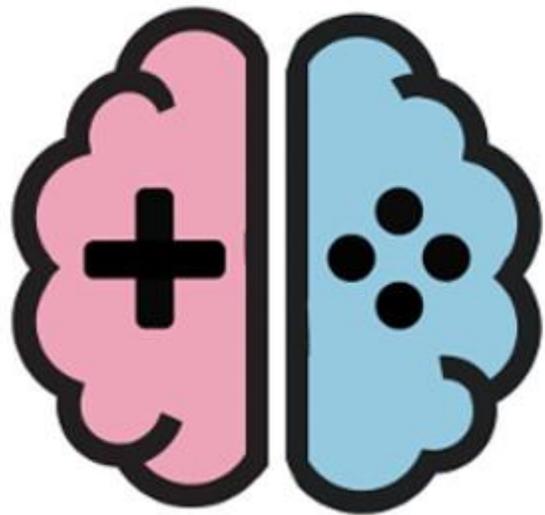


GAME CHANGERS



**PwC CHALLENGE YEAR 1
IMPACT REPORT 2019**

The PwC Challenge 2019 – A GameChanger

Background to the Challenge

PwC put out a call to action across all organisations in the CVSE sector in Northern Ireland in October 2018 – to create a collaborative project that would tackle the issue of suicide within North and West Belfast. The Hummingbird Project joined forces with Bytes and Kippie to deliver a programme to 45 young people in this area. This partnership would deliver group sessions, spread across the year, that encompassed youth work personal development, emotional resilience training, training of peer mental health champions and development of a gaming platform that reflected the participant groups lived experience of mental health and suicide prevention.

Engaging with the participants

One of the key engagement factors in the design of the project and the formation of the partnership, was that Bytes were already embedded in the geographical area where the project wanted to have impact. Bytes were well informed and had long standing connections with groups and organisations in the the North and West Belfast area and were very aware that there were many entry points where the project could engage directly with participants who were highly vulnerable to suicide risk and impact. After discussing possible options, the partnership decided to engage with two groups of young people – members of Clonard Youth Centre and residents of Flax Foyer. Before the final submission of the project proposal, the partnership had conducted a pre-engagement session with both groups, to capture some of the experiences these young people had had with suicide and co-develop the structure and delivery content for the project, to ensure we were going to provide them with really impactful content and remove barriers to engagement.

Emerging factors from two participant groups

Delivery of the group sessions commenced in March 2019.

Clonard Youth Club

The participant group from Clonard ranged in age from 15-18. These young people participated in different activities and projects in Clonard youth centre up to 6 nights a week. They all came from west Belfast and knew each other well from their youth club membership. Normally participation in the group sessions could range from 15-25 participants per session, depending on other commitments including school activities, sports clubs and other youth project participation.

Flax Foyer

The participant group from Flax foyer ranged in age from 18-24. They had all become residents of the foyer because of various adverse experiences and risk factors which led them to becoming homeless and in need of supported living. The participants came from various geographical areas before becoming residents and from differing previous living arrangements – juvenile care homes and detention centres, fractured family living, kinship and foster care and independent living. For many of our participants, they were not accustomed to spending time with each other, and were very uncomfortable in a group setting. Few of them had participated in a project group before.

Response to need

As we finished the first quarter of the delivery year and completed the emotional resilience group sessions with participants, it became clear that there was a much higher level of risk factors and barriers to emotional wellbeing for the Flax Foyer group than Clonard Youth Centre. While the Clonard participants had high levels of connectivity through school, family and youth activities, the Flax participants had virtually no connectivity to each other, or to community or statutory supports. The Clonard participants were very used to group work, were able to grasp to concepts of emotional resilience and draw upon wellness tools and

supports readily, the Flax participants were completely disenfranchised, despondent and had no trust that there were services and communities available that understood their circumstances and could offer them support to improve these and their broader emotional wellbeing. The Flax participants saw very little ability in themselves to change their own future and develop hope and purpose in their lives. For many of these participants, suicide was a valid, inviting solution to what they saw as insurmountable barriers, and one which they considered regularly and in many cases had attempted in the past.

