Criminal Justice System</td>
<td>£34,840 – Fiscal cost saving</td>
</tr>
<tr>
<td>Alcohol misuse - Estimated annual cost to the NHS of alcohol dependency, per year per dependent drinker</td>
<td>NHS</td>
<td>£2,015 – fiscal cost saving, £1,565 – social cost saving</td>
</tr>
<tr>
<td>Drugs misuse - Average annual savings resulting from reductions</td>
<td>Average annual savings resulting from reductions</td>
<td>£3,727 – fiscal cost saving</td>
</tr>
</tbody>
</table>
in drug-related offending and health and social care costs as a result of delivery of a structured, effective treatment programme £9,234 – economic cost saving
£3,933 – social cost saving

<table>
<thead>
<tr>
<th>Ambulance services - average cost of call out, per incident</th>
<th>NHS</th>
<th>£223 – fiscal cost saving</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accident and Emergency Attendance (all scenarios)</td>
<td>NHS</td>
<td>£117 – fiscal cost saving</td>
</tr>
<tr>
<td>Hospital inpatients - average cost per episode (elective and non-elective admissions)</td>
<td>NHS</td>
<td>£1,863 – fiscal cost saving</td>
</tr>
<tr>
<td>Child fostered</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Domestic violence - average cost for one incident            | Multiple agencies involved | £2,836 – Fiscal cost saving
£1,692 – Economic cost saving
£7,803 – Social cost saving |

Source of figures [http://data.gov.uk/sib_knowledge_box/toolkit](http://data.gov.uk/sib_knowledge_box/toolkit)

The costs are broken down into three types of values, where this information is available. These are:

- Fiscal value: savings to the public sector that are due to a specific project
- Economic value: this is the net increase in earnings or growth in the local economy;
- Social value: this depicts the wider gains to society such as improvements to health; safety; or reduced crime.

The costs illustrated in table 6.3 are indicative of the value of having a preventative approach when working with vulnerable young women. Marker et al (2013) argue that there is an evidence base from both well-designed observational studies and clinical trials showing the effectiveness of interventions that address risk factors to health. Moreover, they argue that interventions targeted at children often have the most potential to be cost-effective because of the longer time over which any resulting benefits might be realised. This is important in relation to mental health outcomes, and relevant to The Way Forward because of the focus upon emotional support and holistic intervention that has been evidenced within this evaluation report.

Indeed, the social benefits that also come with an approach such as The Way Forward are evident in the data gathered with the young women who were using the project, who are able to report positive personal outcomes that ultimately are likely to result in potential cost savings for future services.

_“Without the Engagement Worker and her colleagues, I don’t know what I would have done in order to deal with and handle my situation, and strongly believe that I would no longer be living with my parents, which would have created a bigger divide within a family, allowing more problems to arise.”_ 
Young Woman
Key findings – economic case for The Way Forward

- The Way Forward offers a different approach to other services and through analysis of the evaluation data, a case can be made for an earlier and more holistic intervention in the lives of young women.

- It is possible to hypothesise some likely economic prevention cost savings associated with early intervention in the form of an approach such as the one used here in The Way Forward.

- There are also likely to be broader savings in terms of the social value that an approach such as this can bring. Therefore, the evaluation team recommends further detailed research to explore this, for example using a Social Return on Investment approach.
7. Discussion – results synthesis

It is clear that The Way Forward project operates with a specific approach and is guided by a specific set of principles or ‘ways of working’. These principles work for the young women who have engaged in the project, from their point of view and were also cited by the broader stakeholders as being important. These principles are central to the WomenCentre approach and to gender specific ways of working. This philosophy of gender-sensitive working and holistic service provision offers wrap-around and joined up support for women and girls (Caroll and Grant 2014). The principles ensured meaningful engagement of young women in the service, and meeting the young women on their terms. Thus the project worked in a way to reduce pressure upon the young women to behave in certain ways or indeed meet specific criteria, whilst remaining available at the point of need. The young women were simply provided with support irrespective of what their needs were. What matters to the young women was being listened to, being able to talk to and trust someone, being supported and knowing that someone is there for them, which were all delivered by The Way Forward. At the core of the work is a relationship of trust between service providers and women with complex and multiple needs (Duffy and Hyde 2011). Prior evaluations have also suggested the importance of ‘wrap-around’ or holistic services for vulnerable women (Rice et al., 2011). Evidence indicates that services which are tailored to individuals’ needs rather than ‘pigeonholing’ women into specific services (i.e. mental health services, drug and alcohol services) are beneficial (Radcliffe et al., 2013). In respect to women with offending backgrounds in the community, Gelsthorpe et al. (2007) advocate holistic approaches to enable women to address underlying social problems. The Way Forward project was often compared by respondents to other services with specific remits and functions and who were unable to work outside of disciplinary boundaries. In contrast, the Way Forward project was able to work more holistically and in a more universal way with young women which was regarded be respondents as being advantageous and effective. This has also been reiterated in a recent review of effective interventions which argued that interventions with young women need to be cross-cutting and holistic, and reflect the whole reality of women’s lives (McNeish and Scott, 2014). This, in many ways, is the raison d’être of Way Forward.

