

EVALUATION PROTOCOL – ADDENDUM

**AudioActive’s SHIFT mentoring project.
A randomised controlled trial efficacy
study with internal pilot.**

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Protocol Addendum ; Wellbeing Top Up

Trial Name	AudioActive's SHIFT mentoring project. A randomised controlled trial efficacy study with internal pilot.
Delivery Partner	AudioActive
Evaluation PI	Dr Kathryn Lord, Caitlin Hogan-Lloyd, Dr Stephen Boxford
Funding Organisation	Youth Endowment Fund
Link to Original Trial Protocol	https://youthendowmentfund.org.uk/wp-content/uploads/2024/08/Shift-Evaluation-Protocol-October-2024-1.pdf
Wellbeing measures used	Shortened Warwick Edinburgh Mental Wellbeing Scale (S-WEMWBS)

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 30th 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

Introduction

This is an efficacy with internal pilot study trial protocol. The efficacy and internal pilot study will include a two-armed parallel randomised controlled trial (RCT) evaluation and implementation and process evaluation (IPE) of AudioActive's SHIFT mentoring programme.

The efficacy study including the internal pilot trial will begin in May 2024 (fieldwork and delivery will begin in October 2024), and final reporting will take place in February 2027 and be finalised in May 2027.

This section provides:

- An overview of the local context of the SHIFT mentoring programme.
- The rationale for the SHIFT mentoring model.
- The rationale for an efficacy study approach.

Local context

The SHIFT mentoring programme is a voluntary 1:1 music mentoring intervention. It was developed by AudioActive in 2018 when they were commissioned by Brighton and Hove Public Health to deliver diversionary activities to young people involved in substance misuse or risky sexual behaviour, including those at risk of sexual and/or criminal exploitation. AudioActive were then commissioned by West Sussex Violence Reduction Partnership (VRP) to adapt SHIFT to a violence reduction model which was delivered in Crawley, and in 2019 East Sussex VRP commissioned the same model in Hastings for around six months.

With YEF funding, the programme will be delivered across six sites in East and West Sussex and Brighton and Hove local authorities: Eastbourne, Hastings, Brighton and Hove, Crawley, Horsham, and Worthing. Eastbourne and Hastings will be new delivery areas for SHIFT in East Sussex.

AudioActive has existing relationships with key personnel in East Sussex County Council, including statutory services such as Children's Services and the Youth Offending Service, which will facilitate the introduction of SHIFT in Eastbourne and Hastings. Additionally, AudioActive has three existing activities running in Eastbourne as well as a strong network of contacts within the voluntary sector in Hastings. To further ensure the uptake of SHIFT within these new areas, AudioActive will focus on relationship building with key referral partners in Eastbourne and Hastings as part of their comprehensive onboarding process through regular, ongoing meetings.

The programme will work with young people who have offended or are at risk of offending due to risk factors such as violent behaviour, educational exclusion and associations with peers involved in offending. It aims to support young people to develop more positive relationships, improve their behaviour, and enhance their wellbeing, with the ultimate aim of reducing delinquent behaviour. More information about the programme and who it supports can be found in Sections 2.2 and 2.3.

The present, YEF funded work is being commissioned in the context of local research which shows:

- Concern in Sussex over what the Violence Reduction Partnership considers to be a high proportion of serious violent crime committed by young people. Offending committed by under 25-year-olds represents 42% of all serious violent crime in Sussex and 15–18-year-olds account for 18% (Sussex Violence Reduction Partnership, 2022).
- Worse or increasing levels of some indicators that may increase young people’s risk of involvement in violence in Sussex compared with the national rate. Rates of persistent absenteeism are worse in both East Sussex and Brighton and Hove than the national average (23% in East Sussex and 24% in Brighton and Hove compared to 22.5% in England)¹. The percentage of permanent exclusions in primary and secondary schools in West Sussex is slightly worse than the rate in England (0.07 compared to 0.06) (Sussex Violence Reduction Partnership, 2022).
- High numbers of young people associated with violence in Sussex and participating in VRP projects have been excluded or are absent from school, have special educational needs, have low educational attainment, have poor mental health and relationships, or are experiencing criminal exploitation (Sussex Violence Reduction Partnership, 2022).
- Government statistics indicate that minoritised ethnic groups are over-represented throughout the criminal justice system; for instance, in 2020 a higher proportion of prosecutions against children were for Black (12%) and Mixed ethnic (14%) groups than for White (5%) defendants (Ministry of Justice, 2021). The SHIFT programme aims to address risk factors and strengthen preventative factors associated with offending behaviour with the aim of reducing the likelihood of young people including those from minoritised ethnic backgrounds from involvement with the criminal justice system.

¹ <https://explore-education-statistics.service.gov.uk/data-tables/pupil-absence-in-schools-in-england/2021-22?subjectId=aeab75a7-c293-432b-97bf-08db208dd21b> Last accessed: 22 February 2024

Rationale for the SHIFT model

The SHIFT music mentoring model aims to respond to the challenge of serious youth violence in East and West Sussex and Brighton and Hove outlined above. The response is based on evidence which shows:

