

EVALUATION REPORT

EXODUS

Pilot trial report

**Hannah Lawrence, Mia Johnson Hall, Narendra Bhalla,
Amaka Udeagbaja, Lizzie Gilbert, Gregory King, Elizabeth
Raws, Joseph Domingo, Gabriella Hurtado Yanez, Eren Ince,
Cameron James, Max Stanford and Dr Emily Blackshaw**

July 2026



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 from 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 evidence. We'll build that knowledge through our various grant rounds and funding activities.

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 that 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 on 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 about it [here](#).

For more information about the YEF or this report, please contact:

Youth Endowment Fund
C/O Impetus
10 Queen Street Place
London EC4R 1AG

www.youthendowmentfund.org.uk
hello@youthendowmentfund.org.uk
Registered Charity Number: 1185413

About the evaluator

This report was produced by the Coram Institute for Children, a centre for research, innovation and policy development dedicated to the future of children.

Coram is the first and longest-continuing children's charity, established as The Foundling Hospital – the birthplace of children's social care – in 1739. Coram's vision for children is a society where every child has the best possible chance in life, regardless of their background or circumstances, and the Coram Institute for Children is instrumental in realising this vision by turning insight into impact.

The Institute's work includes a variety of mixed-methods research and evaluation designs from feasibility studies through to large-scale, multi-site experimental and quasi-experimental impact evaluations. We work with a range of partners, including Foundations, the YEF, the Department for Education, the NHS, local authorities, universities and third-sector organisations.

Our values as researchers are to be child-centred, rigorous, grounded in experience, collaborative and impactful. We are dedicated to delivering child-centred research where children's voices are at the forefront of our work.

For more information about Coram and the Coram Institute, please contact:

Coram, 41 Brunswick Square

London WC1N 1AZ

research@coram.org.uk

Or visit: www.coram.org.uk/about-us/coram-institute/

Coram Registered Charity Number: **312278**

For more information about this evaluation, please contact:

- Hannah Lawrence (Principal Investigator): hannah.lawrence@coram.org.uk

Contents

About the Youth Endowment Fund.....	1
About the evaluator	2
List of tables and figures	5
Executive summary	7
Introduction	9
Background	9
Youth justice in England and Wales	9
Political and legislative landscape	11
Restorative justice: background and evidence base	11
Evidence base for mentoring.....	12
Previous evaluations of the EXODUS programme	12
The EXODUS intervention.....	13
Research questions.....	18
Success criteria and targets	20
Ethical review	25
Data protection.....	26
Project team and stakeholders	27
Peer researchers	29
Our advisors	29
Methods	31
Trial design.....	31
Participant selection.....	32
Data collection	36
Qualitative data collection methods.....	38
Outcome measures	39
Quantitative data collection	42
Qualitative data collection	46
Randomisation	48
Randomisation procedure	48
Analysis	49
Race, equity, diversity and inclusion	55
Timeline	55
Findings	57
Participants.....	57

Journey through the EXODUS programme	57
Breakdown of referral partners by site	59
Demographic characteristics	60
Sample representation	63
Descriptive analysis of baseline outcome data	64
Evaluation feasibility	76
Recruitment	77
Randomisation	80
Monitoring data	81
Completion and response rates	84
Fidelity	89
Scale-up	98
Evidence of promise	99
Readiness for trial	99
Cost information	110
Conclusion	112
Evaluator judgement of evaluation feasibility	112
Limitations	113
Future research	115
References	116
Appendices	122
Appendix 1: EXODUS trial referral form	122
Appendix 2: Risk and safety rating matrix used by referrers to EXODUS	125
Appendix 2a: initial documents completed with young people at beginning of EXODUS intervention	126
Appendix 3: Information sheet for young people considering taking part in EXODUS trial	128
Appendix 4: Consent forms for young person to take part in EXODUS trial	131
Appendix 5: Data protection impact assessment for the EXODUS trial	133
Appendix 6: Response rate tables for self-reported outcome measures	142
Appendix 7: Detail of the process and parameters of the pilot extension	146

List of tables and figures

Tables

Table 1: Internal pilot progression criteria for EXODUS to move to efficacy trial.....	21
Table 2: Trial design overview.....	31
Table 3: Sample size calculations – protocol and extended pilot.....	36
Table 4: Overview of project data collection methods and participation.....	37
Table 5: Secondary outcome measures for the EXODUS evaluation.....	40
Table 6: Overview of quantitative and qualitative analysis methods.....	50
Table 7: A timeline of key evaluation and programme activities.....	55
Table 8: Breakdown of referrals across partners within Northamptonshire (n = 64).....	59
Table 9: Breakdown of referrals across partners within Haringey.....	60
Table 10: Breakdown of referrals across partners within Lewisham.....	60
Table 11: Ethnicity breakdown of pilot sample.....	62
Table 12: Site-wise comparison of EXODUS sample, general population and sentencing statistics.....	63
Table 13: Baseline SRDS variety of offending frequency and average volume of offending.....	65
Table 14: SRDS volume of offending frequency distribution table.....	66
Table 15: SRDS Q16 – bullying behaviour response frequency table.....	67
Table 16: SRDS getting in trouble and with whom by offence.....	68
Table 17: JVQ response frequency table.....	69
Table 18: SDQ average total difficulties and subscale scores compared with scoring categorisation.....	70
Table 19: SSRS average total and subscale scores: overall and by trial arm.....	72
Table 20: Frequency of types of offences in Northamptonshire Police data (n = 136).....	73
Table 21: Frequency of baseline offending by young person in Northamptonshire Police data (n = 44).....	74
Table 22: Frequency of offending outcomes in Northamptonshire Police data (n = 136).....	74
Table 23: Balance of demographic characteristics and baseline outcome measures.....	75
Table 24: Control check-in availability.....	83
Table 25: Check-in completion % for the pilot control sample.....	84
Table 26: General and on-time response rates for six- and 12-month returns.....	88
Table 27: Average gap between randomisation date and first session by site.....	90
Table 28: Average gap between sessions by site.....	90
Table 29: Session attendance % for the pilot EXODUS sample.....	91
Table 30: Core themes covered in the first 12 sessions (intensive phase) – incidence and coverage.....	92
Table 31: Number of core themes covered in the first 12 sessions (intensive phase).....	92

Table 32: Risk assessment completion % distribution	93
Table 33: Weighting for fidelity checklist scoring.....	94
Table 34: Tiers of fidelity scoring and who they apply to.....	94
Table 35: Mentoring log availability	94
Table 36: Fidelity score distribution – extended pilot sample	95
Table 37: Fidelity score distribution – initial and additional pilot samples	96
Table 38: Session attendance % for the pilot and post-pilot EXODUS sample.....	97
Table 39: Check-in completion % for the pilot and post-pilot BAU sample.....	98
Table 40: Performance against progression criteria for the internal pilot sample	100
Table 41: Additional transition criteria set by the YEF up to 1 July 2025.....	106
Table 42: Summary of internal pilot study findings.....	112
Table 43: Completion rates of the SRDS 'variety of delinquency' questions across 19 offending behaviours examined at T1, T2 and T3.....	142
Table 44: Completion rates of the SRDS 'volume of delinquency' questions across 18 offending behaviours examined at T1, T2 and T3.....	143
Table 45: Completion patterns for the JVQ in T1, T2 and T3 outcomes questionnaires.....	143
Table 46: Completion patterns for the SDQ in T1, T2 and T3 outcomes questionnaires	144
Table 47: Completion patterns for the SSRS in T2 and T3 outcomes questionnaires	145

Figures

Figure 1: The EXODUS programme structure over 12 months.....	15
Figure 2: EXODUS programme logic model.....	19
Figure 3: Trial inclusion and exclusion criteria	34
Figure 4: Participant flow CONSORT diagram between 17 April 2024 and 1 July 2025	58
Figure 5: Demographic characteristics of the pilot sample	61
Figure 6: Sample SDQ score distribution based on SDQ scoring categorisation (n = 346)	71
Figure 7: Distribution of offences by offender classification in local police data (n = 130)	73
Figure 8: Actual vs old target cumulative randomisations (initial months: April – December 2024)	79
Figure 9: Actual vs old and new target monthly randomisations (17 April 2024 – 1 July 2025)	80
Figure 10: RAG criterion for fidelity rephrased	95

The project

Exodus is a 12-month mentoring programme for 11–17-year-olds who are known to have offended, are considered at high risk of offending or are currently in or leaving custody. The programme aims to reduce the likelihood of children and young people perpetrating violence or offending, being affected by exploitation, and to support their reintegration into society following custody. It is delivered by UpskillU, a community-based organisation and restorative justice training provider. The programme begins with an introductory meeting where the child or young person is matched to a mentor and agrees their goals and a safety plan. This is followed by 12 weeks of intensive weekly one-to-one mentoring, with additional weekly check-in calls. The sessions cover themes such as identity, attitudes, values, risks and consequences, conflict, relationships and decision making. Following the 12 weeks, children enter a 26-week transitional phase during which mentoring focuses on longer-term goals and personal development and finally another 12-week phase where support is gradually reduced and the child or young person is introduced to a 'Circle of Support and Accountability' (CoSA), made up of trained community volunteers. Children and young people are referred by partner agencies if they face risks linked to offending, exploitation or victimisation, including contact with youth justice, police or children's services, school exclusion, missing episodes, or experience of custody.

The Youth Endowment Fund (YEF) funded a pilot study as the first stage of a large-scale randomised controlled trial (RCT). It aimed to determine whether a full RCT trial was feasible by testing referral pathways, randomisation, data collection, programme implementation and scale-up. To address these aims, the evaluation randomly split children into two groups: one group was offered Exodus, while the other continued to receive the usual support available in their local area. The primary outcome was self-reported offending, measured through the Self-Reported Delinquency Scale. Secondary outcomes included recorded offending and violent offending, victimisation and exploitation, emotional and behavioural problems, and trusted adult relationships. These were measured using a combination of local police data on recorded offending, and online surveys completed by children and young people before randomisation and at six- and 12-month follow-up. Alongside the trial, an implementation and process evaluation used programme monitoring data, interviews and observations to understand how Exodus was delivered, how children, young people and stakeholders experienced it, and whether the programme could be delivered with fidelity at a larger scale. Between April 2024 and July 2025, 350 children and young people were recruited to the evaluation. Of these, 42% were from a White ethnic background, 27% were Black or Black British, 19% were from Mixed or multiple ethnic groups, 11% were from Other ethnic groups and 1% were Asian or Asian British.

Key conclusions

Exodus has the potential to move to a full efficacy trial, but this depends on strengthening the systems needed to recruit and monitor participants at scale.

The randomisation process was implemented effectively and adhered closely to trial protocols, achieving a balanced allocation between intervention (51%) and control (49%) groups.

Monitoring data collection processes improved over the course of the pilot, moving from fragmented and inconsistent reporting to a more structured, reliable system with the support of a new technology platform.

Outcome data collection – involving children filling a survey at the start and at the end of the intervention – was successful, achieving a response rate of 71%, with high quality data (99–100% completion rates).

Overall, there were low levels of fidelity to the programme. Some parts of the programme were not yet being delivered consistently, especially CoSA sessions. However, although fidelity scores were still below the expected threshold, they steadily improved over time.

Interpretation

Exodus has the potential to move to a full efficacy trial, but this depends on strengthening the systems needed to recruit and monitor participants at scale. The programme has demonstrated potential for scale-up to a full trial with evidence of improved recruitment through expanded referral routes and new local authority engagement. In total, 495 children and young people were referred, 396 were eligible and 350 consented and were randomised. Recruitment was initially slower and more resource intensive than anticipated, with challenges related to assessing children's suitability, sustaining their and their family's engagement, as well as some practitioner apprehension about randomisation. In response to these challenges, UpskillU expanded referral routes through schools and Lewisham Council. This improved recruitment, engagement and attendance. This shows that Exodus can be scaled sustainably. However, growth will need to be carefully managed, especially around practitioner capacity, securing consent, recruiting skilled mentors and maintaining strong information sharing and feedback processes. Further, the attrition rate of 26% will need to be monitored.

The randomisation process was implemented effectively and adhered closely to trial protocols, achieving a balanced allocation between intervention (51%) and control (49%) groups. Although some families and professionals initially found it difficult when children and young people were allocated to business-as-usual, randomisation was generally well understood by children and young people, referrers and delivery staff. Communication regarding this improved over time through more personal engagement and peer researcher involvement. For example, practitioners who initially relied on written information moved to having more direct conversations with referrers and families when needed. The peer researchers, some of whom had completed the programme themselves, also helped build trust with children and young people.

Monitoring data collection processes improved over the course of the pilot, moving from fragmented and inconsistent reporting to a more structured, reliable system. UpskillU shared referral forms with the evaluator (Coram) every two weeks. Initially there were problems with missing IDs, incomplete records and delays in sharing exports. UpskillU agreed a clearer data sharing structure and process, with the evaluator quality checking logs and flagging issues. The transition to the RestorativU app strengthened this further by allowing delivery staff to record mentoring information directly in a consistent format.

Outcome data collection, involving children filling a survey at the start and at the end of the intervention, was successful, achieving a response rate of 71%. The quality of submitted surveys was also high, with near perfect completion rates (99–100%). The children interviewed generally reported finding the surveys acceptable. This was helped by peer researchers who built trust as children reported feeling more comfortable when answering the sensitive questions in the survey. The follow-up surveys did, however, require several phone calls and engaging with the parent/carers, particularly with the business-as-usual group.

Overall, there were low levels of fidelity to the programme. Some parts of the programme were not yet being delivered consistently, especially CoSA sessions and recorded risk assessments. Although fidelity scores were still below the expected threshold, they steadily improved over time. The expected threshold was that 80–100% of children and young people should have high fidelity scores. In the overall pilot sample, only 57% of cases had no deviations from the logic model meaning there were low levels of fidelity. In the initial sample, taken between April and December 2024, this figure was at 42%. Issues included delays between randomisation and the first session, mentoring sessions not taking place as frequently as planned and limited delivery of CoSA sessions. In the later sample, between January and July 2025, this increased to 77%, which moved it closer to the expected threshold. However, the CoSA element was still not being delivered consistently: only a small proportion of eligible children and young people had received CoSA sessions, largely due to practical challenges organising in-person sessions with volunteers. UpskillU was beginning to address this by moving CoSA delivery online.

Introduction

Background

Youth justice in England and Wales

Recent trends in youth justice in England and Wales show a divergence between arrest rates and cautions and sentences. Between April 2024 and March 2025, approximately 58,300 children and young people were arrested, a similar figure to the two previous years (April 2022 to March 2023 and April 2023 to March 2024) but representing a 9% increase from 2021/22 and a 7% increase from 2020/21 (Youth Justice Board, 2026). Between 2020 and 2024, however, the number of children and young people receiving a caution or sentence decreased by 21% (Youth Justice Board, 2026). In the year ending March 2025, around 13,300 received a caution or sentence, which represents a 3% decrease from the previous year. These figures indicate that while arrest levels have risen in recent years, which may reflect heightened policing of certain youth-offending behaviours, the number of formal disposals¹ has continued to decline. This drop may be tied to policy and practice changes (for example, diversion first²) rather than fewer offences (House of Commons: Justice Committee, 2020).

Alongside this, the Youth Endowment Fund (YEF) (2025a) reports that knife crime among children and young people increased by 9% in the year 2023/24 compared to the previous year and increased by a total of 58% between the years 2013/14 and 2023/24.³ The Youth Endowment Fund (2025b) also found that 20% of teenage children reported being victims of violence in 2024 - this compared to 16% in 2023. YEF also reported that 16% of teenage children said that they had been perpetrators of violence - this self-reported perpetration rose very slightly from 15% in 2023 (Youth Endowment Fund, 2025b).

Evidence from the College of Policing (2019) and the Greater London Authority's City Intelligence Unit (2021) highlights a complex array of factors that contribute to children and young people becoming involved in violence. These include deep-rooted and ingrained social and economic issues such as poverty, high unemployment, school exclusion, poor mental health and a lack of youth services, with risk of exposure varying based on gender, age, adverse childhood experiences and educational attainment (McNeill and Wheller, 2019; Greater London Authority, 2021).

There is evidence that children and young people from minority ethnic communities are more likely to become perpetrators and victims of crime. Between 2006 and 2016, the proportion of child prisoners from minority ethnic communities rose from 25% to 41% (Lammy, 2017). In particular, young Black Londoners are disproportionately impacted by violence: they are significantly over-represented in violence statistics, both as victims and as people who have offended (Greater London Authority, 2021). For instance, Black teenagers are six times more likely to be killed by violence than White teenagers in London (Greater London Authority, 2021). In England and Wales, Black children and young people are more likely than their

¹ Meaning a formal, out-of-court alternative to prosecution for young people who have admitted to a crime and are not considered to be at high risk of reoffending

² Diversion is the broad name for alternatives to the traditional court-centred processes of the criminal legal system. A 'diversion first' approach considers appropriate diversion options outside of a criminal justice setting for identified vulnerable people, with the aim to reduce violent offending/reoffending.

³ Knife crime is here defined as the number of 0-17-year-olds admitted to hospital due to knife assault. This means there are likely to be victims of knife crime missing from this statistic as not all victims will have presented or been admitted to hospital.

White peers to be stopped and searched, arrested, held on remand, sentenced to custody and to go on to commit another offence within a year (Fraser, 2022).

Furthermore, those in the youth justice system are more likely than the general population to have one or more disabilities or health conditions, such as ADHD (Young *et al.*, 2014; Young *et al.*, 2018); another form of neurodivergence or neurodisability (Baidawi and Piquero, 2020; Kirby, 2021; Day *et al.*, 2024); traumatic brain injuries or foetal alcohol syndrome disorder (Hughes *et al.*, 2015; Bickle *et al.*, 2024); or language and learning disabilities or differences (Hall, 2000; Talbot, 2010). Many have identified special educational needs and disabilities (SEND) (McDonald-Heffernan and Robin-D’Cruz, 2024; Thomas and Glazzard, 2025).

Care-experienced young people are over-represented in the youth justice system (Prison Reform Trust, 2016; Department for Education, 2018). There is also evidence that young people who have been temporarily or permanently excluded from school are more likely to become involved in criminal behaviour (Gill, Quilter-Pinner and Swift, 2017; Sanders, Liebenberg and Munford, 2018; Cornish and Brennan, 2025).

Many young people experience social vulnerability or marginalisation on multiple fronts and this intersectional disadvantage increases their likelihood of being involved in crime. For example, young people with SEND are vastly over-represented in school suspension and exclusion statistics, as are those from Gypsy, Roma, or Traveller communities and Black Caribbean communities (Department for Education, 2025a; Department for Education, 2025b). Additionally, childhood adversities (such as having a parent with a mental illness or exposure to substance misuse) coupled with living in poverty have been linked with an increased risk of involvement in crime and contact with the police during adolescence (Adjei *et al.*, 2025).

A range of complex factors can lead minoritised young people to become involved in crime and enter the youth justice system, including:

- lack of targeted support and difficulties accessing support to divert children and young people away from the criminal justice system in a way that is culturally sensitive and tailored to their individual needs, particularly for those who are Black (Waddell *et al.*, 2022; Bateman *et al.*, 2023);
- institutional racism and bias that result in over-policing and differences in sentencing young people from some communities (Lammy, 2017; House of Commons: Home Affairs Committee, 2021);
- adults and older young people grooming children and young people (particularly those who are more vulnerable, such as those who live in poverty) and inducting them into criminal activity (Home Office, 2023; Maxwell, 2024). This is also called child criminal exploitation (CCE) (Metropolitan Police, 2025).

For children and young people, involvement in crime increases the probability of experiencing problematic outcomes in later life, including a greater likelihood of experiencing health and social problems (British Medical Association, 2014). Children and young people exposed to violent crime have an increased risk of developing substance abuse, obesity and serious illnesses (Royal College of Paediatrics and Child Health, 2020). When leaving youth detention institutions, young people have limited access to healthcare, particularly mental health care – despite having a higher prevalence of mental health conditions than the general population (British Medical Association, 2014). Additionally, children and young people involved in crime are more likely to go on to experience victimisation and commit further violence as adults (Bellis *et al.*, 2012).

Given this evidence of poorer life outcomes for children and young people involved in crime, it is clear that, along with wider policy changes aimed at tackling systemic inequity, targeted interventions are needed to help children and young people learn how to make positive choices that move them away from crime and towards happy, fulfilling lives.

Political and legislative landscape

In recent years, government approaches to knife crime and youth violence in England and Wales have undergone several legislative and policy changes. The Police, Crime, Sentencing and Courts Act 2022 introduced several reforms affecting children in the criminal justice system. Key changes included a new statutory duty for courts to consider a child's welfare when making remand decisions, stricter conditions for youth detention and amendments to Youth Rehabilitation Orders such as increased curfew hours, extended supervision periods and electronic monitoring. The 2022 Act also increased the proportion of time children must serve in custody for serious offences and introduced stricter sentencing for weapon-related offences, particularly for those aged 16 and over.

More recently, youth justice has continued to be a focus under successive governments. In May 2024, the then Conservative government opened the first secure school for serious youth offenders. In July 2024, the new Labour government outlined further measures aimed at reducing knife crime. These include mandatory referrals to Youth Offending Teams for any young person found with a knife, bans on certain types of bladed weapons and the introduction of the Young Futures programme – a network of local hubs offering wraparound support to help prevent youth violence and reoffending.

Restorative justice: background and evidence base

The EXODUS mentoring programme is underpinned by restorative approaches. It uses one-to-one mentoring to work with children and young people who are affected by or at risk of youth violence, supporting them to build lives that do not involve crime. Mentoring can be viewed as a restorative practice because it focuses on building supportive relationships, encouraging reflection and accountability, and helping young people repair harm and reconnect with their communities rather than relying solely on punishment (Bazemore, 2001; McCold and Wachtel, 2003). Restorative justice is often discussed as an alternative to typical Eurocentric criminal justice systems, which require the state to take ownership of a conflict between the person who has offended and the victim(s) to decide the correct course of action (College of Policing, 2022). Restorative justice, however, seeks to restore ownership of the criminal offence to the offender and victim, through enabling both to take active roles in the justice process (Wood, Suzuki and Hayes, 2022). It can provide a policy framework for dealing with youth crime and other adolescent transgressions and aims to facilitate reparation and promote healing among the person who offended, the victim and the community (Bazemore, 2001). Restorative justice can work to reduce reoffending by making the offender accountable for their offending behaviour while giving them the opportunity to understand the impact that this behaviour has had on victims and the community (Strang *et al.*, 2013; House of Commons, 2016).

Over the last few decades, restorative justice practices have gained popularity, particularly in the juvenile justice space (Youth Justice Board, 2002; McAra and McVie, 2010). Restorative justice programmes for young people who have offended have been shown to be effective at reducing reoffending for many types of young people (Bergseth and Bouffard, 2012). According to the Youth Endowment Fund Toolkit,⁴ **restorative justice has a moderate impact on preventing crime and violence. However, this is mostly based on US research.** Research has suggested that restorative justice could be more effective when applied to violent crimes than property crimes, and to more serious rather than less serious crimes (College of Policing, 2022).

⁴ The Toolkit provides an overview of existing research on approaches to preventing serious youth violence, and can be found here: <https://youthendowmentfund.org.uk/toolkit/restorative-justice>.

The type of restorative approach used in the EXODUS mentoring programme has been found to be effective in family support service provision, where families found taking a restorative approach acceptable, engaging and helpful (Williams, 2019).

Evidence base for mentoring

In London, mentoring as an intervention to support young people to reduce their involvement in criminal behaviour is growing. The Mayor of London announced in November 2024 that London's Violence Reduction Unit would spend an extra £2.3 million funding mentors for pupils in Pupil Referral Units⁵ across all 32 of London's boroughs (London City Hall, 2024).

In the context of youth violence, mentoring has shown signs of promise and **been demonstrated to be moderately effective** (Gaffney, Jolliffe and White, 2022). This is particularly the case if mentors have themselves been through the issues experienced by the child or young person (Creaney, 2018a and 2018b). We refer to mentors who are a similar age and/or have similar experiences to their mentees (meaning young people who receive mentoring) as 'peer mentors'. Peer mentors can act as positive role models for children and young people, building non-judgemental, trusting relationships with their mentees and helping them to navigate the criminal justice system (Lenkens *et al.*, 2023). Mentoring can also introduce children and young people to positive peer groups, helping to reduce the influence of harmful peer groups that the children and young people may have encountered (Creaney, 2018a).

Due to their shared experiences, peer mentors may have greater access to and understanding of the communities they are aiming to help and therefore there may be fewer barriers to engagement for mentees (McPherson *et al.*, 2001). Studies suggest that achieving sustained engagement in mentoring programmes can be an issue: for example, in an evaluation of mentoring programmes delivered between 2001 and 2004 in England and Wales, St James-Roberts *et al.* (2005) found that less than half (2,045 of 4,828) of young people referred to the projects included in the evaluation fully completed their mentoring programme. But evidence shows that using peer mentors with similar experiences is more likely to encourage children and young people to engage with and complete their full course of mentoring (Porteous and Goodman, 2023).

Employing mentors with similar experiences to their mentees is a cornerstone of the EXODUS programme (although they are not from the exact same age range). EXODUS mentors often have unique and valuable insight into how each young person on the EXODUS programme may be feeling, the kinds of experiences they may have had and some of the reasons why they might have become involved in criminal behaviour. Importantly, some mentors will have experienced the positive effects a restorative mentoring programme can have; how it can empower young people to turn their lives around. Mentors can therefore instil in their mentees an understanding of what their future could look like, not just through supportive, ongoing conversations but also as an example of the potential that the programme can help to unlock.

Previous evaluations of the EXODUS programme

EXODUS was previously evaluated by The Bridge Renewal Trust alongside similar programmes under the Haringey Community Gold partnership, with Haringey Council as a lead partner. The programme reached 6,924 children and young people aged 11 to 17 years between January 2019 and December 2021, and was

⁵ A Pupil Referral Unit (PRU) in England is a type of alternative education provision for children and young people who are unable to attend a mainstream school. This may be due to exclusion, behavioural issues, mental or physical health needs or other circumstances that make mainstream schooling unsuitable.

funded by the Mayor's Young Londoners Fund. The evaluation was based on contribution analysis and mostly used qualitative data from delivery partners and children and young people. It highlighted positive feedback from children and young people, with an indication of the EXODUS programme positively impacting behavioural outcomes (Bridge Renewal Trust, 2022).

UpskillU has been a provider of mentoring to Northamptonshire Youth Violence Intervention Unit (YVIU) since 2018.⁶ The Northamptonshire YVIU had an established data system to support the monitoring of the EXODUS programme. Prior to the trial commencing, in July 2023, the Northamptonshire YVIU (then CIRV) reported the performance data on 77 children and young people who were supported by CIRV six months before joining and six months after finishing the CIRV programme. The analysis showed improvements for the young people on CIRV who were supported by EXODUS in several areas, such as a 63% reduction in offences and a 41% reduction in arrests. These findings, however, need to be treated cautiously as these children and young people took part in the 12-week EXODUS programme rather than the 12-month programme, and positive effects may be attributed to other factors.

Interventions that are well developed and have previous evidence of promise, like EXODUS, are considered suitable for a trial with an internal pilot. An **internal pilot** is a phase in a trial after which progress is assessed against pre-specified criteria (Herbert *et al.*, 2019). This phase offers an opportunity to stop trials which are not likely to reach their recruitment, retention or site set-up targets, for example. Unlike an external pilot, data collected during the internal pilot phase contributes towards the final analyses of a trial. This makes internal pilots potentially more cost-effective than running an external pilot followed by a full trial.

A randomised controlled trial of the EXODUS programme beginning with an internal pilot study to assess the feasibility of carrying out an evaluation will provide more definitive findings about the 12-month mentoring programme's efficacy and account for any differences in groups of children and young people.

The EXODUS intervention

This section provides an overview of the EXODUS programme. It describes:

- What is EXODUS and who does it aim to work with?
- How is the mentoring programme delivered?
- What does EXODUS aim to achieve and what is its theory of change?
- What inputs are required to deliver EXODUS?

What is EXODUS and who does it aim to work with?

EXODUS is a 12-month restorative mentoring intervention where a young person⁷ is taken through a structured programme by paid, trained mentors. EXODUS is delivered by UpskillU, a restorative, community-based organisation and an established national restorative justice training provider.

EXODUS is for 11- to 17-year-olds who demonstrate risk factors associated with violence/exploitation or who are affiliated with or affected by violence/exploitation. Referral partners identify and refer young

⁶ This unit was known as the Northamptonshire Community Initiative to Reduce Violence (CIRV) until March 2024 and may sometimes still be referred to as CIRV in documents. For more information about YVIU see here: www.northants.police.uk/police-forces/northamptonshire-police/areas/northamptonshire-force-content/about-us/about-us/youth-violence-intervention-unit/

⁷ For readability, from here we refer to children and young people aged 11 to 17 years old as 'young people'.

people to EXODUS. Referrals are made when a young person shows medium- or high-risk factors linked to offending, exploitation or victimisation or is either in custody or preparing for release.

To be eligible, a young person must meet at least one of the following criteria:

- Known to have offended, where a young person has been arrested (and led to conviction); identified by police for offending and/or anti-social behaviour; or affected by serious violence, criminal or sexual exploitation (as perpetrators and/or victims)
- OR**
- Considered to demonstrate high- or medium-risk factors associated with offending, exploitation and/or victimisation. This is based on vulnerability assessments undertaken by referral partners, which consider whether a child or young person:
 - Is known to the Youth Justice Service (YJS)
 - Has a pending or in-place National Referral Mechanism for being at risk of exploitation or trafficking
 - Has had a recent recorded missing episode (in the last six months)
 - Is known by the police/YJS to be affiliated with groups, often referred to as gangs, involved in crime, violence and trafficking
 - Is known by the police/YJS to have siblings already involved in and affected by serious youth violence
 - Is known to local authority children's services (e.g., known to Early Help, is a Child in Need, is on a Child Protection Plan, is Looked After or has care experience)
 - Demonstrates school exclusion risk factors, e.g., persistent absences and suspension, displaying anti-social behaviour
 - Is currently in or leaving custody. If in custody, the young person is eligible if they will complete their custodial sentence within a given timeframe to allow them to engage in EXODUS.

The EXODUS programme structure over 12 months

The 12-month structured programme includes an initial 12 sessions of intensive one-to-one mentoring covering core topics, followed by a more flexible transitional phase, lasting around 26 weeks, focused on personal development and long-term goals. Mentoring can be a mix of in-person and virtual sessions. In the final phase of the programme (ending phase), young people are introduced to a Circle of Support and Accountability (CoSA) made up of community volunteers. After the ending phase of 12 weeks, the programme concludes with an exit interview and assessment. This process is displayed in Figure 1.

Figure 1: The EXODUS programme structure over 12 months

1. Introductory circle
2. Mentor induction
3. 12-session intensive phase
4. 26-week transitional phase
5. 12-week ending and completion phase
6. Circle of Support and Accountability group sessions
7. Exit interview and assessment



1. **The introductory circle:** This takes place in person, online or via a phone call between the young person and an UpskillU project coordinator (after the initial baseline meeting with a peer researcher, who also introduces the EXODUS programme if the young person is randomly allocated to the intervention). This introductory circle can also include family members and/or the referring professional. This meeting enables UpskillU to explain its restorative approach, the EXODUS programme and its independence from statutory services.
2. **Mentor introduction:** The young person is introduced to their mentor. The parameters of the mentor partnership are set, including establishing ground rules. At this session, the mentor completes:
 - a. An EXODUS outcomes star (not used by Coram as part of this evaluation⁸), which covers eight areas of development, including victim awareness and personal safety
 - b. A contract circle, which is like an agreement between the young person and their mentor and lays out learning style, areas of focus and expectations from mentoring
 - c. An initial safety plan (see [Appendix 2a](#))
3. **12-session intensive one-to-one structured restorative mentoring:** This intensive support phase involves weekly in-person or virtual meetings (depending on the young person's preference) and weekly check-in phone calls. Sessions are all one-to-one and consist of modules covering topics from UpskillU's pre-developed themes, which can be selected and adapted based on the young person's needs. The six core themes are:
 - Self-identity
 - Attitudes and values
 - Risks and consequences
 - Conflict and choices
 - Relationships, influences and decisions
 - Solutions and strategies

The mentorship includes personalised positive activities aligned with each young person's goals, such as leisure, sport, arts, volunteering or employment opportunities, typically two to three over the 12 months. Through triage or ongoing mentoring, mentors may also identify the need for

⁸ The outcomes star was not considered for this purpose, as it is more widely used to support practitioners when working with young people and is not a validated outcome measure.

additional tailored support (such as family sessions or advocacy), which can continue into later phases of the programme.

4. **26-week transitional phase:** At the end of the intensive phase, the mentor and young person complete a progress review assessing engagement, progress and any ongoing risks. Depending on the outcome, a young person may exit the programme due to sustained non-engagement or major changes in circumstances. During the transitional phase, mentoring continues (in-person or virtually) with a focus on longer-term goals and unfinished core activities, allowing flexibility in how the remaining weeks are used.
5. **12-week completion and ending phase:** The mentoring intensity is reduced to fortnightly virtual or phone check-in calls. The young person is introduced to their CoSA at this stage. The CoSA consists of a group of adult volunteers recruited from the local community, including the young person's mentor. CoSA volunteers are trained in restorative practice with professional supervision and generally include individuals with lived experience.
6. **CoSA group sessions** run over six structured sessions, held online or in-person every two weeks for 60 to 90 minutes. Working from a personalised support plan, the young person takes the lead in setting goals and objectives. The CoSA focuses on encouraging accountability and restorative justice while also helping the young person access mainstream community services to support their transition at the end of the programme.
7. **Exit interview and assessment:** At the end of the 12-month programme, the mentor and mentee complete an exit evaluation, including the EXODUS outcomes star and a red, amber and green (RAG) assessment. If risks remain, CoSA support can be extended; if not, the mentor helps connect the young person with community services. Volunteer CoSA members may also choose to stay in touch beyond the programme's end.
8. **UpskillU360 programme:** In selected cases, young people showing leadership potential and interest in youth work can join UpskillU's Traineeship Programme, which offers training, volunteering and mentoring experience to help them develop into future mentors. Some of these trainees were offered peer researcher positions within this evaluation.⁹

The lived experience of mentoring and delivery staff and volunteers

Most EXODUS staff members have lived experience¹⁰ or professional experience working with young people at risk in the community and/or in a secure centre. Some staff have completed the EXODUS programme themselves and the traineeship programme to become mentors. Staff and volunteers come from a range of cultural backgrounds, including many of the marginalised communities they work in. As many UpskillU staff members have lived experience and have offended within the areas where UpskillU works, they have insight into some of the community conflicts, gangs and groups in those areas and therefore have local knowledge around conflict rivalries.

What does EXODUS aim to achieve and what is its theory of change?

The main aim of the EXODUS programme is to reduce the likelihood of young people committing violence, offending and/or being affected by exploitation. For those in custody, the aim is to support the young person's reintegration into society.

⁹ See the section [Peer researchers](#) for more information.

¹⁰ Lived experience refers to experience that relates to any of the criteria in the eligibility criteria, such as involvement in the youth/criminal justice service, care experience and experience of school exclusion.

The core elements of the programme are illustrated in a visual representation of the EXODUS programme's theory of change, i.e., its **logic model** (Figure 2). Initially, this logic model was developed by UpskillU with the support of the research agency Ipsos in July 2023 prior to the commencement of Coram's involvement. In September 2024, the Coram study team and UpskillU's core team, which included senior managers and project coordinators from all three referral sites, met in person to review and refine the logic model (version below). This update did not affect the study's main aims.

What inputs are required to deliver EXODUS?

To deliver its intended activities and outcomes over a year and to an estimated 167–210 young people,¹¹ EXODUS requires the following inputs:

Funding:

- Staff costs (delivery): £571,200
- Staff costs (central/management): £80,800
- Staff costs (training & supervision): £28,000
- Equipment and materials: £10,000
- Travel and expenses: £23,000
- Other expenses (young people activities/incentives and adjustments): £20,000
- Overheads: £79,000
- **Total: £812,000**

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

- Delivery
 - 0.6 FTE Senior Coach and Quality Assurance Lead
 - 1 FTE Delivery Service Manager
 - 3 FTE Project Coordinators
 - 14 FTE Mentors
 - 4 FTE Peer Mentors/Researchers
 - 0.6 FTE Volunteer Coordinator
- Central
 - 0.6 FTE Project Admin
 - 0.6 FTE Lead Developer
 - 0.8 FTE Data Analyst
 - 0.2 FTE CEO

Facilities: Access to comfortable and private spaces to deliver mentoring. The programme uses free community venues or venues offered in kind by referral partners.

¹¹ The lower limit has been estimated based on the number of intervention young people randomised in 2025 (162) and the average intervention randomisation required per year as per the time available and the revised target (167). The upper limit is based on the average number of young people managed by a mentor at one given time as reported by UpskillU (15).

Research questions

The aim of this internal pilot was to assess the readiness of the EXODUS programme for a full efficacy trial. The overarching research question for the pilot was:

Is a full efficacy trial of the EXODUS intervention feasible?

This was broken down into six research questions that the pilot was designed to assess:

1. **Recruitment of young people to the trial:** the extent to which referral pathways were effective, with sufficient eligible referrals entering EXODUS
2. **Randomisation:** the randomisation process, including the acceptability of the referral pathways, consent and randomisation procedures to participants
3. **Monitoring data:**¹² the feasibility of the processes for collecting data on the demographic profiles and characteristics of young people randomised, as well as monitoring data on the uptake and attendance of those in the intervention group and what business-as-usual (BAU) support looks like for the control group
4. **Completion and response rates:**¹³ the feasibility of collecting outcome measures data via a self-reported online survey administered to young people and collecting local police data on (re)offending and violent (re)offending
5. **Fidelity:** whether the programme is being delivered in line with the trial protocol and logic model¹⁴
6. **Scale-up:** the ability of the EXODUS programme to scale up for an efficacy trial

Alongside the internal pilot, we also conducted an implementation and process evaluation (IPE). The IPE methods were qualitative (discussed in detail in the [Methods](#) section below) and aimed to help answer the internal pilot questions about the feasibility of the EXODUS programme moving to a full efficacy trial.

