

Camden and Islington NHS Foundation Trust

Project 10/10

Supported by the Mayor of London's Violence Reduction Unit









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Introduction

This report has been produced by Project 10/10 following grant funding awarded from the Mayor of London's Violence Reduction Unit (VRU).

In December 2019 the VRU awarded a £50,000 grant to the London Borough of Camden as part of the Unit's early plans to develop greater insight and learning of community based crisis intervention and trauma support for young people at risk of exploitation and violence and contributing to the Unit's strategic objective to "enable communities to be strong, safe and resilient".

The grant was used to build on existing practice, community engagement and intervention work to:

- Identify examples of current support that is accessed such as bereavement and counselling services and where there are gaps in provision, quality and access.
- Identify examples of community-based trauma support for families and friendship groups.
- Identify the barriers to accessing services and make clear recommendations on how to reduce these, giving specific consideration to cultural sensitivities.
- Develop a pilot for creating a safe place for young people to access culturally sensitive crisis and trauma support.

This was achieved through supporting the existing Camden based programme; Project 10/10, which works with young people in the context of their peer group using an authentic youth-led approach and a peer-referral outreach model of delivery.

Project 10/10 has grown organically with communities in Camden and Islington, and continues to empower young people to take an active role in how they are supported.

This report is also intended as a contribution to an important base of evidence.

Project partners

London's Violence Reduction Unit

Keeping Londoners safe is the Mayor of London's top priority. The London VRU was set up by the Mayor in the autumn of 2018 as the first VRU in England and Wales. While the VRU is looking to make positive change now, its aims to reduce violence and increase safety are rooted in a long-term sustainable approach that enables it to develop tried and tested preventative measures and to work constructively with partners.

Drawing on lessons from the successful Glaswegian model, the VRU is taking a London-specific public health approach to tackling violence. The Unit is working together with specialists from health, police, local government, schools, probation, and community organisations to tackle violence and its underlying causes, and to promote positive opportunities particularly for vulnerable young Londoners.

The Unit's work is overseen by the Partnership Reference Group (PRG) which is chaired by the Mayor himself and comprises leading figures in the public sector alongside representatives from voluntary, community, and youth groups. The PRG provides strategic direction, support, and challenge to the Unit to ensure that we stay directly accountable to the communities we were set up to serve.

In September 2019, the Unit published its strategy and work programme containing three strategic aims:

- To reduce and stabilise violence across London violence is a concern for us all; we will all play our part to reduce it.
- To increase feelings of safety recognising that London is one of the safest cities in the world.
- To put community at the heart of our work only by doing so do we have a sustainable long-term approach towards reducing violence.

Click here to find out more about the VRU Strategy.



The public health approach places emphasis on addressing the root causes of violence. By seeing violence as a consequence of a range of social factors such as adverse early-life experiences or harmful societal influences, we can design interventions that seek to prevent violence from escalating or even occurring in the first place. Within this model, therapy and therapeutic approaches are central to effective interventions, enabling individuals and communities to identify and resolve traumas that contribute to cycles of violence and harm.

Over the past year, the VRU has consulted with and listened to communities about what they think the key challenges across London are, and what needs to be done. We have heard from young people, community members and VCS organisations and recognise that for those who need it most, existing provision is not always accessible enough. This is particularly apparent in relation to the support available to young people who have tragically lost friends to violence.

This led us to explore and examine current initiatives in this area, supporting new thinking and practice. Alongside, the Project 10/10 model the VRU also commissioned Power the Fight to produce the Therapeutic Intervention for Peace (TIP) report (Click here to download). The report concludes that effective therapeutic interventions to end violence affecting young people are reliant on applied cultural competency and recommends pragmatic steps for service improvement.

The report's recommendations are aimed at institutions and Government bodies working with families and young people, including the NHS, Department for Education, Department of Health and Social Care, Ofsted, Youth Justice Board, Metropolitan Police Service, local authorities and youth charities. The report adds to the ongoing conversation on making therapeutic services more accessible for those impacted by violence affecting young people.

Camden Council

We are really pleased to support and be part of work of Project 10/10. In addition, we are delighted that with funding from the VRU the project has been able to further develop our practice and understanding of working with young people, families and communities who have experienced violence and trauma. The approach they have developed is one shared by the Council and the work of its Youth Safety Taskforce, and together we have set ourselves the ambitious goal of fundamentally re-imagining our services not only to protect young people from violence and harm but also to actively promote their welfare.

Camden and Islington NHS Foundation Trust

We are proud to have been part of Project 10/10 and that with, support from the VRU, the partnership has been able to support local young people who have experienced violence and trauma. While these experiences often have a profound, long-lasting detrimental impact on mental health and wellbeing, mainstream mental health services have not been responsive or accessible to this vulnerable group. Local Community Mental Health services are starting a journey of transformation and will learn from the report's recommendations.