- Mentoring programmes can positively impact on outcomes which are often associated with later involvement in violence, e.g., substance misuse, behavioural difficulties, educational outcomes, social connects, emotional health (Gaffney, Jolliffe, and White, 2022).
- ‘Non-traditional approaches’ that involve creative, dynamic and multisensory music-based strategies can lead to improvements in engagement and mental health for adolescents in diverse contexts (Rowdin et al., 2022).
- Interventions focusing on pro-social leisure or recreation should be structured or have a skills-based focus to be potentially beneficial in preventing offending (HM Inspectorate of Probation, 2023).
- Arts-based interventions may lead to positive emotions, the development of a sense of self, development of positive personal relationships for young people at risk of, or already involved in, violence and/or crime (Mansfield et al, 2024). However, there is a need for more rigorous quantitative evaluation evidence to support this (Mansfield et al, 2024; Daykin et al, 2011).
- The SHIFT mentoring programme may have a positive impact on young people’s mood, confidence, emotional regulation, behaviour, relationships, motivation and attitude, according to qualitative evaluation evidence (National Children’s Bureau, 2023).
- Evaluations of music-based interventions similar to SHIFT which suggest that they may:
 - Improve mental wellbeing (Noise Solution, 2023)
 - Encourage engagement with statutory services (e.g., increased likelihood of young people attending YOT appointments) (Caulfield et al., 2020).
- Targeted programmes which consider the individual characteristics and needs of young people are more likely to reduce attrition and reoffending rates (Christensen, Hagler, and Stams et al., 2020).

- Voluntary participation tailored to individual interests, taking a trauma informed approach encourages better engagement by young people with services than statutory interventions for this cohort (Big Lottery Fund, 2018).

Rationale for the efficacy RCT

The rationale for an efficacy randomised controlled trial (RCT) with an internal pilot trial and implementation and process evaluation of SHIFT is strong. A recent YEF mixed methods systematic review on the effects of arts interventions for young people at risk of, or already involved in, violence and/or crime on behavioural, psychosocial, cognitive, and offending outcomes found insufficient evidence from quantitative studies to support or refute the effectiveness of arts interventions for any outcome. Evidence from qualitative studies reviewed suggested that arts-based interventions may lead to positive emotions, the development of a sense of self, successful engagement in creative processes and practices, and development of positive personal relationships for young people at risk of, or already involved in, violence and/or crime (Mansfield et al, 2024).

Evaluating SHIFT therefore provides an excellent opportunity to rigorously examine any effect of music-as-a-‘hook’ interventions on violence-related outcomes via an independent evaluation using a robust RCT design.

To date, there have been few robust impact evaluations examining the effectiveness of arts-based interventions on violence-related child outcomes. Research examining the impact of arts engagement on young people’s involvement in violence and crime is in the very early stages and there is therefore a clear need to develop this evidence base. Similarly, there is sparse evidence to date from robust impact evaluations of music programmes specifically, especially those delivered with young people at risk of, or already involved in, violence and/or crime (Mansfield et al, 2024).

Moreover, across the UK there is limited robust evidence for what works to reduce offending among young people and in particular, the evidence is limited for the long-term effectiveness of interventions that work with young people aged 11-17 at risk of involvement in crime (Ross et al., 2011). There is emerging evidence that programmes that include mentoring approaches may support young people to stay out of crime, but more research is needed in this area (Jolliffe and Farrington, 2008). While the YEF Toolkit suggests the evidence for mentoring is moderately strong, this is for mentoring programmes as a whole and not with a specific focus on young people already involved in crime or violence. An efficacy RCT study of SHIFT will therefore contribute to knowledge and understanding of what works to reduce offending for this cohort.

About the intervention

Overview

This section provides an overview of AudioActive's SHIFT project (SHIFT). It covers:

- SHIFT's theory of change
- Who does SHIFT aim to work with?
- What is required to deliver SHIFT?
- How does SHIFT work with young people?
- What does SHIFT aim to achieve?
- The support that will be received by the control group.

Theory of change

Figure 1 presents AudioActive's theory of change which was co-developed by Cordis Bright and SHIFT colleagues. It is based on:

- Documentation provided by AudioActive.
- AudioActive's existing theory of change.
- Theory of change and evaluation co-design workshops between Cordis Bright and AudioActive.
- A rapid review of literature to root the theory of change in the existing evidence base.

Figure 1: SHIFT programme theory of change

Why: evidence-based observation	Why: evidence-based need	Who: target population	How: intervention activities that will address the need	What: short-term outcome	What: medium-term outcome	What: long-term outcome
<p>The YEF-funded SHIFT music mentoring programme has been developed to address:</p> <p>1) A high proportion of serious violent crime committed by young people in Sussex.²</p> <p>2) Worse or increasing levels of some indicators that may increase a young person's risk of involvement in violence in Sussex compared with the national rate, including absenteeism and permanent exclusion.³⁴</p> <p>3) Local analysis showing that high numbers of young</p>	<p>SHIFT seeks to impact on areas of need which are known to increase propensity for involvement in offending. These include:</p> <p>A) Difficulties with emotional regulation. B) Low levels of aspiration. C) Low levels of pro-social skills/values D) A lack of positive relationships with pro-social peers. E) School exclusion and entering pupil referral units.</p> <p>SHIFT also seeks to support young people with their wellbeing. The prevalence of mental health needs amongst young people within the youth justice system has been found to be higher than within the general</p>	<p>SHIFT supports young people living or attending school in East Sussex, West Sussex, or Brighton and Hove, aged 11-17, who have either been:</p> <ol style="list-style-type: none"> 1. Convicted of a criminal offence. 2. Arrested, but have not received a criminal conviction. 3. Considered at high/medium risk of offending due to demonstrating one or more of the following factors: <ol style="list-style-type: none"> a) Carrying weapons such as knives. b) Known association with high-risk peers known to be 	<p>Key features of the SHIFT mentoring model:</p> <ul style="list-style-type: none"> • 18 sessions of 90 minutes, delivered over a six-month period. • One-to-one delivery to facilitate trusted relationship with mentor. • Delivered in: school as preference to support school attendance, appropriate community venues or at AudioActive facilities. • Music-based sessions. Music acts as a therapeutic tool and outlet and improves confidence. • Young people will focus on a musical project and may work towards a City 7 Guilds affiliated digital badge • Discussion-based mentoring. Opportunities for 	<p>Trusted relationship with mentor. Young people:</p> <ul style="list-style-type: none"> • Build a trusted relationship with their mentor. • Open up to their mentor about their feelings and emotions. • Feel listened to, understood and like their needs are being met. <p>Skills/knowledge gained from mentor. Young people:</p> <ul style="list-style-type: none"> • Learn coping strategies to 	<p>Young people:</p> <ul style="list-style-type: none"> • Demonstrate improved behaviour, less risk-taking behaviour and improved emotional regulation. • Report improved relationships with pro-social peers and family. • Report feeling more positive about the future and the opportunities available to them. • Access other relevant support 	<ul style="list-style-type: none"> • Young people report improved wellbeing. • Young people's involvement in delinquent behaviour is reduced/prevented.