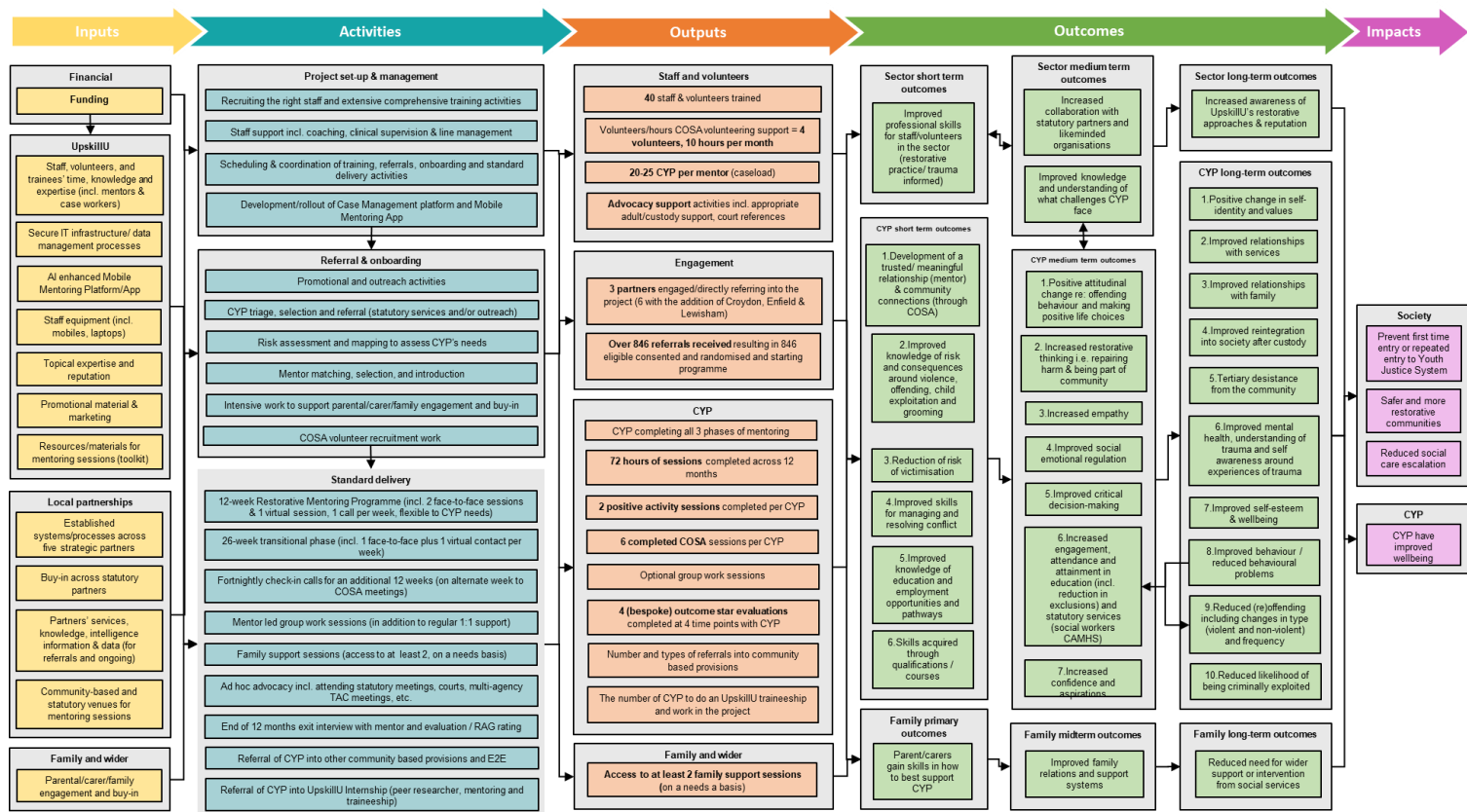
A detailed protocol for the EXODUS efficacy trial with an internal pilot and IPE can be found [here](#). We signpost to the trial protocol in various places throughout this report for the reader to access more detailed information if required.

¹² This criterion was originally titled 'Data collection', but as this was too broad a title and also overlapped with the following criterion, it was amended to clarify the actual scope of what was being covered.

¹³ This criterion was originally titled 'Response rates' but was amended to more accurately represent what was being covered within it, i.e., both survey completion and response/attrition.

¹⁴ This has been measured against fidelity sub-criteria within progression criterion 11 (see Table 2 in the Success criteria and targets section below), as well as a qualitative exploration of a selection of mentoring session debrief forms. The fidelity checklist reflects the core components of EXODUS and was co-developed with UpskillU.

Figure 2: EXODUS programme logic model



Success criteria and targets

Before the trial began, we co-developed a set of 12 progression criteria to help inform the decision about whether EXODUS could feasibly progress from the internal pilot to a full efficacy trial. These progression criteria were co-developed with UpskillU and the YEF. The progression criteria were designed to understand if:

- A large enough sample can be generated to power the trial.
- The randomisation processes are feasible, and referral partners have bought into the EXODUS trial.
- Anecdotally, young people feel comfortable with the randomisation process, and there are no adverse experiences as a result of randomisation.
- The evaluation is able to collect high-quality data from participants.
- EXODUS is being delivered consistently in line with protocols and its theory of change.

Table 1 outlines the progression criteria and what is needed to reach a green (proceed), amber (review) and red (stop) rating for each criterion. The thresholds for each rating were designed with input from UpskillU, the YEF and referral partners during the co-design phase towards the beginning of the project.

Table 1: Internal pilot progression criteria for EXODUS to move to efficacy trial

Criteria	Green (proceed)	Amber (review)	Red (stop)
1. Recruitment rate: recruitment of participants (young people) to internal pilot trial on track against target (n = 102)	80–100% (n = 82–102) of target number of young people recruited to internal pilot	60–79% (n = 61–81) of target number of young people recruited to internal pilot	0–59% (n = 0–60) of target number of young people recruited to internal pilot
2. Randomisation proportions: the proportions of participants allocated to each group should be 50:50	Young people are randomised 50:50 into control or intervention	Young people are randomised into control or intervention 45:55	Young people are randomised into control or intervention 40:60
3. Eligibility rate: young people referred to the trial are eligible	90–100% of young people referred are eligible (as per eligibility criteria detailed in <u>Participant selection</u> section)	70–89% of young people referred are eligible	0–69% of young people referred are eligible
4. Consent rate: young people who meet the eligibility criteria give consent to take part in the trial	90–100% of eligible young people give consent	70–89% of eligible young people give consent	0–69% of eligible young people give consent
5. Randomisation rate: young people who consented to taking part in the trial have been randomised	90–100% of young people who consented have been randomised	70–89% of young people who consented have been randomised	0–69% of young people who consented have been randomised
6. Completion rate: completion rate for primary outcome measure at six months post-randomisation (T2) for young people in intervention and control groups ¹⁵	85–100% completion rate of primary outcome measure at six months	60–84% completion rate	0–59% completion rate
7. Attrition rate to the trial: low attrition rates for both arms of the trial (intervention + control group)	0–20% attrition rate on both arms of trial	21–35% attrition rate on both arms of the trial	36–100% attrition rate on both arms of the trial

¹⁵ We assumed higher completion rates for the intervention group (EXODUS), but for both, we expected a minimum 85% completion rate.

8. Referral partner data: sufficient data collected from at least one referral partner on official police (re)offending and violent (re)offending for young people on trial	Low rates of missing referral partner data (80–100% of cases complete) from at least one referral partner	Some missing data (60–79% of cases complete) from at least one referral partner	High rates of missing data (0–59% of cases complete) from at least one referral partner
9. Delivery partner data: sufficient monitoring data collected from UpskillU to allow for analysis of uptake and demographic profile of young people	Low rates of delivery partner missing data (90–100% of cases complete)	Some missing data (70–89% of cases complete)	High rates of missing data (0–69% of cases complete)
10. Fidelity to trial: deviations from evaluation trial protocol from referral partners and delivery team	Low rates of deviations from the protocol (80–100% of cases with no deviations) Measured by: Incidents of contaminations, e.g., monitoring business-as-usual support to check for any reports of young people accessing 12-month EXODUS	Some rates of deviations from the protocol (70–79% of cases with no deviations) Measured by: Incidents of contaminations, e.g., monitoring business-as-usual support to check for any reports of young people accessing 12-month EXODUS	High rates of deviations from the protocol (0–69% of cases with no deviations) Measured by: Incidents of contaminations, e.g., monitoring business-as-usual support to check for any reports of young people accessing 12-month EXODUS
11. Fidelity to programme: deviations from the intervention logic model by delivery team	Low rates of deviations from the logic model (80–100% of cases with no deviations) Measured by monitoring UpskillU mentoring debrief and missed-session forms and using a fidelity checklist , which covers: 1. Dosage: a) At least 60% of organised in-person and virtual mentoring sessions are attended by young people	Some rates of deviations from the logic model (70–79% of cases with no deviations) (measured in the same way as green)	High rates of deviations from the logic model (0–69% of cases with no deviations) (measured in the same way as green)

	b) At least 50% of the planned CoSA meetings are attended by young people (only for eligible young people as CoSA meetings start at around 36 weeks into 12-month programme) 2. Coverage and consistency: a) Four or more core themes¹⁶ are covered in the 12-week intensive phase by mentor b) Risk assessments are completed for at least 80% of sessions by mentor		
12. Acceptability: acceptability of trial design	0–20% of young people required additional support from a referral partner professional There is a low level of reports from referral partners/other professionals of young people requiring additional emotional support after being randomised (for instance, if distressed about the randomisation outcome), gathered from the de-brief session with peer researchers/UpskillU peer researcher manager	21–35% of young people required additional support There is a medium level of reports of young people requiring additional support after being randomised	36–100% of young people required additional support There is a high level of reports of young people requiring additional support after being randomised

Note: CoSA = Circle of Support and Accountability

Extension to the pilot phase

During the internal pilot, 102 participants were recruited on a rolling basis between 18 April and 2 August 2024. This group was intended to be the main focus of the analysis on recruitment and follow-up for the original pilot phase (April 2024 to March 2025). However, by January 2025, after the internal pilot protocol was published in July 2024, it was identified that there were challenges faced with the recruitment of young people and the completion of six-month follow-up measures with the existing participants.

¹⁶ These are: 1. self-identity, 2. attitudes and values, 3. risks and consequences, 4. conflict and choices, 5. relationships, influences and decisions, 6. solutions and strategies.

Barriers

UpskillU staff told us during the IPE that some young people who were eligible and randomised into the trial were not suitable because they were already involved in other interventions. Staff also felt that recruitment to the trial required constant effort to build relationships with young people, their families and statutory referral partners to engage them and generate buy-in into the research. Despite senior staff being on board, apprehensions among frontline workers around randomisations limited the flow of referrals. Some referrers were hesitant to refer young people because they wanted the young person to receive the intervention and did not want to risk them receiving the control.

At the six-month follow-ups, the peer researchers stated that it was challenging to get through to young people via the phone (especially the control group). Although, once contacted, most young people were happy to contribute, many required multiple contact attempts through various channels (phone calls, emails and contact via parents/carers and professionals such as case managers and social workers). Barriers included young people not having the peer researcher's number saved, having to establish contact through parents or not responding to calls.

Further, in the first six months of the trial, UpskillU's monitoring data (mentoring logs, follow-up trackers) contained many gaps and was not regularly shared, making it difficult to understand what was happening in real time.

Mitigations

The shortfall in recruitment targets up to 1 January 2025 led UpskillU to expand to additional referral routes (mainly schools) within existing sites from January 2025 and to expand into new areas (Lewisham in April 2025, Croydon in November 2025).

To improve follow-up engagement, the peer researchers started calling young people in the control group every month instead of every three months to keep regular contact. Young people were also reminded about the vouchers available for completing follow-up surveys.

Coram also worked with UpskillU to agree on a set list of monitoring data items and create the templates needed to collect them. A regular data-sharing schedule, approved by the YEF, was then put in place for UpskillU to follow.

To assess the impact of these mitigation measures, Coram recommended extending the pilot phase in March 2025 (see Appendix 1 for details). The YEF approved a three-month extension, moving the pilot end date to 1 July 2025. Based on this revised timeline, the number of young people in the pilot phase increased from **102 to 350 young people** (recruited up to 1 July 2025). The mitigation strategies put in place seemed to have a positive impact on recruitment, with almost a third of the young people (29%) coming from new sources in existing sites (84 from schools in Northamptonshire and Haringey) or from a new site (16 randomised in Lewisham).

Northamptonshire paused referrals into the trial from the start of August 2025 following internal quality and safeguarding concerns identified during the study period. YEF led a thorough investigation of these matters and put in place an action plan for improvement that would be regularly monitored. However, Northamptonshire decided not to continue following their own inquiry and the partnership was ended mutually in March 2026. YEF and Northamptonshire communicated thoroughly and openly about these decisions throughout the process. While statutory bodies in Northamptonshire have discontinued participation, individual schools remain free to refer young people on to the trial.

After the conclusion of their internal inquiry in August 2025 and with an action plan in place, the YEF formally granted permission for the EXODUS trial to move into the efficacy phase on 1 September 2025. To answer the research questions in relation to the internal pilot, we report on all data available by the end of the extended pilot (April 2024 to July 2025) wherever possible. This allows us to capture key learning and the progress that informed the YEF's decision to move the trial into the efficacy phase.

Ethical review

Ethical scrutiny and approval

Ethical approval for the internal pilot of the trial was granted by the independent Coram Research Ethics Committee, chaired by Professor Jonathan Portes (reference: C-REC-2023-24-031) on 5 March 2024. The ethics process involved submitting a comprehensive ethics application, with accompanying research tools and materials, presenting to the ethics committee and addressing critical questions. The pilot trial did not begin until ethical approval was received.

Ethical approval for the internal pilot IPE was granted by the same committee on 3 September 2024 (reference: C-REC-2024-25_002).

Ethical approval for the full efficacy trial was granted by the same committee on 16 September 2025 (reference: C-REC-2025-26_001).

The trial was registered on the International Standard Randomised Controlled Trial Number (ISRCTN) website on 7 May 2024 (reference: ISRCTN19464308 and visit: www.isrctn.com/ISRCTN19464308).

Agreement to participate in the EXODUS trial

Children under 16 provided their assent to take part, and parental or guardian consent was also required; young people aged 16 and over were able to give informed consent for themselves, in line with our team values, ethical application and the YEF's guidance. The process is as follows:

- Consent to participate in the EXODUS trial is only obtained from young people who are referred to EXODUS and assessed as meeting the eligibility criteria for the programme by an UpskillU project coordinator
- Voluntary participation in the EXODUS trial is demonstrated by the young person's and their parent's/carers (where required) consent following an initial meeting with a trained peer researcher. The peer researcher gives a detailed explanation of the trial and time for the young person to consider their involvement and ask questions.
- Written and informed consent is gained from young people and their parent/carers/adult using an accessible information sheet, a privacy notice and consent forms. These were developed by Coram with UpskillU and our peer researcher team (see [Appendix 3](#) for the information sheet, [Appendix 4](#) for consent forms and [here](#) for the EXODUS data privacy notice). These documents explain:
 - What the evaluation is about and what a randomised controlled trial (RCT) means – including that young people will be randomly allocated to one of two groups if they agree to take part
 - What each group will get – one group will take part in the EXODUS programme (which is being tested to see if it works), and the other will receive the usual support services
 - That taking part is completely voluntary – young people can change their minds and leave the trial at any time, without affecting any support they already get

- What young people will need to do – they will be asked to fill out three questionnaires before being allocated to a group, and then again at six and 12 months; at the later follow-ups, they will be asked to complete one extra outcome measures questionnaire
- That Coram will request local police data on offending to support the data in the self-reported outcome measures on offending
- That Coram will request referral forms from UpskillU for young people who have consented to take part in the trial so that we can monitor and report on the demographic details of the young people recruited
- That any answers they provide will not be linked to them
- That their data will be used in the YEF data archiving

Coram researchers comprehensively trained the peer researchers in administering and explaining informed consent materials. This included a minimum of three training sessions before the start of the trial. The training covered:

- Understanding the peer researcher role
- Research methods and RCT design
- Explaining and obtaining voluntary consent
- Confidentiality, safeguarding and data protection
- How to successfully support young people to complete outcome measures (questionnaires)
- Understanding the randomisation process
- Ethical research and health and safety for researchers

The peer researchers received a handbook to take away at the end of the training, with step-by-step instructions on how to carry out the randomisation process (explored in more detail within the relevant section). As part of training, the peer researchers learned how to communicate the randomisation outcome to young people and their parents/carers in a balanced and sensitive way and how to mitigate and manage any possible disappointment and distress for the participants randomised to the control arm.

All informed consent processes and materials aimed to be accessible, inclusive and culturally sensitive.

Coram also maintained a Race Equity, Diversity and Inclusion log produced in collaboration with the YEF Race Equity Associate. This log was reviewed and updated quarterly by the study team.

Data protection

In line with the YEF's data protection guidance, Coram is the joint controller of personal data throughout the evaluation, along with UpskillU and referral partners who collect participants' personal data.

We have delivered the evaluation in accordance with our Data Protection Impact Assessment ([Appendix 5](#)) and Coram's data protection and information governance policy. We have developed tailored information-sharing agreements with all partners. Personal data was collected on the basis of public interest (Article 6(1)(e) of the General Data Protection Regulation [GDPR]).

Special category personal data being processed for research purposes is under GDPR Article 9.2(j) and DPA18 Schedule 1 Part 1.4(a), (b) and (c) for special category data, including data considered to be a protected characteristic under the UK Equality Act 2010.

The legal basis is appropriate because the processing is in the public interest so that we can provide more evidence of the effectiveness of programmes that aim to reduce (re)offending rates of young people to

inform future commission decisions. We were not aware of any other way to perform this task in a less intrusive way.

For ethical reasons, we actively requested consent from the participants providing data as part of the evaluation (for example, for interviews).

We have:

- Written and published clear guidance and a data privacy notice on how we handle, collect and process participants' personal data ([here](#)) with the legal basis stated plainly.
- Stored data securely on our internal server – this has only been accessible to Coram study team members.
- Used accessible participant information sheets and consent forms. We have communicated participants' rights to see or change the data we hold on them, or to have it deleted within a given timeframe.
- Transferred data securely – data transferred from UpskillU to Coram has been via a secure folder on SharePoint and is only accessible by named users.
- Only recorded our interviews with informed consent. Interview recordings will be securely deleted after finalisation of the final report.
- Anonymised or pseudonymised data where possible and separated personal data (e.g., referral forms) from questionnaire data. All participants are assigned a unique ID number for analysis, and aliases are used for interview transcripts and reporting.

We will:

- Securely delete project data at the end of the evaluation. We will ensure we delete names from the data at the end of the evaluation, once the data has been archived.
- Not use identifying information when reporting and disseminating findings

Data archiving

In line with [the YEF guidance](#) on archiving, two datasets will be prepared and submitted by evaluators. Datasets will include single rows for each young person. One dataset will be submitted to the Department for Education containing just young people's identifying data and unique project-specific reference numbers for each young person. The dataset will be pseudonymised – personal identifying data will be replaced with pupil matching reference numbers (PMRs). The PMRs and reference numbers will then be submitted to the Office for National Statistics (ONS) and stored in the YEF archive. The second dataset will include all evaluation data and project-specific reference numbers. It will be submitted to the ONS and stored in the YEF archive. Unique IDs will allow the two datasets to be matched.

The YEF will become the data controller when the data has been submitted by Coram.

Project team and stakeholders

The evaluation of EXODUS is led by Coram's Centre for Impact (part of the Coram Institute for Children). The intervention, EXODUS, was designed and is delivered by UpskillU. The EXODUS trial (UpskillU and Coram) is funded by the YEF. There are no known conflicting interests that would affect the design, delivery, analysis or reporting of this trial.

The following are the key members of the EXODUS delivery team:

- **Gifford Sutherland** (Chief Executive Officer, UpskillU) provides the governance and leadership for the EXODUS project delivery and the support of Coram's evaluation.
- **Wayne Headman** (Director, UpskillU) is responsible for providing coaching and clinical supervision to EXODUS mentors and for quality-assuring mentoring delivery.
- **Marie Ftanou** (Project Manager, UpskillU) oversees the delivery of EXODUS across referral partners and manages the delivery team. Marie works alongside Wayne to ensure quality standards and supports Coram with data collection and evaluation processes.
- **Alice Prestidge** (Peer Researcher Manager) is responsible for the recruitment and engagement of young people, as well as the management of the peer researchers.
- **Sasha Sasheva** (Administrative Support, UpskillU) leads business administration and data collection.
- **Amy Kirkland** (Project Coordinator, UpskillU) is responsible for overseeing the EXODUS programme for Oakhill Secure Training Centre (STC).
- **Najay Campbell** (Project Coordinator, UpskillU) is responsible for overseeing the EXODUS programme in Northamptonshire and Lewisham (onboarded April 2025).
- **Alexa Rincon** (Project Coordinator, UpskillU) is responsible for overseeing the EXODUS programme in Haringey.

The following are the key members of the Coram evaluation team:

- **Max Stanford** (Managing Director of Research Programmes, Coram) is the senior responsible owner and provides quality assurance throughout the evaluation.
- **Hannah Lawrence** (Senior Research Manager, Coram) is the principal investigator. Hannah provides day-to-day project management and leads the study team.
- **Mia Johnson Hall** (Research and Evaluation Officer, Coram) is a co-lead on the study. Mia's focus is training, supporting and managing the peer researchers; overseeing qualitative aspects of the IPE; managing the randomisation process; and being a day-to-day contact for UpskillU.
- **Narendra Bhalla** (Senior Quantitative Researcher, Coram) is a co-lead on the study with Mia. Narendra leads quantitative methodology design, randomisation, data collection, data quality assurance and analysis for the pilot and efficacy trial.
- **Amaka Udeagbaja** (Research Assistant, Coram) provides essential research support to the evaluation, such as qualitative fieldwork, quantitative data analysis and administrative tasks. Amaka also carries out randomisations.
- **Eren Ince** (Research Coordinator, Coram) coordinates data requests with UpskillU and provides vital administrative support to the trial. Eren also carries out randomisations.
- **Greg King and Elizabeth Raws** (Research and Evaluation Officers, Coram) provide research support to the trial and carry out randomisations.
- **Joseph Domingo, Gabriella Hurtado Yanez and Cameron James**¹⁷ (Peer Researchers, Coram/UpskillU) meet with young people to introduce them to the trial; gain consent; collect

¹⁷ We mention three peer researchers in the study team because these were the peer researchers that were a) happy to be named in a published report and b) most involved in the pilot phase.

baseline, six-month and 12-month outcome measures questionnaires; and provide support in the co-interviewing and co-analysis of qualitative data.

Peer researchers

We believe that it is essential that the study is grounded in lived experience. We have therefore recruited and trained peer researchers to be involved with the trial since January 2024. These are young people with experience of the EXODUS programme (or similar lived experience) who are undertaking (or have undertaken) a 12-month traineeship with UpskillU. While 12 young people were recruited initially, some were not able to take up or stay in the role due to personal life circumstances or other employment opportunities. Additionally, UpskillU continually recruits new trainees to its 12-month internship programme, and Coram continues a rolling programme of induction training for new peer researchers.

The peer researchers were offered flexibility with the hours that they could work each month, paid for from the evaluation budget of the EXODUS trial. The main focus of their role was to drive the initial contact, follow up with young people on the trial and collect quantitative and qualitative data. Some also transition to mentoring through the course of their traineeship. They also act as a committee of young advisors that meets three or four times a year to discuss and shape the research design, approaches, tools, fieldwork, analysis and dissemination, as well as to troubleshoot any emerging challenges. Race, equity, diversity and inclusion are also focal points of their work and standing items on meeting agendas.

The peer researchers played a critical role in supporting both the intervention and control groups in completing the questionnaires, creating a sense of trust and relatability that helped young people feel more comfortable and understood (see the section on peer research for more detail).

“I answered all the questions honestly, like when they said, ‘Have you carried a knife in the past six months?’ Like, I would either say ‘I have’, or I would say ‘yeah’, or if I haven’t, I would say ‘no’. But it’s easy to admit things to them [peer researchers], I’d say.” **Young person 11**

“At the start, when I saw the questions, I was like ‘Oh, not really, nah’ [because they were about crime and offending], but [the peer researcher] reassured me that because he’s gone through things like me.” **Young person 9**

Our advisors

We are also supported on an ad hoc basis by a pro bono economist, Stephen Gibson, and a pro bono statistician, Dr Andreas Culora. Stephen is Chair of the Government’s Regulatory Policy Committee and a Senior Fellow at the Mossavar-Rahmani Center for Business and Government at Harvard University. Andreas is an expert impact evaluation specialist. He has delivered impact evaluations across a range of social policy areas.

Trial steering committee

We recruited a trial steering committee made up of seven academics and professionals with relevant expertise and knowledge. The voluntary group meets quarterly to provide external scrutiny and advice on the evaluation. Our steering group members are:

1. Kirsten Anderson, Principal Research and Policy Advisor, Coram International
2. Lauren Bennett, Head of Evidence and Impact, Revolving Doors
3. Thaddaeus Douglas, Senior Evidence and Innovation Manager, YoungMinds and the Coram’s Race Equity Advisor

4. Obadiah Emaru, Project Manager, Groundwork
5. Jenny Johnstone, Senior Lecturer, Newcastle University
6. Dr James Rosbrook-Thompson, Senior Lecturer, City St George's, University of London
7. Chloe Tye, Investment Manager, Impetus

Methods

Trial design

EXODUS is being evaluated through an efficacy study with an internal pilot and IPE. This is a multi-site trial where participants are being recruited across five¹⁸ referral sites. All young people who are identified by a referring professional as eligible in the referring sites are referred to the trial (eligibility criteria are presented in more detail in the [Participant selection](#) section below). The trial uses a two-armed RCT design, where children and young people (CYP) referred to UpskillU are randomised to either the intervention or control group with a 50:50 allocation and on a rolling basis. Those in the intervention group are offered EXODUS, while the control group continues to have access to BAU support services available within their local areas. As part of BAU, UpskillU also completes a basic safety plan to help gauge the young person's situation, followed by monthly check-ins and, where relevant, light-touch signposting to resources/support that could be useful. Table 2 below provides a summary of the trial design.

Table 2: Trial design overview

Trial design, including number of arms		Two-arm randomised controlled trial
Unit of randomisation		Individual (young person)
Stratification variables (if applicable)		Referral partner ¹⁹ (Northamptonshire, Haringey and Oakhill Secure Training Centre in the internal pilot; with the addition of Lewisham in the extended pilot phase and Croydon in the efficacy phase)
Primary outcome	Variable	Self-reported offending behaviour
	Measure (instrument, scale, source)	Volume score on the Self-Reported Delinquency Scale (SRDS; Smith <i>et al.</i> , 2001)
Secondary outcome(s)	Variable(s)	1. Offending 2. Violent offending 3. Criminal exploitation and victimisation 4. Emotional and behavioural problems 5. Trusted adult relationship
	Measure(s)	1. Local police data on the number of criminal offences, including the number of arrests (which lead to conviction), cautions, reprimands, warnings and convictions

¹⁸ The trial initially began with three referral partners, which expanded to four in April 2025 with the addition of the London Borough of Lewisham. At the time of writing this report, Croydon was being onboarded as a fifth referral partner and started referring in November 2025 (out of scope for the purpose of this report).

¹⁹ All partners apart from Oakhill that are boroughs encompass referrals in varying quantities from the local council, police, statutory organisations and local schools.

	(instrument, scale, source)	- Local police data on the number of violent offences - Module A (Conventional Crime) of the Juvenile Victimization Questionnaire (JVQ) (Hamby <i>et al.</i>, 2004) - Total difficulties score on the Strengths and Difficulties Questionnaire (SDQ) (Goodman, 1997) - Social Support and Rejection Scale (SSRS) (Roffman <i>et al.</i>, 2000)
Baseline for primary outcome	Variable	Self-reported offending behaviour
	Measure (instrument, scale, source)	Volume score on the SRDS
Baseline for secondary outcome	Variable	- Offending - Violent offending - Criminal exploitation and victimisation - Emotional and behavioural problems - Trusted adult relationship
	Measure (instrument, scale, source)	- Local police data on the number of criminal offences - Local police data on the number of violent offences - Module A (Conventional Crime): subscale of the JVQ (Hamby <i>et al.</i>, 2004) - Total difficulties score on the SDQ (Goodman, 1997)

Participant selection

The eligibility criteria for young people to be referred to the EXODUS *trial* (evaluation) were consistent with the eligibility criteria in place for the EXODUS *mentoring programme* (intervention). This was agreed with the delivery partners at the co-design phase. The criteria remained the same throughout the internal pilot and will remain the same for the efficacy trial.

When a young person is identified by a referral partner as eligible for the EXODUS trial, a referral is made to UpskillU via an online form hosted on Typeform²⁰ ([Appendix 1](#)). This referral is reviewed and assessed by an UpskillU project coordinator to ensure it has been completed correctly and that the young person has met the eligibility criteria using the eligibility checklist. The inclusion (eligibility) and exclusion criteria from this checklist are detailed in Figure 3.

The initial baseline meeting takes place in the young person's local area, such as the YJS office, a local community centre or a meeting room in a school (if assessed to be safe and suitable). This meeting is conducted by a peer researcher, and consent for participating in the trial is obtained directly from the

²⁰ Typeform is a software company that specialises in online form building and online surveys. www.typeform.com

young person and a parent/carer if required. The training that these peer researchers receive and the role that they undertake in the data collection process are detailed in the data collection section below.

Rationale for the planned number of participants

Our approach to estimating the sample size for the efficacy study was conservative and was influenced by the following:

- **The available literature:** Previous research suggests that clinically meaningful change on the Self-Reported Delinquency Scale (SRDS) can be small, at just four (referenced in the evaluation protocol; Flynn *et al.*, 2022) or five points (referenced in an evaluation of functional family therapy and UK youth offending; Humayun *et al.*, 2017) of change. Unfortunately, previous research evaluating mentoring programmes and using the volume score on the SRDS is sparse. We identified one example in a small evaluation of the Youth at Risk's Coaching for Communities programme (Berry *et al.*, 2009), where a mean difference of 5.8 points in the volume of offending was reported between the intervention and control groups at follow-up. More broadly, a comprehensive meta-analysis of mentoring programmes for at-risk youth (Tolan *et al.*, 2014) reported a standardised mean difference effect size of 0.21 (95% confidence interval: 0.17–0.25) for delinquency (n = 25 studies) measured in a variety of ways. To detect change that is clinically meaningful and is in line with previously reported mentoring evaluations, we therefore based our sample size calculations on detecting small effects (≤ 0.2) for the primary outcome.

Figure 3: Trial inclusion and exclusion criteria

Inclusion (eligibility) criteria

11- to 17-year-olds (at the time of referral) who are at least one of the following:

- **Known to have offended**, where a young person has been arrested (and led to conviction); identified by police for offending and/or antisocial behaviour; or affected by serious violence, criminal or sexual exploitation (as perpetrators and/or victims)

OR

- **Considered to demonstrate high- or medium-risk factors²¹ associated with offending, exploitation and/or victimisation.** This is based on vulnerability assessments undertaken by referral partners, which consider whether a young person:
 - Is known to the YJS
 - Has a pending or in-place National Referral Mechanism for being at risk of exploitation or trafficking
 - Has had a recent recorded missing episode (in the last six months)
 - Is known by the police/YJS to be affiliated with groups, often referred to as gangs, involved in crime, violence and trafficking
 - Is known by the police/YJS to have siblings already involved in and affected by serious youth violence
 - Is known to local authority children's services (e.g., is known to Early Help, is a Child in Need, is on a Child Protection Plan, is Looked After or has care experience)
 - Demonstrates school exclusion risk factors, e.g., persistent absences and suspension, displaying anti-social behaviour
 - Is currently in or leaving custody If in custody, the young person is eligible if they will complete their custodial sentence within a given timeframe to allow them to engage in EXODUS.

Exclusion criteria

- Aged under 11 or over 18 years at the time of the referral
- At very high risk of harm or very high safety and wellbeing concern needing emergency support (as set out in [Appendix 2](#))
- With an acute mental health need requiring specialist intervention
- Is judged to lack the mental capacity to decide about participating in this trial

- **Pre-/post-test correlation:** Although covering a broader topic area (health and related research), a review of 20 RCTs using Patient Reported Outcome Measures (PROMS) undertaken between 1998 and 2019 at Sheffield University reported that the majority of pre-post outcome correlations fell between 0.4 and 0.6 (Walters *et al.*, 2019). The more likely middling scenario of a pre-post-test correlation of 0.5 was agreed upon for the main sample size estimate, based on the cited literature.

²¹ Descriptions of the risk and safety ratings used by referral partners can be found in [Appendix 2](#).

- **Estimated EXODUS recruitment rates:** We considered EXODUS's estimated programme recruitment rates to understand what would have been considered feasible in terms of recruitment and delivery.
- **The YEF guidance:** The YEF guidance at the time suggested that efficacy study RCTs should have a minimum detectable effect size (MDES) of 0.20.

Sample size calculations were carried out in R using the 'PowerUp' package, using the model with an individual-level random assignment design with fixed block effects. As shown in Table 3 (Protocol parameters), to detect an effect size of 0.2, a sample size of **n = 592** participants in the analytical sample was estimated. Based on our experience in previous RCTs in children's social care (e.g., Taylor *et al.*, 2023), we estimated the dropout of outcome measure completions (for our primary outcome) as 15% at six months and 30% at 12 months. We therefore recommended recruiting a minimum sample of 846 (102 in the original pilot phase and 744 in the efficacy phase) participants to detect an MDES of 0.2 in volume of offending at 12 months. The target sample size of 102 participants for the internal pilot was based on the timeframes guided by the YEF coupled with UpskillU's projected recruitment rates.

Update to the sample size in the efficacy trial

In May 2025, we reviewed the expected sample size for the efficacy trial based on actual recruitment rates. At that time, 259 young people had been recruited against a target of 366. Through discussion with UpskillU and the YEF, we revised the expected estimates based on the mitigations put in place (e.g., the addition of schools and Lewisham Council as referral partners).

In the time and resources available for the efficacy study, we estimated that a minimum sample size of 528²² would be more realistic, amounting to 754 young people, factoring in 30% attrition. This amounted to recruiting 33 per month from the point of recalculation (1 May 2025) until the end of the trial recruitment period (31 July 2026), a comparable number to the figures set out in the previous estimate. This sample would achieve an MDES of 0.212.

We will continue working with UpskillU to make every effort to achieve a sample size as close as possible to the original 592, as this would be desirable and in line with the YEF guidance. Given the primary outcome is measured at 12 months post-randomisation, the outcome measures data will be available by July 2027 (as per our assumption of 30% attrition).

²² This target was still kept comparable to the original planned sample, given that the referral trend saw a consistent increase from March to June 2025, with the additional sources starting to refer to the trial. A total of 157 CYP were randomised in this four-month period, as compared to 196 over the previous 11 months.

Table 3: Sample size calculations – protocol and extended pilot

		Protocol parameters	Extended pilot parameters
Minimum detectable effect size		0.2	0.212
Pre-test/post-test correlations	Level 1 (participant)	0.5	0.5
Intraclass correlations	Level 2 (referral partner)	-	-
Alpha		0.05	0.05
Power		0.8	0.8
One-sided or two-sided?		Two-sided	Two-sided
Average cluster size	Individuals within referral partners	197.3	105.6
	Referral partner count	3	5
Number of participants	Intervention	296	264
	Control	296	264
	Total	592	528

Data collection

We used a mixed-methods approach to evaluate the EXODUS internal pilot, combining quantitative and qualitative data collected from young people, UpskillU staff and referral partners. Table 4 describes the data collection methods and the number of participants or data points used in each approach. The sections below explain each data source, followed by the timeline and process for collecting the data.

Table 4: Overview of project data collection methods and participation

Research methods	Data collection methods	Participants/data sources
Quantitative outcome measures	Data for the self-reported outcome measures was collected directly from participants by peer researchers at three six-month intervals:²³ 1. Prior to randomisation (T1) 2. At six-month follow-up from randomisation (T2) 3. At 12-month follow-up from randomisation (T3)	n = 346 at T1 n = 116 at T2 n = 26 at T3
Quantitative local police data	Administrative data from the previous 12 months collected from the local police bi-annually for young people on the trial (only received from Northamptonshire in pilot)	n = 64 at T1 n = 64 at T2
Monitoring data	Quantitative administrative data recorded by UpskillU staff and shared with Coram on a rolling basis: 1. Referral form data with demographic information of all participants, along with randomisation log maintained by Coram 2. Mentoring logs of young people receiving EXODUS 3. Monthly check-in logs for young people receiving BAU support Qualitative monitoring data collected in three requests (July 2024, February 2025, April 2025; forms received September 2024, February 2025, November 2025)	Referral forms and randomisation data (n = 350) Mentoring logs (n = 60) Monthly check-in logs (n = 43) Debrief and missed-session forms (n = 14) 10 debrief forms and four missed-session forms relating to nine young people across all three delivery sites were collected This included five young people who were purposefully sampled and four young people were randomly sampled

²³ The data presented here covers all available data up to 1 July 2025 from each stage of follow-up and does not say anything about survey attrition, which is covered in detail in the findings section.

Qualitative interviews	Semi-structured interviews (November 2024 to April 2025) with young people, parents/carers, staff, mentors, referrers; creative methods used where feasible	n = 26 <u>Breakdown:</u> 11 participants: 10 randomised to EXODUS, one to business-as-usual support; three were based in Oakhill, five in Haringey, three in Northamptonshire Five parents/carers: three Oakhill, one Northamptonshire, one Haringey Four UpskillU staff members: two members of the delivery team, two mentors Six referring professionals across all three sites
Observation	Mentoring session observations (November 2024 to April 2025), selected via convenience/opportunity sampling	n = 4 Two observations in-community and two at Oakhill

Qualitative data collection methods

UpskillU provided **qualitative monitoring data** in three structured requests:

- **Request 1 (July 2024):** opportunity sample of five debrief and three missed-session forms from five young people-, covering mentoring sessions between **14 June 2024 and September 2024**. Forms were received in **September 2024**.
- **Request 2 (February 2025):** random sample of six ID numbers; requested two debrief forms per ID; received eight debrief forms from four young people, covering **28 August 2024 to 17 February 2025**. Two forms were duplicates; some IDs were withdrawn and replaced, but replacement forms were not received.
- **Request 3 (April 2025):** requested replacements for duplicates plus two debriefs for seven additional IDs. Forms were received in **November 2025**.