The Engagement worker is at the core of the project in offering the holistic support discussed above. In offering this support, providing emotional labour and building trust the young women are able to build resilience through their pivotal interactions with the Engagement Worker. Emotional comfort and support following the creation of trust, combine to act as a mechanism for building short term recovery strategies, allowing young women to resume ‘normal’ activities and achieve respite from upset for varying lengths of time (see Shepherd et al 2010). The importance of care in messages that young women receive has been discussed within the broader literature particularly in relation to orientations to self and the future (Sanders and Munford 2008). Such a focus upon the self and the future was evident in the work of The Way Forward. Research evidence from other studies also shows the importance of workers who are able to listen to young people and make them feel safe both physically and emotionally (Gilligan 2015).

The Way Forward was delivered by skilled worker/s at the core supported by a multidisciplinary approach in the form of the steering group who offered advice and guidance where appropriate. Collaborative partnership working has been shown to be important in the provision of multi-dimensional,
gender, age and culturally response service provision (Bloom et al 2003). However multi-
agency working was not uncomplicated and in some instances referring young women on
was not possible due to threshold criteria cited by other agencies. Young women under
the remit of The Way Forward were falling through the gaps if they did not meet statutory
threshold criteria. Some were also unable to work with other agencies in terms of
accessing provision and some were not held by other agencies, which were also perceived
negatively by the young women. This reflects that existing service provision is not meeting
the current needs of vulnerable young women, and that wider statutory provision is failing
in its remit to support vulnerable young women. Indeed, broader research evidence
demonstrates that young people are unlikely to engage positively with statutory services in
particular unless such services are able to convince the young people that they will listen
to them particularly in cases where there is risk of or experience of child sexual
exploitation (Gilligan 2015). Consequently, The Way Forward shifted focus to become a
delivery project as well as using an engagement approach. Engagement did remain
central to the project, thus the Engagement Worker role is crucial in this model. Despite
the centrality of the Engagement Worker, she is not working ‘alone’ and is located within a
broader supportive team of staff at WomenCentre, in which supervision was essential in
supporting her role.

The positioning of the Way Forward within the voluntary and community sector was also
important. It has been recognised that voluntary sector run services are ideally placed to
provide holistic support for women with complex needs (Radcliffe et al 2013). This
positioning was seemingly contributing to the particular successes of Way Forward to date.
It was clear from the respondents that the Way Forward project and the staff working
within it, were not stigmatised in the same way as statutory agencies, for example social
workers or criminal justice professionals (Bove and Pervan, 2013, Gilligan 2015). A recent
report noted that adolescent women often have a deep-seated mistrust of helping
professionals who have failed them in the past; the report suggests that interventions
focussing on this group must, therefore, work in different ways to statutory bodies
(McNeish and Scott, 2014). We would argue vehemently that the Way Forward project
does this. From those participating in interviews and focus groups, it was suggested that
stigmatisation of statutory agencies by vulnerable young women occurs in Calderdale
which means that Way Forward makes a valuable contribution to addressing the needs of
young women who would have otherwise avoided statutory bodies. This stigma is a
growing challenge for statutory agencies, particularly as these views are often perpetuated
and reinforced in the media (Zugazaga et al., 2006). Young women thus see specialist
workers within the voluntary sector as helpful (Gilligan 2015), such as the Engagement
Worker within The Way Forward.