² [VRP 2022 Annual Report V2-Portrait.indd \(sussex-pcc.gov.uk\)](#) Last accessed 24 February 2024.

³ <https://explore-education-statistics.service.gov.uk/data-tables/pupil-absence-in-schools-in-england/2021-22?subjectId=aeab75a7-c293-432b-97bf-08db208dd21b> Last accessed 22 February 2024.

⁴ Other indicators listed include children with social, emotional and mental health needs, hospital admissions for self-harm in children, looked after children with a cause for concern around wellbeing, and rate of children on a child protection plan. See: [VRP 2022 Annual Report V2-Portrait.indd \(sussex-pcc.gov.uk\)](#) Last accessed 22 February 2024.

Why: evidence-based observation	Why: evidence-based need	Who: target population	How: intervention activities that will address the need	What: short-term outcome	What: medium-term outcome	What: long-term outcome
<p>people associated with violence in Sussex and participating in VRP projects have: been excluded or are absent from school; special educational needs; low educational attainment; poor mental health and relationships, or are experiencing criminal exploitation.⁵</p> <p>4) Local stakeholders recognising that the available statutory responses on their own are not working effectively to support young people and reduce their involvement in serious youth violence in Sussex.</p> <p>5) Local stakeholders recognising that many young people are not engaging with or are 'falling through the cracks'</p>	<p>population of adolescents.</p> <p>To do this, SHIFT takes a personalised one-to-one music mentoring approach. This is because:</p> <ul style="list-style-type: none"> • Mentoring programmes have been shown to positively impact on outcomes which are associated with offending (Gaffney, Jolliffe, and White, 2022), particularly when the support is frequent and intensive. • There is some evidence that arts-based interventions may lead to positive outcomes for young people at risk of, or already involved in, violence and/or crime (Mansfield et al, 2024). However, there is a need for more rigorous quantitative evaluation evidence to support this (Mansfield et al, 2024; Daykin et al, 2011). • Tailored programmes which consider the individual characteristics and 	<p>involved in criminal activity.</p> <p>c) Known to have siblings already involved in criminal activity.</p> <p>d) Displaying overt coercive or violent behaviour.</p> <p>e) Excluded or at risk of exclusion from mainstream education (i.e. persistent absences and suspension) due to displaying behaviours including offending, bullying, aggression, violence.</p> <p>f) Signs of possible criminal exploitation e.g., burner phones, unexplained change in finances, missing episodes.</p> <p>g) Drug use or possession.</p>	<p>reflection are built in flexibly by mentors in response to young people's needs. Discussion topics covered are:</p> <ol style="list-style-type: none"> 1) Behaviour and emotional regulation. 2) Mental health and wellbeing. 3) Relationships with family. 4) Relationships with peers. 5) Keeping safe. 6) Involvement in offending. 7) Engagement in education. 8) Feelings about the future and career opportunities. 9) Pro-social identity. <p>The programme structure:</p> <p>Mentors develop a plan for the 18 sessions, structured around three phases with a check-in/review session at the end of each phase. The plan will be applied</p>	<p>overcome challenges.</p> <ul style="list-style-type: none"> • Gain an understanding of pro-social values. • Gain an understanding of where they can get help if they need it and feel more able to ask for help. • Gain knowledge and awareness of the impact of crime and violence. <p>Value gained from music activities.</p> <p>Young people:</p> <ul style="list-style-type: none"> • Are motivated to sustain engagement in sessions. • Feel more able to express themselves through their music. 	<p>services and activities to meet needs and continue to divert them from negative influences.</p> <ul style="list-style-type: none"> • Demonstrate improved engagement in education, including (where applicable) returning to school, or increased attendance and fewer exclusions. • Develop a positive and pro-social identity. • Feel safer. • 	

⁵ https://www.sussex-pcc.gov.uk/media/6820/vrp_2022_annual_report.pdf Last accessed 22 February 2024.

Why: evidence-based observation	Why: evidence-based need	Who: target population	How: intervention activities that will address the need	What: short-term outcome	What: medium-term outcome	What: long-term outcome
<p>of statutory provision, putting them at increased risk of offending.</p> <p>6) A belief amongst local stakeholders that arts-based interventions may provide a better way of engaging young people who have not engaged with statutory services, to prevent involvement in offending.</p>	<p>needs of young people are more likely to reduce attrition and reoffending rates (Christensen, Hagler, and Stams et al., 2020) (Big Lottery Fund, 2018).</p>	<p>Young people will not be eligible if they:</p> <ol style="list-style-type: none"> 1. Are currently serving a custodial sentence. 2. Have previously received multiple custodial sentences. 	<p>flexibly and will be revisited regularly.</p> <p>Aim setting:</p> <p>Mentors work with young people to identify areas of musical and personal development and will record these. Progress will be reviewed within the check-in sessions.</p>	<ul style="list-style-type: none"> • Develop skills and gain confidence in music-making, providing them with a sense of achievement and pride 		

Who does SHIFT work with?