Across all three waves, **14 forms were collected (10 debrief, four missed-session), relating to nine young people** across **Oakhill, Haringey and Northamptonshire**.

These forms provided accounts of session content, engagement, challenges, and contextual factors influencing participation.

Qualitative interviews

Between **November 2024 and April 2025**, semi-structured interviews were-conducted with:

- **11 young people (10 EXODUS, one BAU; three Oakhill, five Haringey, three Northamptonshire)**
- **Five parents/carers**
- **Four UpskillU staff (two delivery team members, two mentors)**
- **Six referring professionals**

Young people were recruited through opportunity and convenience sampling, typically when they had mentoring sessions scheduled during the fieldwork window and were in active contact with their mentor.

Where possible, interviews incorporated **creative youth-centred methods** such as images, icons and body-mapping. These were not feasible in secure settings, such as **Oakhill STC**, where restrictions prevented researchers from bringing materials such as glue or scissors.

Observations

Researchers conducted **four observations** of mentoring sessions between **November 2024 and April 2025**: two in-community observations and two at Oakhill STC.

Most young people observed also participated in interviews, enabling triangulation between observed behaviour and self-reported experiences-.

The observations provided insight into relational dynamics, delivery style, environmental constraints and the ways mentors adapted their approach across settings.

Outcome measures

The self-reported data was collected using the following outcome measures:

- The SRDS: Variety and Volume (Smith *et al.*, 2001)
- Subscale of the Juvenile Victimization Questionnaire (JVQ) (Module A: Conventional Crime) (Hamby *et al.*, 2004)
- Strengths and Difficulties Questionnaire (SDQ) (Goodman, 1997)
- Social Support and Rejection Scale (SSRS)²⁴ (Roffman *et al.*, 2000)

To supplement the self-reported SRDS measure, local police data on offending and violent offending was also collected for young people on the trial as two secondary outcomes. Each source is explored in more detail below.

Primary outcome

In line with the primary aim of EXODUS to reduce offending, the primary outcome is the volume of offending at 12-month follow-up (i.e., the number of offending behaviours).

Offending is being measured primarily using the **SRDS**, which assesses the frequency and severity of 19 offending behaviours in the last 12 months. There is evidence that respondents answer accurately when asked if they have carried out these offending behaviours (Nock *et al.*, 2006; 2007). Internal consistency of the measure has been reported as 0.87–0.92, and inter-item correlation has been reported as 0.19

²⁴ This measure was collected only at six months, as the young people did not have access to a mentor at T1.

(Fonagy *et al.*, 2018; Humayun *et al.*, 2017). The measure has been found to correlate with official police records of arrests (89.5–95.2%) (McAra & McVie, 2005).

The participant can answer ‘yes’ or ‘no’ to each question about whether they have taken part in one of the 19²⁵ offending behaviours. The participants who answer ‘yes’ are asked how many times they did this and if they ‘got in trouble’. The SRDS produces two scores: the volume of delinquency score (the estimated minimum total number of offending behaviours reported) and the variety of delinquency score (the number of different offending behaviours reported). To calculate the volume score, the following values are assigned to each answer and totalled: once = 1; twice = 2; thrice = 3; four times = 4; five times = 5; 6–10 times = 6; > 10 times = 11. A participant can score a maximum of 198 on the volume score. To calculate the variety score: yes = 1 and no = 0. The number of items that the respondent answers ‘yes’ to will be calculated, producing a score ranging from 0 to 18. We are using the volume of delinquency score as our primary outcome owing to its greater sensitivity to change, but will also analyse and report on the variety of delinquency scores.

The SRDS is being used as the primary measure of offending, as it captures a substantial number of different types of offending behaviour. It is also more sensitive to changes in offending in the sample size anticipated for this trial compared with local police data. This is because local police data only captures instances reported by the police; some offending behaviour goes unrecorded, especially for CYP.

Secondary outcomes

In line with the aims of EXODUS and its logic model, the secondary outcomes focus on reducing the recorded incidence of offending and violent offending, as well as self-reported criminal exploitation and emotional and behavioural problems. We also measure the quality of trusted adult relationships, given that it is a key aim of the EXODUS programme. The secondary outcomes and the proposed measures are set out in Table 5 below.

Table 5: Secondary outcome measures for the EXODUS evaluation

Secondary outcomes	Measure
Recorded incidence of offending	Local police data, including arrests, cautions, reprimands, warnings and convictions
Recorded incidence of violent offending	Local police data, including arrests, cautions, reprimands, warnings and convictions associated with violent offending
Criminal victimisation and exploitation	Subscale of the Juvenile Victimization Questionnaire (Module A: Conventional Crime) Secondary measure: local police data on number of incidents of victimisation and exploitation
Emotional and behavioural problems	Strengths and Difficulties Questionnaire
Trusted adult relationship	Social Support and Rejection Scale

²⁵ Both volume and variety scores have been calculated for 18 of the 19 offending behaviours, with a direct link to the established scoring structure. The question style and option set for Q16 on bullying behaviour does not match the rest and has been excluded from the computation of the volume and variety score at this stage. However, alternative approaches to scoring will be reviewed for future reports.

Local police data

CYP may not report all offending behaviour through the SRDS due to error or unwillingness. Therefore, local police data is being used to measure **recorded incidence of offending**. This includes, for example, the number and type of criminal occurrences and their associated outcomes (whether the young person is still a suspect or has been convicted). The analysis will primarily focus on the volume of offending but will also look at the type of offending. Data is being requested from the police²⁶ every six months and is segregated based on randomisation date into baseline, six and 12 months. Data collected at each of these stages will look at offending data for the previous 12 months.

Given a focus of EXODUS and the YEF is CYP demonstrating risk factors associated with youth violence, a secondary outcome will be the **recorded incidence of violent offending**. This is defined as any offence involving violence or threats of violence, ranging from assault to murder (Crown Prosecution Service, 2022). This is also being measured using local police data but focuses on the number and type of criminal occurrences under violent offending and their associated outcomes (whether the young person is still a suspect or has been convicted). The analysis will primarily focus on the volume of violent offending but will also look at the type of violent offending. Data is being requested from the police²⁷ every six months and is segregated based on randomisation date into baseline, six and 12 months. The data collected at each of these stages will look at offending data for the previous 12 months.

Self-reported data

In line with EXODUS's intended outcome of reducing CYP's likelihood of being criminally exploited, **criminal exploitation** is being measured directly using one subscale of the **JVQ**. The JVQ intends to measure the victimisation of young people. It includes 34 items across five modules of victimisation and asks about experiences in the last six months. Literature has found associations between victimisation and trauma symptoms (Boney-McCoy & Finkelhor, 1995), and the JVQ has shown significant correlations with symptoms of trauma (Finkelhor *et al.*, 2005). A test-retest reliability assessment identified agreement for 95% of the screener endorsements; the range for items was from 79% to 100%. The JVQ has a good overall internal consistency score – the overall α for respondents answering every item is 0.80 (Finkelhor *et al.*, 2005).

We are using one of the five modules: **Module A: Conventional Crime** (eight items). We have excluded all other questions, as they are not relevant to the logic model and risk being emotionally triggering to CYP (e.g., 'Did anyone try to force you to have sex, even if it didn't happen?'). Including all five modules would also increase the length of the questionnaire, which could potentially increase the attrition rate. Guidance on the JVQ indicates that modules of the measure can be used individually where a more focused assessment is required (Finkelhor *et al.*, 2005). However, we have found limited reported psychometric properties for Module A: Conventional Crime when used independently (although the module has been reported to have α above 0.6 in Finkelhor *et al.*, 2005). We will therefore report psychometric properties in detail in our outputs. We will score responses to the questions we have selected from the JVQ at the item level – anyone who answers 'yes' to an item will be classified as a victim of this type of abuse. The

²⁶ Currently this data is collected from Northamptonshire Police and there are ongoing conversations with the Metropolitan Police about requesting this data for young people in Lewisham.

²⁷ Currently this data is collected from Northamptonshire Police and there are ongoing conversations with the Metropolitan Police about requesting this data for young people in Lewisham.

maximum score is therefore eight. We will also report on the percentage of CYP who answer 'yes' to at least one item. The measure is being collected directly from CYP at baseline, six- and 12-month follow-up.

In line with EXODUS's intended outcome of reducing CYP's behavioural problems and improving social and emotional skills, the trial is measuring **emotional and behavioural problems** using the self-reported **SDQ**. The SDQ is a brief behavioural screening questionnaire with 25 items across five subscales covering emotional symptoms, conduct problems, hyperactivity/inattention, peer relationship problems and prosocial behaviour. Respondents can answer with 'Somewhat True', 'Not True' or 'Certainly True' to each item. The items are scored on a three-point Likert scale (0, 1, 2). 'Somewhat True' is always scored as 1, but the scoring of 'Not True' and 'Certainly True' varies depending on the item. The score can range from 0 to 10 for each subscale and 0 to 40 for the total difficulties. Our main analysis will focus on the total difficulties score (first four subscales listed above), but we may look at individual subscales as part of our exploratory analysis. The SDQ shows internal consistency (alpha coefficients = 0.79 to 0.80) (Haywood *et al.*, 2014). The self-reported total SDQ score has a test-retest reliability score of 0.79 and a four-to-six-month stability score of 0.62 (Achenbach *et al.*, 2008). The SDQ is being used by YEF-funded projects to create consistency and comparability between different evaluations. The SDQ is being collected directly from CYP at baseline, six- and 12-month follow-up.

The CYP's **trusted adult relationship** is being measured using the 22-item **SSRS**. This scale is designed for a child or young person (aged 10–18) to self-report their positive and negative interactions with significant non-parental adults. It assesses four dimensions of social support and social rejection that youth may experience in relationships with important non-parental adults. These dimensions are:

- **Feeling valued** (six items, e.g., 'This person cares about me even when I make mistakes.')
- **Trust** (five items, e.g., 'I talk to this person about problems with my friends.')
- **Mentoring** (six items, e.g., 'I learn how to do things by watching and listening to this person.')
- **Negativity** (six items, e.g., 'I feel that this person will let me down.')

Response options are 'Never', 'Rarely', 'Sometimes', 'Often' or 'Always'. It is being administered to CYP in the intervention and control groups at the six- and 12-month follow-ups (it is not being collected at baseline as the intervention group would not yet have had access to a mentor). This aligns with the logic model that a trusted and meaningful mentor relationship can support CYP to make positive changes in their lives. Each item is scored from 1 (Never) to 5 (Always). Each subscale score is the average of the items that make up the subscale. Higher scores on the three positive scales reflect higher levels of support within the relationship. Higher scores on the negativity scale reflect higher levels of stress and negativity within the relationship. While not validated, we decided to use this measure based on the face validity of the items and their relevance to the EXODUS mechanisms of change described by UpskillU. The measure also does not specifically refer to mentoring relationships, so it can be used with the control group to make comparisons.

Quantitative data collection

The outcome measures were developed into online surveys hosted on SmartSurvey by Coram. The surveys exactly replicated the original outcome measures questions. For the SDQ, use of this tool was authorised by Youth in Mind²⁸ in April 2024.

²⁸ Available here: <https://youthinmind.com/products-and-services/sdq/>

To support anonymity, the questionnaires were linked to a young person by a unique ID created for the purpose of the trial. Earlier in the year, survey responses at the baseline and six-month stages with duplicate IDs were received (fewer than 10 from both surveys combined). After reviewing the Data Protection Impact Assessment (see [Appendix 5](#)) and Privacy Notices, it was decided that the young person's date of birth would be collected at each stage to support linkage with other datasets and resolve issues of ID duplication. This change came into effect on 28 March 2025.

Outcome data was collected directly from young people by the peer researchers at three intervals:

- Prior to randomisation to either the EXODUS mentoring programme or BAU support (T1)
- Six months from the date of randomisation (T2)
- 12 months from the date of randomisation (T3)

Baseline data collection (T1)

After a young person has been referred and then assessed as eligible for the EXODUS trial by an UpskillU project coordinator, the project coordinator arranges for the young person to meet in-person with a peer researcher (the baseline meeting = T1).

At this baseline meeting, the peer researcher introduces themselves and describes the trial and consent process. If the young person is happy to take part in the trial, they complete an online consent form.

Following this, the young person completes the set of baseline questionnaires via a secure online survey on the peer researcher's tablet. The young person can complete this questionnaire via a link provided to their smartphone (or another device available) or on a paper copy if preferred. If a paper copy is chosen, it is later filled out online by the peer researcher. The peer researcher is in the room to provide guidance to the young person or answer questions regarding the questionnaire but gives them time and space to answer the questionnaire privately.

As detailed above, the baseline outcome measures are:

1. The SRDS
2. Module A: Conventional Crime of the JVQ
3. The SDQ

Three-month check-ins and monthly check-ins

In between the baseline and six-month data collection, the peer researchers complete a three-month check-in with young people in the intervention group – which is a chance to check contact details and remind them of the trial to support engagement. UpskillU did maintain some records of these contacts, which were received by Coram for the first time in October 2025. However, they were not utilised for reporting, as there was no clear structure and a lot of missing information. Given that Coram was already receiving mentoring logs for the intervention group and monthly check-ins for the control group (which made the three-month spreadsheet somewhat obsolete), UpskillU proposed to discontinue the maintenance of three-month check-in records in January 2026 to reduce redundancy, and these have since been discontinued.

For the control group, the peer researchers check in monthly by phone (introduced at the end of January 2025 as a retention strategy, prior to the pilot extension). The aim was to build a connection with the control participants and support follow-up data collection at six and 12 months. At every check-in (for

both the intervention and control groups), the peer researchers ask five scripted questions to keep the process consistent. These are:

1. How are you?
2. What's your situation now compared with the last time we spoke?
3. Has anything changed since you joined the trial? Is anything stopping you from continuing to receive support and guidance?
4. How can I help move things forward for you in terms of getting external support?
5. What's going well in your life right now?

Six-month (T2) and 12-month (T3)²⁹ data collection

At six months and 12 months from the point of randomisation, young people are asked to complete follow-up questionnaires via an online survey. Those in the intervention group may be supported to complete the survey by a peer researcher directly after an appropriate mentoring session or the meeting may run separately. For those in the control group, they are contacted by a peer researcher via a method agreed at baseline data collection/a previous monthly check-in and supported to complete the questionnaires either in person or online.

In addition to baseline measures, the six- and 12-month surveys include the SSRS to measure the trusted adult relationship.

CYP receive a £10 thank-you voucher for completing the online survey at both six months and 12 months.

The data collectors: peer researchers

The peer researchers were utilised on the project from January 2024, with three to four actively working on the project at any one time. Their role involves meeting with the young people referred to the trial, explaining the trial to them, getting their consent (and their parent or carer's where needed) and completing the baseline outcome measures questionnaires. The peer researchers initially follow up with all participants at three months. At six and 12 months, they complete the outcome measures questionnaire again with participants in both trial arms.

The peer researchers also conducted fieldwork as part of the IPE (co-interviewing) and took part in analysis, reporting and dissemination activities.

Supporting data collection

Ongoing training and support were provided to the referral partners, EXODUS staff and peer researchers before the start of the trial and throughout.

The referral partners were briefed on the trial and processes, as well as the consent and the eligibility criteria. They also received training on completing referral forms with the correct demographic and additional data on CYP.

For the peer researchers, this included supporting CYP to fill out the outcome measures surveys. This meant providing practical support or answering questions about the survey's confidentiality. Support was also offered to help them understand the wording of the questions. This was balanced with ensuring the CYP were able to complete the questionnaires independently to reduce the likelihood that their answers

²⁹ In light of the pilot extension, data from the 12-month follow-ups that became available in the extended phase has been included in this report where relevant.

were influenced by the peer researchers' presence. It also included support for them to follow up with CYP in the control group to complete the six- and 12-month follow-up questionnaire. Before finalising the outcome measures survey, it was piloted with the peer researchers. UpskillU mentors were provided with training in explaining the trial to the CYP in the intervention and the process of completing the six- and 12-month follow-up questionnaires with the peer researcher.

The referral partners, UpskillU staff and peer researchers were provided with guidance, flowcharts and scripts to refer to as needed. We provided training and guidance to those completing the pre-populated local police data capture tool, monitoring and cost data before the trial and via data drop-in sessions.

CYP were provided with an easy-read sheet on the outcome measures as part of their information sheet and consent forms.

CYP needing extra support were identified through consultation with referral staff or by mentors for those in the intervention. Additional support in completing the survey is provided to CYP who require it.

Monitoring data

Internally, Coram maintains a randomisation log, which is a spreadsheet that holds randomisation records for all young people on the trial, as well as information around survey follow-up. Coram also collects two strands of monitoring data from UpskillU:

- 1) Referral form data
- 2) Mentoring logs (for intervention arm), monthly check-in logs (control arm)

Referral form data ([Appendix 1](#)) covers background information for all the young people referred and randomised, including sex, age, special educational needs and disabilities (SEND), mental health problems, access to free school meals (FSM), care experience and whether they are currently offending. UpskillU shares individual referral forms on a bi-weekly basis (for young people randomised onto the trial) with Coram, and demographic details of the young people are entered into a spreadsheet to maintain these records.

Mentoring logs (intervention group) of the young people receiving EXODUS cover session attendance, whether the session took place, where it took place and the format of the contact (virtual/face-to-face). The logs also detail which core themes³⁰ were covered, which activities were completed and whether a risk assessment was completed. These records are directly compiled into a spreadsheet and shared with Coram by UpskillU on a bi-weekly basis.

Monthly check-in logs (control group) maintained by UpskillU hold information on check-in attempts made with the young people receiving BAU support from peer researchers. These logs provide information on when check-ins were held in a given month and reasons for difficulty in engagement if they weren't completed. This practice was instated at the end of January 2025 to establish a connection with young people in this group to help drive follow-up data collection at six months and 12 months. This data was requested since the start of April 2025 but was only shared with Coram for the first time in October 2025, covering the period from April 2025 to September 2025. These logs have been identified as only being partially complete and have been reported on while acknowledging gaps in this information.

³⁰ Detailed in the EXODUS theory of change, these are: 1. self-identity; 2. attitudes and values; 3. risks and consequences; 4. conflict and choices; 5. relationships, influences and decisions; 6. solutions and strategies.

Debrief and missed-session forms were completed by the mentors after each mentoring session to record what was covered, including key discussion points, session activities and any issues, risks or progress noted for each young person. These forms were routinely shared with Coram by the programme coordinators on a rolling basis. Coram reviewed the submitted forms to build an understanding of the content and focus of the mentoring sessions and to assess whether the core components of the intervention were being delivered as intended. This information contributed to our broader monitoring data, supporting both descriptive insight into session delivery and a fidelity check against the planned intervention model. Three requests for these materials were made over the course of the evaluation, first using convenience sampling and then two random samples to diversify the sample.

Local police data

As mentioned, local police data on offending and violent offending is being collected for young people in the trial to complement self-reported outcome measures. Currently, data is available from Northamptonshire Police, with discussions ongoing with the Metropolitan Police to include Lewisham. Attempts to obtain data from Haringey Council have so far been unsuccessful due to the absence of a key overarching person responsible for multi-agency data, and so multiple contacts have yielded no response.

A test return from Northamptonshire Police in August 2024 provided a partial sample and was supported by a training session to interpret the data fields. Coram established a bi-annual data request process through to July 2027, with the first full return received in March 2025 and the second received in December 2025 (requested in September 2025).

The process is as follows:

- A data request sheet is shared with Northamptonshire Police every six months for the trial participants.
- The request sheet contains identifying information (name, date of birth) of the young person to facilitate data linkage, but the data return is pseudonymised for analysis by the police, removing identifying information and instead supplying the linked police ID alongside the young person's randomisation ID. The data is shared either in a password-protected file or via a secure server within Egress³¹ hosted by the police.
- Each data return covers all retrospective offences on record from the date of request³² for which the young person is suspected/convicted, and the date of each record is used to establish offending levels at the baseline and follow-up time points.

Qualitative data collection

For our qualitative data collection as part of the IPE, we asked UpskillU project coordinators to contact mentors, referral partners and parents/carers to take part in interviews, sharing consent and information sheets in advance.

Interviews with the referral partners and the delivery team took place online (MS Teams). All interviews with the parents/carers took place over the phone to fit their schedules and preferences. Interviews with the mentors either took place over the phone, in a community setting or at Oakhill STC.

³¹ Egress is used to share sensitive information securely by a number of UK councils, government departments and the NHS.

³² The police records cover all offences on their local system. Some data about the young person has older offences beyond the study scope but these are not included in the analysis.

There was potential for selection bias because UpskillU was the intermediary for these contacts. To minimise selection bias, we asked to speak to a range of participants from different services and areas wherever possible. To minimise bias in the interviews, researchers from the Coram team made it clear that the interview content would remain anonymous and not affect the relationship between the interviewee and UpskillU or any other services.

Coram and the peer researchers created semi-structured interview guides covering topics relating to the pilot research questions and the EXODUS theory of change.

Qualitative data collection with young people

UpskillU project coordinators or mentors contacted young people across the three delivery areas that were on the trial from the start of the pilot phase to invite them to take part in interviews. The mentors or project coordinators shared consent and information sheets ahead of the interview. Each young person received a £15 shopping voucher for taking the time to participate, on top of the £10 vouchers they were given at both T1 and T2 for completing the outcome measures surveys.

Recruiting young people in the intervention for interviews was generally straightforward, though it was difficult to reach those in the control group. Using peer researchers for initial contact might have made it easier to involve them, but the peer researchers' time was taken up with randomisations and follow-ups. In total, we interviewed 11 young people: 10 from the intervention group and one from the control group. This was a small sample but proportionate to a small qualitative piece of work as well as the pilot phase target sample.

Most interviews took place straight after a mentoring session, as this was the easiest way to engage young people without adding extra appointments. However, this meant they were often talking for around two hours in one go. As a result, some interviews were shorter because young people became tired.

Over half the sample of young people did not want to be audio recorded during the interview, including one young person who thought being recorded was "dodgy". Researchers are not permitted to take any electrical items into Oakhill STC, so no interview held at Oakhill STC was recorded. Instead, interviewers made some simple notes with pen and paper. Additionally, in Oakhill STC, there was rarely a clock in the room, so it was hard to keep track of time. We offered creative methods (a mapping exercise) to some participants, though this was not always possible due to a lack of table or floor space in some settings. For all interviews that took place in Oakhill, a peer researcher joined to run a joint interview. However, a peer researcher was not always available for interviews in community settings or over the phone.

Despite these challenges to qualitative data collection with young people, the interviews provided good insights into young people's experiences of mentoring and the research process. Qualitative interviews were conducted using opportunity and convenience sampling, with young people selected when they had mentoring sessions scheduled during the fieldwork window and were in active contact with their mentor. This approach enabled researchers to reach participants who were accessible and engaged at the time while still ensuring coverage across EXODUS and BAU groups and across Oakhill, Haringey and Northamptonshire.

For this pilot report, we only report on interview data that pertained to how young people were referred, recruited and randomised into the trial and how they experienced the data collection processes and engagement with the research and peer researchers.

We will not report on young people's qualitative perceptions and experiences of the mentoring until the final phase of reporting. Doing so at this interim stage could risk introducing bias or influencing the

ongoing delivery and participation in the trial, thereby compromising the integrity of the study. Secondly, our qualitative interviews focused on the implementation of the pilot trial and the acceptability and suitability of the referral, recruitment and randomisation processes rather than on young people's perceived outcomes of the intervention.

Randomisation

The EXODUS trial uses a two-armed RCT design, where young people referred to EXODUS are randomised to either EXODUS or BAU support with a 50:50 allocation and on a rolling basis, meaning no pause in randomisation between the pilot and efficacy phases was planned. Randomisation takes place at the individual level and is stratified by four referral partners (Haringey, Northamptonshire, Oakhill and Lewisham) to ensure equal group allocation among participants from each referral site.

The random sequence is generated in advance using the R package *randomizeR*,³³ utilising the permuted block randomisation function. Block sizes are set to be even to ensure equal allocation to each trial arm from every sequence generated. Further, each referral site is allocated a block to ensure equal allocations to each referral partner.

Initially, the first random sequences were generated as per the total expected pilot referrals from each site. Beyond this point, allocations have been generated based on site requirements, given the constant fluctuation in monthly demand overall and by site, to avoid an imbalance between trial arms. Block sizes are kept sufficiently large (greater than 10 per site), and in most cases, all referral sites were randomised together to ensure unpredictability. All sequences are generated by a Coram quantitative researcher. Allocation concealment is being maintained, as those involved in enrolling participants (peer researchers, Coram researchers and referral partners) do not know in advance of randomisation how the participants will be allocated.

Once generated, the randomisation sequences are incrementally fed into the backend of an easily operable Excel tool hosted securely on Coram's internal server, only accessible to the Coram study team. The tool allows evaluators to generate randomisation outcomes while preventing them from being able to view or anticipate the order of forthcoming randomisations hidden in the backend.

The trial participants are not blinded to trial arm allocation. UpskillU and the referral partners delivering BAU support are also not blinded, as they will know the young people to whom they are delivering the EXODUS intervention. This lack of blinding is a necessity of the trial design. However, the standardised self-reported outcomes and routinely collected local police data have been selected to avoid observer bias that may be introduced if outcomes were to be assessed by unblinded members of the delivery team or referring professionals.

Randomisation procedure

During the baseline meeting, after the young person has given consent and completed the set of baseline outcome measures, the peer researcher contacts the Coram research team via phone call to perform the randomisation. The Coram researcher notifies the peer researcher of the randomisation outcome on the phone call.

³³ Available here: <https://cran.r-project.org/web/packages/randomizeR/index.html> [accessed 19 March 2025]

The peer researcher then lets the young person know whether they are in the intervention group (and will receive EXODUS) or the control group (and will receive BAU support via the referral partner). Informing the young person within the meeting is to ensure there is no delay and to reduce disengagement.³⁴

If the young person is randomised into the intervention group, the peer researcher explains the EXODUS intervention and outlines next steps (a follow-up meeting/phone call from an UpskillU project coordinator). If allocated to the control group, the peer researcher explains the next steps and completes a safety plan ([Appendix 2a](#)) with the young person to help them find the right support.

Analysis

For each data-collection method, Table 6 sets out the analysis methods used, the research questions they address, how each approach links to the theory of change, and what the analysis involved. To answer the research questions, we triangulated the quantitative and qualitative data described below.

³⁴ In rare cases where a peer researcher is unable to get through to a Coram researcher, they have been instructed to submit the baseline response with a 'Control' allocation so as not to lose any data and inform the young person of the allocation later in the day/the following day when they hear back. The allocation is corrected in the data at the cleaning stage, using the randomisation log that captures the correct information.

Table 6: Overview of quantitative and qualitative analysis methods

Data collection method	Data analysis	Research question addressed	# participants included	What did the analysis examine?
Quantitative outcome measures questionnaires at: - Baseline (T1) - Six months (T2) 12 months (T3)	Simple descriptive statistics (e.g., univariate statistics, frequencies, means and percentages)	Completion and response rates, scale-up	346 at T1 116 at T2 26 at T3	- Whether data collection processes have been set up and embedded effectively - Completeness of outcome measures (data quality) - Response rates and sample attrition - Timeliness of survey responses - An overview of the sample outcome measures responses and scoring at baseline
Quantitative local police data (Northamptonshire)	Simple descriptive statistics (e.g., univariate statistics, frequencies, means and percentages)	Monitoring data, completion and response rates	64	- The data request process and the linkage of young people to the police database - An overview of local police offending data and outcomes against recorded offences at baseline

Data collection method	Data analysis	Research question addressed	# participants included	What did the analysis examine?
Quantitative monitoring data	Simple descriptive statistics (e.g., univariate statistics, frequencies, means and percentages) and comparisons	Recruitment, randomisation, monitoring data, fidelity, scale-up	Referral and randomisation logs: 350 Mentoring logs: 60 Monthly check-in logs: 43	• Whether EXODUS is reaching its target cohort and the profile of participants • Flow through the programme across both intervention and control groups • Demographic characteristics of young people on the trial • Overview of trial randomisation figures • Whether data monitoring processes have been set up and implemented effectively • Quality of the monitoring data • Descriptive analysis of mentoring logs and control check-in logs • Fidelity of EXODUS to the programme for young people in the intervention group
Qualitative, semi-structured interviews with young people, their parents/carers, mentors, UpskillU staff and referring professionals	Deductive thematic analysis – coding interview data against a framework based on predefined themes linked to the pilot’s feasibility questions Interview transcripts were reviewed and coded, and when interviews couldn’t be recorded, detailed notes were taken and coded in the same way.	Recruitment, randomisation, monitoring data, completion and response rates, fidelity, scale-up	Children and young people and parents/carers: 16 Mentors, referrers, delivery staff: 10	Deductive thematic analysis examined the pilot feasibility research questions about recruitment, randomisation, monitoring data, completion and response rates, fidelity and scale-up. We explored: • The willingness of young people to take part in the randomised controlled trial and acceptability of the study design • How well the recruitment methods worked

Data collection method	Data analysis	Research question addressed	# participants included	What did the analysis examine?
	For interviews with young people, we ran co-analysis sessions with the peer researchers. Together, we selected relevant quotes, reflected on how our own experiences shaped interpretation and discussed how quotes related to their experiences with young people. These discussions were transcribed and included in the analysis, and direct quotes from the peer researchers were used in the report.			• How the participants felt about being randomly assigned • How young people viewed the data-collection methods, including whether they seemed reliable and valid • What helped or made it harder for young people to take part in outcome measures completion and interviews • How closely the intervention followed its planned processes and whether it matched the Theory of Change • Early signs of outcomes or impacts, such as relationships with mentors and considerations for expanding the programme
Qualitative, non-participant observations of a mentoring session with young people and mentors	Simple framework analysis assessing the coverage of the programme's six core topics as well as the extent to which goal setting and risk assessments featured within sessions	Fidelity	4	• Coverage and consistency of content received by young people in the intervention group • Fidelity to trial and programme
Qualitative framework analysis of mentoring debrief forms	Simple framework analysis looking at the coverage of core mentoring components, risk	Fidelity, scale-up	14	• Feasibility of the delivery model

Data collection method	Data analysis	Research question addressed	# participants included	What did the analysis examine?
	assessment, goal setting, activities covered, other themes covered and overall detail or quality			- Activities and the dosage of EXODUS received by young people in the intervention group - Fidelity to the trial and programme

Quantitative analysis methods

We used descriptive statistics (means, standard deviations, percentages, etc.) to explore demographic characteristics of the trial participants, participant flow through the programme, as well as outcome measure completeness and response rates at baseline, six months post-randomisation and 12 months post-randomisation. We also descriptively looked at monitoring data in the form of mentoring logs and control check-ins and computed fidelity scores using this information. The balance of characteristics across trial arms was also examined descriptively. Continuous data such as age was analysed using means, standard deviations and range, and other categorical data was expressed using frequencies.

Qualitative analysis methods

We conducted a deductive thematic analysis of interviews with parents/carers, referring professionals, UpskillU mentors and delivery team members, focusing on themes linked to the pilot evaluation research questions. We systematically coded these themes to provide detailed insights into the trial's feasibility.

We also held a co-analysis session with the peer researchers to gather their perspectives on the interview data and trial feasibility. During this session, we verbally coded themes from young people's interviews, which were later documented for inclusion in this report.

Qualitative co-analysis methods: interviews with young people

For the qualitative data from young people, interview quotes were co-analysed alongside the peer researchers. A Coram researcher used a deductive approach to identify quotes from interview transcripts that would be relevant to the pilot research questions, and these were shared with the peer researchers at an online co-analysis session. In the co-analysis session, we first discussed our position and how personal experiences can affect what we see in the different quotes. We then discussed the quotes, looking at shared themes and what stood out to the peer researchers as potential codes. The peer researchers often used the quotes as a starting point to talk about the experiences of young people they have worked with. These quotes were transcribed by a researcher. Direct quotes from the peer researchers' analysis are used throughout the report.

Analysis of mentoring debrief and missed-session forms

Initially, mentoring debrief forms were selected by UpskillU as examples of good practice in debrief write-ups or examples of missed-session forms. These were shared with Coram.

Coram then aimed to diversify the sample by randomly generating a selection of ID numbers. UpskillU shared two debrief forms per young person receiving mentoring.

Debrief forms were analysed by Coram qualitatively against a framework that marked forms against coverage of the six core mentoring topics, risk assessment completions, goal setting, activities covered, other themes covered and overall detail and quality.

Analysis of observations

Notes recorded during observation sessions were analysed qualitatively against a framework with categories in alignment with the subtheme of coverage and consistency in order to provide insight into the fidelity of the EXODUS programme. The categories/themes of the analysis included coverage of the programme's six core themes and the feature of goal setting and risk assessments in the mentoring sessions.

Race, equity, diversity and inclusion

A race, equity, diversity and inclusion perspective has informed all aspects of the EXODUS trial. The research team practises ongoing reflexivity through weekly meetings that include structured reflective discussions, as well as quarterly reviews of a dedicated race, equity, diversity and inclusion log. These practices help the team consider how positionality, power and assumptions may shape recruitment, data collection, analysis and interpretation. Peer researchers are active contributors to this process, providing lived-experience insight to strengthen cultural responsiveness and participant equity.

Throughout the data collection and analysis, the team reflected on accessibility, cultural relevance and the potential impact of structural inequities on the participants' experiences and outcomes. Reporting and dissemination plans emphasise avoiding deficit framing and ensuring findings are communicated in a way that is respectful, inclusive and useful to CYP, practitioners and communities.

Timeline

Table 7 presents the study timeline from the inception phase through to progression to the full trial phase. The YEF approved a three-month extension to 1 July 2025 and added new criteria focused on recruitment and follow-up data. Following this, recruitment continued to strengthen, and by 30 June 2025, a total of 350 young people had been randomised, exceeding the target of 325 and putting the programme on track to reach 754 by July 2026. The extension thus increased the number of young people in the pilot from 102 to 350. With recruitment and follow-up improving, Coram recommended moving to a full efficacy trial in July 2025, which was approved by the YEF on 1 September 2025.

Table 7: A timeline of key evaluation and programme activities

Date	Activity
July 2023 – September 2023	Co-design phase between the Youth Endowment Fund (YEF), UpskillU, Coram and referral partners - Three co-design sessions with UpskillU, Coram and referral partners - Referral pathways and eligibility criteria established
October 2023 – March 2024	Set up, training and mobilisation phase: completing data-protection steps, agreeing on the randomisation process, recruiting/training peer researchers, developing research tools, delivering training to referral partners and drafting the trial protocol
March 2024	Ethics application submitted and approval received from the Coram Research Ethics Committee (REC) Data sharing agreements agreed and signed
April 2024 – July 2025	Pilot trial phase: UpskillU accepted referrals, recruited young people, collected consent and baseline data, randomised 350 participants and began delivering the EXODUS intervention to those in the intervention group
August 2024 – February 2025	Implementation and process evaluation (IPE) phase (for pilot)
September 2024 – October 2025	Statistical analysis plan: drafted, reviewed by the YEF and published

17 October 2024 – 2 March 2025	Six-month follow-up (T2) outcome measures questionnaires collected for young people in pilot
14 March 2025	Transition decision point document submitted to the YEF: Coram recommends extension to pilot
17 April 2025	The YEF agrees to extend the pilot phase to 1 July 2025 with a set of additional progression criteria
10 July 2025	Coram submits a second transition decision document to the YEF
1 September 2025	The YEF grants permission to progress to efficacy phase
31 October 2025	First draft of internal pilot report submitted to the YEF
September 2025	Coram REC approval of progression to efficacy phase
January 2026 – May 2027	IPE for the efficacy trial: interviews and observations with delivery staff, young people and parents/carers
31 July 2026	Referrals stop – recruitment to the trial ends
August 2026 – October 2027	Efficacy trial data analysis Drafting and submission of the efficacy trial report to the YEF
October 2027 – February 2028	Report review rounds with the YEF Peer review and UpskillU final report submitted to the YEF incorporating feedback Data prepared and submitted to the YEF data archive
July 2028	Report published by the YEF

Findings

The EXODUS pilot period ran from 18 April 2024 to 1 July 2025, covering the first 15 months of the project's delivery. In this section, we aim to draw on the fullest range of data available from the original and extended pilots to answer the overarching research question around the feasibility of a trial. The additional coverage provides the opportunity to explore the impact of the recruitment and retention measures introduced in January 2025 on participant numbers and engagement. This section is broken down into the following subsections:

- Participants
- Evaluation feasibility
- Evidence of promise
- Readiness for full efficacy trial
- Cost information

The datasets used and the time periods they cover are shown in Table 6 above and referenced throughout.

