

EVALUATION PROTOCOL – ADDENDUM

# Evaluation of the Inspiring Futures intervention: a cluster randomised controlled trial

**Ipsos UK**

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## Protocol Addendum; Wellbeing Top Up

Trial Name	Evaluation of the <b>Inspiring Futures</b> intervention: a cluster randomised controlled trial
Delivery Partner	Rugby Football League (RFL)
Evaluation PI	Facundo Herrera Prof. Stephen Morris Jemuwem Eno-Amooquaye (Ipsos UK)
Funding Organisation	Youth Endowment Fund (YEF)
Link to Original Trial Protocol	<a href="https://youthendowmentfund.org.uk/wp-content/uploads/2021/04/REVIEWED-RFL-Trial-Protocol_Final-July-2024.pdf">https://youthendowmentfund.org.uk/wp-content/uploads/2021/04/REVIEWED-RFL-Trial-Protocol_Final-July-2024.pdf</a>
Wellbeing measures used	The Short Warwick Edinburgh Mental Wellbeing Scale (SWEMWBS)

## About the What Works Centre for Wellbeing

The UK government has a long-lasting interest in the wellbeing of citizens, with the UK being one of the first countries to systematically measure subjective wellbeing at the population level, and to commit to using it, alongside economic data, in shaping policy decisions. The What Works Centre for Wellbeing (WWCW) was established in 2014 to help government understand how to best improve people's lives by ensuring that our policies and practices positively contribute to people's wellbeing.

The WWCW closed on 30<sup>th</sup> April 2024, following the end of multi-year grants from The National Lottery Community Fund. Between 2014 and 2024 the WWCW made a significant contribution to government, including work on methods, and specifically the Green Book guidance on wellbeing.

## About the Youth Endowment Fund

The Youth Endowment Fund (YEF) is a charity with a mission that matters. We exist to prevent children and young people becoming involved in violence. We do this by finding out what works and building a movement to put this knowledge into practice.

Children and young people at risk of becoming involved in violence deserve services that give them the best chance of a positive future. To make sure that happens, we'll fund promising projects and then use the very best evaluation to find out what works. Just as we benefit from robust trials in medicine, young people deserve support grounded in the evidence. We'll build that knowledge through our various grant rounds and funding activity. And just as important is understanding children and young people's lives. Through our Youth Advisory Board and national network of peer researchers, we'll ensure they influence our work and we understand and are addressing their needs. But none of this will make a difference if all we do is produce reports that stay on a shelf.

Together we need to look at the evidence and agree what works, then build a movement to make sure that young people get the very best support possible. Our strategy sets out how we'll do it. At its heart it says that we will fund good work, find what works and work for change. You can read it [here](#).

## About the Wellbeing Top-Up Fund.

The WWCW Wellbeing Top Up Fund will explore the impact that policy interventions can have on people's wellbeing across a range of policy areas by funding additional wellbeing data collection on 10 existing studies. This approach will begin to develop a step change in our understanding of the wellbeing impacts of various policy interventions through a low-cost programme that can 'piggyback' on trials that are already in the field.

## Background

### Literature review and evidence for equipoise

This trial builds on a YEF pilot evaluated by the Metropolitan Manchester University, which concluded that an efficacy cluster RCT was the most feasible option to evaluate this

intervention at a larger scale. As highlighted in the final report, the primary assertion of RFL's Educate Mentoring Programme is its commitment to empowering young individuals to make positive choices and contribute constructively to society through an inclusive and supportive mentoring framework. The concept of youth mentoring is broadly used but lacks a precise definition, encompassing formal and informal programs, face-to-face or virtual interactions, and one-to-one or group settings (Armitage, Heyes, O'Leary, Tarrega, & Taylor-Collins, 2020).

The RFL's intervention sets specific goals, utilising the social capital of the RFL Foundation staff and their association with the local RFL club to enhance the self-esteem, teamwork, skills, and wellbeing of at-risk youth. Youth mentoring emphasises building rapport and relationships, serving as a platform for various forms of support, including emotional/social assistance, advice, and skills training (McArthur, Wilson, & Hunter, 2017). It is posited that establishing a positive mentor-mentee relationship can lead to improved social connections and that mentors can act as positive role models, influencing pro-social traits in young individuals (Newburn & Shiner, 2006).