Eligibility criteria

The target group for AudioActive and therefore the RCT is young people aged 11-17 who meet all three of the following inclusion criteria:

- Criteria 1: have either been:
 - Convicted of a criminal offence.
 - Arrested, but have not received a criminal conviction.
 - Considered at high/medium risk of offending due to demonstrating one or more of the following factors:
 - a) Carrying weapons such as knives.
 - b) Known association with high-risk peers, known to be involved in criminal activity.
 - c) Known to have siblings already involved in criminal activity.
 - d) Displaying overt coercive or violent behaviour.
 - e) Excluded or at risk of exclusion from mainstream education i.e. persistent absences and suspension due to displaying behaviours including offending, bullying, aggression, violence.
 - f) Signs of possible criminal exploitation e.g., burner phones, unexplained change in finances, missing episodes.
 - g) Drug use or possession.
- Criteria 2: Are living or attending school in East Sussex, West Sussex, or Brighton and Hove.
- Criteria 3: Are willing to voluntarily engage with and complete SHIFT, as demonstrated through:
 - Confirming willingness to engage following initial meeting and detailed explanation of the project.
 - Provision of informed, written consent to participate in the study.

Young people will not be eligible if they are currently serving a custodial sentence or have previously served multiple custodial sentences. Young people will also not be eligible if they

are accessing any other arts-based programmes or programmes using ‘music-as-a-hook’. These are the only exclusion criteria that would be applied if the young person had satisfied the inclusion criteria.

Young people convicted of an offence or who have been arrested (the ‘tertiary cohort’) are anticipated to make up 15% of the cohort. Those who are deemed to be at high/medium risk of offending (the ‘secondary cohort’) are anticipated to make up 85%.

Securing appropriate referrals

During the mobilisation period the SHIFT Coordinators will deliver a communication and engagement strategy to all referral partners within their ‘professionals’ network’ to ensure referrers have a consistent understanding of the aims, approach and inclusion and exclusion criteria for SHIFT. This will include sharing clear written information with partners and attending their team and other relevant meetings to deliver detailed presentations and training. A short video will also be produced which can be circulated to referral partners, explaining the SHIFT programme and the RCT.

The communication and engagement strategy will be implemented and ongoing throughout the lifetime of the project, ensuring that referring partners’ awareness, knowledge and understanding is maintained and any lack of understanding or issues can be proactively addressed.

Referrals into SHIFT will be monitored, and if inappropriate referrals are being received, referrals are not in line with anticipations, or certain demographic groups appear underrepresented, further communication and discussions will take place between AudioActive and the referral partners to address these issues. If required, the communication and engagement strategy will be updated. More information on referrals and screening for eligibility criteria is available in the full protocol, Section 3.7.1.

Supporting young people from diverse backgrounds

AudioActive is an inclusive service that celebrates diversity and is equipped to support young people from a variety of cultural or ethnic backgrounds with a range of needs. A key aim of the communication strategy with referral partners (see above) will be to actively ensure that referral partners understand and promote this approach.

AudioActive expects to recruit and support young people from a range of ethnic backgrounds, and in the past has supported a more diverse cohort than is represented in the general population of East and West Sussex and Brighton and Hove. Young people from ethnic minority backgrounds are over-represented in cohorts which refer into the programme, including those who have been excluded from school or who are accessing youth justice services. SHIFT will also specifically target organisations which represent and support young

people from minoritised backgrounds, as part of its communication strategy with referral partners.

The anticipated ethnic make-up of the SHIFT cohort for this study is shown in Figure 2 below, compared to the figures for East and West Sussex and Brighton and Hove. This is an estimate only, based on previous experience of delivery in SHIFT’s existing areas. As SHIFT will be delivered in some new areas as well as areas where it has been operating, it is difficult to currently anticipate the breakdown by ethnicity in these areas. However, data will be monitored against the local populations of the areas in which Audio Active is working as part of the study.

Figure 2: Ethnic breakdown of anticipated SHIFT cohort and population figures for West and East Sussex and Brighton and Hove

Ethnic group	Estimated % supported by SHIFT	West Sussex ⁶ population breakdown	East Sussex ⁷ population breakdown	Brighton and Hove population breakdown ⁸
Asian or Asian British	6%	4%	1%	5%
Black, Black British, Caribbean or African	7%	1%	2%	2%
Mixed or Multiple ethnic group	11%	2%	2%	5%
Other ethnic group	6%	1%	1%	3%
White	70%	91%	94%	85%

AudioActive also anticipates supporting children with special educational needs and disabilities (SEND) and those who are children looked after (CLA). Both groups experience vulnerabilities which result in increased risk of involvement in offending or criminal exploitation. 25% of children in youth offender institutions (YOI) and secure training centres (STCs) have a SEND⁹, compared to 17% of school pupils¹⁰. A 2023 study found that 33% of care-experienced children received a youth justice caution or conviction, compared with 4% of those without care experience¹¹. Based on previous delivery of SHIFT, it is estimated that around 25% of the cohort included in this trial will have SEND and 10% will be CLA.

AudioActive is committed to considering and promoting diversity and inclusion and to ensuring that SHIFT mentors can effectively support young people from all of these groups.