Coram's Fields

The approach that Project 10/10 takes to bringing the two disciplines of youth work and clinical psychology together to identify, engage and support some of the most marginalised and 'at risk' young people in London has clearly had a profound impact on the lives of those that have engaged with the programme. The potential for the work of 10/10 and the application of a public health approach to addressing the spiralling issue of youth violence in young people is considerable, and there are many lessons to be taken from the project that can and should be shared across the statutory and voluntary sector. The programme is an excellent example of multi stakeholder intervention that utilises the skills and resources across health, youth and education, with the common goal of changing the lives of young people for the better.



Project overview

Project 10/10 is a multi-agency collaboration between Camden and Islington NHS Foundation Trust, Camden Council, Coram's Fields (a local children's charity), and MAC UK. The project is also supported by a wider partnership including New Horizon Youth Centre and Islington Integrated Gangs Team. The project is not a directly commissioned service, instead it has developed as a result of local statutory and third sector agencies responding flexibly to identified needs in the boroughs, and re-aligning resources to tackle the complex problem of violence affecting young people, youth exploitation, and community tensions.

The project is a true collaboration between psychology and youth work, taking the strengths of each profession and combining them to provide a service that is accessible, relevant, and works <u>with</u> young people instead of doing <u>to</u> or <u>for</u> them.

This approach is informed by the Integrate Model¹ devised by MAC UK, a charity working to improve excluded young people's access to mental health support and information, and draws on psychological theories including AMBIT (Adaptive Mentalisation-based Integrative Treatment), Narrative Therapy, Attachment Theory, and Community Psychology ideas.

Project 10/10 puts mental health at the heart of the intervention, however we challenge the traditional understanding of a mental health service by moving away from referral forms, diagnostic eligibility criteria, and long waitlists, instead positioning ourselves alongside young people to build a service with them that meets their needs at a place and time that suits them. The service is co-produced with young people, meaning that they take an active and collaborative role in building the identity of the project, and deciding what the project does and how it works.

The principles of co-production include ensuring that everyone has a say, contributions are respected and encouraged, and that all participants feel connected with the shared goals and progress of the project. The process of co-producing a project is in itself therapeutic, as it provides an opportunity for disenfranchised young people to be included and experience reciprocity through working towards shared aims.

This report does not serve to criticise mainstream mental health services for young people, or youth clubs and hubs, all of which provide an essential support to many young people and children. However, it is important to recognise that there are service gaps and unmet needs for young people, particularly those vulnerable to violence and exploitation. The Project 10/10 approach seeks to address this gap by adapting its model to meet the needs of young Londoners who feel disconnected, disenfranchised, and persecuted.

Project 10/10 has developed a model that serves to build, or re-build trusting relationships between professionals and young people, and we believe this allows them to access therapeutic support in a way and at a time that feels safe, and that it also acts as a bridge between these young people and the range of excellent local youth services they could find helpful.



Project aims

Project 10/10's work is based on the building of strong, trusting relationships with young people who historically mistrust professionals, authority figures, and traditional services. In this way, project staff work alongside young people to help equip them with the skills and resilience needed to make positive pro-social choices and deal with difficult situations.

The project aims to:

- Promote and respond to trauma and wider mental health needs, thereby reducing unscheduled care through A&E and crisis services.
- Enable young people to engage in training/education.
- Bridge young people into existing services (health, social care and diversionary), making universal services more accessible, particularly in the transition to adult services. Bridging will support prevention of long-term health and social care problems, including homeless, unemployment and poor mental health.
- Reduce violence affecting young people and reoffending.
- Enhance resettlement work undertaken with young people within the
 justice system to increase positive outcomes on release. The project
 supports young people's voices being heard in the justice system so
 resettlement services can increase effectiveness by aligning with young
 people's priorities.
- Influence the work of wider services that can support young people involved in or who are at risk of exploitation and violence, bolstering community's resources and giving young people choice and control over how they access and utilise resources. The project expects to support and model joint working, particularly considering overlapping areas of community need between Camden and Islington.
- Improve local people's perception of community safety.

How the project began

The project began with outreach work – meeting young people 'where they were at', whether that was in a youth club, in a park, or even in a graveyard. From this point staff were able to show their motivation to help, get to know the young people and build trust. These early interactions were informed by previous Integrate projects, and emphasis was put on developing a relationship characterised by gentle curiosity marked with respecting boundaries and differences.

The young people were asked to help the staff create a project that would support them and their peers. This led to a shared narrative for the outreach sessions, where young people and staff agreed the rules of engagement and the purpose. Staff agreed when and where they would meet young people, and staff consistently attended these meetings – even if young people did not show up. This was important, and demonstrative of theory-practice links, as acting in a reliable, predictable, and boundaried manner is an important factor in developing trust in an attachment relationship.

Eventually, the project was able to secure a venue to host drop-in group sessions three-times a week, and these sessions became the foundation of the project. Through these sessions, young people were provided with a safe space to meet peers and professionals, as well as a structure and thus an opportunity to build a sense of containment within the weekly routine.

WHY "PROJECT 10/10"?