While not directly applied to sports, Giordano, Cernkovich, and Rudolph (2002)'s 'hook for change' theory has spurred interest in sport-based interventions (SBIs) within criminology, suggesting they can provide positive identity changes and alternatives to offending trajectories. This theory claims that an intervention such as mentoring through sports activities can innovatively engage young people at risk of offending and spur change in crime trajectories. Studies on SBIs, such as Chamberlain (2016) review, indicate their potential to reduce crime and anti-social behaviour when attended regularly. However, there are evidential challenges, including small sample sizes and qualitative methods relying on self-reported measures (Chamberlain, 2016). Meta-analyses on youth diversionary programs show conflicting results, with variations in research designs and target groups (Gensheimer, Mayer, Gottschalk, & Davidson II, 1986; Wilson & Hoge, 2013).

The complex needs of young individuals, including substance abuse and childhood neglect, indicate that SBIs may only be one element in addressing criminological issues (Andrews & Andrews, 2003). Historically, rugby's violent and hyper-masculine image has become more accessible and classless since the 1990s (Crowther, 2023). However, evidence for rugby's efficacy as a diversionary intervention is limited compared to other sports like boxing and football (Jump, 2021).

The Dallaglio RugbyWorks program, associated with rugby union, reports positive outcomes for young people enrolled in the pupil referral unit system (RugbyWorks Social Impact Report, 2017). Programs like RFL are seen as mechanisms for releasing stress and aggression in a positive environment, yet caution is advised against assuming catharsis solves deeper structural issues (Meek & Lewis, 2014; Pollock, 2014).

The unique aspect of RFL's program lies in its association with a high-profile RFL club, sporting interventions, and school mentoring group programs. However, the effectiveness of this combination remains challenging to ascertain due to the lack of consensus in the literature regarding the critical factors in sports-based mentoring programs. The RFL program occupies a relatively under-researched space, and its potential impact may be maximised by focusing on skill building, maintaining a consistent program, and targeting appropriate support levels for those with more complex needs (Lipsey, 2009).

## The pilot

The pilot randomised controlled trial involved ten schools and 111 pupils, with schools randomly allocated to receive the 12-week Educate Mentoring Programme or waitlist control. The pilot demonstrated that recruitment and randomisation of schools were feasible, though it required strong engagement with Rugby League foundations and allowed more time for schools to complete trial arrangements. Data collection procedures worked adequately, with a high baseline response rate (100%) and good retention at 5-month follow-up (78%). The intervention was delivered as intended. While the smaller-than-expected sample meant evidence of promise could not be evaluated, the results support the theorised mechanisms and suggest that a larger efficacy trial would be feasible if the delivery scalability can be confirmed. Key learnings for the research design include:

- recruiting more schools to achieve an adequately powered sample;
- minimising post-randomisation exclusion of pupils;
- allowing sufficient time for school recruitment;
- maintaining ongoing communication with foundations/schools and
- consistent intervention delivery and data collection protocols across sites.

## About the intervention

### Who (recipients of the intervention)

The intervention targets students in years 8 and 9 in September 2024. Students eligible for the intervention will be recruited through a scoring system based on personal characteristics. The selection of participants and the selection mechanism and criteria are explained in detail in the section Impact Evaluation below. Students within the control arm will not receive this intervention or a placebo. The business-as-usual consists of current practices schools may deploy to engage with young people for similar aims.

### What (physical or information materials used in the intervention)

The mentoring sessions are delivered using resources supplied by the Rugby Football League (RFL), explicitly designed for use with the identified groups of young people recruited into the Inspiring Futures programme. Each session has a lesson plan, classroom presentation and associated pupil worksheets. The syllabus document determines the delivery schedule. In addition to classroom learning, the participants complete a Sports Leaders qualification incorporated into the syllabus and participate in practical activities following each classroom session to consolidate learning.

### What (procedures, activities and/or processes used in the intervention)

Young people completing the Inspiring Futures programme complete surveys and questionnaires to measure their attitude to and occurrences of risky behaviours before and after the intervention. The relevant measures are the SDQ and the Short Warwick Edinburgh Mental Wellbeing Scale. Between completion, they complete 12 sessions during a 12-week

mentoring programme delivered by Rugby League coaches from the Foundation of a local professional club, who use the Inspiring Futures resources alongside their own lived experiences and the power of the badge they wear to attempt to inspire change in the young people in the sessions, having a positive outcome on their future choices and behaviours. The follow-up stage for outcome testing occurs five months after the conclusion of the 12-week program, primarily due to logistical considerations.