⁶ See: <https://jsna.westsussex.gov.uk/assets/pdf/census-briefing/WSX-census-21-ethnicity-briefing.pdf> Last accessed: 22 February 2024

⁷ See: <https://www.eastsussexjsna.org.uk/media/s1nkbbbox/2021-census-ethnicity-language-and-religion-briefing.pdf> Last accessed: 22 February 2024

⁸ See: <https://www.brighton-hove.gov.uk/census-results-2021#tab--country-of-birth-nationality-english-language-proficiency-ethnicity-and-religion> Last accessed: 22 February 2024

⁹ https://adcs.org.uk/assets/documentation/ADCS_AYM_LGA_A_Youth_Justice_System_that_Works_for_Children_FINALx.pdf Last accessed: 22 February 2024

¹⁰ <https://explore-education-statistics.service.gov.uk/find-statistics/special-educational-needs-in-england> Last accessed: 22 February 2024

¹¹ https://www.adruk.org/fileadmin/uploads/adruk/Documents/Policy_Briefings/Policy-briefing-Katie-Hunter.pdf Last accessed: 22 February 2024

AudioActive's Equality, Diversity and Inclusion Policy will be embedded in SHIFT programme practice around recruitment and training of staff, engaging with referral partners, and delivery of the intervention.

Demographics including ethnicity, SEND and care status, as well as children who qualify for free school meals, will be monitored and data collected by AudioActive from referral, throughout project delivery inform the evaluation in line with YEF's demographic data policy¹². The approach will be discussed and agreed between Cordis Bright, AudioActive and YEF and modified if required.

For more information on how the evaluation and programme delivery will incorporate diversity, equity and inclusion considerations, please see Section 8.

What is required to deliver SHIFT?

To deliver its intended activities and outcomes, AudioActive requires the following inputs:

Funding:

- Staff costs (delivery): £860,532
- Staff costs (Central/management/training): £268,476
- Equipment and materials: £6,650
- Travel and expenses (including incentives): £130,882
- Other expenses (discretionary YP expenses, contingency, wind-down costs, YP translation/speech and language): £198,253
- Overheads: £198,290
- **Total: £1,663,083**

Facilities: Access to emotionally and physically safe spaces, including schools or other educational settings, rented music studios, youth centres or other community settings.

Personnel: The funding will support the following full-time equivalent (FTE) roles:

- Senior programme manager (x1).
- Programme managers (x2).
- Programme coordinators (x2).

¹² See: <https://youthendowmentfund.org.uk/wp-content/uploads/2023/06/YEF-Policy-Demographic-data-June-2023.pdf> Last accessed: 22 February 2024

- Music leader mentors (x 8-9 0.6 FTE and 17-19 0.4 FTE).
- Local authority-based control group practitioners¹³ (x3 0.5 FTE, 1 per local authority area). For more information about the role of these practitioners, please see Section 2.7.

How does SHIFT work with young people?

Following successful referral and obtaining written consent to take part in the project and evaluation, young people will be randomised into the treatment group (i.e., receive SHIFT) or the control group (please see Section 2.7 for more detail).

SHIFT will work with young people allocated to the **treatment group** across the following stages taking place over a six-month period.

Engagement and assessment

In the initial meeting with the young people allocated to the treatment group, the SHIFT programme coordinator/manager will ask the young person what they like to do and how they feel they will work best with a SHIFT mentor. A short online assessment form will also be completed to identify the young person's needs and interests.

On the basis of this assessment, the programme coordinator will match the young person with a mentor. Factors considered will include temperament and character, gender, ethnicity, interests (including interest in specific music genres or disciplines) and particular needs, as well as capacity.

Planning

Mentors will discuss a plan with the young person, including individual activities and goals. This is a fluid plan which is reviewed and updated after each session. Plans for each mentoring session and their outcome are recorded within the mentor log.

Delivery

The SHIFT programme will work with young people randomly allocated to the treatment group over a six-month period. Young people in this group will receive:

- Weekly 1:1 90-minute music mentoring sessions, delivered face-to-face.
- 18 sessions in total over the programme.

¹³ The control group practitioners will be employed for the purpose of this trial, i.e., they will not be doing any other work within AudioActive. AudioActive does not foresee any significant risk in these practitioners ending their employment due to the nature of the role, which will be clearly articulated within recruitment literature (adverts / job descriptions etc). AudioActive, has a consistently high staff retention rate, due to the positive working culture. This is achieved by investing in staff development and effective supervision processes, offering attractive employment benefits, and supporting all AudioActive staff to understand the contribution they make in AudioActive achieving its aims of supporting and safeguarding young people to live more positive lives.

Sessions will be delivered in (estimated proportions of where services will be delivered based on previous SHIFT experience shown in brackets):

- School or other educational setting as standard when young people are in school (67%)¹⁴
- Rented music studios (32%)
- Youth centre or other appropriate community settings in each area (1%)

Sessions will cover the following:

- **Sessions 1-4: introductory music-based sessions**, focused on building the relationship between the young person and the mentor. Sessions are tailored to the individual based on their musical interests and personal goals. Discussion topics are introduced as the sessions progress.
- **Session 5-15: mentors progress the musical practice and continue to build the relationship with the young person.** The content of sessions is tailored to the needs and preferences of the young person. Progress made in discussion areas is reviewed and new discussion topics are introduced.
- **Session 16/17: Exit review session**¹⁵. The programme coordinator/manager will join the session with the mentor and young person to reflect on the progress made. Signposting to other AudioActive programmes and/or referrals to other services and activities will be agreed in this meeting.
- **Session 18: Final session.**

Discussion topics to be covered across the 18 sessions are: behaviour and emotional regulation; mental health and wellbeing; relationships with family; relationships with peers; keeping safe; involvement in offending; engagement in education; feelings about the future and career opportunities; pro-social identity.