Originally the project was known as the Camden & Islington Integrate Project. Once a core group of young people had engaged, a discussion emerged around the shared identity of the project. One young person suggested 10/10 because they felt like the staff in the project always looked for something in each individual that is 10/10. A young person then designed a new logo for the Project.



Delivery cohort

Project 10/10 has had contact with 187 young people since April 2016, in the age range of 16 to 25. Prior to COVID-19 there were:

- 30 regular attendees (frequent attenders at group sessions or one-toone engagement)
- Between 20 and 30 young people attending each drop-in group session
- 25 young people with whom we had emerging relationships (infrequent, early engagement trust building),
- 16 young people who have occasional contact (infrequent yet sustained support and engagement),
- 104 young people with whom we have had some engagement that
 has now completed (not seen for six months or more), though due to
 the transient nature of the group there is often movement between
 categories for example young people who have not been seen for 6
 months or more re-engaging with the project. This number also includes
 young people who have moved to prisons outside of London on long
 sentences.
- Supporting 12 young people whilst they are in prison, to maintain a relationship that can be sustained when they leave the criminal justice system, and to work with them therapeutically through what is always a difficult and distressing period for them.

Impact of COVID-19

The last drop-in group session was 17th March, 2020. We spoke with the young people at the session and discussed that we would have to close. We had contact details for 42 young people, of these we remained in regular contact with 36 over the phone, zoom, facetime, and PS4. We worked with the newly formed 10/10 young person's committee group to put together a 'care package' to be sent to young people we were in contact with. This consisted of information about COVID-19, worry and sleep, as well as ideas for home workouts and leisure activities.

Driven by requests from young people for face-to-face contact, as well as losing contact with some of those we had contact details for, plus a further 18 young people who we were at early stages of engagement with, we returned to face-to-face working led by Coram's Fields' outreach project.

Project 10/10 currently provides 16 hours of face-to-face contact time each week for one-to-one sessions and is part of outreach sessions with partner agencies throughout the week. We have one support group session for 12 young people and we hope to increase these in line with Government guidance.



Approach

Project 10/10 uses a mental health informed approach to understanding youth offending and dis-social behaviour and provides a holistic service that works alongside young people to support them to feel more connected to their communities and promote positive social change for all.

Project 10/10 does not accept referrals from professionals, and instead young people find us via our peer referral model; ostensibly young people bring friends to the sessions to meet staff and access support. Most young people who have accessed support from the project are from WC1 and EC1 postcodes that spread across Camden and Islington. However, due to our peer referral model, the project reach has organically expanded to support some young people from other areas of Camden.

A law enforcement narrative has dominated approaches to working with young people at risk of exploitation and violence. This neglects psychosocial factors, such as complex childhood trauma and systemic social exclusion, that may result in young people engaging in socially undesirable behaviour. Project 10/10 engages with the psychological lives and social challenges of these young people; their fears, strengths and weaknesses.

During the lifetime of the project, it has become important to recognise the varied and complex reasons young people may become involved in criminal activity and gang-related violence, and as part of this, Project 10/10 is working to move away from the term "gang", which conjures up negative connotations and fails to capture the complexity of young people's lives and relationships. We have found that the more accurate description of the networks these young people operate in would be "friendship groups", and that young people are brought to the project primarily to access help. Whilst in many cases young people can identify themselves as belonging to a 'gang', the helpfulness of this term as used by professionals describing a group of young people, and certainly in describing a therapeutic mental health service, is in question.

Young people must be worked with and empowered to create their own narrative and extradite themselves from the lifestyle they have adapted to survive. For this reason, the word 'gang' has been substituted to 'group' in this document where appropriate, or descriptors such as "gang-affected" will be used.

Project 10/10 group sessions would normally run three days a week and take place in a church hall on the border of Camden and Islington boroughs. This location provides a regular meeting place for young people and staff to link up, and this has helped build a secure enough base to which young people can come to, and crucially, to which they can bring their peers. As rates of violence affecting young people increased in other areas of Camden, more and more young people aged 16-25, who had experienced trauma, found the project through friends who already attended. We hypothesised that this influx of young people from a different part of Camden was because young people felt unsafe in areas that they would normally frequent.

The peer referral model, along with our co-production approach afforded us the opportunity to engage with a group of young people who were searching for help – not in an overt way, but rather in the sense that they were pushed to explore other avenues for safety, and they drew on preexisting friendships to do this. This highlights the importance of community-led approaches to improving safety for young people – if services can work hard to be more accessible and discoverable, then young people can take an active role in 'referring' themselves and others.

The young people who helped create Project 10/10, and those who have discovered us since, are often described as resistant to and rejecting of mainstream services. These young people have a long history of experiencing services and professionals (including schools and teachers) as being unhelpful and rejecting. They often report early experiences of not achieving at school and giving up on help-seeking at an early age. The idea that they can be helped is challenged by unfulfilling experiences and reaching out for support comes with much more of a threat of rejection than it does the promise of salvation.