## Who (intervention providers/implementers)

The RFL oversees the programme delivery by recruiting suitable Foundations to identify targeted schools to deliver Inspiring Futures. Those Foundations deploy staff with relevant qualifications and skills to connect with the young people chosen by the schools for intervention. The RFL remains in regular contact with the Inspiring Futures lead and mentors at the Foundations, and conducts quality assurance calls and visits to ensure delivery is consistent and satisfactory.

## Theory of change (TOC)

This section set out the theory of change (TOC) to evaluate the intervention. The building blocks of the TOC are:

### Context/Need

- RFL programme has been developed to address poor mental health and a perceived lack of opportunity, two key issues affecting young people from deprived communities in the North of England.
- Children with poor mental wellbeing are more likely not to attend or be truant from school and have negative relationships with their peers and family members. They are also more likely to engage in risk-taking and low-level anti-social behaviour as a child, putting them at a higher disposition of committing further crimes (such as arson and drug-related offences) in late adolescence and early adulthood. This ultimately results in them being at a higher risk of receiving a prison sentence than their counterparts with positive mental health.
- Mentoring programmes have been shown to positively impact on outcomes which are often associated with later involvement in violence (e.g., substance misuse, behavioural difficulties, educational outcomes, social connects, and emotional health) (Ipsos and Gaffney, Jolliffe, and White, 2022). Having a mentor can reduce the likelihood of offending by providing a positive role model.<sup>[1]</sup>
- The aim of using sport is to provide meaning and achievable aspirations by using relatable voices and their experience, to engage with tertiary offenders, to provide hope and to steer them away from being drawn into anti-social behaviour with youths who are considered high-risk or already engaging in criminal behaviour. Chamberlain's (2013) review of the effectiveness of sports-based interventions (SBIs) in reducing rates of offending/re-offending found that many interventions were associated with reduced crime rates and antisocial behaviour – provided that young people attended regularly.

### Target

- Young people aged 12-14 with a record of poor behaviour and or attendance at school.
- These young people are at risk of becoming involved in crime and anti-social behaviour. They face challenges like poverty, childhood adversity, social exclusion, and low educational attainment.

### Inputs

- Foundation coaches receive internal 1 weeklong RFL training (and training from partner organisations) on the programmes 12 weeks syllabus, REDI and Trauma Informed approach training. Training is delivered by RFL, Foundation Delivery Partners (Leigh Leopards and Leeds Rhinos) and delivery service Upshot.
- School Facilities are required as sessions take place on the school grounds.
- Equipment coaches required to run the mentoring sessions are laptops, projectors, flipcharts, worksheets, and sporting equipment.
- Staff time from leadership, senior operational managers, and frontline staff.
- Additional staff also recruited to support delivery: 1. An inspiring futures manager at RFL, 2. Each foundation will recruit at least 1 member of delivery staff.
- The Inclusion and Diversity Board and the RFL Youth Board will support the delivery of the intervention by providing strategic guidance.

### Activities

- 12 weeks of group sessions with a consistent adult mentor. The CYP will receive weekly 2-hour RFL mentoring sessions, delivered face to face. The CYP will attend 12 sessions in total over the programme. Sessions will be conducted at the CYP's school
- The aims of the sessions are to:
  - To build resilience, self-confidence and character in young people.
  - To support positive choices and enable young people to engage positively with society.
  - To improve critical thinking skills.
  - To provide a healthy, stable, supportive framework at home and school.
- Mentoring sessions are grouped into three broad topics —personal wellbeing, collaboration, and leadership. Sessions on personal wellbeing are focused on self-control and stress, drugs and alcohol awareness, self-esteem & and goal setting, and healthy lifestyles. The collaboration session delves into trust, teamwork, and volunteering—lastly, the leadership sessions centre around leadership, organisational skills, and inspirational people.

### Mechanisms

The sporting focus element of the intervention encourages CYP (who have an initial interest in sport), who may otherwise have developed a mistrust of adults, statutory agencies and authority figures, to engage with Inspiring Futures. Young people who are interested in sports may develop an interest in Rugby specifically, and those already interested in Rugby will build on their interest, leading to sustained engagement. Through the rugby sessions, CYP build a trusted relationship with their mentor. This is the key mechanism of change. Building rapport and a relationship is central to any form of youth mentoring. It is then utilised to provide a range of assistance from emotional/social support to advice and, in some cases, skills, e.g. employability training (McArthur, Wilson & Hunter, 2017). In discussions in

mentoring sessions, having built a trusted relationship mentors are then able to support CYP to:

- Reflect upon behaviour, experiences and choices.
- Develop a better understanding of consequences and risk, and move away from risk-taking behaviours.
- Mentors may develop into alternative positive role models, demonstrating and encouraging pro-social values and behaviours. Literature suggests that the mentors themselves can provide a vehicle for change by presenting themselves as positive role models with a variety of pro-social traits for the young person to emulate (Newburn & Shiner, 2006).
- Identify their strengths and protective factors in their lives and understand how to build on these.
- Explore how to deal with difficult situations, developing increased self-efficacy to explore situations independently.