Sessions work towards a final musical performance or production for which young people can gain accreditation through, for example, the City 7 Guilds affiliated digital badge scheme¹⁶.

¹⁴ These estimates are based on term time delivery. As SHIFT will also be delivered during the school holidays for this YEF-funded study, the overall proportion of sessions delivered in school may in practice be lower, and those delivered in rented studios and community settings slightly higher.

¹⁵ The review session takes place before the official final session (session 16 or 17 of 18) as AudioActive have observed low attendance rates in the final session.

¹⁶ The range of badges available can be seen here: <https://www.credly.com/organizations/audioactive/badges>. Last accessed: 22 February 2024

Safeguarding

AudioActive have two safeguarding policies: Safeguarding Children Policy and Safeguarding Vulnerable Adults Policy, to cover people we work with who are under and over 18 years old. Both set out how they ensure that safeguarding happens, the overarching principles that guide practice, commitments, responsibilities, and safer working practices, information on recognising abuse and guidelines for responding to incidents and concerns.

Mentors will have a 6-month induction period where they will meet regularly with their manager to ensure that they have read all the relevant policies and procedures, and that they are accessing all the relevant training. This will be signed off and any on-going issues will be resolved, probation will be extended if staff do not meet minimum expectations.

Mentors will have regular supervision, appraisal, and support to complete extensive relevant training to ensure they are well-equipped to manage disclosures. Staff will receive reflective practice supervision to consider issues in a safe and supportive space and nurturing support. Staff will take part in regular team meetings where they are up-skilled through dissemination of information, skills-sharing and self-development opportunities.

What does SHIFT aim to achieve?

SHIFT aims to reduce young people's future engagement in delinquent behaviour. The short-, medium- and long-term outcomes are described below.

Short-term outcomes

SHIFT aims to achieve the following short-term outcomes:

- Young people build a trusted relationship with the mentor.
- Young people open up to mentors about their feelings and emotions.
- Young people feel listened to, understood and like their needs are being met.
- Young people learn strategies for emotional regulation.
- Young people learn coping strategies to overcome challenges.
- Young people gain an understanding of pro-social values.
- Young people gain an understanding of where they can get help if they need it and feel more able to ask for help.
- Young people gain knowledge and awareness of the impact of crime and violence.
- Young people are motivated to sustain engagement in sessions.

- Young people feel more able to express themselves through their music.
- Young people develop skills and gain confidence in music-making, providing them with a sense of achievement and pride.

Medium-term outcomes

The programme aims to achieve the following medium-term outcomes:

- Young people's behaviour improves, demonstrating less risk-taking behaviour and improved emotional regulation.
- Young people report improved relationships with peers and family.
- Young people report feeling more positive about the future and the opportunities available to them.
- Young people access other relevant support services and activities to meet needs and continue to divert them from negative influences.
- Young people's engagement in education improves, including (where applicable) returning to school, or increased attendance and fewer exclusions.
- Young people develop a positive and pro-social identity.
- Young people feel safer.

Long-term outcomes

The long-term outcomes of the programme are:

- Young people report improved wellbeing.
- Young people's involvement in delinquent behaviour is reduced/prevented.

Control group conditions

The control group pathway

Young people who are allocated to the control group will receive light-touch signposting and safeguarding support, provided by a member of the AudioActive team based in each of the three local authorities.

Young people in the control group will be offered a maximum of four one-to-one one-hour check-in meetings with a local authority-based control group practitioner. These meetings will take place over the same six-month period as the SHIFT programme. This will ensure that

outcomes data collection for the intervention and control groups takes place over the same time periods.

Young people will provide written informed consent, complete baseline measures and be randomised within an initial meeting with an AudioActive programme coordinator/manager, prior to attending the first meeting in the control group pathway with a practitioner.

The control group pathway meetings with the local authority-based practitioner will consist of:

- **Meeting 1:** An initial assessment of needs and risk, which will identify immediate safeguarding concerns and business-as-usual services the young person could be referred to. This may include:
 - Referral to or information sharing with Children’s Services in relation to immediate safeguarding concerns.
 - Referral into other service to meet other identified support needs, e.g. Education and Employment. Young people will not be referred to similar music or art-based interventions.
- **Meeting 2 (within two weeks):** An optional second assessment meeting, held if deemed necessary by the practitioner to ensure the full extent of the young person’s need is captured and to ensure that appropriate referrals have been made.
- **Meeting 3 (at three months):** A check-in session to maintain light-touch and informal contact with the young person and assess whether their safeguarding or wellbeing needs have changed and whether further signposting is necessary.
- **Meeting 4 (at six months):** A final session, in which practitioners will complete the time 2 questionnaires with the young people. The practitioners will also conduct a final assessment of need and safeguarding concerns, and complete onward referrals as needed.

The contact with young people through this control group approach will help facilitate engagement with the outcome measures and support data collection, as well as ensuring any safeguarding issues are identified and addressed.

To monitor fidelity and compliance and to identify any risk of contamination, the frequency, dosage, and content of sessions held with young people in the control group will be robustly recorded by practitioners as part of SHIFT monitoring data. This data will be shared with Cordis Bright on at least a monthly basis during the pilot to enable an audit and analysis of delivery to identify and mitigate any risks or issues posed to the evaluation. The frequency of sharing data during the efficacy study will be determined when progression is agreed but we

anticipate similar regularity. Figure 1 below gives an example of the format of this monitoring data.

Figure 1: Example of session monitoring data

Session & date	Duration	Setting	Content	Referrals/signposting
#1	<i>Length of session</i>	<i>Location of session</i>	<i>Topics/issues covered</i>	<i>Details of any services young person is referred/signposted onto</i>
#2				
etc				

Differences in compliance for key demographic groups within the control group will be explored within the analysis where appropriate, in the same way as it will be explored for the treatment group.