Contact with Statutory mental health services are usually reactive and at crisis point. Young people experience the multiple services involved as dis-united and fragmented, with many people involved, yet none having the resources to meet their needs.



Barriers to engagement

Traumatic experiences in early life can have significant effects on neurological development and understanding and beliefs about the self, others, and the world. Significant and repeated trauma can result in the world seeming unpredictable and uncertain.

Exposure to childhood trauma is a key risk factor and some 80% of young people involved in youth violence have a childhood history of exposure to abuse, violence and neglect, commonly described as 'Adverse Childhood Experiences' or ACEs. Young people who offend may have experienced the trauma of separation and estrangement from parents, death of a care giver, sexual abuse, severe physical chastisement, parental neglect, serial domestic violence, or parental substance misuse. Individuals who have experienced four or more ACEs, are at higher risk of suffering the detrimental effects associated with ACEs. ACE studies in Wales have identified the scale of these risks for those with four or more ACEs compared to those with none to be; six times more likely to have received treatment for mental illness and fifteen times more likely to have been involved with violence².

Further to this, Adverse Community Environments have a substantial impact on mental health outcomes. These are not predetermined but do increase the likelihood, they include things like lack of opportunity, limited economic mobility, and the associated effects of poverty, racism, and classism, as well as experiencing violence in the community. The 'pair of ACEs' tree illustrates not only the ACEs referenced above but also the community context³. These environments contribute to, and compound, the ACEs experienced within relationships during childhood. Young people are also commonly exposed to violence as victims, witnesses and perpetrators.

All of the young people surveyed from Project 10/10 reported having a close friend or relative who had been stabbed or shot. We estimate, based on incidents that have occurred whilst we have known the young people and stories that have been told about them, that 50% of the young people regularly involved in the project have themselves been stabbed.

These experiences predispose young people to develop complex psychosocial, mental health and physical health needs. Many of them may meet diagnostic criteria for depression, anxiety, substance misuse, post-traumatic stress disorder, and continuous-traumatic stress disorder (as a consequence of childhood trauma and on-going exposure to stabbings and deaths) and their history of insecure and harmful relationships means they find trust and engagement extremely difficult.

In this context, the prospect of support from a mainstream mental health service is one that comes with a fear of rejection, and an expectation of being let down. This results in young people turning to their usual ways of coping, be that smoking cannabis to 'dull' their thoughts and feelings, or engaging in impulsive and violent behaviour, which can offer a buffer against low self-esteem and a sense of hopelessness about ever engaging successfully with the conventional world.

Young people will often be drawn back into the world with which they are most familiar, as the traumatic experiences they have been through have impacted their beliefs about the perceived safety (or lack thereof) in opportunity. People who have experienced significant trauma can often return to places, or relationships, that are judged by professionals working with them as dangerous because the trauma is more predictable essentially it is better the devil you know.

As Bessel van der Kolk explains "the mere opportunity to escape does not make traumatised animals or humans take the road to freedom" (van der Kolk, 2014).



^{2.} Responding to Adverse Childhood Experiences, Public Health Wales (2019)

^{3.} ACEs tree model - Milken Institute for Public Health https://publichealth.gwu.edu/departments/redstone-center/resilientcommunities

Trauma and safety

Project 10/10 works from the position that services need to do more in order to create a full feeling of safety – in relationships, in environment, and in the self. To do this, places of safety need to be constructed with young people that offer sanctuary from their daily lives which can be fraught with danger of many sorts. Simultaneously, safe relationships can develop which are marked by consistency in approach and availability, transparency, and acceptance, and from this basis the young person can begin to explore their own minds more and create more safety in themselves.

Of course, it could be argued that it is never possible to make a young person's world completely safe, as there are traumatising structures inherent in our society, for example racism and poverty. However, it is possible to build safe relationships, which can be a foundation for the safer exploration of the young person's internal and external worlds. Alongside this relational work, a trauma-informed intervention must focus on ways of empowering young people to be part of making their environments safer. We propose to do this by working with young people to have their voices heard, and to provide feedback to the community agencies who hold the power, for example local authorities, police, and schools.

For Project 10/10, understanding the impact of trauma is not about absolving people of all responsibility for the harmful things they may do, it is about creating a shared understanding of the reasons they may behave in socially undesirable or harmful ways, to support and empower individuals to take account of themselves and make positive changes in their lives and in their communities.

Being trauma-informed also involves having an awareness of our own trauma as professionals, and how we must ensure that we are appropriately supporting each other to process the emotions that come up for us when working with young people. As such, all staff at Project 10/10 receive weekly clinical supervision from a clinical psychologist, and we have weekly reflective practice sessions and complex case discussions where we draw on psychological theory to help us think about the young people we work with as well as our reactions to them.

Supervision

This cohort of young people, and many others like them across the country, are far more likely to attend a youth club than a GP surgery or a mental health service, and youth workers often find themselves in situations where they have built trust with a young person to such an extent that the young person begins to disclose difficult things to the youth worker. This is a challenging experience for workers from all professions, but it can be experienced as overwhelming by youth workers who are not supported in the same way that a psychology colleague would be when dealing with the same sort of disclosures.