The Leadership element instils confidence and increases self-esteem by allowing the CYP to solve problems creatively, work in a team, and provide an opportunity to develop responsibility. As their self-confidence increases, so does their motivation to work hard at a goal or try new things. They will also strengthen their sense of control and self-identity. They will also build skills essential to employability. Developing and practising "soft transferable skills" as a leader, like communicating, collaborating, and problem-solving, supports their education and employment journey.

The volunteering element creates a sense of belonging in their local community. In addition, collaborating with other CYPs allows them to develop a new network of peers (other CYPs taking part in the programme) and peer- to – peer support with CYPs with similar experiences.

Sessions are delivered in schools wherever possible, encouraging engagement in Inspiring Futures and can positively affect young people's attitude towards school. Young people may now see school as a more positive environment, meaning attendance and behaviour in school, increasing attainment achievement and prospects for further progression.

### Outcomes

There are **primary and secondary outcomes** within the scope of this evaluation. The mentoring sessions are expected to address behavioural difficulties, including internalising and externalising behaviours and pro-social behaviour and wellbeing. Educational outcomes are also expected to improve.

Over the long term, these primary and secondary outcomes are expected to contribute to less risky behaviour, reduction in anti-social and criminal activities, decreased prevalence of smoking and drug use, and a lower likelihood of reoffending. However, assessing these long-term outcomes lies beyond the timing of the present evaluation and, hence, out of the scope of this evaluation. At the end of the evaluation, Ipsos will share all outcome data with YEF for the YEF data archive.



## Trial design

<b>Trial design, including the number of arms</b>		<i>Two-arm, cluster-randomised</i>
<b>Unit of randomisation</b>		<i>Cluster (school)</i>
<b>Stratification variables (if applicable)</b>		<i>Foundation, above or below the % of eligible students for free school meals measured by the indicator FSM6<sup>1</sup></i>
<b>Primary outcome</b>	variable	<i>Behavioural difficulties</i>
	measure (instrument, scale, source)	<i>Externalising behaviour: SDQ – combined conduct and hyperactivity scales (0-20) - survey</i>
<b>Secondary outcome(s)</b>	variable(s)	<i>Internalising behaviour Pro-social behaviour Children's wellbeing Number of temporary exclusions Number of unauthorised absences Number of authorised absences Amount of physical activity</i>
	measure(s) (instrument, scale, source)	<i>Internalising behaviour: SDQ – combined emotional problems and peer problems scales (0-20) - survey Pro-social behaviour: SDQ – Pro-social behaviour scale (0-10) - survey Children's wellbeing: Short Warwick Edinburgh Mental Wellbeing Scale - survey Number of temporary exclusions: Annual number - Administrative data Number of unauthorised absences: Annual number - Administrative data Number of authorised absences: Annual number - Administrative data Amount of physical activity: Self-reported question (0-7) - survey</i>
<b>Baseline for primary outcome</b>	variable	<i>Behavioural difficulties</i>
	measure (instrument, scale, source)	<i>Externalising behaviour: SDQ – combined conduct and hyperactivity scales (0-20) - survey</i>
<b>Baseline for secondary outcome</b>	variable	<i>Internalising behaviour Pro-social behaviour Children's wellbeing Number of temporary exclusions Number of unauthorised absences Number of authorised absences Amount of physical activity</i>
	measure (instrument, scale, source)	<i>Internalising behaviour: SDQ – combined emotional problems and peer problems scales (0-20) - survey Pro-social behaviour: SDQ – Pro-social behaviour scale (0-10) - survey</i>

<sup>1</sup> This refers to the situation when a student holds a historical FSM status. Following their FSM eligibility end date, they will retain the “Ever 6 FSM” classification for the subsequent six years. To illustrate, if a student was eligible for FSM from 1st September 2018 until 31st October 2020, their Ever 6 FSM status will continue until 31st October 2026, encompassing a 6-year duration beyond their FSM end date.