Participants

Journey through the EXODUS programme

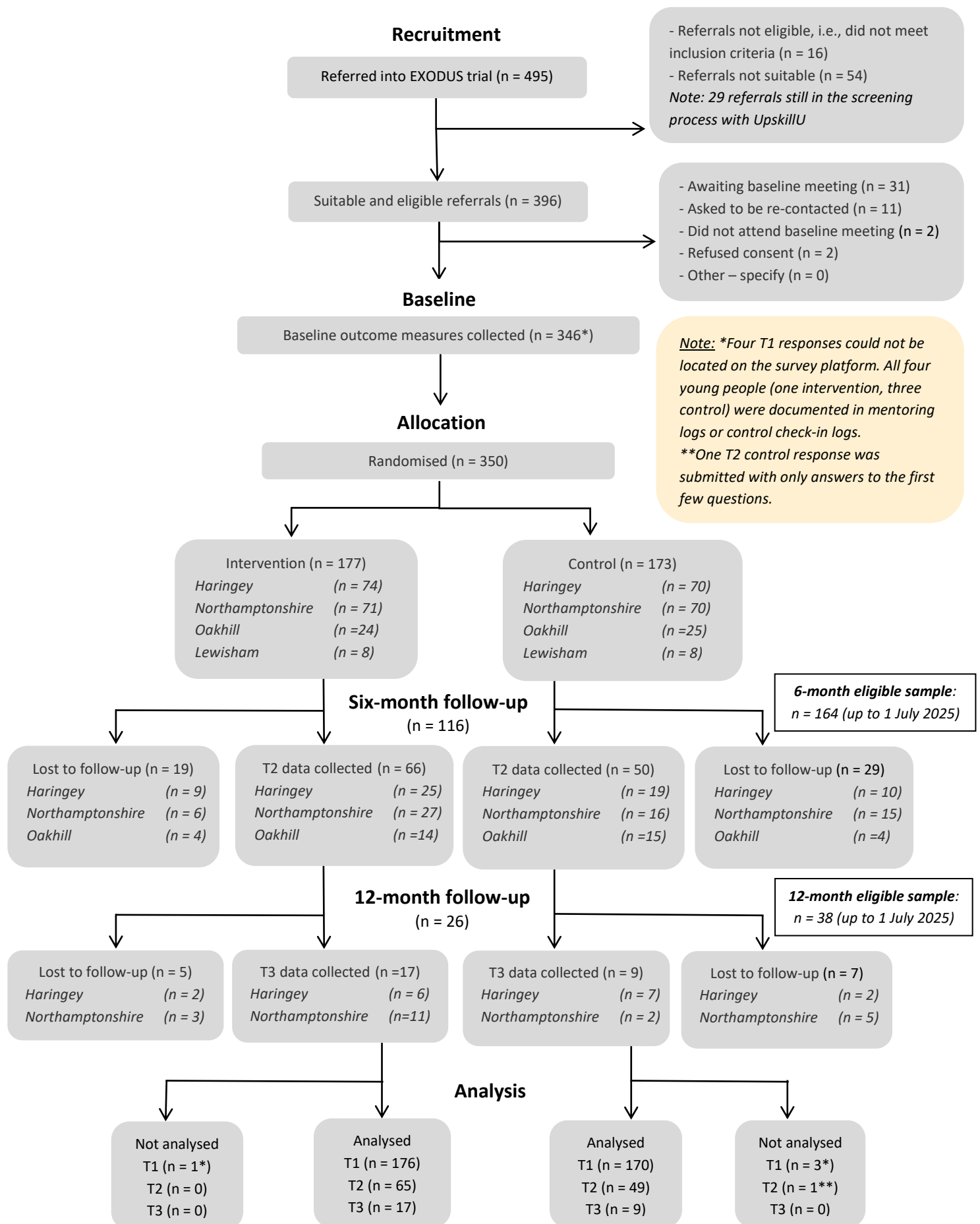
The CONSORT diagram (Figure 4) summarises the participants at each stage of the EXODUS trial (referral, randomisation, six-month follow-up, 12-month follow-up) up to 1 July 2025. While the most up-to-date randomisation figures are presented, this is not the denominator to assess attrition at follow-up. The data at the two follow-up points is presented with the sample that would have crossed the six-month and 12-month mark, respectively, to contextualise those findings appropriately. The diagram shows that:

- 495 young people were referred into the project within the extended pilot period (17 April 2024 to 1 July 2025).
- All young people were screened for eligibility and suitability,³⁵ and 396 met the criteria. 16 young people were considered ineligible, and 54 referrals were considered unsuitable for the programme. 29 participants were still in the screening process with UpskillU.
- Of those 396 young people who were eligible as of 1 July 2025:
 - 31 were awaiting their baseline meeting with a peer researcher.
 - 11 had asked to be re-contacted.
 - Two did not attend the baseline meeting.
 - Two did not consent to participate.

³⁵ **Eligible young people:** They meet the defined eligibility criteria for the trial based on identified need (e.g., involvement with the YJS or police, being in care or having a history of offending).

Suitable young people: Although they may meet eligibility criteria, they are not considered suitable to take part due to practical or logistical reasons (e.g., already having a mentor, having moved out of the area or country).

Figure 4: Participant flow CONSORT diagram between 17 April 2024 and 1 July 2025



- 350 young people were randomised by the end of the extended pilot phase (1 July 2025). Of these, 346 young people completed a baseline (T1) questionnaire, and four responses could not be located on the survey platform. However, all four young people (one intervention, three control) were documented in mentoring logs or control check-in logs.
- 177 young people (51%) were randomised to the intervention group and 173 (49%) to the control group, with equal or nearly equal splits across Haringey (51:49), Northamptonshire (50:50), Oakhill (49:51) and Lewisham (50:50).
- Out of an eligible sample of 164 young people at six months (T2), 116³⁶ young people completed a follow-up questionnaire; 66 (56%) were in the intervention arm and 50 (44%) in the control arm. At T3, 26 young people completed a follow-up questionnaire out of a possible 38, of whom 17 (65%) were in the intervention group, and nine (35%) were in the control group.
- By site, the split across arms was about equal for Oakhill at T2 (48:52) and close to equal for Haringey at T2 and T3 (57:43 and 46:54, respectively). However, it was less equal for Northamptonshire at T2 and more so at T3 (63:37 and 85:15, respectively). These numbers serve as an indication of the challenges UpskillU mentioned facing in following up with young people in the community, spread out across a large borough such as Northamptonshire.

Breakdown of referral partners by site

Within Northamptonshire, there were three main referral partners. Just over a third of the young people in the pilot were referred from the Youth Violence Intervention Unit, with under a third each coming from the Youth Justice Service and schools. The remaining 8% of referrals came from Early Help and Residential Homes.

Table 8: Breakdown of referrals across partners within Northamptonshire (n = 64)

Referral partners within Northamptonshire	# young people	% young people
Youth Violence Intervention Unit	50	36%
Youth Justice Service	40	28%
Schools	39	28%
Early Help	10	7%
Residential homes	2	1%
Total	141	100%

In Haringey, just under two-thirds of the referrals received were from Early Help, and under a third came from schools, with a handful from the Youth Justice Service.

³⁶ There were two surveys submitted at six months where the young person declined consent (one in each arm). These have been excluded from this total figure and the participant flow.

Table 9: Breakdown of referrals across partners within Haringey

Referral partners within Haringey	# young people	% young people
Early Help	89	62%
Schools	45	31%
Youth Justice Service	10	7%
Total	144	100%

In Lewisham, nearly all of the referrals received were from the Lewisham Integrated Adolescent Services within the Youth Justice Service with a single referral from Early Help.

Table 10: Breakdown of referrals across partners within Lewisham

Referral partners within Lewisham	# young people	% young people
Youth Justice Service	15	94%
Early Help	1	6%
Total	16	100%

Oakhill, on the other hand, was an individual referring entity in itself and did not comprise different referring teams.

Demographic characteristics

From our analysis of referral form data collected for the 350 young people who were randomised up to 1 July 2025 (see Figure 5 and **Error! Reference source not found.11** for the breakdown), 78% of the young people in the programme were male and 22% were female, while one young person classified themselves as 'Other'. In line with the eligibility criteria, all but two young people³⁷ were aged between 11 and 17, and the average age of the participants was 14. Similar proportions of participants were recruited from Haringey (41%) and Northamptonshire (40%), while the remaining 19% were recruited to the trial from Oakhill and Lewisham.

³⁷ These two young people were only marginally outside the suggested age range (18.04 years and 10.61 years) in the eligibility criteria. Referral forms are usually received about a month after randomisation, and by the time these cases were flagged and checked, both young people had already been involved in the trial for some time. To avoid causing any harm, Coram decided to keep them in the trial.

Figure 5: Demographic characteristics of the pilot sample³⁸

Gender	Count	%
Female	77	22%
Male	272	78%
Other	1	0%
Total	350	100%

Site	Count	%
Haringey	144	41%
Northamptonshire	141	40%
Oakhill	49	14%
Lewisham	16	5%
Total	350	100%

SEND	Count	%
Yes	119	41%
No	169	59%
Total	288	100%
<i>Don't know</i>	62	

FSM	Count	%
Yes	111	56%
No	88	44%
Total	199	100%
<i>Don't know</i>	151	

Current MH problems	Count	%
Yes	110	40%
No	164	60%
Total	274	100%
<i>Don't know</i>	76	

Level of risk	Count	%
Low	36	10%
Medium	264	75%
High	44	13%
Very High	6	2%
Total	350	100%

Age	Count	%
10	1	0%
11	17	5%
12	29	8%
13	63	18%
14	64	18%
15	70	20%
16	59	17%
17	46	13%
18	1	0%
Total	350	100%

EHCP	Count	%
Yes	60	20%
No	234	80%
Total	294	100%
<i>Don't know</i>	56	

Care experienced	Count	%
Yes	52	16%
No	266	84%
Total	318	100%
<i>Don't know</i>	32	

Currently offending	Count	%
Yes	134	38%
No	216	62%
Total	350	100%

Level of safety concern	Count	%
Low	33	9%
Medium	238	68%
High	67	19%
Very High	12	3%
Total	350	100%

Note: EHCP = Education, Health and Care Plan; FSM = free school meals; MH = mental health; SEND = special educational needs and disabilities.

³⁸ Due to rounding, the percentage totals may not sum to exactly 100%.

42% of the young people were from a White ethnic background, of which 31% were White British. Meanwhile, 27% were from a Black ethnic background, 19% were from a Mixed ethnic background, 11% were from other ethnic groups and the remaining 1% were from an Asian ethnic background.

Table 11: Ethnicity breakdown of pilot sample^{39,40}

Ethnicity – detailed	Count	%
White	147	42%
English, Welsh, Scottish, Northern Irish or British	109	31%
Any other White background	38	11%
Black, Black British, Black Welsh, Caribbean or African	93	27%
African	47	13%
Caribbean	33	9%
Any other Black, African or Caribbean background	13	4%
Mixed or multiple ethnic groups	66	19%
White and Black African	11	3%
White and Black Caribbean	33	9%
Any other Mixed or multiple ethnic groups	22	6%
Asian or Asian British	5	1%
Indian	-	-
Pakistani	-	-
Bangladeshi	-	-
Chinese	-	-
Any other Asian background	-	-
Other ethnic groups	39	11%
Arab	-	-
Any other ethnic group	-	-
Total	350	100%

Among the records with available data, 56% of the participants were reported to be eligible for FSM, but this data was missing from 43% of the forms. Similarly, 41% of the participants were reported to have SEND needs, and 20% were reported to have an Education, Health and Care Plan (EHCP). However, 18% and 16% of the referrers, respectively, did not include this information. 40% were reported to be having current mental health problems (22% of the forms did not contain this information). 16% of the participants were care experienced (9% did not contain this information). A very small proportion of the sample were migrants/refugees (2%) or did not speak English as their first language (9%).

As per the referral form data, over a third of the young people (38%) were reported to be currently offending. The majority of the young people were reported by referrers as having a medium level of risk (75%) and a medium level of safety and wellbeing concern (68%). The way each category rating is defined under risk and safety and wellbeing concern is provided in [Appendix 2](#).

³⁹ Due to rounding, the individual percentages may not sum to sub-total percentage values.

⁴⁰ To reduce the risk of identification, the counts have been hidden for ethnic sub-groups if all, or all but one within an ethnic group are below five (replaced by '-'). Where this is not the case, subgroups with counts less than five have been merged with the 'Any other' subgroup.

Sample representation

The current data suggests that the EXODUS programme is successfully engaging minority ethnic people, with representation greatly exceeding general population proportions in England. As per the 2021 Census, of the population aged 11 to 17, only 6% were from Black ethnic groups, 6% were of Mixed ethnicity and 3% were from other ethnic groups.⁴¹ The sample proportions also over-represented minority ethnic groups in comparison with young people in the youth justice system, where these groups are already over-represented relative to the general population. As per Youth Justice Board data for children cautioned or sentenced in 2023/24,⁴² 12% were Black, 11% were Mixed, 5% were Asian and 2% were from other ethnic groups, compared with 27% Black, 19% Mixed, 1% Asian and 11% Other in the EXODUS internal pilot sample. The over-representation of these groups (other than Asian) could be considered an indication of the proactive steps taken by UpskillU to embed race equity within their service delivery, as well as by Coram to keep this as a standing item at meetings with peer researchers and the trial steering committee.

These findings can be contextualised further when taking into account regional variation (see Table 12).⁴³ In line with the national trend, minority ethnic young people in Northamptonshire and Haringey were over-represented in the EXODUS sample compared with the general population (except for Asian young people). However, sample demographics were largely comparable with proportions of young people who were cautioned or sentenced in those areas in 2023/24. The exceptions to this were over-representation in other ethnic groups in Haringey (19% in EXODUS compared with 6% in YJS data) and Mixed ethnicity groups in Northamptonshire (16% in EXODUS compared with 9% in YJS data), as well as under-representation in Black ethnic groups in Haringey (38% in EXODUS compared with 47% in YJS).

Table 12: Site-wise comparison of EXODUS sample, general population and sentencing statistics^{44,45,46}

Data comparison: EXODUS RCT (11–17 years), Census (11–17 years) and YJS (10–17 years)	Haringey			Northamptonshire			
	EXODUS sample	2021 Census	Cautioned/sentenced in 2023/24	EXODUS sample	North (2021 Census)	West (2021 Census)	Cautioned/sentenced in 2023/24
White/White British	22%	46%	32%	67%	86%	80%	76%
Black/Black British	38%	23%	47%	13%	5%	7%	11%
Mixed	19%	11%	15%	16%	5%	6%	9%
Asian/Asian British	3%	8%	0%	1%	4%	6%	0%
Other	19%	11%	6%	3%	1%	1%	2%

Note: RCT = randomised controlled trial; YJS = Youth Justice Service

⁴¹ Calculated using Census 2021 data on sex and ethnicity, available at:

www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/ethnicity/datasets/ethnicgroupbyageandsexinenglandandwales.

⁴² Data extracted from the 'Children cautioned or sentenced' dashboard for 2023/24, available at:

<https://public.tableau.com/app/profile/chris.strevens/viz/ChildrenCautionedorSentencedDashboard/Dashboard12>.

⁴³ The data for Lewisham is not included within this analysis due to the small sample size covered within the extended pilot period (n = 16).

⁴⁴ General population figures calculated using Census 2021 data on sex and ethnicity, available at:

www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/ethnicity/datasets/ethnicgroupbyageandsexinenglandandwales.

⁴⁵ Data extracted from the 'Children cautioned or sentenced' dashboard for 2023/24, available at:

<https://public.tableau.com/app/profile/chris.strevens/viz/ChildrenCautionedorSentencedDashboard/Dashboard12>.

⁴⁶ Due to rounding, the percentage totals may not sum to exactly 100%.

Girls in the EXODUS sample (22%) were expectedly under-represented in comparison with the national figure (49%⁴⁷ but seemed to be over-represented in comparison with the proportion of girls who received a caution or sentence in 2023/24 (15%⁴⁸). Young people within minoritised groups were also over-represented compared to national figures: SEND (41% compared with 14%⁴⁹ for 2024/25), having an EHCP⁵⁰ (20% compared with 5%⁵¹ for 2024/25), eligible for FSM (56% compared with 26%⁵² nationally for 2024/25). While acknowledging the missing information in the referral form data against these fields, the difference in proportions remains high. As EXODUS progresses to an efficacy trial, we will continue to monitor referral form data to assess whether the trial is accessible to all eligible young people.⁵³

Descriptive analysis of baseline outcome data

The quality of the self-reported and local police offending data is explored further through a descriptive analysis of this data at baseline to provide further insight on the young people in our sample.

Self-Reported Delinquency Scale

The SRDS assesses the frequency (variety) and severity (volume) of 19 offending behaviours in the previous 12 months. The participant answers 'yes' or 'no' to each question about whether they have taken part in an offending behaviour, and those who answer 'yes' are asked how many times they did it and if they got into trouble. Table 13 below summarises both the SRDS variety and volume (primary outcome) scores at baseline for the young people within the pilot period with available data (n = 346). For each offence, the variety incidence is summarised by percentages, while the volume incidence is summarised as averages. In the latter case, average volume is presented based on only those who reported committing the offending behaviours, as well as for the whole sample. Both volume and variety scores have been calculated for 18 of the 19 offending behaviours⁵⁴ with a direct link to the established scoring structure. However, alternative approaches to scoring will be reviewed for future reports.

In terms of variety, assaulting someone on purpose (60%), skipping or skiving school (52%), fare dodging (50%) and being noisy in public (48%) were the offending behaviours that most young people reported committing. Just under a third mentioned shoplifting (31%), damaging property (30%) or carrying a knife or weapon for protection (29%). Very few young people wrote that they bullied someone based on their race/skin colour (2%).

When looking at the average volume of young people who committed an offending behaviour, young people reported selling illegal drugs the most on average (8.7 times), followed by skipping/skiving school

⁴⁷ From 'Youth Justice Statistics: 2023 to 2024', available at: www.gov.uk/government/statistics/youth-justice-statistics-2023-to-2024/youth-justice-statistics-2023-to-2024.

⁴⁸ Data extracted from the 'Children cautioned or sentenced' dashboard for 2023/24, available at: <https://public.tableau.com/app/profile/chris.stevens/viz/ChildrenCautionedorSentencedDashboard/Dashboard12>.

⁴⁹ From DfE SEN statistics for the academic year 2024/25: <https://explore-education-statistics.service.gov.uk/find-statistics/special-educational-needs-in-england/2024-25>.

⁵⁰ An education, health and care (EHC) plan is for children and young people aged up to 25 who need more support than is available through special educational needs support. EHC plans identify educational, health and social needs and set out the additional support to meet those needs: <https://www.gov.uk/children-with-special-educational-needs/extra-SEN-help>.

⁵¹ From DfE SEN statistics for the academic year 2024/25, available at: <https://explore-education-statistics.service.gov.uk/find-statistics/special-educational-needs-in-england/2024-25>.

⁵² From DfE statistics on school pupils and their characteristics for the academic year 2024/25, available at: <https://explore-education-statistics.service.gov.uk/find-statistics/school-pupils-and-their-characteristics/2024-25>.

⁵³ While we are aware that it would be helpful to look at this compared to young people represented in the YJS at the local level, at this stage, this information has been presented as an indicative guide, and these comparisons can be explored in more detail in the final report.

⁵⁴ The question style and option set for Q16 on bullying behaviour does not match the rest and has been excluded from the computation of the volume and variety score at this stage.

(7.9 times), fare dodging (7.3 times), racial assault (7.0 times) and carrying a knife/weapon (6.5 times). The average incidence of shoplifting (6.0 times), being noisy in public (5.6 times), assault (5.5 times), robbery (5.5 times) or riding in a stolen vehicle (5.4 times) was also relatively high among those who committed these behaviours.

Table 13: Baseline SRDS variety of offending frequency and average volume of offending

No.	Self-Reported Delinquency Scale Items	Variety #	Variety % (n = 346)	Average volume by offenders (n = Variety #)	Average overall volume (n = 346)
1	Fare dodging	174	50%	7.33	3.69
2	Noisy behaviour in public	166	48%	5.60	2.69
3	Shoplifting	106	31%	5.98	1.83
4	Ride in a stolen vehicle	72	21%	5.44	1.13
5	Theft from school	49	14%	3.88	0.55
6	Carried a knife/weapon	102	29%	6.50	1.92
7	Defacing property	54	16%	4.83	0.75
8	Robbery	55	16%	5.47	0.87
9	Criminal damage	103	30%	3.61	1.08
10	Housebreaking	31	9%	3.90	0.35
11	Theft from home	65	19%	4.63	0.87
12	Broken into vehicle to steal	19	5%	4.11	0.23
13	Fire-setting	75	22%	3.51	0.76
14	Harming or injuring animals	24	7%	3.46	0.24
15	Assault	206	60%	5.52	3.29
17	Racial assault or harassment	8	2%	7.00	0.16
18	Selling illegal drugs	86	25%	8.74	2.17
19	Skipped or skived school	181	52%	7.87	4.12
	Average scores (Median scores)	346	4.55 (4.00)	26.69 (19.00)	

While responses overlap with the most committed offending behaviours detailed above, there are differences as well (i.e., the most common behaviours were not necessarily committed with the most frequency). Examining the average volume of an offending behaviour across the entire sample (considering both variety and volume), young people reported skipping or skiving school the most on average (4.1 times), followed by fare dodging (3.7 times) and assault (3.3 times). Many young people, on average, also mentioned being noisy in public (2.7 times), selling illegal drugs (2.2 times), carrying a knife or a weapon (1.9 times) or shoplifting (1.8 times). Very few young people, on average, said that they

participated in racial assault (0.2 times), broke into vehicles to steal (0.2 times) or harmed animals (0.2 times).

The variety of offending score ranges from 0 to 16, and the average score for the pilot sample is 4.6 different offending behaviours per person in the last 12 months. The volume of offending score ranges from 0 to 137, and the average score for the pilot sample is 26.7 offending behaviours committed by a person in the last 12 months.

As in Table 14, only 10% of the sample had zero volume scores at baseline, i.e., reported not committing any of the listed offending behaviours. Over half of the sample engaged in between one and 30 offending behaviours (57%), and nearly three-quarters of the sample (75%) committed between one and 50 offending behaviours, where most young people reported committing between 11 and 20 offending behaviours (22%). Only 15% of young people reported committing 51 or more (up to 137) offences. Given the skewed nature of these outcome scores, in the previous table, we also report the more robust median variety score (four different offending behaviours per person in the last 12 months) and median volume score (19 offending behaviours per person in the last 12 months).

Table 14: SRDS volume of offending frequency distribution table

Self-Reported Delinquency Scale volume of offending (grouped by number of occurrences)	Frequency	Proportion (%)
0	34	10%
1–5	45	13%
6–10	25	7%
11–20	77	22%
21–30	50	14%
31–40	38	11%
41–50	26	8%
51–60	14	4%
61–70	7	2%
71–80	12	3%
81–90	5	1%
91–100	6	2%
101+	7	2%
Total (valid responses)	346	100%

There was also some additional information asked of young people around these offending behaviours. Among those that:

- (Q4) rode in a stolen vehicle (n = 72), 28% (20 young people) reported that they had stolen the vehicle they were riding in.
- (Q6) mentioned carrying a weapon (n = 102), 70% reported carrying a large knife/flick knife, while 16% reported carrying a small knife/penknife (85% carried knives in total).
- (Q15) got into a fight (n = 206), 51% reported giving the other person bruises or a black eye, 18% reported inflicting scratches/cuts, 8% reported inflicting broken bones and 6% reported causing other injuries. 27% of young people reported inflicting no injuries.

- (Q19) skipped/skived school (n = 175), when asked about how their parents felt, 43% mentioned they were worried, while 26% mentioned they were angry. A few said they were not bothered (15%) or they didn't know (14%).

Bullying behaviour

Most young people mentioned saying nasty things/calling people names (68%), ignoring them on purpose (55%) or threatening to hurt them (48%). Fewer young people mentioned hitting/spitting/throwing stones (27%) or influencing others to participate in bullying (16%).

Table 15: SRDS Q16 – bullying behaviour response frequency table⁵⁵

Self-Reported Delinquency Scale Q16 <i>[During the last year, how often did you do each of these things to someone you know?]</i> (n = 346)	Most days		At least once a week		Less than once a week		Never	
Q16.1 Ignore them on purpose or leave them out of things	53	15%	66	19%	72	21%	155	45%
Q16.2 Say nasty things, slag them off or call them names	128	37%	60	17%	46	13%	112	32%
Q16.3 Threaten to hurt them	72	21%	48	14%	45	13%	181	52%
Q16.4 Hit, spit or throw stones at them	25	7%	20	6%	47	14%	254	73%
Q16.5 Get other people to do these things	19	5%	15	4%	20	6%	292	84%

Getting in trouble

Along with variety and volume, as part of the SRDS questionnaire, CYP were asked about whether they got in trouble for committing the listed activities and with whom, if so (e.g., the police, an adult, parents). These frequencies are summarised in Table 16, and key things to highlight are summarised in the following bullets.

⁵⁵ Due to rounding, the percentage totals may not sum to exactly 100%.

Table 16: SRDS getting in trouble and with whom by offence

No.	Self-Reported Delinquency Scale trouble questions [<i>Did you get into trouble for doing this?</i>]	With the police	With an adult	With my parents	No
1	Fare dodging (n = 174)	8% (14)	12% (21)	3% (5)	80% (139)
2	Noisy behaviour in public (n = 166)	25% (42)	39% (65)	19% (32)	35% (58)
3	Shoplifting (n = 106)	16% (17)	20% (21)	10% (11)	65% (69)
4	Ride in a stolen vehicle (n = 72)	31% (22)	0% (0)	11% (8)	62% (45)
5	Theft from school (n = 49)	12% (6)	16% (8)	8% (4)	71% (35)
6	Carried a knife/weapon (n = 102)	53% (54)	11% (11)	10% (10)	43% (44)
7	Defacing property (n = 54)	11% (6)	13% (7)	2% (1)	78% (42)
8	Robbery (n = 55)	36% (20)	7% (4)	9% (5)	56% (31)
9	Criminal damage (n = 103)	24% (25)	18% (19)	20% (21)	52% (54)
10	Housebreaking (n = 31)	39% (12)	0% (0)	13% (4)	58% (18)
11	Theft from home (n = 65)	5% (3)	6% (4)	54% (35)	42% (27)
12	Broken into vehicle to steal (n = 19)	32% (6)	0% (0)	16% (3)	63% (12)
13	Fire-setting (n = 75)	13% (10)	7% (5)	8% (6)	76% (57)
14	Harming or injuring animals (n = 24)	8% (2)	4% (1)	13% (3)	75% (18)
15	Assault (n = 206)	20% (42)	37% (76)	22% (46)	43% (89)
17	Racial assault or harassment (n = 8)	0% (0)	0% (0)	0% (0)	100% (8)
18	Selling illegal drugs (n = 86)	33% (28)	2% (2)	7% (6)	65% (56)
19	Skipped or skived school (n = 181)	5% (9)	42% (76)	37% (67)	43% (78)

- Young people got into trouble with the police the most for carrying a weapon (53%), breaking into a house to steal something (39%) or using force to commit theft (36%). A relatively high share also got into trouble for selling an illegal drug (33%), breaking into a vehicle to steal something (32%) or riding in a stolen vehicle (31%).
- Young people got into trouble with an adult the most for skipping/skiving school (42%), being noisy in public (39%) or fighting with someone on purpose (37%).
- Young people got into trouble with their parents the most for stealing something from home (54%), skipping/skiving school (37%), fighting with someone on purpose (22%) or destroying/damaging property not owned by them (20%).
- Overall, young people got into trouble most for being noisy or cheeky in a public place (65%), stealing something from home (58%), skipping/skiving school (57%), carrying a weapon (57%) or fighting with someone on purpose (57%).
- On the other hand, young people mentioned not getting into trouble at all for attacking someone because of their race/skin colour. A relatively high share also mentioned not getting in trouble for fare dodging (80%), defacing property (78%), burning something on purpose (76%) or hurting/injuring animals (75%).

Juvenile Victimization Questionnaire

Within the JVQ, we have collected responses on one of the five modules: **Module A: Conventional Crime** (eight questions that ask about the young person's experiences with victimisation in the last year; Yes/No responses). The average score for a respondent in the baseline pilot sample was 1.93, with scores ranging from 0 to 7 (out of a maximum of 8). 30% of the sample reported no victimisation, and young people most frequently reported facing one (22%) or two (15%) kinds of victimising behaviour. 20% of young people reported facing three to four such behaviours, and the remaining 13% reported facing five to seven such behaviours.

Table 17: JVQ response frequency table

Juvenile Victimization Questionnaire questions [<i>In the last year, did anyone ...</i>] (n = 346)	# young people	% young people
Q1. use force to take something away from you that you were carrying or wearing?	78	23%
Q2. steal something from you and never give it back?	110	32%
Q3. break or ruin any of your things on purpose?	85	25%
Q4. hit or attack you on purpose WITH an object or weapon?	84	24%
Q5. hit or attack you WITHOUT using an object or weapon?	148	43%
Q6. start to attack you, but for some reason, it didn't happen?	120	35%
Q7. try to kidnap you?	12	3%
Q8. hit or attack you because of your skin colour/religion/family origin/a disability/someone said you are gay?	31	9%
Average score	1.93	

Referring to Table 17 above, at least 23% of the sample responded 'Yes' to six of the eight questions. Most young people mentioned being attacked without a weapon (43%), escaping an attack (35%) or having something stolen from them (32%). Very few young people mentioned being attacked for their race/religion/disability/etc. (9%) or being kidnapped (3%).

Strengths and Difficulties Questionnaire

The SDQ measures emotional and behavioural problems and has 25 items across five subscales covering emotional symptoms, conduct problems, hyperactivity/inattention, peer relationship problems and prosocial behaviour. Respondents can answer with ‘Somewhat True’, ‘Not True’ or ‘Certainly True’ for each item. The score can range from 0 to 10 for each subscale, and the total difficulties score ranges from 0 to 40 (a combination of the first four subscales, as shown in the table below).

Table 18: SDQ average total difficulties and subscale scores compared with scoring categorisation

SDQ overall and subscale average scores (n = 346)	Average sample scores	SDQ scoring four-band categorisation			
		Scores close to average	Slightly raised (/lowered)	High (/low)	Very high (/low)
Total difficulties	17.32	0–14	15–17	18–19	20–40
Emotional problems	3.38	0–4	5	6	7–10
Conduct problems	4.40	0–3	4	5	6–10
Hyperactivity/Inattention	6.54	0–5	6	7	8–10
Peer problems	2.99	0–2	3	4	5–10
Prosocial	6.97	7–10	6	5	0–4

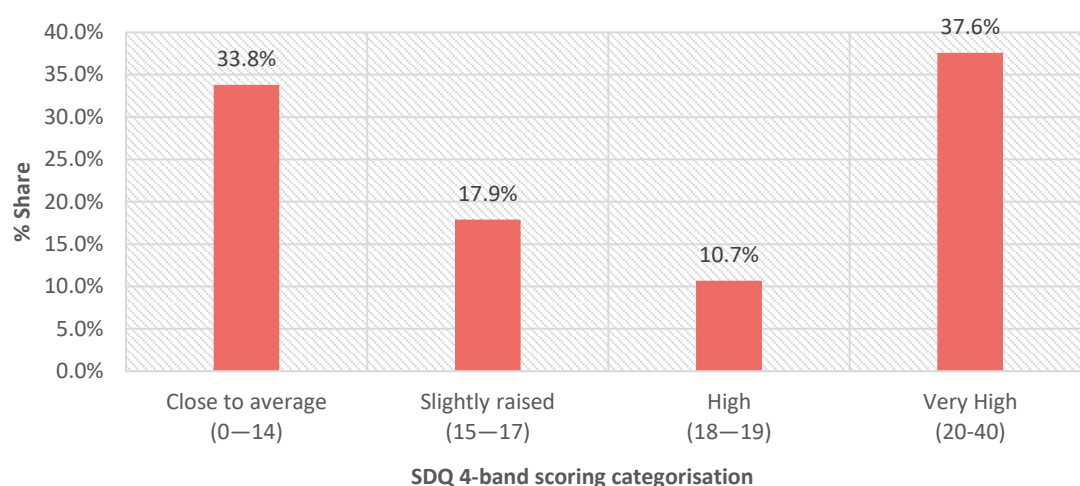
Note: SDQ = Strengths and Difficulties Questionnaire

Table 18 above presents the average SDQ total difficulties and subscale scores alongside the four-band scoring categorisation provided in the SDQ scoring guidance.⁵⁶ The average baseline sample total difficulties score falls within the ‘slightly raised’ category, as do the scores for the conduct problems, hyperactivity and peer problems subscales. The scores are on the borderline of being ‘closer to average’ for the emotional problems and prosocial subscales.

While this is a good visual benchmark, it can be considered an oversimplification upon looking at the SDQ total difficulties score distribution in Figure 6. From the figure, we can tell that while the average total difficulties score fell in the ‘slightly raised’ category, only 18% of young people actually scored at that level. Most young people actually scored on either extreme, within the ‘very high’ category on one end (38%) or those that were ‘close to average’ on the other (34%).

⁵⁶ The SDQ scoring guidance can be found here: <https://sdqinfo.org/py/sdqinfo/c0.py>

Figure 6: Sample SDQ score distribution based on SDQ scoring categorisation⁵⁷ (n = 346)



Social Support and Rejection Scale at six months

The SSRS is a 22-item measure designed for a young person (aged 10–18) to self-report their positive and negative interactions with significant non-parental adults. It assesses four dimensions of social support and social rejection that youth may experience in relationships with important non-parental adults: feels valued (six items), trust (five items), mentoring (six items) and negativity (six items). Response options for each question were ‘Never’, ‘Rarely’, ‘Sometimes’, ‘Often’ or ‘Always’, and scores for each subscale (out of five) were calculated by averaging across its items.⁵⁸

Given that this measure was not part of the baseline data collection exercise, reporting here has been done based on the responses received at six months (T2). 61% (n = 70) of the 115 young people at T2 who mentioned they had a trusted adult were asked to answer the questions in the SSRS measure related to said adult. There was a marked difference in the responses of the intervention and control young people to having a trusted adult, with 71% positive responses within the intervention group compared with 47% in the control group. While it is too early to draw any conclusion from this finding, it may indicate that more young people receiving mentoring support appear to be building trusted relationships in their lives.

The SSRS average total and subscale scores overall and by trial arm are presented in Table 19. The calculated total support score (scored out of 20) assigned to a trusted adult relationship was 17.2, with relatively higher scores (out of five) in the feels valued (4.6) and mentoring subscales (4.2) and a very low score in the negativity subscale (1.2). However, scores were relatively lower for the trust subscale (3.7). Examining by trial arm as well, it can be observed that trust holds the lowest score in both groups, but lower still in the control group compared with differences across other subscales.

⁵⁷ Due to rounding, the percentage totals may not sum to exactly 100%.

⁵⁸ While it has not been advised how to calculate an overall score for the measure, a total score (scored out of 20) has been provisionally computed by summing across the three positive measures and adding the difference from the negative measure, i.e., total support = feels valued + trust + mentoring + (6-negativity).

Table 19: SSRS average total and subscale scores: overall and by trial arm

SSRS scale and subscales	Sample average scores (n =70)	Intervention arm average scores (n = 47)	Control arm average scores (n = 23)	Scored out of
Total score	17.24	17.40	16.89	20
Feels valued	4.58	4.61	4.51	5
Trust	3.66	3.75	3.47	5
Mentoring	4.21	4.26	4.11	5
Negativity	1.21	1.22	1.20	5

Note: SSRS = Social Support and Rejection Scale

Local police data

At baseline, the data received covers records of 44 young people⁵⁹ randomised within the original pilot period (April – August 2024), as shared by Northamptonshire Police. This comprises 136 offences⁶⁰ for which 33 young people on the trial are suspected/have been convicted in the six months prior to randomisation. 11 young people did not have any records at this time point. This data is summarised in the bullet points below:

- Young people are considered to be offenders for 24% (n = 33) of the crimes and are considered suspects for 76% (n = 103). Further, 79% (n = 108) of crimes are categorised as ‘victim-based’, while 21% (n = 28) are categorised as ‘other crimes against society’.
- As in Table 20, 35% of the recorded offences⁶¹ are violent offences, followed by criminal damage and arson (18%), theft offences (17%) and drug offences (10%). Violent offences are further broken down into 23% (n = 31) categorised as ‘violence without injury’ and 12% (n = 16) categorised as ‘violence with injury’.
- The SRDS offending behaviours⁶² overlap with these figures as well, with offences related to assault being committed by most young people (64%), followed by carrying a knife/weapon (41%). Some young people also reported committing criminal damage (36%), drug offences (36%), shoplifting (34%), arson (25%) and robbery (21%), but at a relatively lower frequency compared with other behaviours less likely to put them on a police database, such as skiving school, fare dodging or being noisy in public.

⁵⁹ While police data is held for 64 young people from Northamptonshire randomised onto the trial up to 1 January 2025, the additional information was not received with enough time for the analysis to be updated for this report.

⁶⁰ Many of these offences could be associated with different aspects of a single incident and are hence being considered as individual/separate offences.

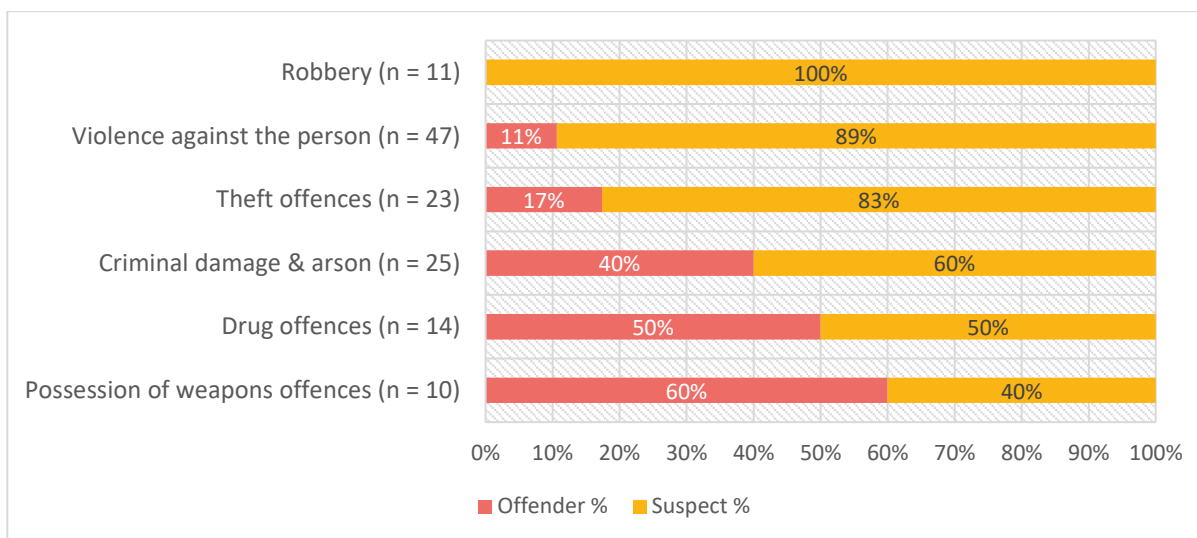
⁶¹ The data shared is available at more levels of disaggregation, which we may explore in analysis as part of future reports.

⁶² It is to be noted that while the SRDS self-reported measure covers the frequency of each offending behaviour, the table with local police data presents information for each offence as a percentage share of all offending. For this reason, no comparison has been made between the difference in percentages between the two tables.