Whether psychologist or youth worker, all Project 10/10 staff receive weekly supervision from a clinical psychologist in the team, which provides a dedicated space to discuss the worker's caseload, as well as the interpersonal dynamics with young people from the project and any associated challenges. All staff have worked hard to develop a safety in the supervisory relationship, and this extends to a safety within the team. This is important, as it promotes a curiosity about young people, and ourselves as workers, leading to an open and compassionate approach.

- "I think for me supervision has been an imperative part of my development professionally and personally. In order for supervision to be successful I feel you have to collaboratively work together to structure it and build trust. Learning needs to take place on both parts and there needs to be mutual respect and patience. A safe space to reflect and explore without worrying about being shamed or blamed."
 - Project 10/10 Clinical Practitioner
- "With the use of supervision, you are able to strengthen the safety of your relationship which allows you to challenge an issue or something that triggered you in a professional and contained way. At first it can feel overwhelming and foreign, but consistency, boundaries and the flexibility to make it your own is very rewarding and crucial to any workers development, not only in the criminal justice, youth work and psychology fields but in every field out there."
 - Project 10/10 Clinical Practitioner
- "Good clinical supervision speaks to and recognises that if you the worker isn't in a good place then the work is comprised as the worker can't be as effective as they could be. This view cultivates a feeling of being cared for in the worker, and one of being held in mind. This is similar to what we try to do for our clients. Its powerful and nurturing which builds (epistemic) trust in the relationship."
 - Project 10/10 Senior Youth Worker



Peer referral model

An important aspect of the Integrate model which informs the way Project 10/10 operates is the peer referral model. Young people who were initially engaged with via outreach are then encouraged to bring their peers to sessions. This creative approach enables young people to access support at their own pace and on their terms, and it contributes to the project feeling like it can be an authentic 'youth' space rather than a venue or place created and dictated by professionals.

Young people do not need a reason to 'refer' their peers to the project, and often the referred young person attends without a clear understanding of the type of help they could get from the project.

This is then explored with them as they get to know staff, and how they spend their time with the project can be co-created. It could be argued that the peer referral model evokes a psychological experience called epistemic trust.

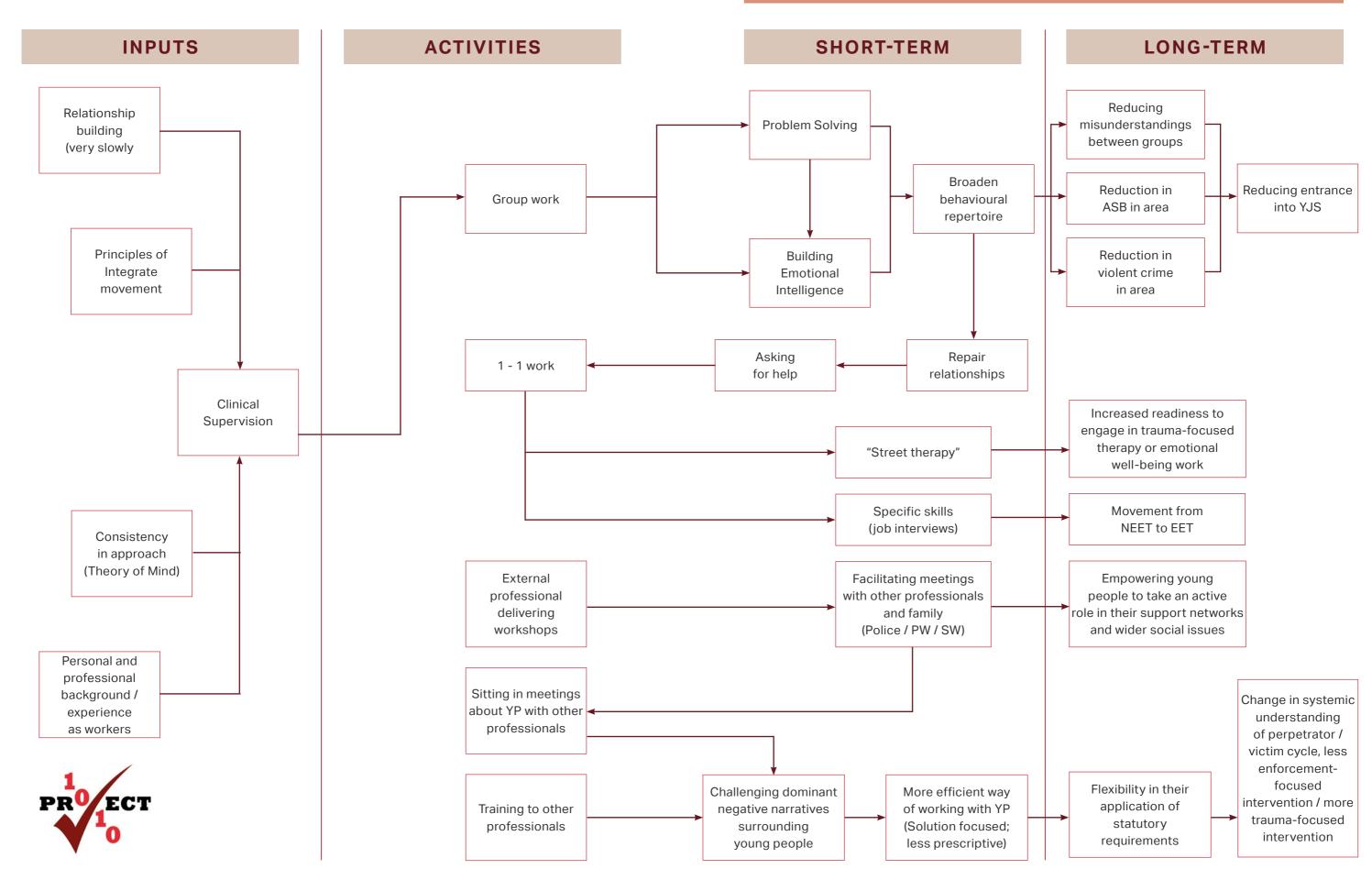
Epistemic trust, as understood in the AMBIT model, is the means by which one feels accurately seen and understood by another, and therefore will be more likely to then follow that other's guidance and direction. Something similar happens when a young person is introduced to the project, or a staff member, by a peer, as there is likely an assumption that the peer 'gets' the young person. This may be because they are from the same area, have been through similar experiences, and have bonded over their similarities. We propose that through the peer referral model, young people are able to share their trust in the project with each other, and this permits a head start for staff in building a trusting relationship.