The transferability of the Way Forward project was also considered within the evaluation.
There was overwhelming consensus amongst stakeholders that the model could apply
beyond the Calderdale locality. The application of the model needs to take into account
the local context in which it is to be embedded, but critical components have been distilled
from the evidence to produce a transferable programme model that has the potential to be
deployed in other geographical contexts. Figure 2 depicts the programme model and
shows the centrality of the Engagement Worker and core values if replication is to be
executed successfully. Both evidence presented in this report and other
findings (Warwick-Booth et al., 2013), show the lynchpin role that the
Engagement Worker makes to the project delivery. Nonetheless, the
importance of the underpinning values; multiagency steering group; and the importance of statutory service referrals and support are demonstrated.
8. Learning from the Way Forward

- Learning captured by the WomenCentre team in the delivery of the project shows that some of the young women who engage with the project have no obvious referral routes i.e. the young women discuss their needs and their way forward can be identified however there is not an organisation/agency that can provide self-development and emotional support in relation to confidence, self-esteem, reassurance, coping strategies and resilience building. Herein lies the value of The Way Forward in providing gender-specific, holistic support to young women in need.

- Threshold criteria cited by other agencies is a barrier to engaging with young women who clearly have high levels of unmet need. Young women under the remit of The Way Forward were falling through the gaps if they did not meet statutory threshold criteria. Some were also unable to work with other agencies in terms of accessing provision and some were not held by other agencies, which were also perceived negatively by the young women. This reflects that existing service provision is not meeting the current needs of vulnerable young women, and that wider statutory provision is failing in its remit to support vulnerable young women. However, as The Way Forward is a generic project without any threshold criteria it has a much broader scope and thus can meet the gender-specific needs of young women.

- The critical factor of the qualities of the Engagement Worker are central to the success of the project, (see Jones 2014) as she is able to develop trust and provide support in a solution focused approach to meeting the needs of young women, without being too focused upon outcome measures. Thus the distance travelled is considered as more important for young women, rather than specific targets that need to be met. This is related to the overall project approach in which permanence for young women is understood as crucial. This project is based around long term gain and not short term fixes.

- Learning from the project also shows the importance of the flexibility adopted in relation to the project development and delivery mechanisms. This level of flexibility and adaptability enabled the project to respond to young women’s individual need and experience. The funders of this project were also important in enabling this approach.
9. Conclusion

This is the final report which seeks to evaluate the impact and process of delivering the Way Forward project. The first interim report focused specifically on capturing the views and experiences of the young women who are engaged with The Way Forward Project showing the positive outcomes associated with their journeys through The Way Forward (Warwick-Booth et al., 2013). The second interim report reflected consistency with what the literature suggests service users find valuable in women-centre based services (Radcliffe et al., 2013). There were some prominent ingredients that respondents suggested were critical for the success of the Way Forward project. These were: the positioning of Way Forward in the non-statutory sector; ethos and values; operating under statutory thresholds; a holistic approach and intervening early. These organisational ‘ingredients’ alongside multi-agency working have been applied to a ‘women’s-centred’ programme model which can potentially be used and applied to other geographical contexts (Woodall et al 2014). This final report collates the previous two reports alongside further additional data from the final phase of the evaluation to show that the Way Forward has been successful in supporting young women who have improved life chances following engagement with the project. However, the project experienced a journey from inception to present day which reflects an evolution in terms of delivery due to the development of different referral pathways, and the need to ‘hold’ some young women and do case work rather than being able to pass them on.

9.1 Issues for consideration

Whilst the Way Forward has successful established an effective approach to engaging with young women with a variety of need and successfully working with them to improve their life chances, this evaluation has raised some issues which can be considered in relation to future planning. These are discussed below:

• Whilst evidence of short-term impact on participating individuals has been demonstrated, it is important that the medium and longer term impacts are captured over time. Nevertheless, it will be challenging to capture such data given the nature of the project and its work.

• Whilst stakeholders have reported positive perceptions of The Way Forward, evidence has shown that the project is working in a twin track manner as both an early intervention approach and as a holding point. The project is early intervention in the main in the sense that it is acting as a mechanism to capture young women before their needs escalate into demands upon adult services and thus has a preventative focus. The project is also ‘holding’ young women and offering case work in instances where other provision is not available. This flexibility of delivery may not possible within all gender-specific services.