Table 20: Frequency of types of offences in Northamptonshire Police data (n = 136)

Type of offence	# young people	% young people
Violence against the person	47	35%
Criminal damage and arson	25	18%
Theft offences	23	17%
Drug offences	14	10%
Robbery	11	8%
Possession of weapons offences	10	7%
Sexual offences	2	1%
Public disorder	2	1%
Miscellaneous crimes against society	2	1%
Grand total	136	100%

Figure 7: Distribution of offences by offender classification in local police data (n = 130⁶³)



- Examining offences by offender classification (Figure 7), more young people were classified as offenders for the possession of weapons (60%), drug-related offences (50%) or criminal damage/arson (40%). On the other hand, more young people were considered suspects when it came to theft (17% offenders), violent offences (11% offenders) and robbery (0% offenders).
- Offences per young person range from 0 to 28 (which is an outlier), with an average of 3.1 offences and a median of two offences recorded for each young person. Similarly, violent offences range from 0 to seven per young person, with an average of 1.1 offences and a median of zero offences recorded for each young person.
- A distribution of the number of offences per young person is given in Table 21 below. 25% of the sample did not have any offences recorded in the six months prior to baseline, and over half (57%) did not have any violent offences recorded over this period. In both cases, among those who had recorded incidents, most young people had one to two offences recorded (50% and 32%, respectively), with a much lower share with three or more offences on the system.

⁶³ Three categories with low frequencies (< 10) are omitted from the chart (six records in total).

Table 21: Frequency of baseline offending by young person in Northamptonshire Police data (n = 44)

# offences/violent offences committed	# young people committing offences	% young people committing offences	# young people committing violent offences	% young people committing violent offences
0	11	25%	25	57%
1–2	22	50%	14	32%
3–5	4	9%	2	5%
6–10	3	7%	3	7%
11–20	3	7%	0	0%
21+	1	2%	0	0%
Total	44	100%	44	100%

- The outcomes against recorded offences are given in Table 22 below. The rows are arranged in terms of the nature of the outcome, with the colour-coded grouping of outcomes around conviction, investigative issues and procedural decisions. The remaining two categories did not fit into the above groupings and were left out of the colour coding.
- Under conviction, 10% of young people were charged/summoned, 7% were cautioned or 7% were provided a community resolution. Most records had investigative issues, broken down into evidential difficulties (58%) and not being able to identify a suspect (2%). In a few cases, investigations were left, as prosecution was not in the public interest (4%) or the time limit had expired (1%). Of the remaining, records were marked as currently unresolved (4%) or as having another agency with a primary role to play (7%).

Table 22: Frequency of offending outcomes in Northamptonshire Police data (n = 136)

Outcome type	# young people	% young people
Young people convicted: caution	10	7%
Young people convicted: charge/summons	13	10%
Young people convicted: community resolution	9	7%
Investigative issues: evidential difficulties	79	58%
Investigative issues: no suspect identified	3	2%
Procedural decisions: not in public interest	6	4%
Procedural decisions: time limit expired	1	1%
Currently unresolved	5	4%
Other body/agency has primacy	10	7%
Grand total	136	100%

Sample balance

The balance of the sample across trial arms is reported in Table 23. Values have been reported for key demographic variables from referral form data, as well as self-reported outcome measure scores at baseline. The findings are summarised below. While there seem to be differences across trial arms, given the random nature of allocations and the unpredictability of randomisation across referral sources within sites, this is expected.

- White young people are over-represented in the intervention group (with a 10-percentage-point difference), and Mixed ethnic groups are over-represented in the control group (with a six-percentage-point difference).
- SEND (with a seven-percentage-point difference) and young people with mental health problems (with an eight-percentage-point difference) seem to be over-represented in the control arm.
- Means and standard deviations across nearly all outcome measures are quite comparable across trial arms. Being the most sensitive, the primary outcome measure of the SRDS volume score indicates a slightly higher average volume of offending (by two offences) and variability within the intervention group.

Our analysis in this section suggests that the trial has successfully engaged young people from minority ethnic backgrounds. Many also belonged to minoritised groups: Over half (56%) were eligible for FSM, 41% were reported to have SEND, 20% had an EHCP and 16% were care experienced. The contrast between these figures and the national statistics for young people in these groups indicates that the trial is reaching its target population of young people with complex needs. Comparison at the site level with census and YJS data also suggests that EXODUS is engaging a population broadly consistent with those most affected by youth justice involvement, particularly minority ethnic and higher-risk young people.

The randomised groups were broadly comparable at baseline. While some variation was expected, demographic and outcome measures were generally balanced, with small differences by gender, ethnicity and some vulnerability indicators.

Table 23: Balance of demographic characteristics and baseline outcome measures

Sample characteristics	Control			Intervention		
	#	%/mean	Standard deviation	#	%/mean	Standard deviation
Demographics						
Age	173	14.47	1.69	177	14.41	1.73
Gender	173			177		
Female	39	23%	-	38	21%	-
Male	133	77%	-	139	79%	-
Other	1	1%				
Ethnicity	173			177		
Asian or Asian British	3	2%		2	1%	
Black or Black British	49	28%	-	44	25%	-
Mixed ethnicity	38	22%	-	28	16%	-
White or White British	64	37%	-	83	47%	-
Other	19	11%	-	20	11%	-

SEND	142			146		
Yes	64	45%	-	55	38%	-
No	78	55%	-	91	62%	-
FSM	101			98		
Yes	58	57%	-	53	54%	-
No	43	43%	-	45	46%	-
Care experienced	155			163		
Yes	28	18%	-	24	15%	-
No	127	82%	-	139	85%	-
Current MH problems	139			135		
Yes	61	44%	-	49	36%	-
No	78	56%	-	86	64%	-
Currently offending	173			177		
Yes	66	38%	-	68	38%	-
No	107	62%	-	109	62%	-
Self-reported outcome measure scores						
Baseline						
SRDS Variety score	170	4.38	3.33	176	4.73	3.73
SRDS Volume score	170	25.72	25.63	176	27.63	27.89
JVQ Module A score	170	1.82	1.88	176	2.04	1.92
SDQ score	170	17.28	6.18	176	17.35	6.20
Six months						
SSRS score (six months)	23	17.41	2.13	47	16.89	1.96

Note: SEND = special educational needs and disabilities; FSM = free school meals; MH = mental health; SRDS = Self-Reported Delinquency Scale; JVQ = Juvenile Victimization Questionnaire; SDQ = Strengths and Difficulties Questionnaire; SSRS = Social Support and Rejection Scale

Evaluation feasibility

Overall, findings from the internal pilot suggest that it is feasible for the EXODUS programme to move to a full efficacy trial, with some areas to monitor or strengthen as the trial progresses.

1. **Recruitment:** Referral pathways were functioning well, with a steady flow of referrals into the programme. Most referrals met the eligibility criteria, indicating that the referral forms and processes were being used appropriately.
2. **Randomisation:** The randomisation process has been smooth and well implemented with no reported errors. While gaining consent has taken time, particularly in explaining the randomised nature of the trial to young people and families, the process seems to be acceptable to the participants.

3. **Monitoring data:** The processes for collecting demographic and monitoring data are in place and working as intended. Information on programme attendance, engagement and control group support has been successfully captured, helping to build a clear picture of both trial arms. Collecting monitoring data has been a challenging process, but data quality and consistency have improved over the course of the trial. Most monitoring processes are now well established and functioning effectively.
4. **Completion and response rates:** The collection of outcome data through online surveys and police records (within one referral partner area) has proven feasible, with encouraging levels of completion and data access that support the ability to measure key trial outcomes, including (re)offending and violent (re)offending. Response rates have been adequate, although the differential attrition between trial arms could be a potential source of bias in the final sample (mitigated at the data collection stage by monthly check-ins with control group young people to boost engagement at follow-up).
5. **Fidelity:** Mentoring sessions are being delivered in line with the EXODUS logic model, with core components largely present across the sample reviewed. Existing fidelity scores are below the expected threshold for this criterion, but adherence to the programme structure has steadily improved over time. While some sessions focused on practical or relationship-building support, these adaptations appear appropriate. Monitoring tools are in place, with mentors providing detailed feedback and reflections. There have been some challenges in collecting delivery team debrief data over the course of the pilot, but the systems and processes have improved.
6. **Scale-up:** The programme has scaled well to date, with some barriers and challenges, including limited recruitment up to December 2024 and some difficulties in collecting six-month outcome measures. Delivery staff and mentors noted challenges that could affect future expansion, such as mentor recruitment, training time and access to venues. While referring professionals generally viewed EXODUS as scalable, some noted capacity strains as delivery expanded.

In summary, the pilot phase demonstrates strong foundations across all six research questions, with no major barriers to progressing to a full efficacy trial. Continued attention to recruitment, capacity and monitoring processes will support successful scale-up and trial implementation.

Recruitment

Research question: To what extent were the **referral pathways effective** in recruiting sufficient numbers of eligible young people into the EXODUS trial?

To answer this research question, we analysed recruitment data for the whole pilot period, April 2024 – July 2025.

As detailed in the participant CONSORT diagram (Figure 4):

- 495 young people were referred to the project within the extended pilot period (17 April 2024 to 1 July 2025).
- All young people were screened for eligibility and suitability,⁶⁴ and 396 met the criteria. 16 young people were considered ineligible, and 54 referrals were considered unsuitable for the programme. 29 participants were still in the screening process with UpskillU.

⁶⁴ **Eligible young people:** They meet the defined eligibility criteria for the trial based on identified need (e.g., being involved with the YJS or police, being in care or having a history of offending).

Suitable young people: Although they may meet the eligibility criteria, they are not considered suitable to take part due to practical or logistical reasons (e.g., already having a mentor or having moved out of the area or country).

- Of those 396 young people who were eligible up to 1 July 2025:
 - 31 were awaiting their baseline meeting with a peer researcher.
 - 11 had asked to be re-contacted.
 - Two did not attend the baseline meeting.
 - Two did not consent to participate.
- 350 young people were randomised by the end of the extended pilot phase (1 July 2025). Of these, 346 young people completed a baseline (T1) questionnaire, and four responses could not be located on the survey platform. However, all four young people (one intervention, three control) were documented in mentoring logs or control check-in logs.

Findings from our IPE show that recruitment was resource-intensive, with several factors supporting or hindering effective referral. Referring professionals largely viewed the referral process as straightforward and timely, with positive feedback given about the support offered by the EXODUS team to help with assessing eligibility. Many reported the strong local need for a service like EXODUS, driven by high rates of youth violence, school exclusion, unmet needs related to SEND and limited provision for young people in or leaving custody. This demand created a steady flow of referrals in some sites.

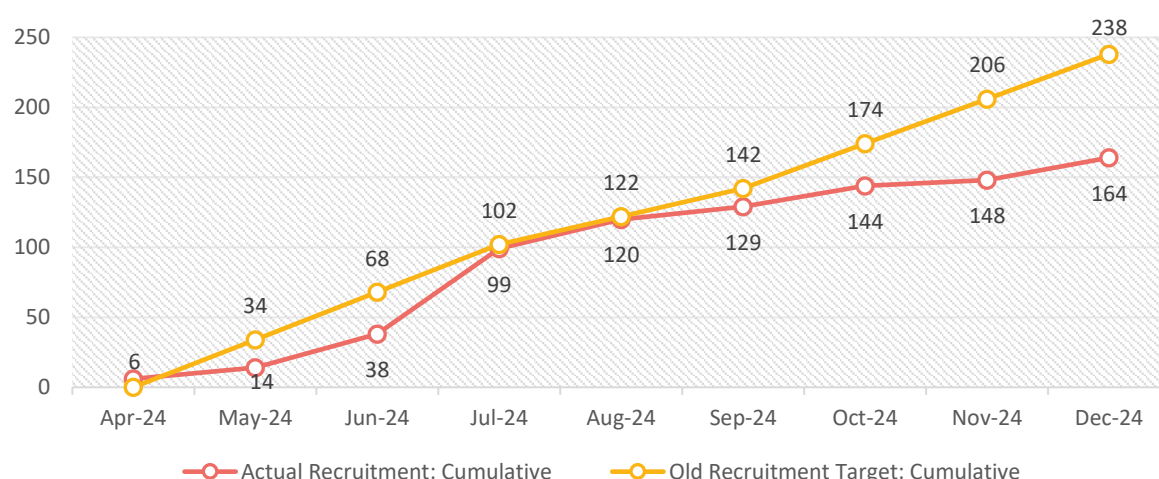
“We’re having kind of an endless flow [of young people needing the service], really, so there’s never a shortage of [young] people to refer.” **Referring professional 2, Haringey**

However, recruitment into the trial, as distinct from service delivery, introduced added complexity. UpskillU delivery staff highlighted the distinction between eligibility and suitability, noting that some eligible young people were not suitable for inclusion due to their involvement in other interventions (such as mentoring). This is something that has since been picked up on right at the start of a referral in discussions with the referrers. Recruitment also required sustained engagement, with some young people needing multiple contacts before committing to the trial. Family member buy-in was considered essential to successful recruitment and retention, though families were sometimes less clear about the trial’s purpose than the young people themselves. There was also a view that increasing the financial incentive for participants could improve engagement by signalling the value of their contribution to the trial.

“For a young person, a £20 voucher is not much, you know; they can’t get a pair [of] trainers for that, you know. Something nearer £40, £50 is psychologically something more; it’s something that you can do more with.” **Delivery team member**

These teething issues were also evidenced by the pace of recruitment during the pilot (Figure 6), where barring the month of July and August 2024, actual recruitment levels remained below the initial recruitment target that had been set at the start of the programme.

Figure 8: Actual vs old target⁶⁵ cumulative randomisations (initial months: April – December 2024)



Challenges were also faced in working with statutory referral partners. While senior-level buy-in was generally secured, frontline engagement varied, and some practitioners were hesitant to refer because of the randomisation process, which may have affected referral numbers. Maintaining referral pathways often required ongoing relationship management and repeated efforts to promote the offer. In some cases, gatekeeping or the misalignment of priorities (such as prioritising compliance over flexibility in engagement) limited referral flow.

These findings suggest that while recruitment was achievable, it required considerable effort, proactive partnership management and flexible, youth-centred engagement approaches. Based on the above, and from our analysis of qualitative data for the IPE, we consider overall recruitment into the EXODUS trial to be feasible once adaptations and new sites are added in.

Recruitment in the extended pilot phase

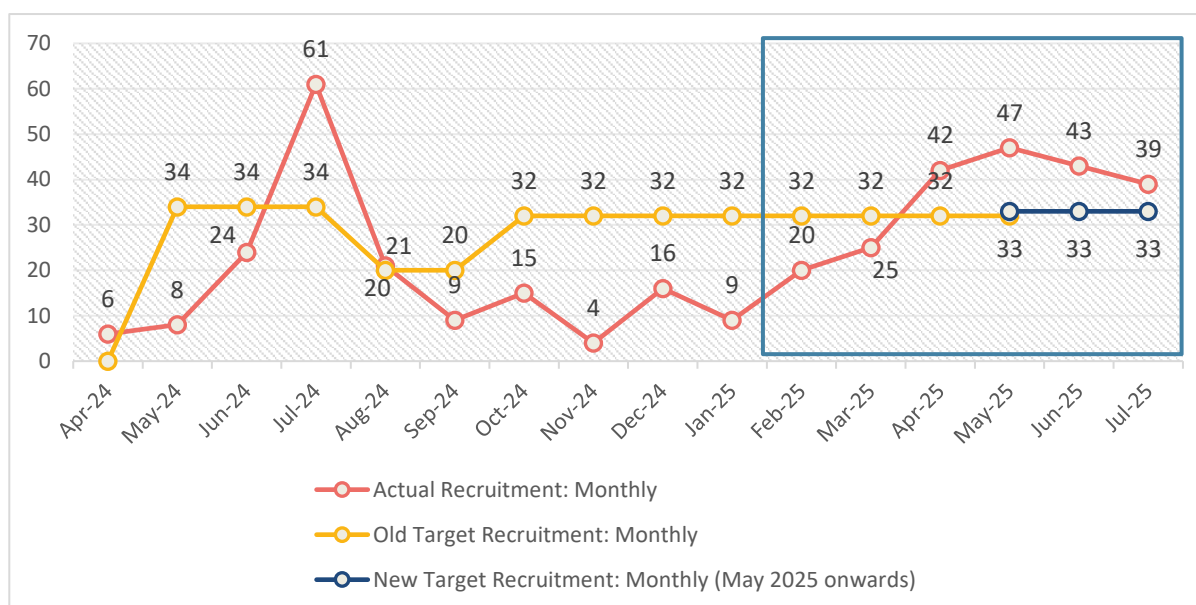
The gap in recruitment target achievement up to 1 January 2025 led to an exploration of alternative referral routes in the form of schools within the existing sites of Northamptonshire and Haringey (with referrals starting in February 2025), as well as expansion to Lewisham Council (with referrals starting in April 2025). The positive impact of the expansion is demonstrated in Figure 9, as randomisations consistently increased from February 2025 and exceeded the target recruitment from April to July 2025, in contrast with the trend prior to this period.

A large part of this uptick came from the new sources. Between 1 March and 30 June 2025, 40/65 (62%) randomisations in Northamptonshire and 41/64 (64%) randomisations in Haringey were from schools. Additionally, there were 16 randomisations from Lewisham between May and June 2025 (against a target of 21 for April to June 2025). This suggests the addition of new sites was important for achieving recruitment targets.

Based on what would be achievable looking at recruitment levels up to and during the transition, an updated sample target of 754 was estimated, taking into account the existing and new referral sources mentioned above, with the process and calculations covered earlier in the report, under the Participants section.

⁶⁵ The updated overall target of 754 young people (and corresponding monthly targets) came into place starting May 2025. For the period prior to this, we have reported referral numbers against the monthly targets corresponding to the previous overall target of 846 young people.

Figure 9: Actual vs old and new target monthly randomisations (17 April 2024 – 1 July 2025)



Randomisation

Research question: How **acceptable and feasible** were the **consent, referral and randomisation procedures** for young people and stakeholders involved in the EXODUS trial?

To answer this research question, we analysed recruitment data for the whole pilot period, April 2024 – July 2025.

Randomisation process

As evidenced by Coram’s referral and randomisation logs, the process of randomisation used to allocate young people to either the intervention or the control group appears to have been implemented effectively:

- Up to 1 July 2025, 350 young people were recruited and randomised into the pilot phase of the trial. Of these, Coram received completed T1 questionnaires for 346 young people, and the remaining respondents (one intervention, three control) were documented in mentoring logs or control check-in logs.
- 51% (177 young people) had been randomly assigned to the intervention group, and 49% (173 young people) had been randomly assigned to the control group in the pilot phase. This is in line with a 1:1 allocation ratio, which the process is aiming to achieve for the trial.

To ensure compliance with randomisation outcomes and that trial allocation was consistent with delivery, Coram reviewed UpskillU’s records of the outcomes young people were receiving in comparison with the randomisation allocation. Within the extended pilot sample, there were only six instances where there was a mismatch between random allocation and treatment, likely due to manual error in capturing this information at the randomisation stage. Of these, four young people randomised into the control arm were receiving EXODUS, while two randomised into the intervention arm were accessing BAU services. This corresponded to a negligible proportion of the sample (2%).

From the qualitative data, randomisation appeared broadly acceptable to the young people participating in the internal pilot. The interviews indicated that most young people were initially indifferent to whether they were allocated to the EXODUS intervention or control group. Some only later recognised the potential benefit of the intervention and reflected that missing out might have negatively affected them.

The peer researchers echoed this, suggesting that disappointment about allocation was often more strongly felt by themselves as peer researchers or by families than by the young people, who were sometimes even relieved not to be committing to a structured programme.

Interviewer: “How would you have felt, though, if it was the other way [control arm]?”

“Yeah, at the time I wouldn’t have really blinked an eyelid, as I didn’t really, like, see it as it would help me. But then I think if I didn’t have it, I would have gone down. That would probably be the best way to research it though, because [otherwise], like, you’re not going to be able to compare it, and then after the research is done, I’m assuming that it’ll go to [everyone like that].” **Young person 9**

“There are some [young] people that are like ‘I don’t care’ kind of thing. And I could really see that in the first [quote above, young person 9]. Some [young] people don’t really care in the beginning, but once they get randomised, they’re like, ‘Oh OK, actually this will benefit me a little bit more’.”

Peer researcher (during co-analysis session)

Referring professionals largely understood and accepted the purpose of randomisation, recognising its role in generating robust evidence. However, they expressed concern that young people and their families did not always fully grasp the randomised nature of the trial, and in some cases, this led to disappointment or confusion, especially when expectations of receiving support were not met.

Delivery team members found that communicating the RCT model required time and personal engagement with the referring professionals and family members. Initial strategies, such as sending out written information, proved insufficient, and early on, the team adapted to include more direct contact with referring professionals and family members if needed. Peer researchers, some of whom had completed the EXODUS programme themselves, played a key role in explaining the research and building trust with the young person at the baseline randomisation meeting.

“Selling them the idea that they’re [referral sites] part of a piece of research that is going to really help young people generically – I think that requires you sitting down and explaining that to them [referral partners/professionals] rather than sending them out information.” **Delivery team member⁶⁶**

Despite this, randomisation presented ethical and emotional challenges. The staff and referring professionals sometimes struggled with the idea that young people in clear need might not receive the intervention. To address this, the delivery team emphasised the value of monthly check-ins for the control group participants, which helped secure buy-in and maintain engagement. There was also a strong desire to offer the intervention to control group participants after the trial, although concerns were raised about whether delayed support would still be relevant or effective given the rapid changes in young people’s lives.

“Yeah, I think that is difficult because I think if you go through the referral process and then ... actually then it [EXODUS] doesn’t happen.” **Referring professional 2, Haringey**

Monitoring data

Research question: How feasible were the processes for collecting demographic, engagement and intervention-participation data and for documenting ‘business-as-usual’ support for the control group?

⁶⁶ As only two members of the delivery team were interviewed, numbers have not been included to retain anonymity.

To answer this research question, we examined all relevant context up until 1 July 2025.

Monitoring data being collected from UpskillU can be categorised into two strands: individual referral forms and mentoring logs (intervention) or monthly check-in logs (control).

Referral form data ([Appendix 1](#)) covers background and demographic information for all young people referred. UpskillU shares individual referral forms on a bi-weekly basis (for young people randomised onto the trial) with Coram, and demographic details of the young people are entered into a spreadsheet to maintain these records. The process has been straightforward, with referral forms coming through to Coram regularly.

The data is complete for the most part, with some fields (SEND, EHCP, mental health problems and care experience) having 15–20% missing information and FSM data missing for just under half (43%) of young people on the trial. However, these levels are down compared with the early stages of data collection, when these gaps were flagged to referrers. In all, Coram has been able to maintain an up-to-date record of the characteristics of the young people in the trial.

Mentoring logs of the young people receiving EXODUS primarily capture attendance, the nature of contact (virtual/face-to-face), core themes covered and whether a risk assessment was completed. These records are directly compiled into a spreadsheet and shared with Coram by UpskillU on a bi-weekly basis.

Initially, there were a lot of gaps in the quality of the data in the mentoring logs (missing IDs, incomplete information in records, inconsistent recording practices), and exports were not shared regularly, as a result of which there were a lot of follow-ups required to first get visibility of this information and then have the issues looked at and rectified by UpskillU. A data structure and sharing process was finalised and put in place by Coram, and logs were quality checked soon after receipt, with issues flagged regularly to UpskillU. These efforts paid dividends, with an improvement in data capture over time allowing us to now assess fidelity at this stage of the project.

Since July 2025, UpskillU has transitioned to using the RestorativU app to capture mentoring logs, and this data is now being received as a direct export from the app. The transition to an app-based model has smoothed over the monitoring data capture and collection process, with exports being received in a more regular, timely fashion and in a consistent format. It has also made the process easier for delivery staff, who capture the same information by now only completing a form on the app, instead of manually updating an Excel template.

Control monthly check-in logs hold information on check-in attempts made with young people in the control group. This data was requested since the start of April 2025 but was only shared with Coram for the first time in October 2025, covering the check-ins that took place between April 2025 and September 2025, with young people randomised in the extended pilot. The availability of young people's data in this log is detailed in the table below.

Table 24: Control check-in availability

Fidelity score distribution	Initial sample April – December 2024 (n = 81)	Additional sample January – June 2025 (n = 95)	Extended sample April 2024 – July 2025 (n = 176 ⁶⁷)
Available in logs	43 (54%)	89 (94%)	132 (75%)
Engaging but missing from logs ⁶⁸	16	0	16
No records (Oakhill)	19	6	25
Never started	1	0	1
Receiving intervention	2	0	2
Total	81	95	176

These logs contain 132 (75%) of the 176 young people within the control group from the pilot period, with missing records mainly from Haringey and no records present from Oakhill. The level of missingness was much higher for young people randomised in the initial months, which could be linked to the fact that control check-ins were first instated in January 2025 as a retention strategy, and the records only started from April 2025. Further, missingness was not linked with non-engagement, as noted in the table above and through an examination of follow-up records.⁶⁹

However, as can be seen in the table below, even among those IDs that were present in the logs, there were no recorded check-ins for just over a third of the young people in the pilot sample (35%). 65% had responded to at least one check-in, and 37% of young people had participated in 60% or more check-ins. Even though engagement was higher in the additional sample (n = 89), 30% of young people in this group had no recorded check-ins.

Given the gaps in reporting across the board, this was raised to UpskillU early on, and soon after the data was first shared in October 2025, an updated live version of the logs was shared with Coram at the start of December 2025. This has since made the logs accessible, with internal oversight and quality assurance being provided by the recruitment and engagement manager at UpskillU.

⁶⁷ This is higher than the randomised sample of 173 control young people, as it also covered three young people who were randomised intervention but were receiving control as their outcome.

⁶⁸ This was based on email proof provided by UpskillU of these young people having completed safety plans as part of their engagements on the trial when these gaps were highlighted.

⁶⁹ Of the 42 young people in control missing from these logs, 30/42 (71%) have six-month survey returns, and 23/33 (70%) have 12-month survey returns (nine young people were not yet at the deadline for a 12-month return).

Table 25: Check-in completion % for the pilot control sample

Check-in completion	Young person count	Young person %
0%	46	35%
1–19%	12	9%
20–39%	17	13%
40–59%	8	6%
60–69%	20	15%
70–79%	3	2%
80–100%	26	20%
Total	132	100%
<i>At least one check-in</i>	86	65%

Scoping of business-as-usual

Referring professionals generally described a wide range of support already available to young people through their own services or linked organisations, including career advice, therapeutic services and family support. Many felt that young people benefit from strong existing relationships with staff and that this ongoing provision may reduce visible differences between control and intervention groups in the trial.

“We have an educational psychologist two days a week. We have a full-time speech and language therapist ... a family engagement lead who’s a systemic family therapist ... so there is a lot available.” **Referring professional 2, Haringey**

One professional noted that the existing depth of support might limit the visible differences between the control and intervention groups in the trial:

“You might not see a massive difference in the results ... because we work hard to find other forms of support for young people if they need it.” **Referring professional 2, Haringey**

This suggests that referral partners, committed to supporting young people regardless of trial allocation, may provide additional help to those not receiving EXODUS. While this reflects good practice, it may reduce the contrast between control and intervention conditions, posing a challenge to maintaining a ‘true’ control group.

Delivery team members and mentors described BAU support as inconsistent, limited and difficult to navigate. They noted that local services often change and can be hard to access, with many young people and families expressing disappointment in statutory support. Mentors felt that young people are more open to mentoring than to more formal services, which are often narrowly focused on issues like addiction.

Together, these perspectives suggest that while some referral settings offer comprehensive support, the availability and quality of BAU provision likely vary, which could influence both participant experience and trial outcomes.

Completion and response rates

Research question: How **feasible was it to collect outcome data through self-reported** online surveys and local police records on (re)offending and violent (re)offending?

To answer this question, we used outcome measures data from the extended pilot up to 1 July 2025, as well as six-month and 12-month survey returns received from eligible young people by that date (n = 164 at T2, n = 38 at T3). We also examined the local police data return provided by Northamptonshire Police.

Outcome measure completion

The collection of outcome measures data using online surveys administered to young people by peer researchers has been successful.

The analysis of survey completion rates of the outcome questionnaires shows that baseline (T1) and follow-up (T2 and T3) questionnaires have been almost fully completed for all four scales and are well above the target completion rate of at least 85% outlined in the progression criteria for the trial. Overall, missing responses were minimal. Four surveys were missing at T1, while only one survey each at T2 and T3 was missing one or more items on any scale. A summary of the survey completion rates for each of the outcome measures is below, with the respective tables presented in Appendix 6.

SRDS completion: At both T1 and T2, at least 99% of the participants (T1 = 346 out of 350, T2 = 115 out of 116) completed each item in the variety and volume (primary outcome) measures. At T3, all questionnaires were fully complete, with 100% of the participants (26 out of 26) providing answers to the variety and volume questions. Given that the volume score will serve as the primary outcome measure in the efficacy trial, the near 100% completion rates suggest that this measure is likely to be completed at a sufficient rate as part of the efficacy trial.

SDQ and JVQ completion: At both T1 and T2, all items in the SDQ and JVQ were completed by at least 99% of participants (T1 = 346 out of 350, T2 = 115 out of 116). At T3, all questionnaires were fully completed for both measures.

SSRS completion (T2 and T3 only): In line with the measure's original skip logic, only the young people who answered positively to having a trusted adult completed this measure (n = 70). Completion rates were high for the 116 and 26 young people at T2 and T3, respectively, who completed the SSRS questionnaire. Each item on this scale was answered by 99% of young people at both T2 (115 out of 116) and T3 (25 out of 26).

From the interviews with young people, the data collection processes were largely feasible and acceptable to the young people participating in the trial. While some found the questionnaires long or initially confronting, particularly the items related to offending or victimisation, most said they answered honestly. The peer researchers played a critical role in supporting both the intervention and control groups in completing the questionnaires, creating a sense of trust and relatability that helped young people feel more comfortable and understood (see the section on [peer research](#) for more detail).

Although some professionals expressed concern that surveys might deter engagement, this did not seem to significantly affect those who completed baseline or follow-up questionnaires, as reflected in high-quality data and low levels of missing responses.

Co-interviews involving the peer researchers were viewed as a promising approach for gathering qualitative data, offering both strong rapport with young people and personal development opportunities for the peer researchers themselves. The pilot showed these were feasible and may enhance data richness in the full trial.

“It was like out of this world. I can't explain that feeling because obviously that was sensitive for me, isn't it? ... it's different for young people when they know that I was there [in the same

situation], you know, it gives a lot of hope. You know, not all of [the] young people are in the best circumstances, but you know, just that energy of, like, nothing's impossible ... that's the main thing, hope, and just yeah, inspiration. So that's my experience with the interviews, and I feel like they'll [young people] definitely ... engage, especially when they talk to us, because like I said, I have been there, so it just it's different. So that's how I personally feel with the interviews.” **Peer researcher**

The delivery team viewed changes in mindset, language, attitudes and relationships as the most meaningful indicators of progress. Engagement with mentoring was highlighted as a core measure of connection and personal growth. They also reported that monitoring processes (such as tracking session attendance, risk assessments and young people's feedback) had long been embedded in their practice and had been scaled up for the trial. The use of the tailored EXODUS outcome star and collaborative work with the trial's quantitative lead supported efficient and consistent data reporting.

Overall, outcome measure data collection was feasible and acceptable across stakeholder groups, especially when supported by clear communication, peer-led delivery and flexibility in approach.

Survey response rates and attrition

To measure attrition, we have analysed the response rate and mentoring logs of the young people who were randomised during the pilot period from 18 April 2024 to 1 January 2025, as these young people would be eligible for a six-month (T2) follow-up by 1 July 2025.⁷⁰ The response rate is being measured based on the number of young people who completed a T2 questionnaire. Given that there is potential for T3 data collection from respondents we didn't get a response from at T2, we have factored that into our estimation of attrition. Attrition has been estimated based on the number of young people who had neither completed a T2 questionnaire nor engaged⁷¹ with mentoring/control check-ins, as recorded in June 2025. While slightly different from the YEF's definition, we think this approach is justified, as the pilot did not focus on the final point of data collection, and marking all non-responders as part of attrition might be an overestimation of that figure, especially given the learning phase UpskillU has gone through and their improvement in collecting follow-up data in more recent months. Accounting for these few young people using available fidelity data does not massively change the figure but acknowledges the possibility of a response at T3.

Of the 164 young people who reached the six-month follow-up timepoint within the duration of the pilot, T2 data was collected from 70.7% (n = 116) of young people, and 3.7% (six young people) who did not have a follow-up submission at T2 were recorded as still engaging in the mentoring logs/check-ins. This implies that the response rate for the pilot sample is 71% (29% non-response), while the estimated rate of attrition from the trial is 26% (n = 42). This proportion is broadly acceptable and within the attrition threshold set for the pilot and efficacy phase (no more than 30%). These calculations are broken down by trial arm below.

Intervention group: Of the 85 young people in the intervention group who reached the six-month follow-up time point during the pilot, T2 follow-up data was collected from 77.6% (n = 66) of young people, and 3.5% (three young people) who did not have a follow-up submission at T2 were recorded as still engaging

⁷⁰ We did not assess attrition for T3 data in detail, as this follow-up phase had only just begun in April 2025.

⁷¹ For the intervention arm, engagement was defined as having a medium or high fidelity score (60% or higher), as well as attending at least one mentoring session in the three months prior to reporting (April – June 2025). For the control arm, engagement was defined as responding to at least one monthly check-in within the three months prior to reporting (April – June 2025).

with the intervention. Hence, the response rate for the intervention arm is 78% (22% non-response), while the estimated attrition rate is 19% (n = 16).

Control group: Of the 79 young people in the control group who reached the six-month follow-up time point during the pilot phase, T2 follow-up data was collected from 63.2% (n = 50) of young people, and 3.8% (three young people) who did not have a follow-up submission at T2 were recorded as still engaging with monthly check-ins. Hence, the response rate for the control arm is 63% (37% non-response), while the estimated attrition rate is 33% (n = 26).

The estimated differential attrition rate across trial arms is 14 percentage points for the pilot phase, which could lead to biased results and pose a threat to the study's internal and external validity. This is being mitigated at the data collection stage by peer researchers carrying out monthly check-ins by phone with young people in the control arm to boost engagement and consequently response rates at follow-up.⁷² Further, the use of the intention-to-treat approach at the analysis stage will better preserve the sample balance afforded by randomisation, even after attrition.

In the qualitative interviews, the peer researchers found that contacting young people by phone at the six-month point to complete T2 questionnaires was time-consuming and challenging, particularly for those in the control group. Young people were generally willing to complete the surveys once contact was established, as reflected in the very high data quality and completeness (approximately 99–100%). However, establishing contact often required multiple attempts using different communication channels, including phone calls, emails and outreach through parents/carers and professionals such as case managers and social workers. Barriers included young people not having the peer researcher's phone number saved, having to go through parents/carers or simply being unresponsive when called.

"Sometimes I have to go through the mum, and the mum doesn't want to answer. So, I send so many emails and then text messages, and then it's just, like, if I have no answer, how can I do the six-month survey? 'Cause I know that once I speak to a young person, they're gonna be like 'Oh, this is calm'. Yeah, it's difficult to contact them [young people on trial], but once they are contacted, they are calm [with doing the outcome measures]." **Peer researcher 1**

Despite these challenges, the mitigations introduced between January and March 2025 (e.g., ensuring numbers are saved, reminders about vouchers and doing a monthly check-in phone call with young people in the control arm) appeared to be improving response rates. The peer researchers noted that these measures had begun to make the follow-up process more manageable.

"I feel like definitely recently we have definitely improved, and we've had like different measures to make the process easier, like Typeform and, you know, emails and like text templates, that we always make sure to say the vouchers as well." **Peer researcher 2**

The referring professionals echoed the difficulty of re-engaging young people for follow-up surveys but recognised that the peer researchers' relatability and persistence improved the likelihood of successful contact and data collection. The presence of a trusted, youth-led communication channel appears to be a key factor in the ongoing feasibility of collecting outcome data in the full trial.

"Young people quite often will respond better to young people [compared to] adults that they might feel they have nothing in common with or no connection with. And I know the phone calls

⁷² Even though minimal compared to receiving EXODUS, this lends itself to the risk of enhancing the control arm, with young people receiving more than BAU support, and has been acknowledged as a limitation later in the report.

certainly around, kind of, getting involved in the programme [the EXODUS trial] were impactful in terms of getting kids initially to give it a go and do [outcomes measure] survey.” **Referring professional 2, Haringey**

With multiple survey links for each timepoint that led to similar-looking pages, there was also some scope for confusion while collecting data. There were two responses identified where surveys meant for one timepoint were accidentally entered into the online link pertaining to another timepoint (e.g., a 12-month survey submitted through a six-month survey link). These mistakes were either directly reported by UpskillU or identified through data quality checks by Coram. Given the small scale of these occurrences (1% of total follow-ups), the mitigation put in place has been to manually copy across the survey and resubmit it within the correct time point and capture this within Coram records.

Timeliness of survey responses

For the data collection process to adhere to follow-up timelines, initially, a four-week period after the deadline was established as the outer limit to receive survey responses at T1 and T2. However, in light of the often-unpredictable circumstances that young people on the trial would find themselves in, as well as the additional time investment almost always required to establish contact, the YEF approved Coram’s recommendation to extend this window to a six-week period after the deadline, along with a two-week head start prior to the deadline for UpskillU to begin making contact.

Within Table 26, we present the timeliness of six-month and 12-month survey returns received from eligible young people up to 1 July 2025 (n = 164 at T2, n = 38 at T3). As can be observed, while the return rate at six months for the eligible pilot sample is 71%, the on-time return rate is 48%. The reason for this low on-time return rate can be observed by splitting the sample into the initial (April – July 2024) and additional sample (August – December 2024).

Table 26: General and on-time response rates for six- and 12-month returns

Sample period	CYP #	Returns #	Return %	On-time return # (six-week range)	On-time return % (six-week range)
Eligible pilot sample (6M) <i>April – December 2024</i>	164	116	71%	79	48%
Initial pilot sample (6M) <i>April – July 2024</i>	102	68	67%	36	35%
Additional pilot sample (6M) <i>August – December 2024</i>	62	48	77%	43	69%
Initial pilot sample (12M) <i>April – June 2024</i>	38	26	68%	24	63%

Note: CYP = children and young people; 6M = six-month; 12M = 12-month

Through discussions with UpskillU, it was established that the initial pilot sample had a lot of young people who were already not engaging well with statutory services, had been referred to the programme as a last resort and with whom it was difficult to establish and build a relationship. This is evidenced by the on-time return rate for that portion of the sample, which was 35%. However, UpskillU accounted for this in its referral processes from that point on, and the change was visible in the on-time and six-month return rates for the additional pilot sample, where the overall return rate was 77% and the on-time return rate

was 69%. The initial pilot also proved to be a lesson for collecting data at 12 months. Although the general and on-time return rates were slightly lower, as this was the same cohort, nearly all of the returns received were within the stipulated timeframe.