Project 10/10 is co-produced, with the structure, location and content of the group informed by what the young people want from the service. Using an innovative community-based approach, the young people are able to access support in their own contexts with their peer groups. Co-produced activities, building on the strengths and interests of the young people empower them to develop a different narrative for themselves that can be shared with the project. Drawing on systemic ideas and narrative therapy, the young person can build an alternative narrative that counters the problem-focused negative narrative that may have surrounded them since childhood – for example, "bad", "violent", "criminal".



Project 10/10 theory of change

OUTCOMES (IMPACT)



Development and dissemination of the model

The approach of Project 10/10 goes beyond the individual focus, drawing on community psychology ideas that posit that a problem is not located within an individual, as individuals always exist as part of a wider system that has influence over them. To this end, an equally important part of the 10/10 model is working with professionals and services in the networks of young people to become more trauma-informed. This work can happen formally or informally, with 10/10 staff being conscious of the language we use to speak about young people in every setting, thus developing alternative narratives about them.

One example of this in the formal sense was a pilot reflective supervision group trialled with a group of youth workers from Coram's Fields Youth Centre. The youth workers found the space to be helpful in supporting them to think about the young people they work with, but crucially their reactions as workers to those young people. (For a more detailed description of the work please see Alghali, Moore, and Grove 2020)

Similarly, we also helped develop a trauma-informed reflective supervision pilot that was co-produced with police officers from Central North BCU. Young people from the project often speak about negative interactions they have with police officers, and when these conversations have come up, we think with the young people about how the project could respond.

A group of young people expressed concerns that police officers they were interacting with were often from outside of London, and therefore do not understand what it is like to be a young person growing up here. This led to a broader conversation about what it is like growing up in London, and staff were able to make links between the experiences young people described and a psychological understanding of trauma. We also thought about police officers' experiences of trauma, and how these might lead to them approaching situations with young people in a fearful way.

The young people in the discussion agreed that the project could explore a way of providing some trauma-informed training to officers. Working in collaboration with colleagues from Camden IYSS, a pilot project was completed with police officers across 20 weeks that provided them with training on trauma, ACEs, attachment theory, and also provided a space for open reflection on these subjects and promoted officers reflecting on their own experiences and the challenges of their jobs.

The officers reported that the training had helped them think about young people differently, but also think about themselves differently. All officers agreed that the pilot should be extended to work with other teams across the BCU and the Metropolitan Police more widely.

(For a more detailed description of the work please see 'We asked for workers, they sent us humans: Examining trauma informed supervision for police officers' - Grove and O'Connor, 2020)



Co-developing the project

Through working with young people to co-design the way in which we support them, Project 10/10 identified a need to engage with young people we had worked with in the community and who still requested support whilst they were in prison. Staff members were able to work with prisons and young offenders' institutes to arrange legal visits where young people could reflect on their current situation and discuss any concerns or issues they were having in the prison. We found this time to be valuable in supporting young people through a difficult and emotional transition, and in managing risk and safety by working with the guards and safer custody departments.

This development led to conversations with professionals at New Horizon Youth Centre (who have a long history of providing prison in-reach support) and also Camden Youth Offending Service, and a two-year pilot project was created to support young people in custody or at high risk of going into custody. The Building Bridges Project (formerly the Enhanced Constructive Resettlement (ECR) Project) has worked with young people known to Camden YOS and supported them with weekly visits where they are able to think about their current situation and plan for their release.