The approach to working with the control group will differ significantly from the treatment group. There will be a separate practitioner team working with young people in the control group, while young people in the treatment group will receive support from SHIFT mentors. This will minimise the risk of contamination and ensure that young people allocated to the control group are not supported by a mentor who also supports young people allocated to the treatment group.

The treatment group will receive 18 weekly mentoring sessions over a 6-month period, including music-based activities and discussion around topics such as family, school and offending. The control group will be given a maximum of four sessions but may only require three if one assessment meeting is deemed sufficient. In these sessions, young people will be given basic information to ensure they are safeguarded and are referred to other services that may meet their needs as appropriate. The SHIFT mentoring activities and content will not be available or delivered to young people in the control group.

Business-as-usual services

Young people randomised into the control group will be signposted to business-as-usual services for which they would have been eligible if SHIFT had not existed. Control group young people will not be referred to arts-based/music-based programmes including an element of ‘music-as-a-hook’, to avoid contamination.

The services available as part of business as usual will vary across the three local authorities and it would not be possible to complete an exhaustive mapping exercise as part of the

development of this trial protocol. However, an indicative list of services that young people may be able to access is provided below:

- **Early Help services.** This is a preventative, voluntary service and is designed to ensure an early response to concerns and to prevent the need for prolonged support.
- **Support for children at risk of extrafamilial harm.**
 - In West Sussex, the Serious Violence, Missing and Exploitation Team provide specialist intervention and assessment for children vulnerable to serious violence and to exploitation. This can provide supplementary support for children and families already supported on a Child In Need, Child Protection Plan, or are a Child We Care For. Children experiencing high risk of extrafamilial harm are discussed in a fortnightly MACE Panel, which is managed by children's social care with multi-agency input.
 - In East Sussex, safeguarding concerns are referred into the single point of advice (SPoA). If a referral flags that a child may be at risk of child sexual exploitation and or other criminal exploitation, SPoA will escalate the referral to the multi-agency safeguarding hub (MASH). The safeguarding adolescents from exploitation and risk (SAFER) panel for children aged 10+ is used to produce a plan to increase protective factors and reduce risk of further exploitation. There is a family key work SAFER team.
 - In Brighton and Hove, families in need of intensive interventions access support through the Front Door for Families. Children experiencing exploitation or assessed as being high risk to others have a multiagency plan in place at the adolescent vulnerability and risk panel (AVRM).
- **Youth justice service.** Those children convicted at Court or who receive an Out of Court Disposal are supported via a multi-disciplinary team comprising social workers, probation officers, youth workers, specialist substance misuse workers, family workers, psychologists and therapists. In West Sussex and Brighton and Hove, the service has recently expanded to include the Turnaround scheme which provides enhanced provision for children who can engage voluntarily with the YJS following police intervention/arrests and who meet certain criteria.
- **Non-statutory support specialist support delivered by Sussex VRP/Police.** This includes projects funded by the Sussex VRP such as the Knife Intervention Project which aims to provide enhanced support to children at risk of knife crime or serious violence. It also includes the Reboot project led by Sussex Police which supports children at risk of committing anti-social behaviour (ASB) and vulnerable to extrafamilial harm.

- **Substance misuse services.** This includes Brighton and Hove’s drugs, alcohol and sexual health service (DASH) which delivers one to one support to young people up to the age of 18.
- **Child and adolescent mental health services (CAMHS).**
- **Special Educational Needs and Disabilities (SEND) services.** This includes the Inclusion Special Educational Needs Disability (ISEND) offer in East Sussex.
- **Voluntary sector youth work provision.**
 - West Sussex: This includes 4TheYouth who provide outreach one-to-one and drop-in sessions at youth centres in Horsham, sports activities and other support offered by Sidyouth in Crawley and Worthing, outreach support offered by Electric storm and boxing mentoring offered in Worthing.
 - Brighton and Hove: This includes the Brighton Streets Detached youth project, which provides street-based outreach with young people, and Albion in the Community which offers sport-based activities.
 - East Sussex: This includes Xtrax in Hastings, the central focal point for marginalised young people aged up to 25, offering support as needed. It has a dedicated team of outreach workers that visit areas across Hastings and Rother where young people tend to congregate. YMCA DLG runs several youth clubs across Eastbourne for young people aged 11-25. These clubs are located in Langney, Willingdon Trees and Devonshire.

Trial design

The evaluation of SHIFT will be an efficacy study with an internal pilot study. The study will include a two-armed parallel randomised controlled trial (RCT) evaluation.

Figure 2: Trial design

Trial design, including number of arms	Two-armed parallel randomised controlled trial with random allocation at the young person level
Unit of randomisation	Individual young person
Stratification variables (if applicable)	None

Primary outcome	variable	Self-reported delinquent behaviour
	measure (instrument, scale, source)	Self-Reported Delinquency Scale (SRDS) volume score (see, Smith & McVie, 2003)
Secondary outcome(s)	variable(s)	<p>Delinquent behaviour.</p> <p>Wellbeing.</p> <p>Behavioural difficulties.</p> <p>Positive and pro-social identity.</p> <p>Quality of relationship with mentor/case worker.</p> <p>Conduct problems.</p> <p>Emotional problems.</p> <p>Peer problems.</p> <p>Hyperactivity/inattention.</p>
	measure(s) (instrument, scale, source)	<p>Delinquent behaviour measured by the SRDS variety score.</p> <p>Wellbeing measured by the Shortened Warwick Edinburgh Mental Wellbeing Scale (S-WEMWBS) (Stewart-Brown et al., 2009).</p> <p>Behavioural difficulties, measured by the Strength and Difficulties Questionnaire externalising score (SDQ) (Goodman, 1997).</p> <p>Pro-social values and behaviours, measured by the SDQ pro-social sub-scale (Goodman, 1997).</p> <p>Quality of relationship with mentor/case worker, measured by the Social Support and Rejection Scale (SSRS) (Roffman, Paganao, and Hirsch, 2000).</p> <p>Conduct problems, measured by the SDQ conduct problems sub-scale (Goodman, 1997).</p> <p>Emotional problems, measured by the SDQ emotional problems sub-scale (Goodman, 1997).</p> <p>Peer problems, measured by the SDQ peer problems sub-scale (Goodman, 1997).</p>