The partnership had regular monthly meetings with key management partners in the PWC team. As part of the continuous feedback and co-development of the project, the issues that the Flax participants were facing were reported and discussed. It was clear to the project team that these young people had little or no support to address their individual barriers and traumas in a meaningful way, with most never having engaged in 1-2-1 support of any kind before. It was decided that to truly have impact with these individuals and address their vulnerability to suicide, their barriers and negative experiences, the project had to provide an opportunity for the participants to engage in 1-2-1 recovery mentoring sessions with The Hummingbird Project. These mentoring sessions would allow each participant to share some of their traumatic childhood experiences, set goals, reconnect them with an infrastructure of statutory and community supports to address a range of health, social and economic issues and co-create realistic action plans to give them hope, purpose and control over their future.

All participants in the Flax group who had participated in the emotional resilience sessions were offered the opportunity of 1-2-1 recovery mentoring. Of the total participant group, 90% engaged with 1-2-1 sessions. Of the total participant group 80% continuously engaged in 1-2-1 sessions throughout the entire duration of the programme.

Deep dive of adverse experiences

As The Hummingbird Project began engagement on a 1-2-1 basis, our first objective was to spend time with each individual to gain insight and understanding of their background, what they were “bringing into the room” as regards trauma and barriers that were going to

impact their decision making for the future and had affected them during their developmental years.

As well as being very flexible around when, where and how these sessions were delivered to encourage engagement and trust, we also had to be acutely aware that very often, they had never disclosed these difficulties to a professional before. The Hummingbird Project's lived experience approach was absolutely vital as part of this process, with extremely high scepticism from all participants that they would be judged or discarded due to their history and current challenges. Their experiences with professional or statutory services were predominantly negative and reported that any community groups or projects they had experienced, hadn't provided them with the support they needed to address these issues. As part of our initial assessment process, we determined what, if any, adverse childhood experiences (ACE's) each individual had endured.

The table below captures these experiences.

Table 1. ACE's

Adverse Childhood Experience	Percentage of 1-2-1 Participants affected
Physical abuse	78%
Sexual abuse	33%
Emotional abuse/neglect	100%
Concerns/confirmed physical neglect	89%
Separation from parents/carers	100%
Witness violence towards parents/carers	78%
Problem drinking/drug use by parents/carers	89%
Parents/carers have mental health problems/illness	78%
Member of household in prison	22%
Member of household has serious illness/disability	33%
Parents/carers always arguing	100%
Financial problems/poverty	100%
Family impacted by neighbourhood/troubles related crime	56%
Family involvement in crime	44%
Involvement in crime / conviction	33%
Bereavement due to suicide	100%

All participants had experienced at least 10 of the 16 identified adverse experiences under the age of 18.