		<i>Children's wellbeing: Short Warwick Edinburgh Mental Wellbeing Scale - survey</i> <i>Number of temporary exclusions: Annual number - Administrative data</i> <i>Number of unauthorised absences: Annual number -Administrative data</i> <i>Number of authorised absences: Annual number - Administrative data</i> <i>Amount of physical activity: Self-reported question (0-7) - survey</i>
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## Wellbeing measurement

This trial will use the Short Warwick Edinburgh Mental Wellbeing Scale (SWEMWBS) to measure wellbeing at baseline and follow-up after the intervention.

The SWEMWBS is a shortened version of the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS) created to facilitate the monitoring of mental wellbeing within the general population. It is also used to assess the effectiveness of projects, programs, and policies to enhance mental wellbeing.

In 2009, the Short Warwick–Edinburgh Mental Wellbeing Scale (SWEMWBS) was developed using Rasch modelling to improve the original 14-item scale, providing a more accurate interval measure of mental wellbeing and being more accessible to complete. Mental wellbeing, rooted in positive psychology, is now a core health indicator in some regions, with countries adopting (S)WEMWBS for this purpose. This concept is relevant in mental health services and primary care and is linked to patient-centred and recovery agendas. While the best measurement approach is debated, a consensus supports the framework of WEMWBS, which includes both Hedonia (feeling good) and Eudaimonia (functioning well). SWEMWBS also covers these concepts but focuses more on functioning well. The relationship between mental illness and wellbeing is debated, but studies show a high inverse correlation between WEMWBS and respected measures of mental illness (Shah, Cader, Andrews, McCabe, & Stewart-Brown, 2021).

The SWEMWBS comprises seven out of the 14 statements in the WEMWBS, explicitly focusing on thoughts and feelings related to functioning rather than pure emotions. The Short Warwick–Edinburgh Mental Well-Being Scale (SWEMWBS) consists of the following seven items, each assessing different aspects of mental wellbeing:

1. I've been feeling optimistic about the future
2. I've been feeling useful
3. I've been feeling relaxed
4. I've been dealing with problems well
5. I've been thinking clearly
6. I've been feeling close to other people
7. I've been able to make up my own mind about things

Respondents rate their experiences over the past two weeks for each item on a 5-point Likert scale:

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time

Data will be collected electronically by the evaluation team (Ipsos) using Dimensions, which is a survey software owned by Ipsos.

## Analytical approach

The analytical approach adopted for the SWEMWBS follows the same as for the other outcomes. The quantitative data analysis will start with descriptive statistics and multilevel regression analysis to account for the nested nature of data, namely, students within schools.

A descriptive analysis will consist of percentages of:

- The total count of students enlisted in the trial by school, age, sex, ethnicity, and school-specific figures;
- The total count of trial participants with baseline data from school and the percentage of complete records by school and overall;
- The total number of students in intervention schools who withdrew from the intervention before its completion, by school and overall;
- The total count of students withdrawing from the trial, by arm and school;
- The total count of schools withdrawing from the trial by arm.

The multilevel regression analysis will be conducted with the post-test outcome (SWEMWBS) as the dependent variable and the following variables as independent variables:

- a school-level dummy variable indicating treatment,
- the pre-test outcome measure
- and a dummy variable for each Foundation (stratifying variable)

This is described by the equation below:

$$SWEMWBS_{ij} = \beta_0 + \beta_1 T_j + \beta_2 X_{ij} + \delta_j + \varepsilon_{ij}$$

Where  $SWEMWBS_{ij}$  is the post-test response for student  $i$  in school  $j$ ,  $T_j$  is a binary indicator assuming '1' if the school is within the intervention arm and '0' otherwise. Moreover,  $\beta_1$  is the estimated average causal effect of the intervention,  $X_{ij}$  is the pre-test outcome covariates of student  $i$  in school  $j$ ,  $\delta_j$  is a random effect at the school level, and  $\varepsilon_{ij}$  is a random effect at the individual and school level, assumed to be uncorrelated with  $\delta_j$ .

Another assumption is that random effects follow a normal distribution within the population, characterised by a mean of zero and variance represented by  $\sigma^2$  and  $\tau^2$  for within-cluster variance. Thus, the intraclass correlation coefficient ( $\rho$ ) is defined as  $\sigma^2/(\sigma^2 + \tau^2)$ .

The pooled standard deviation for the effect size will be obtained by running an empty model.

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