Project staff continue to support young people when they are released from custody, and almost two years into the project there are currently no young people in custody known to Camden YOS, indicating that re-offending rates, and/or severity, have decreased. This project has also allowed for stronger partnership working, and sharing of trauma-informed practice, reflective practice, and clinical supervision.

Outcomes

Through this programme we are monitoring our impact and notable key learnings and outcomes include:

- A positive engagement with a group of young people who are involved in and victims of violence.
- An increase in prosocial activities among young people attending the project
- Project sessions provide opportunities to discuss mental health in a way that reduces the stigma associated with it. Currently, 8 young people are having regular one-to-one sessions with a clinical psychologist.
- Improved mental health and wellbeing: Self-report questionnaires by attenders describe a significant improvement in their ability to manage emotions, to relate to friends and peers, to engage with their community, to trust professionals and engage with mainstream services.
- Young people are becoming more engaged with how the project operates and reports its findings: One group worked together to produce an animated evaluation of the project, and another group are working on coproducing outcome measures for the project. Young people also worked together with staff to host an event showcasing the project, and they helped create a video of the same nature.
- Project 10/10 young people are taking up jobs and apprenticeships, attending employability sessions, writing CVs, attending local youth centre activities, and accepting referral into mainstream mental health services.
- Training of staff in other agencies to enhance their work with gangaffected young men and their report of increased confidence to work with this cohort.



- Positive reports from families of young people involved with the project.
- Local youth services reporting improved relationships with young people since they engaged with Project 10/10 and reporting a change in how they work with other young people they engage with.
- Young people co-producing and co-delivering training to other professionals and university students about the project and the model.
- A pilot exploring the impact of reflective group supervision that was run with a group of 20 police officers from the Central North Gangs Team. This work was shortlisted for a World Class Policing Award, and a proposal for an extension of the work is being completed.

In the last two years:

| Employment | Through working with the project 30 YP have attained employment (full-time, part-time, apprenticeship or short-term contract) |
|---|--|
| Job skills – interview prep, CV writing | 28 young people have been supported with specific job skills support. General support and discussions about jobs and CV would happen at each group session also. |
| Benefits – JSA/ESA/ PIP/UC/housing | 12 young people supported to access benefits |
| Training and education | 20 young people have been supported to access education or training programmes including 5 CSCS qualifications. |
| Support engaging with other services (YOS, probation, social care, mental health) | 22 young people have been supported to engage with other services and professionals |
| Social and health (sex and relationships, gym, drug and alcohol sessions, street doctors) | 30 young people have engaged in specific sessions focusing on issues related to health and wellbeing. This included 12 young people who accessed STI checks (and treatment) for the first time. |
| Social policy work and co-production | 30 young people have been involved in various paid and non-paid roles raising awareness and sharing their opinions on a variety of social issues including knife crime and stop and search. Young people have attended Parliament, met with MOPAC reps including Sophie Linden, and co-delivered training sessions for professionals and university students |
| Other support | 14 young people have been supported to get a form of ID – provisional license, passport, and birth certificate. 10 young people have been supported through homelessness applications. |



Feedback

Feedback from Young People

"I think there is a need for this project as it isn't like any other project that I personally and my friends have been to. The project is different in its ways as the staff actually want to help us get a job and try to push us towards the right way, even if we are telling them not to, they will still show us other ways around it and how they can help. I also think there is a need for this project, with everything to do with gang violence and everything that's even going on in the world right now, it's the only place that we can go to and just talk and really express how we are feeling and what we think of what's really happening and how we can get help."

- feedback from a 10/10 young person

• Extract from a transcribed focus group:

Staff: What makes our service different from other services?

YP058: 'it's helpful'

YP002: 'we're all equal. You treat us the same. We get along with you guys,

we connect well, that's what it is'

YP003: 'it's not awkward between us'

Staff: So if you guys have a problem how...

YP002: 'we can come talk to you guys'

YP003: 'cos we trust you'

YP002: 'we trust you yeah'

• Extract from a focus group:

"I even think our opps should have something like this, like a project, obviously not this one but something like it you know what I mean?"

Feedback from families

- "Thank you very much for the support you continue to show me and ------. You have played such a fundamental part in our lives and the reason
 why I am becoming who I am is because of the support you have showed
 us and I would like to pass this on to someone else. Your resilience,
 communication and understanding is always there and you are helpful
 in many situations. I really hope that the work you do will be recognised
 because I believe other organisations should learn from you. Thank you
 again for everything it really means a lot."
 - 22-year-old sister of a 10/10 young person
- "I cannot honestly say she has saved my son, I do credit her for opening up lines of communication and for being 'the Jimminy Cricket' on my son shoulder, stopping him from getting deeper and doing even more stupidness, I know if he had no idea what to do he would call her and as a parent that means so much, for if he didn't call her he wouldn't call anyone whom would offer him any good reasonable advice, it would more than likely be a local drug dealer. He is thinking now, he is considering options, now he is far from a saint but these little improvements over a short period of time is vast to me, I had given up, on him, on the services, on life"
 - mother of a 10/10 young person
- "[She] has been an absolute support system. She has supported the entire family and has really assisted us through a difficult time. Honestly if it wasn't for [her] throughout the past few months, I have no idea how as a family we would have managed. She has been there to listen to us, to advise us and also just been there as someone who genuinely does care and that has been something that matters so much as it means a lot to genuinely care. [She] is honestly only a phone call away and always willing to help and support. She is a great individual who really does care about people and this is evident in her approach."
 - sister of a 10/10 young person



