



## **Evaluation of Includem Services**

### **Introduction**

Evaluation and monitoring of the services is vital to ensuring the best possible service is provided. All Includem services are evaluated regularly. This booklet offers a brief overview of the findings over the first 5 years.

### **Aims and nature of the evaluation**

The aims of the research are to assess the progress and outcomes for young people served by Includem and assess the contribution made by different elements of the service.

Like Includem itself, the evaluation programme began small and has grown as the service and number of teams has expanded. Shortly after the inception of Includem in 2000, one researcher (Anne-Marie Campbell) was engaged on a part-time basis. Additional researchers have joined the team to evaluate new projects as they have come on stream.

Evaluation reports have been written on the following services (note that a few services altered their names or structures subsequently):

- East Crisis Resource Service
- Edinburgh Team
- Giveback
- Glasgow Home Team
- Glasgow Offenders Team
- Laidlaw Extremely Vulnerable Young Women's project
- Lanarkshire and Dunbartonshire Offenders Team
- Lanarkshire Home Team
- Relapse Prevention Project
- Secure Accommodation Throughcare and After-care Service
- Tayside and Fife Offenders Team
- West Crisis Resource Service
- West Home Team
- West Offenders Team
- Young Women's Intensive Support Programme

Since April 2005, two of the researchers have mainly concentrated on planning and beginning fieldwork for an evaluation of the Intensive Support Services/Intensive Support and Monitoring Services run by Includem. It is too early for findings from that work to be included in this summary.

## **Methods used**

For each project evaluated, semi-structured **interviews** have taken place with

1. young people
2. the Includem Project Worker for each young person interviewed
3. the referrer (who in nearly all cases is a local authority social worker), whenever practicable

Where appropriate some parents or carers have also been interviewed (mainly Home and Crisis Teams).

For a number of Projects all the young people willing to take part have been interviewed, but in some of the larger projects there has not been time to include everyone.

In most instances, follow up interviews have been carried out approximately 6 months after the first interview, although this has been subject to the young person's availability and researcher time constraints. It has not been appropriate for Crisis Resource services. In relation to young people who joined early established projects and moved on to the Relapse Prevention services, data is available for considerably longer periods (up to 24 months).

A core set of questions have been used for all projects along with others adapted to the particular nature of the service. Although the number of young people interviewed for an individual service has not been large (5 to 15), the total number is substantial. Case record data has been analysed in relation to larger numbers. For instance one time-limited study involved interviews with 7 young people and their workers, but further data was examined on all 36 who had been referred to the Team at that time.

In addition, standardised measures have been used to assess young people's progress. Includem developed a system of 'Events and Changes' pro-formas to monitor positive and negative developments across key dimensions of young people's lives:

- Accommodation/living situation
- Alcohol or drug use
- Education/employment
- Health
- Offending
- Family and other significant relationships

Project workers have completed weekly 'Events and Changes' sheets jointly with young people. They recorded new offence charges, as well as improvements or deterioration in the young person's situation and relationships. The research team summed the numbers of positives and negatives on each dimension to show progress for individuals and across the whole sample for each project. Interviews with local authority social workers have revealed occasional discrepancies in perceptions of change, but in the great majority of cases have validated the Events and Changes evidence.

In most cases, scores have been obtained on two measures of offending risk and attitudes to crime – the Youth Level of Service and Crime Pics II. In recent evaluations, Participatory Appraisal techniques (body mapping, timelines & quick evaluation) have been deployed as means of enabling young people to express their experiences and views with visual aids, while questions about social exclusion/inclusion have been added for certain services. In addition, observation has taken place of work in a Crisis Resource Centre and on occasion group discussions held.

## **Main Findings**

The findings across all the evaluations have been consistent as regards both the progress made by young people and the feedback about Includem services.

### **Young people referred to Includem**

The majority of young people referred to Includem are male, reflecting the general gender imbalance with respect to offending. Most of those dealt with by Offender team are aged 15-17, while other projects include more younger children.

Referring social workers have stated that all the young people referred to Includem have high levels of difficulty in at least one aspect of their lives and normally in several domains. This has also been confirmed by the YLS scores.

The presence of serious and multiple problems were illustrated in a sample of 50 young people selected at random from four offender teams. Just under two thirds (63%) were categorised on the basis of the YLS score as either high or very high risk of offending at referral. In the initial interview, 90% said they needed help with offending, about half with accommodation and about half with education or employment issues. Another example is the Young Women's project in Edinburgh, which is intended for clients with offending or substance misuse difficulties. Everyone in a research sample of 11 young women had *both* recently offended and had either drug or alcohol difficulties.