• The sustainability of continued delivery needs attention given the short-term nature of the funding cycle, and the issues with referring young women on. If The Way Forward ceases to exist, what will happen to the young women currently being ‘held’ given the difficulties raised in referring on, and the issues associated with threshold criteria specified by other agencies?
Further research needs to be considered in relation to two key areas:
  - Firstly, the impact of the Vanguard approach upon The Way Forward
  - Secondly, the economic and social impact of The Way Forward.
10. How we did the research

The evaluation was conducted by researchers from the Centre for Health Promotion Research between 2013-2015. The evaluation used a mixed method approach including data from focus group discussions with young women, focus groups and semi-structured interviews with project staff and stakeholders and desk-based analysis of monitoring data. The evaluation sought the views and experiences of Way Forward staff, stakeholders and service users, in order to:

- Investigate how and in what ways the Way Forward has made a positive difference to the life trajectory of the girls and young women encompassed within its remit;
- To identify the ways in which the Way Forward operates and delivers its provision, identifying the factors that are important in developing and supporting progress. This included an assessment of the importance of the engagement worker role;
- To examine how the Calderdale Young Women’s Resilience Project works within a multi-agency setting, and to ascertain what this means for the success of the project including how the project informs local decision making and commissioning arrangements.
- To examine the economic case for the Way Forward, tracking contributions in relation to added value and examining sustainability.
- To map the potential replication of the Way Forward as a model that could be applied within other areas.

The overarching aim of the evaluation was to ascertain the extent to which the Way Forward project’s aims and objectives had been met.

Theory of Change

The evaluation also tested the programme’s ‘Theory of Change’ (Judge and Bauld 2001). This makes explicit the links between programme goals and the different contexts and ways in which the project works. It provides a framework for mapping subsequent outcomes at individual, organisational and community level which will fit with the overall objectives of the Way Forward Project (see Figure 4).
Figure 4 – Theory of Change for the Way Forward Evaluation

- **Way Forward Programme** - strategic aim to make significant positive differences to the lives of 200 young girls/women with high levels of unmet need and vulnerability
- **Engagement** (mechanism for change) - local engagement and support through the engagement worker
- **Changing the environment** (mechanism for change) - engaging in the life-worlds of the young women, facilitating change, building protective factors and resilience
- **Intermediate organisational outcomes**
  - Local mutliagency innovation and practice
  - Strengthened partnerships and networks
- **Long term Outcomes**
  - Positive adaptation and resilience within young women who have journeyed through the project
  - Added value to mainstream provision
  - Hypothesised prevention costs with social and economic benefit

Approach to gathering evidence

**Focus Group discussions with young women**

Two focus groups were carried out with young women aged between 15 and 25 years who were participating in the resilience project. The Engagement Worker and Steering Group overseeing this project advised the research team of suitable young women to invite and the Engagement Worker approached them on the evaluation team’s behalf. The young women were given the opportunity to self-select to participate within the evaluation.

The focus group schedule was developed in line with the objectives of the evaluation and was designed to facilitate an inclusive, flexible and non-threatening approach putting the young women at the centre of the data gathering process (Cross and Warwick-Booth, 2015). See appendix 3 for the focus group schedule.

**Qualitative data collection with stakeholders**

The evaluation team conducted focus groups and interviews with project steering group members (see appendix 4 for the schedule) and those individuals that refer into the Way Forward project (for example, from schools or other community agencies).

Focus groups were chosen as an appropriate method to gauge the stakeholders’ perspectives of the project and as a way to encourage interaction and dialogue between participants (Then et al., 2014). Two
focus groups were facilitated by the evaluation team – one group consisted of individuals who had referred into the Way Forward project (3 participants) and another group comprised the project’s steering group members (4 participants). Two individuals, who had regularly referred into the project but were unable to attend the focus groups, were interviewed individually so that their perspectives could be ascertained.

A focus group schedule was developed in line with the objectives for this stage of the evaluation and broadly covered the following key areas: participants’ expectations and experience of the project, their understanding of how the local context influence the way in which the project works, the features of the project’s success, features of the project that are replicable or transferable to other contexts and finally if/how the project would work in other areas (see appendix 5 for the workshop schedule).

**Desk-based analysis**

The aim of the desk-based analysis was to provide a rigorous synthesis of monitoring data collected via the Way Forward staff. The primary data sources were the engagement details of the young women, referral data, 11 brief case studies and 12 detailed case notes from the Engagement Worker’s records. Data from each of these were extracted and analysed systematically, using framework analysis.