Local police data

As part of the secondary outcome to assess recorded incidences of offending and violent offending, local police data is being collected for the young people in the trial. Currently, this data is only being collected from Northamptonshire Police, with the data being shared most recently in December 2025. As per this last request, data is currently held for baseline and six-month outcomes for 64 young people randomised up to 1 January 2025. Data linkage was established for all 64 young people, even if there were no offences on record at either time point. This is in line with the target criteria of low missing data (at least 80% complete) on offending being received from at least one referral partner. There is also an ongoing conversation with the Metropolitan Police about requesting this data for young people in Lewisham as well.

Fidelity

Research question: To what extent **can fidelity to the EXODUS programme** be maintained, as measured against the fidelity criteria?

To answer this research question, where applicable, we looked at mentoring logs for the initial (six-month eligible) pilot sample (17 April 2024 – 1 January 2025), the additional pilot sample (1 January – 1 July 2025) or the entire extended pilot phase (April 2024 – July 2025). We also looked at data within the additional pilot period (January – July 2025) to report on control check-ins.

Within this section, we first descriptively analyse the fidelity data for the initial (six-month eligible pilot sample) to examine the fidelity criteria in more detail. Following this, we describe the methodology behind scoring and assigning RAG ratings and then proceed to calculate fidelity for the participants and the sample as a whole. While not included within fidelity, we have reported on monthly check-ins for the control group, along with intervention fidelity data, to look at engagement with check-ins for those young people in comparison. We also cover the difference in fidelity before and after the expansion of referral sources and the improvement in referral quality. Qualitative insights on fidelity from interviews with young people and staff are present at relevant portions throughout the section.

A descriptive exploration of fidelity criteria

The fidelity score has been calculated based on the fidelity checklist, comprising the **four key criteria** below:

1. Dosage:

- a) (D1) At least 60% of organised in-person and virtual mentoring sessions are attended by young people (yes/no).
- b) (D2) At least 50% of the planned CoSA meetings are attended by young people (yes/no) (only for the full trial, as CoSA meetings start at around 36 weeks into the 12-month programme).

2. Coverage and consistency:

- a) (C1) Four or more core themes are covered in the 12-session intensive phase by a mentor (yes/no).
- b) (C2) Risk assessments are completed for at least 80% of sessions by a mentor (yes/no).

Within the eligible pilot sample of young people on the trial for six or more months since randomisation (n = 164), 85 were allocated to the intervention. Of these, 25 young people (29%) withdrew from the

programme without attending any sessions. Of the remaining 60, there were 59 that were delivered EXODUS and one that was given BAU support, while there was one young person allocated BAU support that received EXODUS, which kept the total young people receiving the intervention at 60. The descriptive analysis of each fidelity criterion is based on these 60 young people who attended at least one session.

Intervention uptake and attendance (D1)

Mentoring sessions started on average 54 days (median 42 days, six weeks) from randomisation, ranging from five to 216 days (7.2 months). This figure varied by site, with the highest average lead-in time reported in Northamptonshire (68 days), followed by Haringey (51 days) and Oakhill (39 days). These findings speak to the complexity of establishing contact and building relationships with young people in a large borough such as Northamptonshire, something that was acknowledged as a challenge by UpskillU. Additionally, the median and mean values were closer to each other for Oakhill compared with the other two sites, implying relatively less unpredictability in establishing contact with a young person in a controlled environment as opposed to in the community.

Table 27: Average gap between randomisation date and first session by site

Measure of central tendency	Overall	Haringey	Northamptonshire	Oakhill
Mean	54	51	68	39
Median	42	30	50	35

Further, the average gap between sessions was just over two weeks (16 days) on average (median 11 days). While median values were comparable across sites, Haringey had the lowest average gap (a session every 11 days), and Oakhill had the highest average gap (a session every 22 days). This indicated a higher presence of outliers in Oakhill that were skewing the average value to the right of the median.

Table 28: Average gap between sessions by site

Measure of central tendency	Overall	Haringey	Northamptonshire	Oakhill
Mean	16	11	15	22
Median	11	10	13	13

Young people attended between two and 41 sessions, with an average attendance of 16 sessions. Sessions took place, on average, every 16 days (median 11 days). 37 young people (62%) attended 12 or more sessions, i.e., they completed at least the intensive phase of the EXODUS programme and fulfilled the condition of compliance with the intervention, as defined in the statistical analysis plan. From Table 29, 22% of young people within the pilot sample had more than 80% attendance, while 75% of the sample had more than 60% attendance. Only a handful of young people had attendance levels below 40%. These observations indicate that if a young person started mentoring, even if sessions did not happen as frequently as envisioned, they would be more likely to attend a fair share.

Table 29: Session attendance % for the pilot EXODUS sample

Attendance level	CYP count	CYP %
1–19%	0	0%
20–39%	2	3%
40–59%	13	22%
60–69%	18	30%
70–79%	13	22%
80–100%	14	23%
Total	60	100%

Note: CYP = children and young people

Of the 60 young people, a further nine were reported by UpskillU to have dropped out after attending anywhere between two and 12 sessions. These young people had attended, on average, about six sessions, in comparison to an average of 18 sessions attended by those who were still receiving the intervention. There was also a link between session attendance and T2 responses for young people. Among those young people who submitted T2 responses ($n = 51$), the average session attendance was 18, while those who didn't submit a response ($n = 9$) only attended an average of seven sessions.

CoSA sessions (D2)

There are six young people with recorded CoSA attendance within the pilot sample, ranging from two to five sessions per young person. All six young people who had been to one or more CoSA sessions had 100% attendance for said sessions. While this is positive, it is a fraction of those young people who would be eligible to receive a CoSA at this stage: Up to 1 July 2025, 60 of the 85 young people receiving intervention within the pilot group would have been eligible for a CoSA. Accounting for the 34 young people who withdrew from receiving EXODUS, this brings the figure down to 26, i.e., 23% of those eligible for CoSAs were receiving them at the nine-month mark. It is worth noting, though, that UpskillU more recently shifted to conducting CoSAs virtually after facing difficulties in organising and scheduling in-person sessions with a number of volunteers across communities.

Core themes covered (C1)

Of the six core themes to be covered as part of the intensive phase (Table 30), mentors covered the themes of 'attitudes and values' (88%); 'relationships, influences and decisions' (83%); and 'self-identity' (73%) with most young people. The other three themes also had high rates of coverage, with the lowest being 58% for 'risks and consequences'. In terms of average frequency of coverage, young people and mentors covered 'attitudes and values' in over three sessions on average across the sample, while the themes on 'relationships, influences and decisions' and 'conflicts and choices' were covered in just under three sessions on average. All other themes were covered in about two sessions on average.

Table 30: Core themes covered in the first 12 sessions (intensive phase) – incidence and coverage

Core themes	CYP count (n = 60)	CYP %	Total coverage	Average coverage
1 Self-identity	44	73%	98	2.23
2 Attitudes and values	53	88%	164	3.09
3 Risks and consequences	35	58%	62	1.77
4 Conflict and choices	33	55%	85	2.58
5 Relationships, influences and decisions	50	83%	132	2.64
6 Solutions and strategies	39	65%	71	1.82

Note: CYP = children and young people

In terms of the number of core themes covered (Table 31), mentors covered all six core themes with 22% of young people, while four or more core themes were covered in 72% of the cases. Of the remaining, 24% covered two to three core themes, and only a handful covered one or no theme.

Table 31: Number of core themes covered in the first 12 sessions (intensive phase)

# Core themes covered	CYP count	CYP %
0	1	2%
1	2	3%
2	7	12%
3	7	12%
4	11	18%
5	19	32%
6	13	22%
Total	60	100%

Note: CYP = children and young people

Risk assessments of sessions (C2)

On average, risk assessments were completed for 71% of the sessions with young people. Looking at the distribution in Table 32, 58% of the sample risk assessments were completed for 80% or more sessions (in line with the fidelity checklist). Meanwhile, for 10% of young people, risk assessments were completed for 60–79% of the sessions, and for the remaining 32%, they were completed for less than 60% of their sessions.

Table 32: Risk assessment completion % distribution

Risk assessment completion	Young person count	Young person %
0–19%	9	15%
20–39%	4	7%
40–59%	6	10%
60–79%	6	3%
70–79%	4	7%
80–100%	35	58%
Total	60	100%

Discussion

This descriptive overview of the fidelity checklist raises some interesting points. The first is that 29% (n = 25) of the young people allocated to EXODUS withdrew before starting sessions. However, it is worth noting that a majority (25%, n = 21) were randomised within or adjacent to the original pilot phase (April to August 2024), and the remaining handful (n = 4) were randomised later that year. This ties into the findings around hard-to-engage young people in the initial cohort who were referred to the programme as a last resort, also evidenced through low levels of on-time return rates for this cohort.

38% of young people (n = 23) completed fewer than 12 sessions (constituting the intensive phase) and therefore did not appear to be receiving the intervention as intended. However, of these, nine withdrew mid-way through delivery, six still had around four to six months remaining until final follow-up and another six were situated in Oakhill, where the average gap between sessions attended was higher than in other sites. Taking in these contextual factors, only the remaining two young people (3%) seemed not to be receiving the intervention as intended.

CoSAs and risk assessments had also been recorded for fewer than expected sessions on average. The former was primarily due to logistical challenges in organising these sessions, leading to a transition to virtual CoSAs more recently. On the other hand, while the latter could represent the true picture, it could also possibly signal gaps in reporting in the log, as there is a section on risk assessment to be filled within each mentoring session debrief form.

Fidelity scoring

The fidelity score has been calculated based on the fidelity checklist, comprising the four key criteria explored descriptively earlier in the section. These four criteria were presented to senior UpskillU staff to consider weights for each of them, and the final weights agreed upon in that discussion are provided in Table 33.

Table 33: Weighting for fidelity checklist scoring

Fidelity criteria	Final weights
D1: 60% of organised sessions attended	40
D2: 50% of organised Circles of Support and Accountability attended	10
C1: four or more core themes covered (in the 12-session intensive phase)	30
C2: risk assessment conducted for 80% sessions	20
Total score	100

We scored each young person only against the fidelity criteria they were eligible for. Those who attended 11 or fewer sessions were assessed on attendance and risk assessment only. Those who attended 12 or more sessions were also assessed on the core themes. Young people who had been in the trial for 36 weeks or more and had records of organised CoSAs were assessed against all four criteria. The breakdown is shown in Table 34.

Table 34: Tiers of fidelity scoring and who they apply to

Scoring type	Type of young people it applies to
Basic scoring	Between one and 11 sessions attended (engagement and risk assessments)
Non-CoSA	>= 12 sessions attended (engagement, core themes and risk assessments)
All	Crossed the 36-week threshold and started CoSAs (all criteria are valid)

Note: CoSA = Circle of Support and Accountability

In the table below, we show the available fidelity data for the extended pilot up to 1 July 2025 (n = 104). Around 76% of young people in the intervention group attended at least one mentoring session, excluding those who were recently randomised or due to start soon, based on information from UpskillU.

Table 35: Mentoring log availability

Category	Count	%
Attended at least one mentoring session and logs available	104	76%
Attended at least one mentoring session and logs unavailable	3	2%
Withdrew/never started (no logs)	27	20%
Receiving control	2	2%
Participants eligible to attend mentoring sessions	136	100
Early stages of engagement/due to start mentoring (excluded)	44	
Total count	180⁷³	

⁷³ This is higher than the 177 young people randomised to intervention, as it also includes three young people from the control group who were receiving intervention. The corrected percentage after excluding those young people would still be 76% (101/133).

Red, Amber and Green rating conversion and scoring

As per the fidelity criteria, we were required to assess the programme's RAG rating based on 'deviations from the logic model'. Within our analysis, we classified scores into three bands: low (0–64), medium (65–79) and high (80–100). The decision to divide into three bands as opposed to two (high and low) was to differentiate between young people with limited to no engagement (low fidelity) and those who were at least meeting the 60% attendance criterion (medium fidelity). We defined 'no deviation from the logic model' as a participant having a high fidelity score, and the proportion of these scores was used to assign a rating for this criterion. The adapted definition of the RAG criterion is as follows.

Figure 10: RAG criterion for fidelity rephrased

Low rates of deviations from the logic model (80–100% of cases with high fidelity scores)	Some rates of deviations from the logic model (70–79% of cases with high fidelity scores)	High rates of deviations from the logic model (0–69% of cases with high fidelity scores)
---	---	--

On average, the fidelity score for a young person in the pilot phase was 77.03. 21% of this sample had low fidelity scores, 22% had medium scores and 57% of young people had high scores (no deviation from the logic model).

Table 36: Fidelity score distribution – extended pilot sample

Fidelity score distribution	Extended pilot sample (n = 104)	
	Score count	Distribution %
Low (0–64)	22	21%
Medium (65–79)	23	22%
High (80–100), i.e., no deviations from the logic model	59	57%

While the above score falls within the 'Red' rating, by breaking down the sample into initial pilot sample (up to 1 January 2025) and the extended sample in Table 37, we can observe an improvement in this metric for young people from new referral sources (January – July 2025). The average fidelity score for a young person in the initial sample was 71.30. Broken down into a score distribution, 27% of this sample had low fidelity scores, 32% had medium scores and 42% had high fidelity scores. In comparison, the average fidelity score for a young person in the additional sample was 84.8, and 77% of the additional sample had high fidelity scores ('Amber'), which was a larger proportion than the young people having both high and medium scores combined in the initial sample (73%).

Table 37: Fidelity score distribution – initial and additional pilot samples

Fidelity score distribution	Initial sample (n = 60) April – December 2024		Additional sample (n = 44 ⁷⁴) January – July 2025	
	Score count	Distribution %	Score count	Distribution %
Low (0–64)	16	27%	6	14%
Medium (65–79)	19	32%	4	9%
High (80–100), i.e., no deviations from the logic model	25	42%	34	77%

While this difference has to be qualified by the fact that newer referrals were still at early stages at the time of analysis, the marked improvement in scores is a promising indicator of potentially stronger engagement for this new cohort.

Fidelity from qualitative sources

Early findings suggest a high level of fidelity to the EXODUS programme model, with the core components and activities being delivered as intended across most mentoring sessions. An analysis of the debrief and missed-session forms showed that key elements (e.g., risk assessment, goal-setting and structured activities such as GROW,⁷⁵ Genogram,⁷⁶ EXODUS Outcome Star, Shield⁷⁷ and the Circle of Trust⁷⁸) were regularly included. While some sessions focused more on rapport-building or addressing urgent practical needs, these deviations were contextually appropriate and did not represent a drift from the programme's core aims.

For the delivery team, the randomisation process has been smooth, and there have been only six instances of incorrect assignment after randomisation (2% of all cases). Although young people allocated to the control group are not receiving the 12-month EXODUS programme, the delivery team at UpskillU acknowledges that these individuals are being supported beyond typical BAU through structured check-in phone calls. This is in line with reasonable flexibility in design that can help ensure the success of social research trials (Sanders *et al.*, 2025). The organisation maintains that this does not constitute contamination, emphasising that no EXODUS content is being delivered:

“They’re not getting any components of EXODUS; they’re not getting the EXODUS programme. So, it’s not as though they’re receiving the EXODUS content.” **Delivery team member**

The team sees value in offering this light-touch contact, ensuring that all young people, including those in the control group, have at least some regular interaction:

“That in itself is a support that many young people never get. They don’t even get no one who even cares about what’s happening to them.” **Delivery team member**

⁷⁴ This is out of a total potential sample of 94 young people randomised up to 1 July 2025. Of the remaining 50, four were reported to have started but were not updated in the logs, 34 were due to start, nine were still in the early stages of engagement with UpskillU, two had withdrawn and one was allocated to the BAU arm.

⁷⁵ This structured coaching model (Goal, Reality, Options Will) is used to help young people set positive goals and explore practical steps to achieve them.

⁷⁶ This visual family tree tool helps mentors and mentees understand family dynamics and patterns that may influence behaviour.

⁷⁷ This is an activity in which young people design a personal shield representing their strengths, values and protective factors, boosting self-awareness and resilience.

⁷⁸ This visual exercise helps identify trusted individuals in a young person's life, fostering awareness of safe relationships and support networks.

The structure of the intervention (a 12-week intensive phase, followed by a 26-week transitional phase and a 12-week completion phase) is being followed, with most young people receiving two contacts per week. Delivery combines face-to-face and virtual mentoring, aligning with young people's preferences and increasing accessibility. Although the control group participants receive check-in calls, the delivery team confirmed that no EXODUS content is shared, maintaining the integrity of the trial.

Referring professionals reported that young people remained engaged throughout the programme and demonstrated increased awareness of the consequences of offending, as well as positive shifts in identity and behaviour. While one case of mentor turnover was noted as potentially affecting consistency, this was isolated.

Overall, while the programme seems to be tending towards delivery with improved fidelity, with positive qualitative evidence in support, the existing fidelity scores are below the expected thresholds set for this criterion. However, mechanisms for monitoring and reflection are in place and are functioning well.

Referral suitability after new referral sources in place

In order to capture the impact of new referral sources on recruitment and retention, we attempted to assess the relative suitability of referrals randomised during and after the pilot phase based on young people's engagement captured via:

- Monitoring data available for young people randomised within the initial sample (n = 60, April – December 2024) and the extended pilot (n = 44, January – July 2025), covering the period April 2024 – July 2025
- Control check-ins data available for young people randomised within the pilot (n = 43, April – December 2024) and post-pilot (n = 89, January – June 2025), covering the period April 2025 – September 2025 (monthly check-ins were instated at the end of January 2025)

Mentoring session attendance was higher for participants in the additional sample, with 77% of young people attending 80% or more of the organised sessions, compared with 23% for the initial pilot sample (see Table 37). As was the case above, the caveat here is that young people randomised within the extended period were at an early stage of the intervention at the time of reporting, with attendance ranging from one to 13 sessions, averaging three sessions per young person. However, this level of engagement early on is promising in comparison with the earlier cohort.

Table 38: Session attendance % for the pilot and post-pilot EXODUS sample

Attendance level	Initial sample (n =60) April – December 2024		Additional sample (n = 44) January – July 2025	
	CYP count	CYP %	CYP count	CYP %
1–19%	0	0%	1	2%
20–39%	2	3%	0	0%
40–59%	13	22%	5	11%
60–69%	18	30%	2	5%
70–79%	13	22%	2	5%
80–100%	14	23%	34	77%
Total	60	100%	44	100%

Note: CYP = children and young people

This is mirrored in the control check-ins logs, where a higher proportion of young people (70%) were responding to check-ins in some capacity within the additional pilot sample. Among those young people, levels of check-in completion were also higher.

Table 39: Check-in completion % for the pilot and post-pilot BAU sample

Check-in completion	Initial sample (n = 43) April – December 2024		Additional sample (n = 89) January – July 2025	
	CYP count	CYP %	CYP count	CYP %
0%	19	44%	27	30%
1–19%	7	16%	5	6%
20–39%	1	2%	16	18%
40–59%	2	5%	6	7%
60–69%	5	12%	15	17%
70–79%	0	0%	3	3%
80–100%	9	21%	17	19%
Total	43	100%	89	100%
<i>At least one check-in</i>	24	56%	62	70%

Note: CYP = children and young people

Scale-up

Research question: What is the **potential for the EXODUS programme and its trial processes to be scaled up to support** a full efficacy trial?

To answer this research question, we examined all relevant context up until 1 July 2025.

The EXODUS team and delivery partners appear broadly able to scale up for the full trial, but some challenges may need to be addressed to ensure quality is maintained. The delivery team reported that the initial scale-up has gone well. However, time-consuming processes – particularly explaining the RCT and gaining consent from young people and family members – have added pressure. Future scaling may also be limited by access to venues and the long lead-in time needed to recruit and train experienced mentors.

Mentors highlighted that training is intensive, even for those with relevant backgrounds, and that experience is essential to manage the complex needs of participants – raising concerns that rapid expansion could strain delivery quality.

Referring professionals generally felt EXODUS was scalable, with strong communication and positive relationships noted in many areas. However, some also observed capacity strains as the programme expanded and suggested improvements to information-sharing and feedback processes to help manage increased demand.

The extended pilot phase (to 1 July 2025) provided additional time to explore whether new referral routes and partnerships, such as engaging more schools and onboarding Lewisham Council, could strengthen recruitment, intervention engagement and data follow-up. Following these changes, the number of young people recruited during the pilot increased from 102 to 350 (by 1 July 2025), suggesting that the revised recruitment strategies show promising signs of improving recruitment and potential for scale-up to a full trial.

Evidence of promise

As the EXODUS mentoring programme moves from the pilot phase into the full efficacy trial, as is the norm in internal pilots, this report does not present findings on young people's outcomes or progress. This is to protect the integrity of the trial and avoid the risk of influencing ongoing delivery, participation or expectations. The pilot phase was not designed or powered to assess impact and any early indications (positive or negative), which could unintentionally bias the remainder of the study. Data gathered during the pilot will contribute to the final analysis at the efficacy stage, when outcomes will be robustly assessed and reported.

Readiness for trial

Data from the pilot – both the outcome measures and the process evaluation – shows that EXODUS can be delivered adequately and suggests it is suitable to be evaluated through an efficacy trial. The programme is largely being delivered as intended, has strong recruitment processes in place when also considering new referral sources and has much improved data collection systems and processes with acceptable retention. However, differential attrition between trial arms could potentially lead to biased results. Randomisation was balanced across the trial arms, and there were no reports of young people being negatively affected by the process. Overall, along with adaptations and learnings incorporated from the internal pilot, UpskillU is delivering a service that shows early promise for young people in this pilot.

Table 40 summarises progress against the predefined progression criteria. Using data from the extended pilot period (17 April 2024 to 1 July 2025) and from eligible sub-samples where needed, the evidence indicates that EXODUS is well-positioned to move to a full efficacy trial.

Table 40: Performance against progression criteria for the internal pilot sample

Criteria	Green (proceed)	Amber (review)	Red (stop)	Status (RAG)	Commentary
1. Recruitment rate: recruitment of young people to the internal pilot trial period ⁷⁹	80–100% (n = 82–102) of target number of young people recruited to internal pilot	60–79% (n = 61–81) of target number of young people recruited to internal pilot	0–59% (n = 0–60) of target number of young people recruited to internal pilot	GREEN	100% of the target met (GREEN), i.e., 102 young people recruited to original pilot phase by 2 August 2025. <i>Note: There was no additional overall target set for young people recruited during the extended pilot phase (April 2024 – July 2025), other than monthly targets set out prior to the start of recruitment.</i>
2. Randomisation proportions: participants allocated to each group should be 50:50	Young people are randomised into control or intervention 50:50	Young people are randomised into control or intervention 45:55	Young people are randomised into control or intervention 40:60	GREEN	Of the 350 young people randomised in the extended pilot sample (April 2024 – July 2025), 177 young people (51%) were randomised to the intervention group and 173 (49%) to the control group, nearly an even split at 51:49 (GREEN).
3. Eligibility rate: young people referred to the trial are eligible	90–100% of young people referred are eligible	70–89% of young people referred are eligible	0–69% of young people referred are eligible	GREEN	Of the young people referred (n = 495) but excluding those still being screened at time of reporting (n = 29): 16 young people were considered ineligible to the pilot. - This means 97% of the referred and screened sample (n = 466) were eligible (GREEN).

⁷⁹ This criterion was set per the original sample target (n = 102) to be recruited to the internal pilot between April and the end of July 2024. Given that the pilot was only later extended in March 2025 to include young people randomised up to 1 July 2025, the reporting for this criterion has been done against the original pilot target and timeline.

Criteria	Green (proceed)	Amber (review)	Red (stop)	Status (RAG)	Commentary
4. Consent rate: young people who meet the eligibility criteria give consent to take part in the trial	90–100% of eligible young people give consent	70–89% of eligible young people give consent	0–69% of eligible young people give consent	GREEN	Two young people (out of 352 who attended baseline meetings) did not give consent, meaning 99% of young people gave consent to take part in the trial (GREEN).
5. Randomisation rate: young people who consented to taking part in the trial have been randomised	90–100% of young people who consented have been randomised	70–89% of young people who consented have been randomised	0–69% of young people who consented have been randomised	GREEN	100% of young people (n =350) who consented were randomised in the pilot (GREEN). All but four young people who consented to the trial completed baseline (T1 outcome measures) prior to randomisation (n =346 of 350).
6. Completion rate: completion rate for primary outcome measure (SRDS) at six months for young people in intervention and control	85–100% completion rate	60–84% completion rate	0–59% completion rate	GREEN	116 of the 164 young people completed the six-month follow-up (T2) among the extended pilot sample. The completion rates across this data were quite high (GREEN). 115 (99%) young people completed all items in the Self-Reported Delinquency Scale (primary measure), as well as the Juvenile Victimization Questionnaire, Strengths and Difficulties Questionnaire and Social Support and Rejection Scale outcome measures.
7. Attrition rate to trial: low attrition rates for both arms of the trial (intervention and control group)	0–20% attrition rate on both arms of trial	21–35% attrition rate on both arms of the trial	36–100% attrition rate on both arms of the trial	AMBER	Of the 164 young people randomised to the trial during the extended pilot, six-month follow-up data was collected from 116 young people (70.7%), and 3.6% (six young people) with non-response were recorded as still engaging with the intervention/check-ins. This implies the estimated rate of attrition from the trial was 26% (n = 41), accounting for engagement in mentoring or check-ins in lieu of a survey response. By trial arm: The intervention response rate was 77.6% and non-response engagement was 3.5%, making the estimated attrition rate 19%.

Criteria	Green (proceed)	Amber (review)	Red (stop)	Status (RAG)	Commentary
					The control response rate was 63.2% and non-response engagement was 3.8%, making the estimated attrition rate 33%. The differential attrition between trial arms (14 percentage points) could be a potential source of bias in the final sample. However, this is being mitigated by control group monthly check-ins to boost engagement at follow-up, as well as the use of the intention-to-treat approach during analysis to better preserve post-attrition sample balance. <i>Note: For the intervention arm, engagement was defined as having a medium or high fidelity score (60% or higher), as well as attending at least one mentoring session in the three months prior to reporting (April – July 2025). For the control arm, engagement was defined as responding to at least one monthly check-in within the three months prior to reporting (April – July 2025).</i>
8. Referral partner data: sufficient data collected from at least one referral partner on official police (re)offending and violent (re)offending	Low rates of missing data (80–100% of cases complete) from at least one referral partner	Some missing data (60–79% of cases complete) from at least one referral partner	High rates of missing data (0–59% of cases complete) from at least one referral partner	GREEN	Local police data from Northamptonshire is currently held for baseline and six-month outcomes for 64 young people randomised up to 1 January 2025. Data linkage was established for all 64 young people, even if there were no offences on record at either time point. This is in line with the green criterion of low missing data (100% complete).
9. Delivery partner data: sufficient monitoring data collected from UpskillU to allow for analysis of uptake and demographic profile of young people	Low rates of missing data (90–100% of cases complete)	Some missing data (70–89% of cases complete)	High rates of missing data (0–69% of cases complete)	AMBER	This is listed as AMBER; although it has taken considerable effort to collect monitoring data, the provision of most information has improved over the trial, although some outputs still require a lot of work. In more detail:

Criteria	Green (proceed)	Amber (review)	Red (stop)	Status (RAG)	Commentary
					<u>Referral forms</u>: Returns have become consistent over time, and Coram holds this data for all extended pilot young people with a fair amount of completeness <u>Mentoring logs (intervention)</u>: Initially, there were some gaps in data quality and the frequency with which logs were shared, but a data structure and regular sharing process was put in place in collaboration with UpskillU, as well as a regime of regular quality checks of logs received by Coram. As a result, of the 85 young people allocated to EXODUS (excluding the 25 who withdrew without attending any sessions), logs were available for 100% of the remaining 60 eligible young people (attended at least one session). <u>Monthly check-ins (control)</u>: This data was requested since the start of April 2025 but was only shared with Coram in October 2025 for the first time, covering the period from April 2025 to September 2025. These logs contained 132 (75%) of the 176 young people within the control group from the pilot period, but even within that, only 65% had at least one recorded check-in. These gaps were raised quite early on, and soon after the first export, a live version of the logs to be updated regularly was shared with Coram at the start of December 2025. This has since made the logs quite accessible with higher quality information. <u>Mentoring and debrief forms</u>: We asked UpskillU to provide a mix of randomly and purposefully selected mentoring debrief forms (intervention group). We collected 10 debrief forms and four missed-session forms for nine young people across three delivery sites (Northants, Haringey and Oakhill). Of these, five young people were purposefully selected, and four were randomly selected.

Criteria	Green (proceed)	Amber (review)	Red (stop)	Status (RAG)	Commentary
10. Fidelity to the trial: deviations from trial protocol from referral partners and delivery team	Low rates of deviations from the protocol (80–100% of cases with no deviations)	Some rates of deviations from the protocol (70–79% of cases with no deviations)	High rates of deviations from the protocol (0–69% of cases with no deviations)	GREEN	Low rates of deviations from protocol reported. We worked with UpskillU to detail the process for the control group young people. UpskillU works with young people who are allocated to the control arm to create a safety plan (completed by a peer researcher). Following a quarterly monitoring meeting with the YEF (27 January 2025), the peer researchers began monthly phone check-ins with young people in the control arm as a retention strategy to improve six-month data collection. While this form of support is light touch and distinct from EXODUS, it could pose the risk of enhancing business-as-usual support and reducing the chance of observing an effect. Up to 1 July 2025, there were only six instances where there was a mismatch between random allocation and treatment, likely due to manual error in capturing this information at the randomisation stage. This corresponded to a negligible proportion of the sample (2%). Up to 1 July 2025, a small number of young people (three) were incorrectly given ID numbers matching existing IDs and were randomised based on the allocations of those already existing IDs. Given all of them were in early stages, their IDs were updated and they were re-randomised.
11. Fidelity to the programme: deviations from the intervention logic model by delivery team	Low rates of deviations from the logic model (80–100% of cases with no deviations)	Some rates of deviations from the logic model (70–79% of cases with no deviations)	High rates of deviations from the logic model (0–69% of cases with no deviations)	RED MOVING TO AMBER	This is listed as RED (moving to AMBER), as even though mentoring logs suggest movement towards an acceptable level of fidelity, existing fidelity scores are below the expected threshold for this criterion. <i>Fidelity scoring:</i> Based on the fidelity checklist for all eligible young people within the extended pilot (n = 104), the average fidelity score was 77 (out of 100) for the pilot sample, and 57% (RED) of the young people had high levels of fidelity (no deviations from the logic

Criteria	Green (proceed)	Amber (review)	Red (stop)	Status (RAG)	Commentary
					model). However, there was a marked improvement in fidelity between the initial sample (April – December 2024) and sample (January – July 2025). The average fidelity score for the initial sample was 71 compared with 85 for the additional sample. Furthermore, 77% of the additional sample had a high fidelity score (AMBER), which was a larger proportion than the young people having high or medium scores combined in the initial sample (73%). While this difference has to be qualified by the fact that the newer referrals were still at early stages at the time of analysing, the marked improvement in scores is a promising indicator of potentially stronger engagement for this new cohort. <u>Mentoring debrief forms:</u> We were provided a random sample of mentoring debrief forms (n = 9), which show that core components of the mentoring programme were being covered in this small sample. But without sufficient monitoring data, we cannot accurately assess fidelity across the trial. We know that sessions shifted from in-person to virtual based on young person's needs, which is a deviation from the original model but with a clear and sensible rationale. This was discussed with Coram at a theory of change review session held with UpskillU in September 2025.
12. Acceptability of trial design	There is a low level of reports of young people requiring additional support after being randomised	There is a medium level of reports of young people requiring additional support after being randomised	There is a high level of reports of young people requiring additional support after being randomised	GREEN	There have been no reports of young people being adversely affected by the randomisation process or outcome. There were concerns reported in the implementation and process evaluation from referring professionals about the randomisation of highly at-risk young people as part of the trial design. This was also noted at the initial induction training by Coram (April 2024). Increased contact with peer researchers (brief, monthly check-in

Criteria	Green (proceed)	Amber (review)	Red (stop)	Status (RAG)	Commentary
	(0–20% of young people required additional support)	(21–35% of young people required additional support)	(36–100% of young people required additional support)		calls to flag any safety risks) as part of randomisation into the control group worked to reassure referring professionals.

In addition to the main progression criteria, we also report on the additional criteria put in place during the transition phase to assess the mitigations put in place to improve recruitment, retention and monitoring. As can be observed, nearly all of these criteria were also met to a high standard.

Table 41: Additional transition criteria set by the YEF up to 1 July 2025

Additional conditions for extended pilot phase	Status (RAG)	Commentary
<u>RETENTION</u>: improvement in retention following implementation of mitigation strategies		
Observing close to <u>70% of all six-month surveys due</u> within the six-week window as of 1 July 2025	GREEN	On-time return rates were low for the initial pilot sample (April – July 2024) due to some young people being less suitable for the trial (e.g., young people who were consistently not engaging in statutory services). UpskillU accounted for this in its referral processes from that point by adding an internal triage of referrals, resulting in much higher on-time and six-month return rates for the additional pilot sample. This was also a lesson learned for collecting data at 12 months, where, although return rates were slightly lower as this was the same hard-to-reach cohort, nearly all returns received were within the stipulated timeframe. Noting the improvement in the timeliness of responses, given that the on-time rate for the additional sample is close to 70% as stated in the condition, this criterion is marked GREEN. Six-month overall and timely response rates - Initial pilot sample (April – July 2024): 67% response rate; 35% response rate (on time) - Additional pilot sample (August – December 2024): 77% response rate; 69% response rate (on time) - Overall (April – December 2024): 71% response rate; 48% response rate (on time) 12-month overall and timely response rates 68% response rate; 63% response rate (on time)

A minimum of <u>70% of young people referred starting 1 March</u>, including new referral pathways, attending mentoring sessions (treatment group) or responding to monthly check-ins (control group) as of 1 July 2025	AMBER	This criterion is marked AMBER, as in the case of both trial arms, a slightly lower share of young people compared with the 70% target have records available in EXODUS mentoring logs and monthly control check-in logs. Intervention: assessed from mentoring logs, for the 60 young people randomised between 1 March 2025 and 31 May 2025 (considering the median lead time of over a month between referral and randomisation) As per the data, 63% of the young people (n = 38) randomised within that period were engaging with mentoring. The breakdown of the 60 young people was: • Number of young people who attended one session or more = 35 • Started (but no logs present) = 3 • Due to start = 21 • Receiving control = 1 Control: Of the 77 young people randomised between 1 March and 30 June, records were available for 72 young people, and 42 of them (58%) had recorded responses to at least one monthly check-in between April and June 2025, and 49 of them (68%) had recorded responses to at least one monthly check-in between April and September 2025.
---	---------------------	--

ONBOARDING: *improvement in recruitment rate and engagement following onboarding of additional referral partners*

Overall recruitment is on track to reach the minimum required sample size of 754 young people randomised as of 1 July 2025	GREEN	Up to 1 July 2025, 350 young people had been randomised against a target of 325, on track to randomising 754 young people by 31 July 2026. This was driven by an increase in randomisations from new sources starting February 2025, with numbers consistently exceeding the monthly target of 33 randomisations from April to June 2025 (42, 47 and 44 randomised, respectively).
Lewisham council and school referrals lead to an increase in randomisations per month during April – July 2025.	GREEN	There were 16 randomisations from Lewisham between May and June 2025 (against a target of 21 from April – June 2025). On account of referrals starting a month later than expected in Lewisham, being close to the target can be considered a positive finding. Between 1 March and 1 July 2025, 81 of 129 (63%) randomisations in Northamptonshire and Haringey came from schools, averaging to about 20 referrals a month (four times the minimum target). By site: 40 / 65 (62%) in Northamptonshire, 41/64 (64%) in Haringey.
Suitability of referrals from these new partners is high, translated into high engagement	GREEN	The suitability of new referrals was assessed based on the engagement captured by monitoring (April 2024 – July 2025), as well as control-group check-ins data available (April 2025 – September 2025) for the initial and additional pilot period. • Mentoring session attendance was higher for participants in the post-pilot sample, with 77% of young people attending 80% or more of the organised sessions, compared with 23% for the pilot sample • In control check-in logs, a higher proportion of 70% of young people within the additional pilot sample (January – July 2025) were responding to check-ins in some capacity, compared with 56% for the initial pilot sample (April – December 2024).

MONITORING DATA: improvement in consistency and quality of the monitoring data following adoptions of the new Case Management System (CMS) and addition of a data administrator

UpskillU independently keeps up-to-date monitoring data on its CMS and is able to successfully transfer monitoring and demographic data to the evaluator for 100% of the sample every two weeks, without delays	GREEN	Since July 2025, UpskillU has transitioned to using the RestorativU app to capture mentoring logs, and this data is now being received as a direct export from the app. The transition to an app-based model has smoothed over the monitoring data capture and collection process, with exports being received in more regular and timely fashion. Bi-weekly transfers of individual referrals forms (containing demographics) have typically been on time since early 2025. Mentoring data, on the other hand, had a lot of gaps initially and was not always shared per the planned timeline, but this process has improved since the transition to the RestorativU app in July 2025, with all subsequent data exports coming through on time, directly from the app.
Low rates of missing data in mentor logs (90–100% complete)	GREEN	Based on all the young people that have attended at least one mentoring session, whether in the trial or withdrawn, fidelity data was fully complete for the pilot period (100%), and nearly complete for the overall sample (97%).
Coram is able to fully assess fidelity based on the monitoring data shared by UpskillU	GREEN	Coram has been able to fully assess fidelity to the programme using the mentoring logs, and the fidelity checklist and scoring have been included in the internal pilot report.