### **The service delivered**

The main components of Includem's services are:

- intensive support and supervision provided by a key worker
- 7 day a week availability (including a 24 hour helpline)
- brokerage of help packages from general and specialist agencies
- providing multiple supports, including use of mentors and volunteer befrienders
- 'stickability', that is, staying with young people 'no matter what'
- constant management support

It is pertinent to note here that many local authority social work respondents have reported initial doubts about Includem's capacity to deliver the intensity of support promised and the out-of-normal-hours availability, but with rare exceptions have confirmed that the service has been provided at the level planned and needed. A few have noted gaps or pointed to the occasional missing of a meeting as a result of the worker having to attend to an emergency. When asked to say how they would like to see the service improved, many social workers and young people have not made any suggestions or have mentioned only minor matters.

A number of social workers have called for the expansion or extension of the service.

### **Young people's expectations and engagement with Includem**

Many previous studies have shown that it is hard for services to engage young people with severe and multiple problems and that often there is a high drop-out rate. The Includem evaluations have shown that many young people, when referred, were doubtful about committing themselves and had low expectations of success.

This was partly because their previous experience of formal agencies had often been negative. Also many had only a hazy idea at the start of what contact with Includem will involve. This was in turn related to the fact that social workers often lacked detailed knowledge about Includem prior to referral.

Nevertheless, Includem have sustained contact with nearly all young people for as long as planned. For instance, out of 50 young people referred to offender's teams in 2002-3, 49 were still in contact with Includem at the follow-up point, which was at least 6 months and often much longer after they began with Includem. Project workers considered that all but three had effectively engaged with the service.

Also the evaluation of the Relapse Prevention and Young Women's services to which young people graduate from within Includem showed a different pattern of expectations compared with newcomers to Includem's services. When they moved to Relapse Prevention from another service, young people expressed confidence in the organisation's approach and ability to deliver, in contrast to the sceptical initial views of those coming fresh to Includem.

### **Overall progress**

The evaluations have shown that the great majority of young people have made good progress with Includem. With a few exceptions, respondents including local authority social workers have attributed the prime responsibility for the improvements to the young person's response to the Includem service.

Not surprisingly, patterns vary among individuals, over time and with respect to different dimensions. The most common sequence of progress has been for young people to make rapid early gains during the first 6 months, followed by a recurrence of difficulties at a lower level than before, then for further improvement to occur and be sustained in the second year. For a group followed up over 24 months, negative events showed a sharp drop in the first 6 months, accompanied by an increase in positive events. Not uncommonly, there was a renewed peak of negative events between 7 and 9 months, followed by a further decline. During the second six months of the service, events in different domains (e.g. accommodation difficulties and re-offending) tended to coincide. At 18 months, negative events were still occurring, but much less often than originally. By 24 months, negative events were few and often caused by external circumstances (e.g. another family member or an agency action) rather than the young person.

In the sample of 50 young people referred to earlier in this summary, one quarter committed no further offences during the initial 12 months working with the Offenders Teams. The re-offending by the others mostly occurred either within months 3 and 4 or between months 7 to 9, with an overall halving of the number of offences in the second six months. This reflects a common pattern also found in other Includem projects with young people engaging and improving their behaviour as regards offending and substance or alcohol misuse quickly within the first six months, but then having a setback, which often coincided with turbulence or a crisis in family relationships or accommodation.

Another example of substantial improvement in the sample of 50 occurred in relation to education and employment. Those who were under the age of sixteen and had been excluded from school had re-engaged with formal education fully or partly by the end of twelve months with Includem. Among the over-16s, half of the ones who had not been in education or employment at referral had either gained employment (and sustained it for a period of at least 4 weeks) or begun attending further

education. Nearly all the others had begun attending a job centre or other services related to seeking employment.

YLS scores were available for 30 of the 50 showing that two thirds had moved to a lower risk category at follow up. For a different sample followed up over 2 years, YLS and Crime-Pics scores had reduced for the majority. Those whose scores were not lower had mostly stayed constant. The categories assessed by YLS that had improved most were with respect to attitudes, behaviour and peer relations.

Several evaluations have reported success in keeping young people at home young people on the brink of family breakdown and assistance to young people making possible an early exit from residential care.

Several of the project evaluations have shown that the young people who make little progress or who are most likely to relapse have alcohol or drug misuse problems. Findings on the two year follow up sample indicated that those with alcohol issues returned to offending more frequently than those misusing drugs. Some project evaluations have suggested that progress with regard to relationship issues is harder to achieve and sustain than is the case for offending, employment, education and accommodation.

### **Changes in aspirations and attitude**

It has been noteworthy that at the start of the service, young people's expectations for help tend to be not only low but also vague. In addition, not uncommonly they deny a need for help in areas where the referring social worker and Includem project worker think there is a need. By the 18 and 24 month stage, many have espoused more specific and achievable goals, while some have come to recognise that they require help with certain issues that they previously did not acknowledge (notably relationships). They tend to become more empathic, not only expressing greater understanding towards potential victims of their behaviour, but also taking more account of external commitments affecting workers.