Feedback from professionals

- "The work they do with my client is very helpful for him as well and he engages fully with them not only as somewhere safe to go, but also somewhere he can progress in himself. I feel that he has developed a sense of maturity from engaging in this project as there are opportunities to participate in courses that are designed to equip him for not only employment, but also general life skills and raising awareness to equip him to being safe on the street as well as ready for adulthood. It is a service that really explores what the main issues are for young people and brings in realistic support for them. I feel that they listen to the young people and understand that if they are going to be caught up in possible dangerous activities, then they will prepare them for what to do if they ever get caught up, rather than penalise them for being in that situation" probation officer of a 10/10 young person
- "I saw ----- and ----- on Saturday 21st October around 12.30 and they were getting ready to take part in some football training. I had a very pleasant and adult-like conversation with both. I haven't seen either for a while so it was nice to catch up and chat. It was also great to see an encouraging change in the boys which unfortunately a lot of other people don't see, especially if they're hanging around in big groups."

 a local youth work manager



Recommendations

Recommendation 1 - Building safe relationships

We propose that through the peer referral model, young people are able to share their trust in the project with each other, and this permits a head start for staff in building a trusting relationship.

Services need to do more in order to create a full feeling of safety – in relationships, in environment, and in the self. To do this, places of safety need to be constructed with young people that offer sanctuary from their daily lives which can be fraught with danger of many sorts. Safe relationships can simultaneously develop which are marked by consistency in approach and availability, transparency, and acceptance, and from this basis the young person can begin to explore their own minds more and create more safety in themselves.

Recommendation 2 - Building safe spaces

Alongside this relational work, a trauma-informed intervention must focus on ways of empowering young people to be part of making their environments safer. We propose to do this by working with young people to have the voices heard, and to provide feedback to the community agencies who hold the power, for example local authorities, police, and schools.

Using an innovative community-based approach, the young people are able to access support in their own contexts with their peer groups. Coproduced activities, building on the strengths and interests of the young people empower them to develop a different narrative for themselves that can be shared with the project.

Recommendation 3 - Developing supported staff teams

Supporting young people through the often times traumatic and challenging experiences they have can be upsetting and arduous. Professionals who work with young people impacted by youth violence are exposed to a risk of vicarious traumatisation, and the additional aim of rebuilding trust with young people who struggle to trust professionals and services can quickly lead to burnout. Clinical supervision and reflective practice are an important part of ensuring staff teams are supported to help young people whilst maintaining a healthy and necessary awareness of their own mental health and emotional wellbeing.

Recommendation 4 - Multi-agency approaches

Working in collaboration with colleagues from Camden IYSS, a pilot project was completed with police officers across 20 weeks that provided them with training on trauma, ACEs, attachment theory, and also provided a space for open reflection on these subjects and promoted officers reflecting on their own experiences and the challenges of their jobs. The importance of this pilot, and similar work across the country, is paramount when facing the challenges of how we as a community respond to cultural incompetence and associated harms of this within our societies and professional services.

We have been contacted by colleagues from Lancashire VRU, West Midlands VRU, and other police forces from around the country interested in the model we developed and wanting to do their own pilots. But this approach must be applied across all our service industries, with youth workers, police officers, psychologists, doctors, and nurses, all provided with more support to do their jobs effectively, and improving their access to reflective supervision, trauma training, cultural competency training and peer support is one way we believe our communities will be safer and happier.



Conclusion

This report aims to outline the way Project 10/10 works with young people and describes in detail the aspects of our model that we believe to be most important. We do not wish to proclaim Project 10/10 as the 'finished product' or gold standard by which all other services should be compared against, and to do so would be to disregard the key messages of this report – creating community-led, coproduced support services is a dynamic process.

Project 10/10 is constantly evolving, and we hold it as paramount that promoting a culture of on-going learning from staff, young people, and professional partners is crucial in coproducing a dynamic and effective support service. When looking back on early reports about the project, it is clear that in some ways our thinking and our language has developed over the years, and we must notice and reflect on this growth.

We exist as part of a wider system that shares a common goal; to create safer communities for all. We hope that by sharing our learning and experiences, we can contribute to building a shared understanding of young people affected by gang-involvement and violence, one that promotes collective responsibility and a trauma-informed, compassionate, and responsible approach to safer communities.