Cost information

As per the protocol, at the internal pilot stage, we only aimed to understand where costs are incurred and plan an approach to capture them for the main efficacy study. This was driven by conversations with UpskillU on its organisational structure, key programme activities and how it captures its costs. All of this fed into the classification of costs into key categories (and activities within them) and has informed how we plan to approach data collection and analysis. During the efficacy trial, we will work with UpskillU to identify and report prerequisite, setup and recurring costs for EXODUS, broken down into the following:

- **Staffing (delivery):** This covers the time spent by mentors, peer mentors,⁸⁰ service managers, project coordinators, the volunteer coordinator (CoSA) and the quality assurance lead, who ensures the quality of service delivery.
- **Staffing (central costs):** This covers the time spent by non-delivery staff supporting the delivery process, such as a CEO's contribution to the project in terms of oversight of quality and project governance. With the shift to app-based delivery, a senior developer responsible for the maintenance and management of the mentoring platform and a data analyst to support monitoring of data quality and data sharing with delivery sites will also be factored into these central staff costs.
- **Training and supervision:** This covers costs related to mentor and staff training, recruitment and clinical supervision (support provided to UpskillU to help process sensitive situations it may come across on the job). This would involve looking at how often training is delivered and whether there are different costs for 'onboarding' training and 'refresher' training. We will also factor in costs associated with the Continuing Professional Development accreditation of the mentoring training.
- **Materials and equipment:** This covers materials required for delivering EXODUS sessions in-person (including printouts, electronic devices) or virtually (mobile devices and plans). This would also cover devices for relevant staff involved in management and coordination, as well as the device lending scheme offered to young people with limited access to technology to be able to connect and stay in touch with their mentors.
- **Travel and facilities:** This covers travel costs associated with site visits, spot checks and client check-ins for UpskillU staff, as well as costs incurred on travel by volunteers. It also covers venue costs for mentoring sessions, CoSAs or other meetings with young people. This would also involve variation based on the delivery site.
- **Incentives and activities:** This covers costs related to engagement support, such as refreshments and positive celebratory activities, as well as some financial support towards memberships (e.g., for the young person to go to a gym). The spend on refreshments/activities as part of family mediation sessions offered to young people in the intervention will also be covered.
- **Overheads:** This will cover office costs (rental, utilities, etc.), device costs (non-delivery staff), marketing and publicity materials. These will fall under prerequisite costs.

Based on conversations with UpskillU staff, there are a lot of unseen costs that go into running the intervention in the form of extra hours put in by staff members. This could be, for example, additional phone conversations or contacts, additional support sessions for the family or even involvement in advocacy work (attending statutory meetings with or on behalf of the young person as part of multi-

⁸⁰ This model assumes that the peer researchers currently being used in the evaluation will be embedded into the delivery process as 'peer mentors' even outside an evaluation setting, to continue to carry out opening meetings and check-ins.

agency working, attending court proceedings, making formal visits to young people in custody, writing references/letters, etc.). These costs may prove challenging to include in our eventual estimates.

There are also venue costs for sessions that are often not directly incurred, on account of UpskillU being given access to venues within the relevant institution as a payment in kind for the delivery of the mentoring service.⁸¹ These will be estimated using information on rates for the most-used venues, requested from the local authorities/venues themselves.

As reported in the protocol, our approach to cost data collection, analysis and reporting will be informed by YEF's Cost Reporting Guidance.⁸² In line with these principles, we will take a bottom-up approach to estimating costs associated with individual resources and estimate these from the perspective of the delivery organisation. We anticipate using an Excel data template that would include setup and ongoing costs, broken down by the nature of the resource (e.g., staff and equipment), excluding programme development and evaluation costs. Assumptions made at each stage will be captured and reported on to ensure the replicability of the analysis. In the case of high uncertainty with any particular assumption, we will report cost estimates for each alternative around that assumption. All of this will eventually lead to the estimation of the cost of intervention delivery for a cohort,⁸³ as well as the unit cost per young person. Depending on the quality of the data and cohort size chosen, we will also aim to examine the variation in costs across delivery sites or referral sources.

We have been taking inputs from one of our pro bono economists throughout the ideation of this process, who will continue to support the team with the development and quality assurance of this approach.

⁸¹ Per UpskillU, these offers are taken up only if the venue meets the young person's safeguarding requirements.

⁸² Available here: <https://youthendowmentfund.org.uk/wp-content/uploads/2022/01/21.-YEF-Cost-reporting-guidance.pdf>

⁸³ As per the YEF cost reporting guidance, a cohort may look like either a single mentor's case load, all young people referred in from a particular site or all young people that receive the intervention.

Conclusion

The key findings from the feasibility study are detailed in Table 42 below.

Table 42: Summary of internal pilot study findings

Key conclusions
EXODUS has the potential to move to a full efficacy trial, but this depends on strengthening the systems needed to recruit and monitor participants at scale.
The randomisation process was implemented effectively and adhered closely to trial protocols, achieving a balanced allocation between intervention (51%) and control (49%) groups.
Monitoring data collection processes improved over the course of the pilot, moving from fragmented and inconsistent reporting to a more structured, reliable system with the support of a new technology platform.
Outcome data collection – involving children and young people filling a survey at the start and at the end of the intervention – was successful, achieving a response rate of 71%, with high-quality data (99–100% completion rates).
Overall, there were low levels of fidelity to the programme. Some parts of the programme were not yet being delivered consistently, especially CoSA sessions. However, although fidelity scores were still below the expected threshold, they steadily improved over time.

Note: CoSA = Circle of Support and Accountability

Evaluator judgement of evaluation feasibility

Overall, we believe that the findings from the internal pilot mean that it is feasible for the EXODUS programme to move to a full efficacy trial, with some areas to monitor or strengthen as the trial progresses. These are:

Recruitment, randomisation and retention

- Sustain the involvement of peer researchers in recruitment, consent and follow-up data collection. Their engagement has enhanced data quality, trust and retention, particularly among young people who are often under-represented in research.
- Continue to target referral routes through schools (in Lewisham, for example) and local authority partners to sustain recruitment momentum and maintain representativeness across sites.
- Consider establishing regular information and Q&A sessions between Coram, UpskillU and referral partners to explain the purpose and process of randomisation, address ethical queries and share learning so far from the trial.
- Continue to carry out monthly check-ins with the control group young people to help boost control group response rates at follow-up and reduce differential attrition between trial arms.

Delivery with fidelity to the EXODUS theory of change

- Maintain adherence to the EXODUS model, ensuring that all phases of mentoring (intensive, transitional to ending) and core themes are delivered as specified.
- Continue fidelity monitoring using structured mentoring logs to ensure consistent implementation across sites.

- Integrate peer researchers' (as our young advisors) insights into fidelity reviews and reflective learning processes to ensure that delivery remains responsive, inclusive and grounded in young people's lived experience.
- Continue regular fidelity reflection and learning sessions for the delivery team, facilitated by Coram, to support continuous improvement and the sharing of good practice in alignment with the theory of change.

Capacity in the delivery team

- Retain and expand (where needed) the existing team of trained mentors and peer researchers, recognising their complementary roles in supporting delivery, engagement and data quality.
- Continue to invest in training, supervision and reflective practice to maintain delivery quality and consistency as the programme scales up to a full efficacy trial.
- Continue to focus on a data liaison role within UpskillU to coordinate and oversee the timely submission of monitoring data to the evaluation team and attend regular check-in meetings.

Acceptability of randomisation

- Continue clear and transparent communication with young people, families and professionals about the rationale and fairness of randomisation and continue to explore this in the next-phase IPE.
- Maintain the involvement of peer researchers in explaining randomisation and consent procedures, ensuring that these are delivered in accessible and relatable ways.
- Offer periodic Q&A or feedback sessions between Coram, UpskillU and referral partners, including frontline staff, to promote understanding of trial ethics, address concerns and reinforce confidence in the process.
- Disseminate short, accessible summaries on the randomisation process and its role in ensuring trial integrity to strengthen understanding and engagement.

Monitoring data from the delivery team and referring agencies (e.g., police)

- Continue the systematic collection of mentoring and engagement data through the RestorativU app and standardised reporting templates to ensure consistent and comprehensive records.
- Maintain linkage of monitoring, survey and administrative data to provide a complete understanding of young people's engagement and outcomes.
- UpskillU should continue to submit monitoring records to Coram on a regular and agreed schedule (monthly) to support ongoing analysis and timely feedback.
- Hold periodic data review meetings between UpskillU and the evaluation team to discuss data completeness, address quality issues and support shared learning across sites.

Limitations

Risk of contamination: To boost control group engagement, monthly check-ins by phone were introduced at the end of January 2025 as a sensible retention strategy, in agreement with the YEF. The aim was to build a connection with the control participants and support follow-up data collection at six and 12 months. This form of support is light-touch and distinct from EXODUS. However, there is still a chance that even with the slightly enhanced BAU support, the difference between treatment and control would be less, as would be the chance of observing an effect. This is mitigated by the fact that both the frequency and mode of contact are different and that no EXODUS content is shared, maintaining the integrity of the trial.

UpskillU monitoring data quality: There were initially some gaps in UpskillU's routinely collected monitoring data, such as missing data in the mentoring logs. There was also no quick or efficient way to access this monitoring data (initially shared via a joint SharePoint folder). While this has since improved after the transition to the RestorativU app, poor data quality could potentially lead to reduced reliability by reducing our ability to accurately assess the fidelity of the intervention. Data quality and data gaps can also increase staff costs for both the delivery partner (UpskillU) and evaluator (Coram), as it takes more time and repeated follow-up to assess and monitor how the intervention is being delivered.

Attrition: There was attrition from both arms of the trial but more prominently from the control group (where the 33% attrition rate exceeded the threshold set in the protocol). In most cases, this meant that young people were lost to follow-up data collection at six months. Incomplete data at six months might affect the reliability of long-term outcomes, as we are not aware of outcomes for all young people on the trial. However, because the trial also takes into account local police data, this could go part of the way to mitigate against attrition in the pilot and indicate potential outcomes for those who do not complete six- or 12-month self-report questionnaires. We also have several mitigations to reduce attrition for the full trial and hope to see lower attrition at 12 months and for those who were referred later in the trial. Other issues relating to attrition include:

- **Difficulty engaging young people:** Engaging young people in the EXODUS mentoring programme itself has been challenging for UpskillU due to time commitments and the need for flexible communication approaches. Onboarding young people often took several phone calls and engagement with the parent/carer. Even once a young person had been randomised into the trial, it took a lot of work, time and resources to maintain their engagement, particularly in the follow-up data collection, where it was common for sessions to be booked but cancelled at the last minute or for there to be 'no shows'.
- **Non-response bias:** Not hearing from non-engagers can lead to non-response bias, where those who do not respond to the six-month data collection or engage with mentoring differ from those who do respond/engage, potentially skewing the results. This could affect the representativeness of the findings.
- **Differential attrition:** A higher proportion of young people have dropped out in the control group (33%) compared with the intervention group (19%), a difference of 14 percentage points. If this gap persists or widens substantially, changing the composition of trial arms, it could potentially bias the final sample and affect the internal validity of the study.
- **Intervention sustainability:** The resources required to engage young people in randomisation, mentoring and follow-up data collection could affect the sustainability of how the rest of the intervention is delivered because of additional or unforeseen costs from sustaining engagement, in particular with the most at-risk young people.

Qualitative sample selection: Qualitative samples were selected by UpskillU, so they may not be representative of the broader population, potentially limiting the generalisability of the findings across the trial. In addition, the control group and young people with engagement challenges could not be fully represented in this sample for logistical reasons. There may be some selection bias in UpskillU deciding who to put forward based on their working relationship. However, we spoke to a range of people from different services and believe that the variety of views and positions represented indicates a representative sample of professionals, young people and parents/carers. Furthermore, in the pilot phase, we mainly collated data about perceptions of the processes in the trial, rather than opinions about EXODUS mentoring and outcomes for the young person. The selection bias, however, is more likely to

demonstrate a bias towards those who are most engaged, rather than those who feel the most positively towards the intervention.

Implementation variability: Differences in how the EXODUS programme is implemented across various settings (community settings, schools, youth justice services and a secure training centre) and with young people at varying levels of risk and need can lead to variability in outcomes, making it challenging to attribute effects solely to the intervention. The lead time between randomisation and the start of mentoring is about 54 days on average (median 42 days, six weeks), and the variation by sites also adds to this. Further, the average gap between sessions also varied by site, with a higher chance of large gaps between sessions at Oakhill, followed by Northamptonshire and Haringey. Given all of this variation, different young people may have had different levels of engagement with EXODUS at the time of data collection follow-up.

Peer researchers' bias: Peer researchers could potentially show bias towards the EXODUS programme, as they work closely with UpskillU and some have received the intervention themselves. As part of peer researcher training, we discuss neutrality and bias. We discuss the importance of maintaining objectivity, making participants feel comfortable and able to tell the truth and strategies to minimise personal biases during data collection. Additionally, we hold regular supervision and debriefing sessions to ensure peer researchers are practising these principles. Despite these measures, there remains a possibility of subtle biases influencing the data. However, we feel confident that the training and support provided help peer researchers to carry out data collection without an obvious bias towards the intervention.

Future research

We will produce a final report of the full efficacy trial in late 2027, which will be published by the YEF in 2028. There are no other planned publications before this.

We recommend that the next phase of the evaluation (the full efficacy trial) should follow the same methodology and design as the internal pilot phase, building on the evaluation processes in place. In particular, we recommend the continued use of peer researchers throughout the efficacy trial and will continue to train and support new and existing peer researchers up to July 2027.

We also believe that implementing the recommendations detailed in the 'Evaluator judgement of evaluation feasibility' section will be important for ensuring the trial's success.

Further exploratory research, beyond the scope of this evaluation, would be valuable to better understand the experiences of young people who do not engage with the EXODUS mentoring programme or who choose to withdraw. Future studies could explore their reasons for disengagement, identify factors that might have supported continued participation and examine whether young people who withdraw share any common characteristics or circumstances.

Additional research should also assess the specific impact of involving peer researchers on young people's engagement and data quality. While evidence from the pilot IPE suggests that peer researchers positively influenced participation and trust, a more robust comparative study would help determine the extent of this effect. Evaluating outcomes collected by peer researchers with lived experience against those gathered by traditional researchers could strengthen the evidence base for the benefits of this participatory approach in RCTs.

References

- Adjei, N.K. , Jonsson, K.R., Opoku-Ware, J., Yaya, S., Chen, Y., Bennett, D., McGovern, R., Munford, L., Black, M. & Taylor-Robinson, D. (2025). 'Impact of family childhood adversity on risk of violence and involvement with police in adolescence: findings from the UK Millennium Cohort Study', *Journal of Epidemiology and Community Health*, 79(6). DOI: 10.1136/jech-2024-223168.
- Achenbach, T. M., Becker, A., Döpfner, M., Heiervang, E., Roessner, V., Steinhausen, H. C. & Rothenberger, A. (2008). 'Multicultural assessment of child and adolescent psychopathology with ASEBA and SDQ instruments: research findings, applications, and future directions', *Journal of Child Psychology and Psychiatry*, 49(3), 251-275.
- Baidawi, S. & Piquero, A. R. (2020). Neurodisability among children at the nexus of the child welfare and youth justice system. *Journal of Youth and Adolescence*, 50(4), 803–819. Available at: <https://link.springer.com/article/10.1007/s10964-020-01234-w>
- Bateman, T., Brodie, I., Day, A.-M., Pitts, J. & Osidipe, T. (2023). 'Race', disproportionality and diversion from the youth justice system: a review of the literature – executive summary. Nuffield Foundation. Available at: <https://www.nuffieldfoundation.org/wp-content/uploads/2022/10/Race-disproportionality-and-diversion-from-the-youth-justice-system-a-review-of-the-literature-executive-summary.pdf>
- Bazemore, G. (2001). 'Young people, trouble, and crime: restorative justice as a normative theory of informal social control and social support', *Youth & Society*, 33(2), pp. 199–226.
- Bellis, M.A., Hughes, K., Perkins, C. & Bennett, A. (2012). *Protecting people, promoting health: a public health approach to violence prevention in England*. Liverpool: Centre for Public Health, Liverpool John Moores University. Available at: <https://assets.publishing.service.gov.uk/media/5a7cd6f7ed915d71e1e4df40/Violence-prevention.pdf>
- Bergseth, K.J. & Bouffard, J.A. (2012). 'Examining the effectiveness of a restorative justice program for various types of juvenile offenders', *International Journal of Offender Therapy and Comparative Criminology*, 57(9), pp. 1054–1075. DOI: 10.1177/0306624X12453551.
- Berry, V., Little, M., Axford, N. & Cusick, G. R. (2009). 'An evaluation of youth at Risk's coaching for communities programme', *The Howard Journal of Criminal Justice*, 48(1), 60-75.
- Bickle, L., Hughes, N., Ford, K., Westmoreland, D., Williams, W. H. & Slocombe, T. E. (2024). Traumatic brain injury in criminal justice systems: A systematic literature review. *Journal of Forensic Psychiatry & Psychology*, 35(2). Available at: <https://doi.org/10.1080/14789949.2024.2313451>
- Boney-McCoy, S. & Finkelhor, D. (1995). 'Psychosocial sequelae of violent victimization on a national youth sample', *Journal of Consulting and Clinical Psychology*, 63(5), 726–736.
- Bridge Renewal Trust (2022). *Mayor's Young Londoners Fund Haringey Community Gold end of programme evaluation*. Bridge Renewal Trust.
- British Medical Association (2014). *Young lives behind bars: the health and human rights of children and young people detained in the criminal justice system*. British Medical Association Ethics Department. Available at: <https://www.bma.org.uk/media/1861/bma-young-lives-behind-bars-2014.pdf>
- College of Policing (2019) *Knife crime: Evidence briefing*. Available at: <https://assets.college.police.uk/s3fpublic/2022-03/Knife Crime Evidence Briefing.pdf>

College of Policing (2022). *Evidence briefing*. Available at: <https://www.college.police.uk/guidance/restorative-justice/evidence-briefing>

Cornish, R., & Brennan, I. (2025). Exclusion from school and risk of serious violence: A target trial emulation study. *British Journal of Criminology*, 65(6), 1221–1240. Available at: <https://academic.oup.com/bjc/article/65/6/1221/8051126>

Creaney, S. (2018a). ‘Children’s voices—are we listening? Progressing peer mentoring in the youth justice system’, *Child Care in Practice*, 26(1), pp. 22–37. DOI: 10.1080/13575279.2018.1521381.

Creaney, S. (2018b). *Knife crime: how former offenders can make great mentors for at-risk teens*. The Conversation. Available at: <https://theconversation.com/knife-crime-how-former-offenders-can-make-great-mentors-for-at-risk-teens-105880>

Crown Prosecution Service (2022). ‘*Violent crime*’, Available at: <https://www.cps.gov.uk/crime-info/violent-crime>

Day, A.-M., Allely, C., Robinson, L., Turner, K., Gerry, F. & Forrester, A. (2024). The over-representation of neurodivergent children in youth justice systems and the youth court. *Medicine, Science and the Law*, 64(4), 255–258. Available at: <https://doi.org/10.1177/00258024241274073>

Department for Education. (2018). *Children looked after in England (including adoption), year ending 31 March 2018*. Department for Education. Available at: <https://www.gov.uk/government/statistics/children-looked-after-in-england-including-adoption-2017-to-2018>

Department for Education (2025a). *Suspensions and permanent exclusions in England: academic year 2023/24*. Available at: <https://explore-education-statistics.service.gov.uk/find-statistics/suspensions-and-permanent-exclusions-in-england/2023-24>

Department for Education (2025b). *Suspensions and permanent exclusions in England: autumn term 2024/25*. Available at: <https://explore-education-statistics.service.gov.uk/find-statistics/suspensions-and-permanent-exclusions-in-england/2024-25-autumn-term>

Finkelhor, D., Hamby, S. L., Ormrod, R. & Turner, H. (2005). ‘The Juvenile Victimization Questionnaire: Reliability, validity, and national norms’, *Child Abuse & Neglect*, 29, 383–412

Flynn, S., Langdon, P., Hastings, R., Gray, K., Thompson, P., Coulman, E., Playle, R., Segrott, J., Lugg-Widger, F. & Moody, G. (2022). ‘*Evaluation protocol: Brief Solution Focused Therapy in 10–17-year-olds presenting at police custody: A Randomised Controlled Trial with internal pilot.*’ Youth Endowment Fund (YEF). Available at: <https://youthendowmentfund.org.uk/wp-content/uploads/2022/09/YEF-Brief-Solution-Trial-Protocol-FINAL.pdf>

Fonagy, P., Butler, S., Cottrell, D., Scott, S., Pilling, S., Eisler, I., Fuggle, P., Kraam, A., Byford, S., Wason, J., Ellison, R., Simes, E., Ganguli, P., Allison, E. & Goodyer, I. (2018). ‘Multisystemic therapy versus management as usual in the treatment of adolescent antisocial behaviour (START): a pragmatic, randomised controlled, superiority trial’. *Lancet Psychiatry*, 5(2): 119–133, [https://doi.org/10.1016/S2215-0366\(18\)30001-4](https://doi.org/10.1016/S2215-0366(18)30001-4)

Fraser, K. (2022). *Annual statistics: a youth justice system failing Black children*. Youth Justice Board for England and Wales. Available at: <https://www.gov.uk/government/news/annual-statistics-a-system-failing-black-children>

Gaffney, H., Jolliffe, D. & White, H. (2022). *Mentoring: toolkit technical report*. Youth Endowment Fund. Available at: https://youthendowmentfund.org.uk/wp-content/uploads/2022/10/Mentoring-Technical-Report_Final.pdf

Gill, K., Quilter-Pinner, H. & Swift, D. (2017). *Making the difference: Breaking the link between school exclusion and social exclusion*. Institute for Public Policy Research (IPPR). Available at: <https://ippr-org.files.svdcdn.com/production/Downloads/making-the-difference-report-october-2017.pdf>

Goodman, R. (1997). 'The Strengths and Difficulties Questionnaire: a research note', *Journal of Child Psychology and Psychiatry*, 38, pp. 581–586.

Greater London Authority (2021). *Mayor reveals driving factors behind violence affecting young people*. Available at: <https://www.london.gov.uk/press-releases/mayoral/driving-factors-behind-violence-affecting-young-pe>

Hall, D. (2000). Young offenders with a learning disability. *British Journal of Learning Disabilities*, 28(3), 98–103. Available at: https://www.researchgate.net/publication/242513304_Young_offenders_with_a_learning_disability

Hamby, S.L., Finkelhor, D., Ormrod, R. & Turner, H. (2004). *The Juvenile Victimization Questionnaire (JVQ): administration and scoring manual*. Durham, NH: Crimes Against Children Research Center.

Haywood, K., Collin, S., & Crawley, E. (2014). 'Assessing severity of illness and outcomes of treatment in children with chronic fatigue syndrome/myalgic encephalomyelitis (CFS/ME): A systematic review of patient-reported outcome measures (PROMs)', *Child: Care, Health and Development*, 40(6), 806– 824.

Herbert, E., Julious, S.A. & Goodacre, S. (2019). Progression criteria in trials with an internal pilot: an audit of publicly funded randomised controlled trials. *Trials* 20, 493. Available at: <https://doi.org/10.1186/s13063-019-3578-y>

Home Office (2023). *Criminal exploitation of children, young people and vulnerable adults: county lines*. Available at: https://assets.publishing.service.gov.uk/media/65322ad1e839fd001486720d/2023_FOR_PUBLICATION_-_Criminal_exploitation_of_children_young_people_and_vulnerable_adults_county_lines1.pdf

House of Commons: Home Affairs Committee (2021). *The Macpherson Report: twenty-two years on*. London: UK Parliament. Available at: <https://committees.parliament.uk/publications/7012/documents/89144/default/>

House of Commons (2016). *Restorative justice: fourth report of session 2016–17 (HC 164)*. London: House of Commons. Available at: <https://publications.parliament.uk/pa/cm201617/cmselect/cmjust/164/164.pdf>

House of Commons: Justice Committee (2020). *Children and young people in custody (part 1)*. London: UK Parliament. Available at: <https://committees.parliament.uk/publications/3399/documents/32490/default/>

Hughes, N., Williams, W. H., Chitsabesan, P., Walesby, R. C., Mounce, L. T. A. & Clasby, B. (2015). The prevalence of traumatic brain injury among young offenders in custody: A systematic review. *Journal of Head Trauma Rehabilitation*, 30(2), 94–105. Available at: <https://doi.org/10.1097/HTR.0000000000000124>

Humayun, S., Herlitz, L., Chesnokov, M., Doolna, M., Landau, S. & Scott S. (2017). 'Randomised controlled trial of Functional Family Therapy for offending and antisocial behaviour in UK Youth'. *Journal of Child Psychology and Psychiatry*, 58(9), pp. 1023-1032. Available at: <https://doi.org/10.1111/jcpp.12743>

- Kirby, A. (2021).** *Neurodiversity: A whole-child approach for youth justice*. HM Inspectorate of Probation. <https://hmiprobation.justiceinspectorates.gov.uk/document/neurodiversity-a-whole-child-approach-for-youth-justice/>
- Lammy, D. (2017).** *The Lammy Review*. London: UK Government. Available at: <https://assets.publishing.service.gov.uk/media/5a82009040f0b62305b91f49/lammy-review-final-report.pdf>
- Lenkens, M., van Lenthe, F., Schenk, L., Sentse, M., Severiens, S., Engbersen, G. & Nagelhout, G.E. (2023).** 'Experiential peer support and desistance from crime: a systematic realist literature review', *Psychology, Crime & Law*. Advance online publication. DOI: 10.1080/1068316X.2023.2203925.
- London City Hall (2024).** *Mayor announces major funding boost for mentors in pupil referral units*. Available at: <https://www.london.gov.uk/media-centre/mayors-press-release/mayor-announces-major-funding-boost-for-mentors-in-pupil-referral-units-in-london>
- Maxwell, N. (2024).** *Child criminal exploitation*. HM Inspectorate of Probation. Available at: <https://cdn.websitebuilder.service.justice.gov.uk/uploads/sites/32/2024/07/Academic-Insights-Child-Criminal-Exploitation-FINAL.pdf>
- McAra, L. & McVie, S. (2005).** 'The usual suspects? Street-life, young people and the police'. *Criminal Justice*, 5(1), 5-36.
- McAra, L. & McVie, S. (2010).** 'Youth crime and justice: key messages from the Edinburgh Study of Youth Transitions and Crime', *Criminology & Criminal Justice*, 10(2), pp. 179–209.
- McCold, P. & Wachtel, T. (2002)** 'Restorative justice theory validation', in Weitekamp, E.G.M. and Kerner, H.-J. (eds.). *Restorative Justice: Theoretical Foundations*. Cullompton: Willan Publishing, pp. 110–142.
- McDonald-Heffernan, K. & Robin-D'Cruz, S. (2024).** *How is youth diversion working for children with special educational needs and disabilities?* Justice Innovation. Available at: https://justiceinnovation.org/sites/default/files/media/document/2024/send_youth_diversion.pdf
- McNeill, A. & Wheller, L. (2019).** *Knife crime: evidence briefing*. College of Policing. Available at: [https://assets.college.police.uk/s3fs-public/2022-03/Knife Crime Evidence Briefing.pdf](https://assets.college.police.uk/s3fs-public/2022-03/Knife%20Crime%20Evidence%20Briefing.pdf)
- McPherson, M., Smith-Lovin, L. & Cook, J.M. (2001).** 'Birds of a feather: homophily in social networks', *Annual Review of Sociology*, 27(1), pp. 415–444.
- Metropolitan Police (2025).** *Child criminal exploitation*. Available at: <https://www.met.police.uk/advice/advice-and-information/caa/child-abuse/child-criminal-exploitation/>
- Nock, M.K., Kazdin, A.E., Hiripi, E. & Kessler, R.C. (2006).** 'Prevalence, subtypes, and correlates of DSM-IV conduct disorder in the National Comorbidity Survey Replication', *Psychological Medicine*, 36(5), 699- 710. Cambridge University Press. DOI:10.1017/S0033291706007082.
- Nock, M.K., Kazdin, A.E., Hiripi, E. & Kessler, R.C. (2007).** 'Lifetime prevalence, correlates, and persistence of oppositional defiant disorder: results from the National Comorbidity Survey Replication'. *Journal of Child Psychology and Psychiatry*, 48(7), 703-713. DOI:10.1111/j.1469-7610.2007.01733.x.
- Porteous, D. & Goodman, A. (2023).** 'If I had had a me': the benefits and challenges of involving children with lived experience in youth justice services', *Safer Communities*, 22(3), pp. 172–185. DOI: 10.1108/sc-10-2022-0043.

Prison Reform Trust. (2016). *In care, out of trouble: How the life chances of children in care can be transformed by protecting them from unnecessary involvement in the criminal justice system.* Prison Reform Trust. Available at: https://prisonreformtrust.org.uk/wp-content/uploads/old_files/Documents/In%20care%20out%20of%20trouble%20summary.pdf

Roffman, J.G., Pagano, M.E. & Hirsch, B.J. (2000). *Social Support and Rejection Scale.* Evanston, IL: Northwestern University.

Royal College of Paediatrics and Child Health (2020). *Youth violence – state of child health.* Available at: <https://stateofchildhealth.rcpch.ac.uk/evidence/injury-prevention/youth-violence>

Sanders, M., Ellingwood, J., Vallis, D., Hirneis, V., Ewanich, K., Harrop, I., Rodriguez, G., Hume, S. & Kozman, E. (2025). *Designing and delivering randomised trials for social policy.* King's College London. Available at: <https://www.kcl.ac.uk/sfg/assets/designing-and-delivering-randomised-trials-for-social-policy-digital.pdf>

Sanders, J., Liebenberg, L. & Munford, R. (2018). The impact of school exclusion on later justice system involvement: Investigating the experiences of male and female students. *Educational Review*, 72(3), 267–284. Available at: <https://doi.org/10.1080/00131911.2018.1513909>

Smith, D.J., McVie, S., Woodward, R., Shute, J., Flint, J. & McAra, L. (2001). 'The Edinburgh study of youth transitions and crime: key findings at ages 12 and 13', *British Journal of Criminology*, 43, pp. 169–195.

St James-Roberts, I., Greenlaw, G., Simon, A. & Hurry, J. (2005). *National evaluation of Youth Justice Board mentoring schemes 2001–2004.* Youth Justice Board for England and Wales. Available at: <https://dera.ioe.ac.uk/id/eprint/7757/1/National%20Evaluation%20of%20Mentoring%20Projects%202001%20to%202004%20web%20ready.pdf>

Strang, H., Sherman, L., Mayo-Wilson, E., Woods, D. & Ariel, B. (2013). 'Restorative Justice Conferencing (RJC) using face-to-face meetings of offenders and victims: effects on offender recidivism and victim satisfaction', *Campbell Systematic Reviews*, 9(1), pp. 1–59.

Talbot, J. (2010). Prisoners' voices: Experiences of the criminal justice system by prisoners with learning disabilities. *Tizard Learning Disability Review*, 15(3), 33–41. Available at: <https://doi.org/10.5042/tldr.2010.0403>

Taylor, S. Blackshaw, E., Lawrence, H., Stern, D., Gilbert, L. & Raghuo, N. (2023). *Randomised controlled trial of Family Group Conferencing at pre-proceedings stage.* Available at: <https://foundations.org.uk/wp-content/uploads/Reports/Randomised-controlled-trial-family-group-conferencing.pdf>

Tolan, P. H., Henry, D. B., Schoeny, M. S., Lovegrove, P. & Nichols, E. (2014). 'Mentoring programs to affect delinquency and associated outcomes of youth at risk: A comprehensive meta-analytic review', *Journal of experimental criminology*, 10: 179-206.

Thomas, S. & Glazzard, J. (2025). Special educational needs and disabilities of children in custody: A systematic review of international research. *Review of Education*. Available at: <https://doi.org/10.1002/rev3.70081>

Waddell, S. , Sorgenfrei, M., Freeman, G., Gordon, M., Steele, M. & Wilson, H. (2022). *Improving the way family support services work for minority ethnic families.* Early Intervention Foundation. Available at: <https://www.eif.org.uk/report/improving-the-way-family-support-services-work-for-minority-ethnic-families>

- Walters, S.J., Jacques, R.M., dos Anjos Henriques-Cadby, I.B., Candlish, J., Totton, N. & Shu Xian, M.T. (2019).** 'Sample size estimation for randomised controlled trials with repeated assessment of patient-reported outcomes: what correlation between baseline and follow-up outcomes should we assume?', *Trials*, 20(566). <https://doi.org/10.1186/s13063-019-3671-2>
- Williams, A. (2019).** 'Family support services delivered using a restorative approach: a framework for relationship and strengths-based whole-family practice', *Child & Family Social Work*, 24(4), pp. 555–564.
- Wood, W.R., Suzuki, M. & Hayes, H. (2022).** *Restorative justice in youth and adult criminal justice*. Oxford Research Encyclopedia of Criminology and Criminal Justice. DOI: 10.1093/acrefore/9780190264079.013.658.
- Young, S., Moss, D., Sedgwick, O., Fridman, M. & Hodgkins, P. (2014).** A meta-analysis of the prevalence of attention deficit hyperactivity disorder in incarcerated populations. *Psychological Medicine*, 45(2), 247–258. Available at: <https://doi.org/10.1017/S0033291714000762>
- Young, S., Gudjonsson, G., Chitsabesan, P., Colley, B., Farrag, E., Forrester, A., Hollingdale, J., Kim, K., Lewis, A., Maginn, S., Mason, P., Ryan, S., Smith, J., Woodhouse, E. & Asherson, P. (2018).** Identification and treatment of offenders with attention-deficit/hyperactivity disorder in the prison population: A practical approach based upon expert consensus. *BMC Psychiatry*, 18, Article 281. Available at: <https://doi.org/10.1186/s12888-018-1858-9>
- Youth Endowment Fund (2025a).** *Statistics update: trends in violence affecting children*. London: Youth Endowment Fund. Available at: https://youthendowmentfund.org.uk/wp-content/uploads/2025/01/YEF_Statistics_update_January_2025.pdf
- Youth Endowment Fund (2025b).** *Children, violence and vulnerability 2024: who is affected by violence?* London: Youth Endowment Fund. Available at: <https://youthendowmentfund.org.uk/reports/children-violence-and-vulnerability-2024/who-is-affected/>
- Youth Justice Board (2002).** *Final warning scheme: guidance for the police and youth offending teams*. Available at: <https://webarchive.nationalarchives.gov.uk/ukgwa/http://www.homeoffice.gov.uk/documents/final-warning-scheme.pdf?view=Binary>
- Youth Justice Board (2026).** *Youth justice statistics: 2024 to 2025*. Available at: <https://www.gov.uk/government/statistics/youth-justice-statistics-2024-to-2025/youth-justice-statistics-2024-to-2025>

Appendices

Appendix 1: EXODUS trial referral form

Referrer's name:

Position:

Organisation:

Email:

Telephone:

Has the young person and their parent/guardian consented to be referred onto the EXODUS programme and its evaluation? Yes/No

Young person's first name:

Young person's surname:

UCIN (unique child identification number):

Young person's date of birth:

Young person's gender:

Young person's ethnicity:

Is English the young person's second language?

What is the young person's first language?

Does the young person have any current mental health problems?

Does the young person have Special Educational Needs and Disabilities (SEND)?

Is the young person eligible for Free School Meals?

Is the young person care experienced (currently or having been in care)?

***Is the young person open to any of the following?**

A: Children looked after Team

B: Child Protection Plan

C: Child in Need

D: Early Help/Targeted Family support

E: None of above

Is the young person currently open to the Youth Justice Service?

***Is the young person open/receiving any of the following?**

A: Child Criminal Exploitation CCE team

B: Child Sexual Exploitation CSE team

C: Behaviour Support Service

D: CAMHS

E: Other

F: NO

If you answered 'other' to the previous question, please specify:

Main parent/carer first name:

Main parent/carer surname:

Does this person have parental responsibility for the child/young person you are referring?

Is English the parent/carer's second language?

What is the parent/carer's first language?

Main reason for referral:

What is the age of the young person?

*The young person must be one of the following to be eligible for the EXODUS trial, please tick which are relevant:

A: Known to be currently offending where young person has been arrested or identified by police for offending and/or antisocial behaviour or affected by serious violence, criminal or sexual exploitation (as perpetrators and/or victims)

B: Considered to demonstrate high/medium risk factors associated with offending, exploitation, and/or victimisation. This is based on vulnerability assessments undertaken by referral partners which considers whether young person is at least one of the following:

- Currently in / leaving custody where young person is in custody and will complete their custodial sentence within a given timeframe to allow them to engage in EXODUS
- Known to be currently offending where young person has been arrested or identified by police for offending and/or antisocial behaviour or affected by serious violence, criminal or sexual exploitation (as perpetrators and/or victims)
- Known to the Youth Offending Services (YOS)
- Has a pending or in place National Referral Mechanism (NRM) as at risk of exploitation or trafficking
- Has had a recent recorded missing episode
- Known by the police/YOS to be affiliated with groups, often referred to as gangs, involved in crime, violence and trafficking
- Known by the police/YOS to have siblings already involved in and affected by serious youth violence
- Known to Children's Services (e.g., known to early help, are a Child in Need, on a Child Protection Plan, are Looked After, or have care experience)
- Demonstrates exclusion risk factors i.e., persistent absences and suspension, displaying Anti-Social Behaviour.

If young person is still in custody, when will they be leaving?

What is the young person's level of risk?

- LOW RISK - No evidence at present to indicate likelihood of serious harmful behaviour in future. No specific risk management work needed.

- MEDIUM RISK - Some risk identified but the young person is unlikely to cause serious harm unless circumstances change. Relevant issues can be addressed as part of the normal supervision process.
- HIGH RISK - Risk of harm identified. The potential event could happen any time and the impact would be serious. Action should be taken in the near future and the case will need supervision and monitoring (e.g., local registration, oversight by middle/senior management).
- VERY HIGH RISK - Imminent risk of harm identified. The young person will commit the behaviour in question as soon as they are able to or as soon as an opportunity arises, and the impact would be serious. Immediate action is required and is likely to involve intensive multi-agency support and surveillance.

What is the young person's level of safety and wellbeing concern?

Low / medium / high safety and Wellbeing concern

Is there a preferred location for the consent meeting with the peer researcher?

Which town does the young person live in?

Thanks for completing this Typeform.

Appendix 2: Risk and safety rating matrix used by referrers to EXODUS

LOW RISK	No evidence at present to indicate likelihood of serious harmful behaviour in future. No specific risk management work needed.
MEDIUM RISK	Some risk identified but the young person is unlikely to cause serious harm unless circumstances change. Relevant issues can be addressed as part of the normal supervision process.
HIGH RISK	Risk of harm identified. The potential event could happen any time and the impact would be serious. Action should be taken in the near future and the case will need supervision and monitoring (e.g., local registration, oversight by middle/senior management).
VERY HIGH RISK	Imminent risk of harm identified. The young person will commit the behaviour in question as soon as they are able to or as soon as an opportunity arises, and the impact would be serious. Immediate action is required and is likely to involve intensive multi-agency support and surveillance.