		Hyperactivity/inattention, measured by the SDQ hyperactivity/inattention sub-scale (Goodman, 1997).
Baseline for primary outcome	variable	Delinquent behaviour
	measure (instrument, scale, source)	Self-Reported Delinquency Scale volume score.
Baseline for secondary outcome	variable	<p>Delinquent behaviour</p> <p>Wellbeing.</p> <p>Behavioural difficulties.</p> <p>Positive and pro-social identity.</p> <p>Conduct problems.</p> <p>Emotional problems.</p> <p>Peer problems.</p> <p>Hyperactivity/inattention.</p>
	measure (instrument, scale, source)	<p>Delinquent behaviour, measured by the SRDS variety score.</p> <p>Wellbeing, measured by the S-WEMWBS.</p> <p>Behavioural difficulties, measured by the SDQ externalising score.</p> <p>Pro-social values and behaviours, measured by the SDQ pro-social sub-scale.</p> <p>Conduct problems, measured by the SDQ conduct problems sub-scale (Goodman, 1997).</p> <p>Emotional problems, measured by the SDQ emotional problems sub-scale (Goodman, 1997).</p> <p>Peer problems, measured by the SDQ peer problems sub-scale (Goodman, 1997).</p> <p>Hyperactivity/inattention, measured by the SDQ hyperactivity/inattention sub-scale (Goodman, 1997).</p>

Wellbeing measurement

The Shortened Warwick Edinburgh Mental Wellbeing Scale (S-WEMWBS) will be used to measure change in wellbeing within the study.

This measure has been chosen because in SHIFT's theory of change, increasing young people's wellbeing is viewed as a long-term outcome of the programme, as well as a possible mechanism by which the programme might reduce delinquent behaviour.

The scale includes seven items scored on a scale from 1-5 (none of the time, rarely, some of the time, often, all of the time), which together give a total score to indicate level of wellbeing¹⁷. Young people are asked to tick the box that best describes their experiences over the last two weeks. The items comprise:

- I've been feeling optimistic about the future.
- I've been feeling useful.
- I've been feeling relaxed.
- I've been dealing with problems well.
- I've been thinking clearly.
- I've been feeling close to other people.
- I've been able to make up my own mind about things.

Analytical approach

This section outlines our high-level approach to:

- Primary outcome analysis
- Secondary outcomes analysis
- Exploratory subgroup analysis

Primary outcomes analysis

Our analyses will be conducted in line with the YEF Analysis Guidance. First, all analyses will be conducted on an intention to treat basis, which means the data of all those who commence SHIFT will be included regardless of the 'dose' received.

The primary analysis will be an analysis of covariance (ANCOVA), controlling for SHIFT versus the control group on the SRDS volume score measure at baseline (see Youth Endowment

¹⁷ More information about the S-WEMWBS is available here: <https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/> Last accessed: 22 February 2024

Fund, 2021a). The outputs from this analysis will be used to calculate the effect estimate (Hedges' G) for the impact of SHIFT on young people's self-reported delinquent behaviour.

After the completion of this analysis, we will conduct a robustness check particularly related to the demographic characteristics of SHIFT compared to the control group. That is, if these are unbalanced, a model controlling for this would be employed.

It may be possible to examine the extent to which scores on the SSRS may account for any differences observed between SHIFT and the control group on the primary outcome measure. We will also undertake sub-group analyses (e.g., ethnicity), where samples are appropriate.

Further detail around primary outcomes analysis will be included in the evaluation's Statistical Analysis Plan, which will be developed and agreed in collaboration with AudioActive and YEF colleagues within two-three months of the completion of all baseline data collection.

Secondary outcomes analysis

We propose mirroring the analytic approach used for the primary outcome (e.g., ANCOVA) to predict the post-measure scores (e.g., SDQ sub-scale final scores, S-WEMWBS and SSRS final scores) for the secondary outcome measures, based on whether the individual was in the SHIFT (treatment) or control group. We will calculate Hedges' G and the corresponding confidence intervals for these analyses. We will outline more about our approach to analysis in the Statistical Analysis Plan.

Exploratory analysis

We propose conducting exploratory data analysis on the following questions if sufficiently powered:

- **Model compliance.** This will utilise monitoring data collected by AudioActive. We will explore questions concerning what level of dosage was associated with a desirable outcome on the SRDS. For example, does attending 60% of SHIFT's sessions result in a similar impact as attending all sessions?
- **Police data.** We will explore how useful police contact data is for use in RCTs like this. If these data can be obtained, we may be able to evaluate the impact of SHIFT on official data concerning police contacts and triangulate the findings with regards to the SRDS.
- **Race equity, equality, diversity and inclusion.** If the sample is appropriate, we will conduct exploratory analysis exploring differences in outcome for participants from ethnic minority and White British backgrounds. We propose conducting an ANCOVA to evaluate whether SHIFT worked equally well with individuals from different ethnic backgrounds.

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