**Data analysis**

For all qualitative methods used (focus group, case studies/case notes and interviews with stakeholders) framework analysis was used. Framework Analysis develops a hierarchical thematic framework to classify and organise data according to key themes, concepts and emergent categories. The framework is the analytic tool that identifies key themes as a matrix where patterns and connections emerge across the data (Ritchie et al., 2003). The matrix was constructed using three main categories and several sub-themes which were aligned to the aims of this phase of the evaluation. These were agreed by members of the research team. For a diagram representing the synthesis of the evaluation results, see figure 5.
Research ethics

The evaluation was given ethical approval through Leeds Beckett University ethics procedures (Metropolitan at the time). The following practices were adhered to ensure ethical rigour. Informed consent – written consent was obtained from all participants in the focus group discussion and interviews. Assent - where the young women were below the age of consent parental assent was obtained. Risk - given the vulnerability of the young women included within the focus group discussions, particular attention was paid to safeguarding the young women, with risk assessment undertaken prior to data collection and the use of a debrief sheet following data collection. Confidentiality and anonymity – no personal identifying information has been used in the reporting the data. Secure information management – security was maintained through password protected university systems.

Limitations of the Evaluation

The evaluation has sought to identify and bring together a range of perspectives in order to highlight what works and what might be done differently. Nevertheless, like any piece of work, there are limitations to what could be achieved. The evaluation team were reliant on Way Forward staff to access the young women stories, whether this was in person or via records/documents held with the project. The evaluation team was not always cognisant of the range of activities that were being undertaken within the project. Likewise, the team did not always have access to reports and other paperwork, and were conscious of overburdening staff with requests for information when delivery needed to be done. The data would have been richer had the
evaluation team been able to talk to more young women but sensitivity was needed in
terms of where some of the young women were at on their ‘journey’. The evaluation team
recognises the limitations of using an action-research approach to data gathering which
necessarily requires flexibility and adaptability nevertheless, we note the inevitable
changing goalposts in terms of the evaluation throughout the life of the project due to the
journey and development of The Way Forward.
11. References


Gilligan, P. (2015) ‘Turning it around; what do you women say that helps them to move on from child sexual exploitation?’ Child Abuse Review Article first published online: 2 MAR 2015 DOI: 10.1002/car.2373


## INITIAL REVIEW

On a scale of 1-10, before your journey with The Way Forward project....

<table>
<thead>
<tr>
<th>1 = Lots of issues/work to be done</th>
<th>5 = halfway there/work in progress</th>
<th>10 = no issues/feeling positive</th>
</tr>
</thead>
<tbody>
<tr>
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### MOVING ON REVIEW

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**On a scale of 1-10, after your journey on The Way Forward Project......**

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<thead>
<tr>
<th></th>
<th>1 = Lots of issues/work to be done</th>
<th>5 = halfway there/work in progress</th>
<th>10 = no issues/feeling positive</th>
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Comments
Appendix 2 – Storyboard images created by the young women in the focus groups
Where I was
- all signs of depression
- putting myself in danger
  by meeting men
- using dangerous apps
- moving from one place
  to another
- going to college under
  influence of alcohol
- getting sexually assault
  (rape)
- watching my mum stay
  in an abusive relationship
- recovery from being in
  an abusive relationship
- battling depression and
  MDD (major depressive
  disorder)
- enduring physical abuse
  off my step-dad and
  seeing it happen
- bullied by my dad
- being isolated from
  everything after my
  attempted suicide

Where I am
- battling depression with
  antidepressants
- in a loving relationship
- no longer meet people
  or use apps
- living with my grand
  parents
- forming a relationship
  with my mum
- no longer scared to
  speak up

Where I hope to be
- free of depression
  and MDD
- happy
- be able to move
  on from past experiences
- feeling secure and
  safe again
bored
sick?

SMILE

PARTY

YOU ARE ALONE
Where I was

- Suicidal thoughts
- Self-harm
- Losing friends
- Being bullied
- Suffering from body dysmorphic disorder

- Being bullied
- Depression
- Difficulty sleeping
- Anxiety
- Feeling worthless
- Not wanting to live

where I am

- Having relationships
- Having hobbies
- Having a job
- Having a support network
- Feeling happy

Where I want to be

- Moving to a new city
- Having a job
- Having a partner
- Having a support network
- Feeling happy

Before

- Sad
- Crying
- alone

Now

- Happy
- Smiling
- Connected

Future

- Traveling
- Having a family
- Having a career
- Feeling content
- Healthy
Appendix 3 – Focus Group Schedule with young women

Question/ Focus Group Activity Schedule:

Introduction:

Housekeeping – toilets, refreshments, fire alarm

Welcome and introduction to Louise and Ruth; explaining what will take place and ensuring that all the participants have had the necessary information and agreed to take part.

The young women have the opportunity to introduce themselves and say something about themselves.

General questions designed to put the young women at ease:

Tell us about how you got involved in the project. How did you hear about it? What were your expectations of the project? What do you think about it?