### **The elements of Includem's service**

Young people's and social workers' accounts have concurred that key to the largely successful outcomes have been the young person's close personal relationships with individual Project Workers. Critical ingredients have been the implementation of the Includem ethos of high availability and stickability. This has meant help is reliably at hand at any time of the day or week. Workers also persist with young people despite missed appointments, through crises and at difficult meetings or hearings. One young person said *"It's good to know there's someone there for you, even if you muck up"*.

Other characteristics of Project workers that young people liked and which encouraged them to be responsive included:

- Informality – speaking in a way that suits young people, being easy to talk to
- Genuineness – conveying they really want to help, putting themselves out
- Reliability – being available when needed, keeping promises
- Honesty - *"They don't mess you about, they tell you it straight"*.
- Outreach and 'entertainment' – coming to the young people and often taking them out

By 12-18 months, many young people had developed a considerable dependence on their workers, which corresponded often with a stage of stability or improvement. Hence they often found it difficult to adjust to having new worker, whether because of a staff change or move to the Relapse Prevention Service. However follow up interviews have shown that usually a successful transfer is made to a new worker after a few months.

Young people have also provided positive feedback about mentoring and the 24-hour helpline. Views about the workbook and weekly planning sheets were more variable, although the majority said they were helpful. These are tools used by Project Workers to identify with young people aspects of their behaviour and the environment that require changing and then plan how to modify these. Social workers have generally said they value the use of workbooks.

Most parents interviewed have said that the services have helped both their children and themselves, but some have wanted more attention. In Home Team evaluations, young people have explained some improvements in their well-being and self-confidence in terms of changes in their parents promoted by the Includem worker. This has resulted sometimes from mediation and in other instances from separate work with the parent(s).

### **Partnership work with local authorities**

The fact that local authorities have been prepared to refer and fund so many young people's involvement with Includem is itself a tribute to the co-operation between statutory services and the voluntary sector. Throughout the evaluation period there have been reports from different parties of excellent co-operation in some cases, but communication or co-ordination problems in others. Early evaluation reports indicated that social workers and even more so young people were often unclear what Includem would do with and for young people, which is understandable with a new service. As time has gone by, knowledge has improved. Not infrequently, Includem workers reported gaining insufficient background information from the referring worker, while conversely at a later stage some social workers observed that Includem did not keep them informed enough about the young person's progress. However, recent follow up contacts have revealed significant improvements, especially in communication about progress.

Some young people were disillusioned by their earlier experiences with local authority social workers, but for others the benefit of combined input was valued, e.g. *"Includem have helped me change but social work has helped with stuff too"*. Uncertainty about future care plans has adversely affected some young people, notably in the crisis services.

### **Conclusions and Challenges for Future Partnership Work**

The evidence from the evaluations has clearly demonstrated that Includem has helped large numbers of highly vulnerable young people to make significant progress across a range of their life domains. This has included significant reductions in offending and increases in 'social inclusion' e.g. re-engaging with education; gaining or seeking jobs. Considerable numbers of young people have been helped to remain in the community or to return there from residential care. The research does not have a cost-effectiveness component, but reductions in offending and the use of

residential care, as well as improvements in employment prospects, have been shown by other work to entail substantial savings for society.

Young people's and social workers' accounts have shown that key to the largely successful outcomes have been the close personal relationships with individual Project Workers. Initial wariness by young people has nearly always been replaced by trust, which has then made the young person open not only to practical support, but also guidance and challenging of attitudes and behaviour. Critical to gaining trust have been the high levels of availability, persistence and loyalty shown by staff (stickability). These are core features of Includem's approach.

The research has identified some issues and challenges. These include:

- Many though not all of the young people provided a service by Includem have been involved in offending, but this rarely occurs in isolation from relationship and accommodation problems, substance misuse or education difficulties. In the context of the review of Children's Hearings, this highlights the importance of integrating attention to needs and deeds in decision-making and service delivery.
- Consistent with other research, the need has been demonstrated for long term support (18-24 months) for the most vulnerable young people in order to ensure that improvements are sustained. This requires long-term planning and financial commitment
- The success of intensive community based services, alongside the continuing need of a residential service for a small minority of young people, poses questions about the nature and scope of residential provision needed for young people at serious risk of persistent offending or other forms of harmful behaviour
- There is potential for improving communication prior to referral to Includem among all parties about expectations and goals
- The role of cognitive-behavioural work may require some adaptation to meet the needs of young people who are less motivated
- Includem's prime responsibility is to young people, but staff often work with parents and carers. More guidance or training about the balance between individual and family work in different cases may be helpful
- Gender issues have not emerged prominently in most of the research, but the presence and evaluations of two separate Young Womens' Projects indicates the value of further consideration of when and how it may be helpful to separate or combine services for young men and women
- Ways of facilitating the transition onwards from Includem and promoting independence within the context of positive informal network support have been developed, but could perhaps benefit from more explicit policies and inter-agency agreements