Low safety & wellbeing concern	No risks to the young person's safety and well-being have been identified or the risks identified are unlikely to occur and would not impact on the young person's immediate safety and wellbeing.
Medium safety & wellbeing concern	Some risks to the young person's safety and well-being have been identified and are likely to occur. The young person's immediate safety and wellbeing is unlikely to be compromised provided specific actions are taken.
High safety & wellbeing concern	Clear risks to the child or young person's safety and wellbeing have been identified, are likely to occur and the impact would compromise the young person's safety and well-being. Actions are required in the near future and are likely to involve other agencies in addition to youth justice services.
Very high safety & wellbeing concern	Clear risks to the young person's safety and wellbeing have been identified, are imminent and the young person is unsafe. Immediate actions are needed to protect the young person, which will include (or have already included) a referral to statutory child protection services.

Appendix 2a: initial documents completed with young people at beginning of EXODUS intervention

Initial contact form

About You: What is important to you?

Fill in the details in the bubble about you. Think about 5 different areas of your life that are important to you.

1.....

2.....

3.....

4.....

5.....

Name:

Age:

Contact number:

EXODUS outcomes star

County Lines & Crime Exploitation

Healthy Relationships with female / male partners

Positive Choices around life and future

Victim Awareness

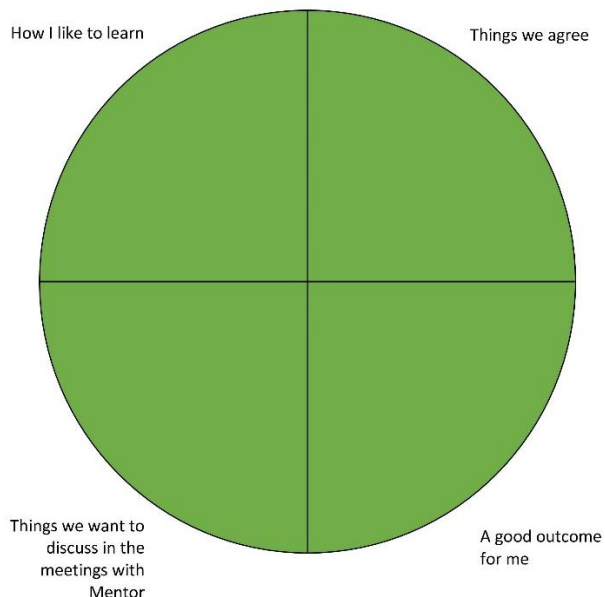
Family

Offending

Personal Safety

Healthy and well-being

Contract circle



Initial safety plan

This is an initial safety plan that allows us to explore the best ways to keep a young person safe and address their immediate needs.

Questions	Response	Reasons behind your thoughts
Rest/ refocus – what do you need right now?		
Keeping you safe – how can we improve your situation?		
Health and wellbeing - how can we make you feel better?		
Goals – what can you focus on to upskill yourself?		
Guidance – which people can support you?		
Name who you can talk to if you are upset or self-harming/ having suicidal thoughts		
Emergency/ professionals – name a trusted adult you can go to for help or support		

EXODUS: information about the research for young people

The Coram team would like you to take part in our research. Before you decide if you are happy to take please read this information. It explains the research we doing and what we would like you to do.



Please **get in touch** if you have any questions at all. You can contact the lead researcher, Hannah Lawrence, by:



- calling, texting or sending a WhatsApp message to 07805 813071
- calling 020 7520 0365 (Monday to Friday from 9am to 5pm)
- emailing research@coram.org.uk
- writing to Coram Impact & Evaluation, 41 Brunswick Square WC1N 1AZ
- you can find out more about Coram here: www.coram.org.uk

What is EXODUS?

- EXODUS is a **mentoring programme** for 11 to 17 year olds who are at risk of offending.
- EXODUS aims to reduce the likelihood of young people offending
- Mentors who understand the criminal justice system take young people through a structured mentoring programme.

UpskillU run EXODUS. You can find out more about UpskillU here: <https://upskillu.co.uk>



The Youth Endowment Fund funds EXODUS and this research. More information here: <https://youthendowmentfund.org.uk>

What is the research?

Coram is a charity that aims to help young people. Coram's research team is working with UpskillU to research the impact of EXODUS on young people. As part of the research, young people taking part will be **randomised**. This means about 50% of young people will randomly get EXODUS, and 50% will randomly get the normal support offered by their local youth offending service or local council.



At the end of the research, Coram will compare the outcomes for the young people that got EXODUS to the young people that got usual support. We will then look if EXODUS can help achieve positive outcomes for young people, including reducing offending. At the moment, we do not know if EXODUS works so this research is very important.

If you agree to take part, you will be randomly put into the EXODUS group **or** the normal support offered by your local youth offending service or local council. We will work with you while you get either type of support.

Why do you want me to take part?

We want you to take part because you have been involved in your local youth offending service or a service run by your local council. It is really important that we get a lot of young people involved in the research to see any results - **we need at least 800 young people to take part** across the country!

What happens if I agree to take part?



If you are happy to take part, you will need to complete a **consent form** (at the end of this information). After that, a researcher will support you to answer some questions using an online questionnaire. The questionnaire asks about any offending you have been involved with in the past year and how you have been feeling and behaving over the last six months. The researcher will contact you again three, six and 12 months later. At six and 12 months, the researcher will ask you to complete the online questionnaires again. **You will receive a**

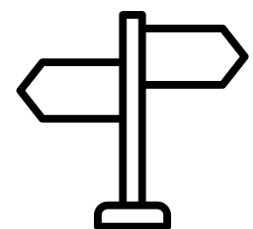
£10 thank you voucher for completing the questionnaires at six months and then another £10 voucher at 12 months.

Will what I have said be shared with other people?

Your answers will be analysed with other answers from young people by the Coram research team. Your answers **will not be shared** with any other teams, such as your local youth offending service. Your answers will not affect any support you receive. The only time the researcher or person at Coram would break confidentiality is if you said something to them which suggests that someone is at risk of harm. For example, this could be if anyone is going to be attacked. In the rare occasion this might happen, the researcher would talk to you about how and when they are going to share this information with others.

Could it be upsetting for me to take part?

As the questionnaire asks about any offending you have been involved with in the past year and how you have been behaving and feeling over the past six months it may feel sensitive. You do not need to answer any questions if you find them upsetting, and you can take a break or stop at any time. We aim to be **supportive and kind** and we will **signpost you to support** if you need.



You may feel disappointed if you are not offered EXODUS, this is completely understandable. Whether you are offered EXODUS is completely down to **chance** and in no way due to anything you have said or done. Whether you are or are not offered EXODUS, the researcher and your youth offending worker (or similar)

will talk about the other support available to you. Remember at this stage, we do not know that EXODUS helps young people more than the regular support services available.

What will happen to the results of the research?



We will write a report about the research in March 2025 and again in 2028. We can share the report with you if you would like. The report will not contain any names or anything which could identify you. The report will be published on the Youth Endowment Fund's website and possibly in an academic journal.

At the end of the research the Youth Endowment Fund will **archive some of your data** (your name, gender and date of birth). The Youth Endowment Fund wants to know whether taking part in the research study prevents young people from being involved in crime and violence as they grow older. To do this, the Youth Endowment Fund will keep information about the young people who have taken part in this research in an archive. Once this data is transferred it will be **permanently deleted** from Coram's data storage systems. When your data is archived by the Youth Endowment Fund your name will be removed. From this point on, it will no longer be possible to identify you from the data. More information about this is in our **data privacy notice** here: www.coram.org.uk/wp-content/uploads/2024/04/EXODUS-research_data-privacy-notice-Apr-2024.pdf

Do I have to take part?

No. It is up to you whether you take part – either way this will not affect any support you receive from your local youth offending service or local council now or in the future. If you agree to take part today then you can change your mind later. You can decide to withdraw from the research at any point up until **01 January 2025 [for young people in pilot group only]**. To do this please contact Hannah Lawrence at Coram on the same contact details (above).

How will you use the information about me and how will you keep it safe?

We have many systems to keep your data safe.

Here is our **data privacy notice**: www.coram.org.uk/wp-content/uploads/2024/04/EXODUS-research_data-privacy-notice-Apr-2024.pdf

It is quite long, but it explains everything you need to know about how we make sure we keep your data secure. Please do take the time to read it and get in touch with us if you have any questions at all.



I am happy to take part, what do I need to do?

You will need to complete the consent form on the next page.

Thank you for taking the time to read this information and we hope that you will take part in the research!

Appendix 4: Consent forms for young person to take part in EXODUS trial

Consent form to take part in the EXODUS research

Please tick the yes or the no box for each statement:

	Yes	No
I have read the information about the EXODUS research or someone has read it to me	☐	☐
I have been able to ask questions about the information about the EXODUS research and I understand it	☐	☐
I am happy to be randomised either into EXODUS or for business-as-usual support as part of the EXODUS research	☐	☐
I agree that the information collected (what I say) will be used in a published report and may be talked about at events anonymously	☐	☐
I understand that my information (what I say) will be stored securely	☐	☐
I understand that information I provide will be confidential unless the researcher has concerns about my or another person's safety. If this happens, the information will be passed on to the relevant people	☐	☐
I understand that my data will be transferred to a data archive and kept indefinitely	☐	☐

Your name:

Your signature:

Today's date:

Consent form for your child / the young person you support to take part in the EXODUS research

Please tick the yes or the no box for each statement:

	Yes	No
I have read the information about the EXODUS research or someone has read it to me	☐	☐
I have been able to ask questions about the information about the EXODUS research and I understand it	☐	☐
I am happy for my child / the young person I support to be randomised either into EXODUS or for business-as-usual support as part of the EXODUS research	☐	☐
I agree that the information collected about my child / the young person I support will be used in a published report and may be talked about at events anonymously	☐	☐
I understand that the information will be stored securely	☐	☐
I understand that information my child / the young person I support provides will be confidential unless the researcher has concerns about my or another person's safety. If this happens, the information will be passed on to the relevant people	☐	☐
I understand that my child's / the young person I support's data will be transferred to a data archive and kept indefinitely	☐	☐

Your name:

Your signature:

Today's date:

Appendix 5: Data protection impact assessment for the EXODUS trial



Data Protection Impact Assessment (DPIA)

Date created: 23 February 2024

Date updated: 30 September 2025

Version no: 1.3

Ethics reference number: C-REC-2023/24-031

Screening questions

These questions are intended to help you decide whether a DPIA is necessary. Answering 'yes' to any of these questions is an indication that a DPIA should be completed. You can expand on your answers as the project develops if you need to. **NB This only applies to individuals living in the EEA.**

Questions		Yes	No
1.	Will the project involve the collection of new information about individuals?	Yes	
2.	Will the project compel individuals to provide information about themselves?		No
3.	Will information about individuals be disclosed to organisations or people who have not previously had routine access to the information?	Yes	
4.	Are you using personal data about individuals for a purpose it is not currently used for, or in a way it is not currently used?	Yes	
5.	Does the project involve you using new technology which might be perceived as being privacy intrusive? For example, the use of facial recognition.		No
6.	Will the project result in you making decisions or taking action against individuals in ways which can have a significant impact on them?	Yes	
7.	Is the information about individuals of a kind particularly likely to raise privacy concerns or expectations? For example: health records, criminal records, or other information that people would consider to be particularly private.	Yes	
8.	Will the project require you to contact individuals in ways which they may find intrusive?	Yes	

Step 1: About the project

Explain broadly what the project aims to achieve. You may find it helpful to refer or link to other documents, such as a project proposal.	Coram's Impact & Evaluation team is carrying out an evaluation of EXODUS, a 12-month intensive restorative practice mentoring programme. EXODUS is delivered to young people (aged 11-17 at the point of referral) involved in or displaying risk factors associated with violence, offending and/or exploitation. EXODUS is delivered by paid mentors from a community organisation, UpskillU. The project aims to provide evidence about the effectiveness of the EXODUS programme on reducing offending for these young people.
--	---

Summarise why you identified the need for a DPIA (this can draw on your answers to the screening questions).	The evaluation will be a randomised controlled trial design. There will be an internal pilot leading to an efficacy study (if progression criteria are met) with an implementation and process evaluation throughout. This will involve receiving consent from young people to be part of the trial. If consenting, it will involve collecting data from young people aged 11-17 years old (YP) in a control group (who do not receive the EXODUS mentoring programme) and intervention group (who do receive the EXODUS mentoring programme) on a number of validated self-reported outcome measures. It will also include collecting and matching data on their participation in activities (including EXODUS if they are in the control group) and local police data on instances of crime from referral partners (Northamptonshire Police and Youth Offending Services; Oakhill Secure Training Centre and Haringey Council and Youth Offending Service). As well as data about EXODUS uptake and engagement from UpskillU.
--	---

Step 2: About the use of personal data

Completion of this section requires knowledge of data protection legislation. Speak to your local GDPR champion or Coram's Privacy Officer (dataprotection@coram.org.uk) if you are unsure about anything.

	Question	Answer
1.	What personal data will you be collecting and/or processing?	We will be collecting data from EXODUS referral forms used to refer young people (YP) into the trial (after the YP consents to take part in the trial). This includes personal data of the referral partner: • Referrer name • Referrer position • Referrer telephone number • Referrer email This includes personal data of the young person, which may include: • YP first, middle and surname • YP DOB/YP age • YP gender • Ethnicity • Is English a second language? • What is the YP's first language? • Is this young person a migrant or refugee? • Does the YP have any current mental health problems? • Does the YP have Special Educational Needs (SEND)? • Does the YP have an Education, Health or Care Plan (EHCP)? • Is the YP eligible for Free School Meals? • Is the YP care experienced (currently or having been in care)? • Whether the YP is open to Children Looked After, Child Protection Plan, Child in Need, Early help/targeted family support • Whether the YP currently open to Youth Justice Service

		• Whether the YP is open to Child Criminal Exploitation (CCE) team; Child Sexual Exploitation (CSE) team; Behaviour Support Service; CAMHS or similar services • Whether YP is known to be currently offending • Whether YP is considered to demonstrate high high/medium risk factors associated with offending, exploitation, and/or victimisation including: - Known to the Youth Offending Services (YOS) - Have a pending or in place National Referral Mechanism (NRM) as at risk of exploitation or trafficking - Have had a recent recorded missing episode - Known by the police/YOS to be affiliated with groups, often referred to as gangs, involved in crime, violence and trafficking - Known by the police/YOS to have siblings already involved in and affected by serious youth violence - Known to Children's Services (e.g., known to early help, are a Child in Need, on a Child Protection Plan, are Looked After, or have care experience). - Demonstrate exclusion risk factors i.e., persistent absences and suspension, displaying Anti-Social Behaviour. • Whether the YP is currently in/leaving custody • Level of Risk and Safety & Wellbeing concern as assessed by the referral partner Information on the parent/guardian: their first and surname and if English a second language and what is their first language We will be asking YP to complete a questionnaire at baseline, 6 months and 12 months including the: 1. Self-Reported Delinquency Scale 2. Strengths and Difficulty Questionnaire 3. Module A of the Juvenile Victimization Questionnaire 4. Social Support and Rejection scale (only at 6 and 12 months) We will also be collecting: • local police data on YP's offending in the last 12 months at baseline, and in the last 12 months (and 18 months for a sub-sample) a year after baseline. This will be collected from police/YOS referral partners and include the volume and type of criminal offence and the number of arrests, cautions, convictions etc) • Monitoring data on uptake and attendance of EXODUS, attrition rates and reasons for attrition for YP in the intervention group from UpskillU at 3 months, 6 months, and 12 months in the internal pilot and at 6 months and 12 months in the efficacy study • Monitoring data on business-as-usual support for YP in the control group from referral partners at 6 and 12 months. We will interview YP, parents/carers and professionals. Interviews will be recorded with permission. Recordings will be stored securely and
--	--	---

		deleted 12 months after the research is published. Interviews will be transcribed anonymously. All reporting will be anonymous and will not include identifiable data.
2.	Will the information you collect include sensitive (special category) or criminal offence data?	Yes. We will be collecting data on offending and ethnicity .
3.	What is your <i>legal basis</i> for processing the personal data? See glossary for definition. For legitimate interest, explain what legitimate interest is being pursued.	In line with Youth Endowment Fund (YEF) guidance⁸⁴: 1. Personal data will be processed under the basis of Public Task under UK General Data Protection Regulation Article 6.1(e). 2. Special category personal data being processed for research purposes is under GDPR Article 9.2(j) and DPA18 Schedule 1 Part 1.4(a), (b)&(c) for special category data including data considered to be a protected characteristic under the UK Equality Act 2010. In accordance with the definitions below: 5. Public task: the processing is necessary for you to perform a task in the public interest or for your official functions, and the task has a clear basis in law. It is in the public interest to provide evidence of the effectiveness of programmes that aim to reduce (re)offending rates of young people to inform future commission decisions. Our evaluation will provide this. We are not aware of any other way to perform this task in a less intrusive way. However, it should be noted that for ethical reasons we will actively request consent from those providing data as part of the evaluation (for example questionnaires, interviews).
4.	What is the purpose of processing this data? What do you want to achieve? What are the benefits of the processing – for you and more broadly? Does the project involve the use of existing personal data for new purposes?	Coram has been commissioned by the Youth Endowment Fund (YEF) to evaluate the EXODUS mentoring programme delivered by UpskillU. The primary research question for the efficacy trial is: <i>What is the difference in self-reported offending rates of young people demonstrating risk factors or affected by offending or exploitation, between those who receive a targeted restorative mentoring programme and those who receive business-as-usual?</i> The benefit will be to future children and families in England and the UK as well as society in general, indirectly, through the production of evidence to inform future commissioning decisions.

⁸⁴ Available here: <https://youthendowmentfund.org.uk/wp-content/uploads/2021/07/YEF-Data-Guidance-Projects-and-Evaluators.pdf>

		In line with YEF guidance Coram will be the joint controllers of personal data throughout the evaluation period, along with the delivery partner UpskillU and referral partners (Northamptonshire Police and Youth Offending Services; Oakhill Secure Training Centre and Haringey Council and Youth Offending Service) who will also collect participant personal data. We will make decisions together about what data will be collected and how they will be processed for the evaluation.
5.	Who will the data subjects be? What is the nature of their relationship with you/Coram e.g., potential adopters; funders; trustees etc. Do they include children or other vulnerable groups?	Our primary subjects will be children and young people aged between 11-17 (at the point of referral) who are referred to the study by Northamptonshire Police and Youth Offending Services; Oakhill Secure Training Centre and Haringey Council and Youth Offending Service, as they are involved in or displaying risk factors associated with offending or exploitation. They are likely to be vulnerable. We will also interview their parents/carers and UpskillU staff involved in delivery and staff from referral partners. Participants should have no existing relationship to Coram.
6.	How will individuals be made aware of why and how their personal data is being used and their rights in relation to that data?	Referral partners will ask for the YP and parent/carer consent to be referred onto the trial. Referred YP will be given an easy-to-read information sheet informing them about the evaluation and a consent form to complete if they are happy to take part in the trial. This will be given at an initial meeting with a trained peer researcher. Peer researchers (young people with lived experience of EXODUS) have been trained to become Coram peer researchers, and with the support of Coram researchers (permanent members of staff), will go through the information sheet with young people and answer any queries they may have. Coram will draft clear guidance and privacy notices on handling, collecting and processing personal data. Data will be stored securely on our internal network, only accessible by named team members. Data transferred from UpskillU will be via a secure folder on SharePoint, only accessible by named users. We will use accessible participant information sheets and consent forms. We will communicate participants' rights to see or change the data we hold on them, or to have it deleted within a given timeframe. Interviews will only be recorded with informed consent. Recordings will be securely deleted after finalisation of the final report and other data anonymised and archived. We will not use identifying information when reporting and disseminating findings.
7.	How will the data be collected? Who will provide the data and when?	Participants will complete a baseline survey and six and 12-month follow-up surveys which will be on the platform Smart Survey. YP will be given the option to complete it online, verbally or on paper with support from peer researchers.

		Data from referral partners and UpskillU will be shared via a secure folder on SharePoint using Excel spreadsheets, or if necessary, via Egress. Interview data will be recorded, with permission, using audio recorders if the interview is in-person or over the phone or video recorded if over a video call. Interviews will be transcribed anonymously.
8.	Will the data be checked for accuracy? When? How?	Coram will carry out data validation and cleaning checks for all data received.
9.	Who will have access to the data? Why? How? When?	Coram's Impact and Evaluation team. Data will be saved in the secure I&E team folder. Coram may use a secure third-party transcription service only to transcribe interviews. No other data will be accessed by a third party. Coram will analyse the data and publish findings in a de-identified form. Data will also be submitted for archiving in line with YEF protocols at the end of the evaluation in 2028 (see here: https://youthendowmentfund.org.uk/wp-content/uploads/2023/11/YEF_Data_Protection_Evaluators-Oct-2023.pdf https://youthendowmentfund.org.uk/wp-content/uploads/2021/07/YEF-Data-Guidance-Participants.pdf). This states that two data sets are created and submitted separately to the DfE and ONS: I. One dataset contains just children's identifying data and a unique project specific reference number for each child. This is submitted to the DfE and pseudonymised – a process where the personal identifying data is removed and replaced with DfE's pupil matching reference numbers (PMRs). The PMRs and the project specific reference numbers are then submitted to the ONS for storage in the YEF archive. II. The second dataset contains all the evaluation data and the project specific reference numbers. This is submitted directly to the ONS, where it's also stored in the YEF archive. The inclusion of the project specific reference numbers in both the data submitted to DfE and the data submitted to ONS allows both datasets to be recombined once they're in the ONS secure environment. Once the data has been submitted to the DfE and the ONS, the YEF will become the controllers. III. Secure storage: - Both datasets are held securely in the YEF archive by the ONS, who manage the archive on our behalf. Nobody can access the data without approval from us, nor without being an ONS accredited researcher. They will only allow information to be used for research in accordance with the Five Safes Framework

		(https://ukdataservice.ac.uk/help/secure-lab/what-is-the-five-safes-framework) Once the data is transferred it will be permanently deleted from Coram's data storage systems.
10.	Will the data be used for <i>automated decision-making</i> or profiling?	No
11.	Will any data processing be undertaken by a third party? What protocols and safeguards will be in place?	No
12.	How will the data be stored and where?	The data will be stored in the secure I&E team folders on the Coram server which are only accessible by team members. The data archived and the personal data that I&E hold destroyed 12 months after the research has been published. See answer 9 for where the data will be stored after it has been archived.
13.	What technical and organisational security measures will be in place to prevent any unauthorised or unlawful processing of the personal data?	Coram secure server, firewall, and encryption. Coram holds a Cyber Essentials Plus certificate. All Coram staff receive data security and GDPR training. We will sign data sharing agreements with UpskillU and referral partners.
14.	Will the data leave EU borders? If so where, and what arrangements will be in place to ensure that there are adequate safeguards over the data?	No data will leave the EU.
15.	How long will the data be retained? What will be the process for data destruction? How will the data be disposed of?	12 months after project end, defined as date of publication of main results. Personal data on participants in the trial will be deleted from Coram's servers. Once the evaluation is finished, data will be archived. In line with YEF guidance, two datasets will be prepared and submitted by evaluators. Datasets will include single rows for each YP. One dataset will be submitted to the Department for Education containing just children's identifying data and unique project specific reference numbers for each child.

		The dataset will be pseudonymised - personal identifying data will be replaced with pupil matching reference numbers (PMRs). The PMRs and reference numbers will then be submitted to the ONS and stored in the YEF archive. The second dataset will include all evaluation data and project specific reference numbers. It will be submitted to the ONS and stored in the YEF archive. Unique IDs will allow the two datasets to be matched. YEF will become the data controllers when the data has been submitted.
--	--	--

Step 3: Assessment of necessity and proportionality

Question	Answer
Does the processing achieve your purpose?	Yes
Are there alternative ways of achieving the same outcome? Why are they not being considered?	We believe this is the most feasible way of answering our research questions. We have considered and rejected collecting Police National Computer data as it is less detailed and more difficult to obtain than the collection of data from participants and local police data referral partners, who we will have DSAs with, hold.
How will you ensure data quality and <i>data minimisation</i> ?	Quality: - Explaining the importance of data quality to partners. - Supporting YP to complete outcome surveys. - Clear guidance on the data required and timelines. - Drop-in sessions for data leads, FAQ document and quick responses to queries. - Cleaning and data validation checks. Minimisation: - Discussion with partners about the data that is necessary before finalising data request forms. - Clear guidance about the data required. - Only using one module of the JVQ. - Using a short measure of mentor-mentee relationship - Not using the impact supplement of the SDQ.

Step 4: Risk assessment

	Risk Describe source of risk and nature of potential impact on individuals. Include associated compliance and corporate risks as necessary.	Likelihood of harm 1 – remote; 2 – possible; 3 – probable	Severity of harm 1 – minimal; 2 – significant; 3 – severe	Overall risk 1 – Low; 2 – Medium; 3 – High
1	Risk of data breach, e.g., emails containing personal data are sent to wrong address or failure of Coram server	2	3	3
2	Risk that we are unable to comply with a request from a young person to withdraw their consent for the use of their data for this evaluation, due to holding incomplete records	1	1	1
3	Risk that young people change phone number in the gap between baseline and 6 month or 12-month follow-up which could	3	1	2

	result in someone else seeing our communication intended for the young person			
--	---	--	--	--

Step 5: Mitigating measures

Identify additional measures you could take to reduce or eliminate risks identified in the risk assessment as **medium** or **high** risk.

Risk (No.)	Solutions to reduce or eliminate the risk	Are the controls in place already? ✓	Effect on risk 1 – Eliminated 2 – Reduced 3 – Accepted	Residual risk 1 – Low 2 – Medium 3 – High
1	• Encryption of emails • Use of Egress secure system • Project folder in I&E team space is only accessible by the I&E team • Ensure SharePoint folders are only accessible on a need to access basis • Data protection training for researchers	✓ ✓ ✓ x ✓	2	2
2	We would attempt to identify the individual with the help of referral partners and UpskillU	X	1	1
3	We would not send any communication that could be used to identify the young person or their circumstances to phone numbers	X	1	1

Step 6: Sign off and record outcomes

Action to be taken	Date for completed actions	Responsibility for action

Contact point for future privacy concerns:

Max Stanford, Managing Director of Research Programmes, Coram Max.stanford@coram.org.uk 07805 813071

Project approved

Signed		Date	
--------	--	------	--

Appendix 6: Response rate tables for self-reported outcome measures

Note: Invalid responses refer to cases where responses do not follow the questionnaire's logical structure format, i.e., the young person skipped or responded 'No' to the main question while still answering one or more follow-up questions. This could happen for example in cases where responses affecting skip logic are changed after being filled within the online survey. Such gaps are tackled and fixed at the data cleaning stage, with the response being excluded from the count if data is missing. Such kinds of responses have been marked as footnotes against the respective question and timepoint where they were located.

Table 43: Completion rates of the SRDS 'variety of delinquency' questions across 19 offending behaviours examined at T1, T2 and T3

No.	Behaviours and offending	Outcome measure completion rates		
		T1 (n=350)	T2 (n=116)	T3 (n=26)
1	Fare-dodging	346 ⁸⁵ (99%)	116 (100%)	26 (100%)
2	Noisy behaviour in public	346 (99%)	116 (100%)	26 (100%)
3	Shoplifting	346 (99%)	115 (99%)	26 (100%)
4	Ride in a stolen vehicle	346 (99%)	115 (99%)	26 (100%)
5	Theft from school	346 ⁸⁶ (99%)	115 (99%)	26 (100%)
6	Carried a knife/weapon	346 (99%)	115 (99%)	26 (100%)
7	Defacing property	346 (99%)	115 (99%)	26 (100%)
8	Robbery	346 (99%)	115 (99%)	26 (100%)
9	Criminal damage	346 ⁸⁷ (99%)	115 ⁸⁸ (99%)	26 (100%)
10	Housebreaking	346 (99%)	115 (99%)	26 (100%)
11	Theft from home	346 (99%)	115 (99%)	26 (100%)
12	Broken into vehicle to steal	346 (99%)	115 (99%)	26 (100%)
13	Fire-setting	346 (99%)	115 ⁸⁹ (99%)	26 (100%)
14	Harming or injuring animals	346 (99%)	115 (99%)	26 (100%)
15	Assault	346 ⁹⁰ (99%)	115 (99%)	26 ⁹¹ (100%)
16	Bullying behaviour	346 (99%)	115 (99%)	26 (100%)
17	Racial assault or harassment	346 (99%)	115 (99%)	26 (100%)
18	Selling illegal drugs	346 (99%)	115 (99%)	26 (100%)
19	Skipped or skived school	346 ⁹² (99%)	115 ⁹³ (99%)	26 ⁹⁴ (100%)

⁸⁵ 1 invalid response(s)

⁸⁶ 1 invalid response(s)

⁸⁷ 2 invalid response(s)

⁸⁸ 1 invalid response(s)

⁸⁹ 1 invalid response(s)

⁹⁰ 1 invalid response(s)

⁹¹ 1 invalid response(s)

⁹² 3 invalid response(s)

⁹³ 2 invalid response(s)

⁹⁴ 1 invalid response(s)

Table 44: Completion rates of the SRDS 'volume of delinquency' questions across 18 offending behaviours examined at T1, T2 and T3

No.	Behaviours and offending	Outcome measure completion rates		
		T1 (n=350)	T2 (n=116)	T3 (n=26)
1	Fare-dodging	346 (99%)	116 (100%)	26 (100%)
2	Noisy behaviour in public	346 (99%)	116 (100%)	26 (100%)
3	Shoplifting	346 (99%)	115 (99%)	26 (100%)
4	Ride in a stolen vehicle	346 (99%)	115 (99%)	26 (100%)
5	Theft from school	346 (99%)	115 (99%)	26 (100%)
6	Carried a knife/weapon	346 (99%)	115 (99%)	26 (100%)
7	Defacing property	346 (99%)	115 (99%)	26 (100%)
8	Robbery	346 (99%)	115 (99%)	26 (100%)
9	Criminal damage	346 (99%)	115 (99%)	26 (100%)
10	Housebreaking	346 (99%)	115 (99%)	26 (100%)
11	Theft from home	346 (99%)	115 (99%)	26 (100%)
12	Broken into vehicle to steal	346 (99%)	115 (99%)	26 (100%)
13	Fire-setting	346 (99%)	115 (99%)	26 (100%)
14	Harming or injuring animals	346 (99%)	115 (99%)	26 (100%)
15	Assault	346 (99%)	115 (99%)	26 (100%)
16	Bullying behaviour	346 (99%)	115 (99%)	26 (100%)
17	Racial assault or harassment	346 (99%)	115 (99%)	26 (100%)
18	Selling illegal drugs	346 (99%)	115 (99%)	26 (100%)
19	Skipped or skived school	346 (99%)	115 (99%)	26 (100%)

Table 45: Completion patterns for the JVQ in T1, T2 and T3 outcomes questionnaires

No.	[In the last year, did anyone...]	Outcome measure completion rates		
		T1 (n=350)	T2 (n=116)	T3 (n=26)
1	use force to take something away from you that you were carrying or wearing?	346 (99%)	115 (99%)	26 (100%)
2	steal something from you and never give it back?	346 (99%)	115 (99%)	26 (100%)
3	break or ruin any of your things on purpose?	346 (99%)	115 (99%)	26 (100%)
4	hit or attack you on purpose WITH an object or weapon?	346 (99%)	115 (99%)	26 (100%)
5	hit or attack you WITHOUT using an object or weapon?	346 (99%)	115 (99%)	26 (100%)
6	start to attack you, but for some reason, it didn't happen?	346 (99%)	115 (99%)	26 (100%)
7	try to kidnap you?	346 (99%)	115 (99%)	26 (100%)
8	hit or attack you because of your skin color/ religion/ where your family comes from/a physical problem you have/someone said you are gay?	346 (99%)	115 (99%)	26 (100%)

Table 46: Completion patterns for the SDQ in T1, T2 and T3 outcomes questionnaires

No.	SDQ Item Description	Outcome measure completion rates		
		T1 (n=350)	T2 (n=116)	T3 (n=26)
1	I try to be nice to other people. I care about their feelings.	346 (99%)	115 (99%)	26 (100%)
2	I am restless, I cannot stay still for long.	346 (99%)	115 (99%)	26 (100%)
3	I get a lot of headaches, stomach-aches or sickness.	346 (99%)	115 (99%)	26 (100%)
4	I usually share food with others (food, games, pens, etc.)	346 (99%)	115 (99%)	26 (100%)
5	I get very angry and often lose my temper.	346 (99%)	115 (99%)	26 (100%)
6	I am usually on my own. I generally play alone or keep to myself.	346 (99%)	115 (99%)	26 (100%)
7	I usually do as I am told.	346 (99%)	115 (99%)	26 (100%)
8	I worry a lot.	346 (99%)	115 (99%)	26 (100%)
9	I am helpful if someone is hurt, upset, or feeling ill.	346 (99%)	115 (99%)	26 (100%)
10	I am constantly fidgeting or squirming.	346 (99%)	115 (99%)	26 (100%)
11	I have one good friend or more.	346 (99%)	115 (99%)	26 (100%)
12	I fight a lot. I can make other people do what I want.	346 (99%)	115 (99%)	26 (100%)
13	I am often unhappy, downhearted, or tearful.	346 (99%)	115 (99%)	26 (100%)
14	Other people my age generally like me.	346 (99%)	115 (99%)	26 (100%)
15	I am easily distracted. I find it difficult to concentrate.	346 (99%)	115 (99%)	26 (100%)
16	I am nervous in new situations. I easily lose confidence.	346 (99%)	115 (99%)	26 (100%)
17	I am kind to younger children.	346 (99%)	115 (99%)	26 (100%)
18	I am often accused of lying or cheating.	346 (99%)	115 (99%)	26 (100%)
19	Other children or young people pick on me or bully me.	346 (99%)	115 (99%)	26 (100%)
20	I often volunteer to help others (parents, teachers, children).	346 (99%)	115 (99%)	26 (100%)
21	I think before I do things.	346 (99%)	115 (99%)	26 (100%)
22	I take things that are not mine from home, school or elsewhere.	346 (99%)	115 (99%)	26 (100%)
23	I get on better with adults than with people my own age.	346 (99%)	115 (99%)	26 (100%)
24	I have many fears, I am easily scared.	346 (99%)	115 (99%)	26 (100%)
25	I finish the work that I am doing. My attention is good.	346 (99%)	115 (99%)	26 (100%)

Table 47: Completion patterns for the SSRS in T2 and T3 outcomes questionnaires

No.	SSRS Item Description	Outcome measure completion rates		
		T1 (n=350)	T2 (n=116)	T3 (n=26)
0	Do you have a trusted adult?	-	115 (99%)	26 (100%)
1	This person cares about how I am doing in school.	-	115 ⁹⁵ (99%)	25 ⁹⁶ (99%)
2	This person is very sure I can do well in school and in the future.	-	115 (99%)	25 (99%)
3	This person cares about me even when I make mistakes.	-	115 (99%)	25 (99%)
4	This person really listens and understands me.	-	115 (99%)	25 (99%)
5	This person looks out for me and helps me.	-	115 (99%)	25 (99%)
6	This person and I both have fun when we're together.	-	115 (99%)	25 (99%)
7	I talk to this person about problems with my friends.	-	115 (99%)	25 (99%)
8	I talk to this person about problems with my parents/family.	-	115 (99%)	25 (99%)
9	I feel safe when I'm with this person.	-	115 (99%)	25 (99%)
10	I tell this person things that are very private.	-	115 (99%)	25 (99%)
11	I talk to this person when something makes me angry or afraid.	-	115 (99%)	25 (99%)
12	This person gives me useful advice in dealing with my problems.	-	115 (99%)	25 (99%)
13	This person has qualities or skills that I'd like to have when I'm older.	-	115 (99%)	25 (99%)
14	I learn how to do things by watching and listening to this person.	-	115 (99%)	25 (99%)
15	This person introduces me to new ideas, interests, and experiences.	-	115 (99%)	25 (99%)
16	This person pushes me to succeed at the things I want to do.	-	115 (99%)	25 (99%)
17	Sometimes I think that this person doesn't like me.	-	115 (99%)	25 (99%)
18	I don't like things this person says or does.	-	115 (99%)	25 (99%)
19	This person is too busy to pay attention to me.	-	115 (99%)	25 (99%)
20	This person and I get angry at each other.	-	115 (99%)	25 (99%)
21	I feel this person will let me down.	-	115 (99%)	25 (99%)
22	If I tell this person what I'm thinking, he/she will laugh at me.	-	115 (99%)	25 (99%)

⁹⁵ 1 invalid response(s)

⁹⁶ 1 invalid response(s)

Appendix 7: Detail of the process and parameters of the pilot extension

On 17 April 2025, YEF approved a three-month extension to the pilot phase to 01 July 2025, along with additional progression criteria relating to retention, recruitment rates and data monitoring (for UpskillU). These were:

1. **Improvement in retention following implementation of mitigation strategies. As of 01 July 2025:**
 - Observing close to 70% response rate on 6-month follow-up surveys due within the 6-week response window
 - A minimum of 70% of CYP referred starting 1 March, including new referral pathways, attend mentoring sessions (treatment group) or respond to monthly check-ins (control group)
2. **Improvement in recruitment rate and engagement following onboarding of additional referral partners. As of 01 July 2025:**
 - The overall recruitment is on track to reach the minimum required sample size of 754 CYP randomised.
 - Lewisham council and school referrals lead to an increase in randomisations per month during April-July 2025.
 - Suitability of referrals from the new partners is high, translating into high engagement.
3. **Improvement in consistency and quality of the monitoring data following adoptions of the new Case Management System and addition of a data administrator. As of 01 July 2025:**
 - UpskillU independently keep up-to-date monitoring data on their CMS and are able to successfully transfer monitoring and demographic data to the evaluator for 100% of the sample every 2 weeks, without delays.
 - Low rates of missing data in mentor logs (90%-100% of data is complete).
 - Coram is able to fully assess fidelity based on the monitoring data shared by UpskillU.

At the end of the extension, Coram submitted an updated transition document on 10 July 2025, and on 01 September 2025, the YEF Senior Management Team approved the recommendation for the EXODUS programme to progress to an efficacy trial.