Questions/activity which focus on improvements in the young women’s life chances:

A group activity will be introduced at this point to encourage conversation and sharing of stories/experiences.

Using photos and images from old magazines and newspapers, the young women will be encouraged to cut out pictures and stick them on a large piece of card which is divided into three sections under three separate headings:

- Where I was (before getting involved in the Project)
- Where I am now
- Where I hope to be

In each section they can stick pictures/images which ‘speak to them’ or say/represent something about each phase under each heading. We will then, with the permission of the young women, use these ‘story boards’ to encourage them to talk about their experiences in relation to the project as follows:

- before they were involved in the project (Where I was),
- being involved in the project/what it’s like to be involved (Where I am now)
- what they hope their future will look like as a result of being involved (Where I hope to be)

Encouraging the young women to talk will enable probing and prompting during the telling of their personal stories using the ‘story-boards’ they have created.

Questions relating to how the young women have been enabled to take a central role in the project

How have you been involved so far? What is your role? What do you do? Tell us what it is like to be involved. How does this make you feel? What works well for you? What sort of things could be improved and how?
Focus group wind-down:

Thanks for coming

Token of appreciation

We will subsequently, with the young women’s permission, take photos of the story-boards and the young women will be able to take them away with them if they want to.
Appendix 4 – Stakeholder interview schedule

Introductions

Stress that we want to talk about the project in a general way rather than trying to obtain specific information about any of the young women involved. If names or identifying factors come up in the conversation then reassure that the information will be anonymised.

Background/Introductory information

Please could you tell me about your role/what you do?

How are you connected to the Way Forward Project?

Questions relating to the project

What do you know about the Way Forward project?
Probes:
How did you find out about it?

What type of connection have you had with the project? In what capacity? (referral? Information-seeking)

Who did you first speak to? Why did you make contact with (this person)?

What happened next?

What do you understand/know about the engagement worker role?

What impact has the project has on the young women who you have referred to it?
Probes:
Do you know what happened after you had made the referral?

Have you had contact with the young woman (en) you referred? If not, why?

What changes have you seen in her situation/circumstances? Which of these might be as a direct result of her involvement with the Way Forward project?

How do you think the project has supported the young women who have been referred?

Is this different in any way to existing provision?

Is the project engaging with young women in a different way to existing services?

Can you describe the Way Forward approach?
Probes:
What makes it unique?

Do you think it is effective? If so, how and why (what features make it so?)
Do you think there is any evidence of changed/improved working relationships between the project and other agencies?
• Probe: why do you think this is? Is this to do with The Way Forward?

What about the involvement of, or reaching, excluded or disadvantaged young women?

Has the Way Forward helped respond to vulnerable young women’s needs?

Has the project influenced how decisions are made within your work environment?
Probes:
• Changed referral approach
• Changed how workers engage with and deal with young women

Closing questions

Is there anything you would like to say about the Way Forward project which we have not discussed/talked about?

Thank you for your time etc.
Appendix 5 – Stakeholder workshop schedule

Workshop Outline:

Preliminaries

Welcome and housekeeping

Introductions from evaluation team and participants (name, organisation, role etc.)

Opportunity for participants to ask questions before consenting to participate

Main focus

The workshop will be organised around the three objectives for this stage in the evaluation:

- to identify the ways in which the Calderdale Young Women's Resilience Project operates and delivers its provision, identifying the factors that are important in developing and supporting progress (what works)

Discussion will be facilitated around the following kind of areas/questions:

Participants' expectations and experience of the project.
Why are they involved?
How did they get involved?
What experience have they had of the project?
How did they find out about it?

- to examine how the Calderdale Young Women's Resilience Project works within a multi-agency setting, and to ascertain what this means for the success of the project including how the project inform local decision making and commissioning arrangements

Discussion will be facilitated around the following kind of areas/questions:

What is the nature of the project within Calderdale?
How does the local context influence the way in which the project works?
How does it work?
What agencies are involved? How?
What makes the project unique?
What is the role of the steering group?
What do you know about the Women’s Centre approach/ethos?
How important is the Women’s Centre approach for the project? Why?
How does the project inform local decision making?
- to map the potential replication of the Calderdale Young Women's Resilience Project as a model that could be applied within other areas.

What are the features of success?  
What features of the project are directly replicable? Transferable to other contexts?  
How would the project work in other areas? What would it look like?

------------------------------------------------------------------------------------------------------------------------

Workshop wind down:  
Any final questions/comments?  
Thanks for coming