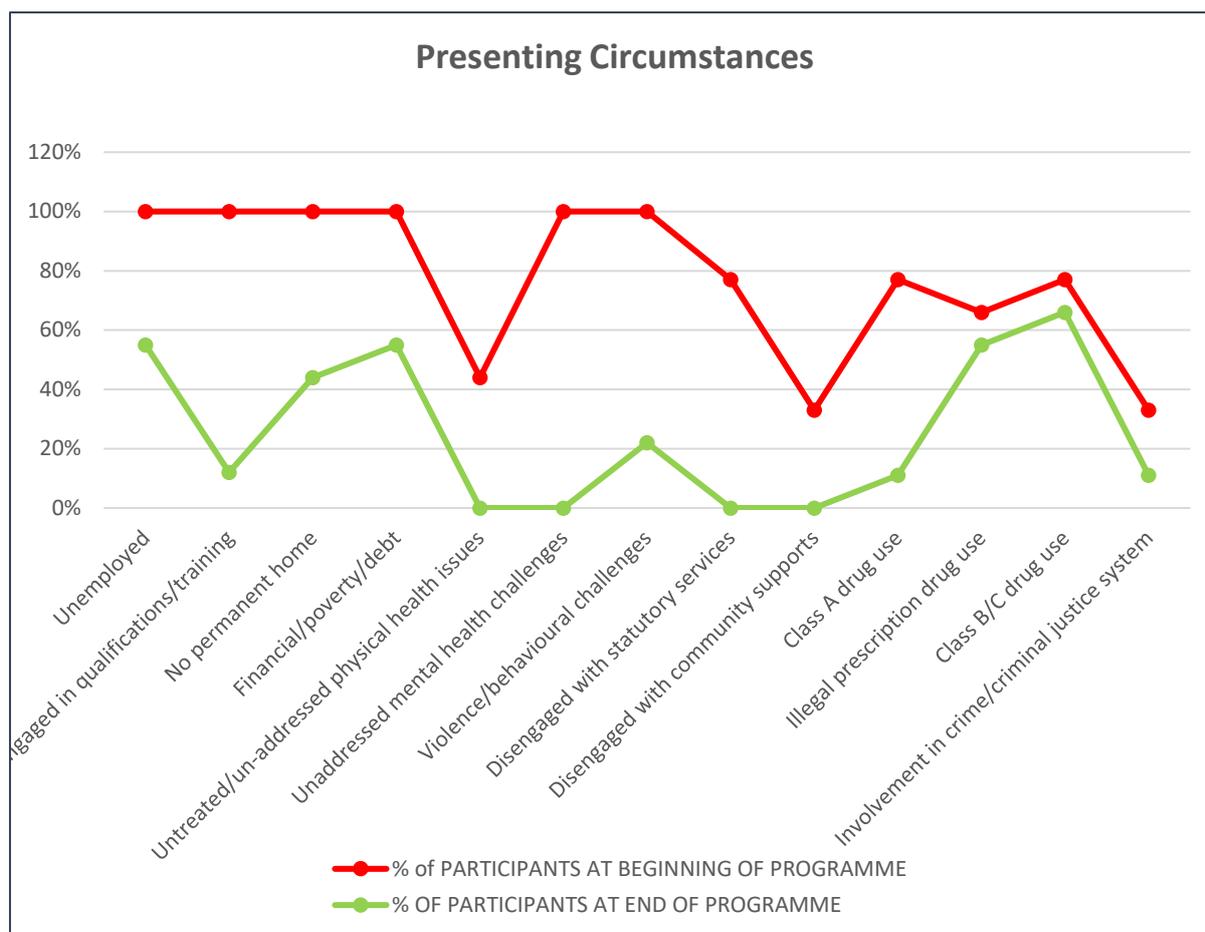
IMPACT

Challenges and goals achieved by participants

Even though all participants came their own set of challenges and goals to achieve, there were many common themes that the participants felt were vital to improving their life circumstances and mental health. The data below captures the common issues that these individuals were facing at the beginning of the programme and at the end of 2019, how far they had travelled in addressing these issues and achieving new goals.

Table 2.

PRESENTING CIRCUMSTANCES	% of PARTICIPANTS AT BEGINNING OF PROGRAMME	% OF PARTICIPANTS AT END OF PROGRAMME
Unemployed	100%	55%
Not engaged in qualifications/training	100%	12%
No permanent home	100%	44%
Financial/poverty/debt	100%	55%
Untreated/un-addressed physical health issues	44%	0%
Unaddressed mental health challenges	100%	0%
Violence/behavioural challenges	100%	22%
Disengaged with statutory services	77%	0%
Disengaged with community supports	33%	0%
Class A drug use	77%	11%
Illegal prescription drug use	66%	55%
Class B/C drug use	77%	66%
Involvement in crime/criminal justice system	33%	11%



Clinical measurement

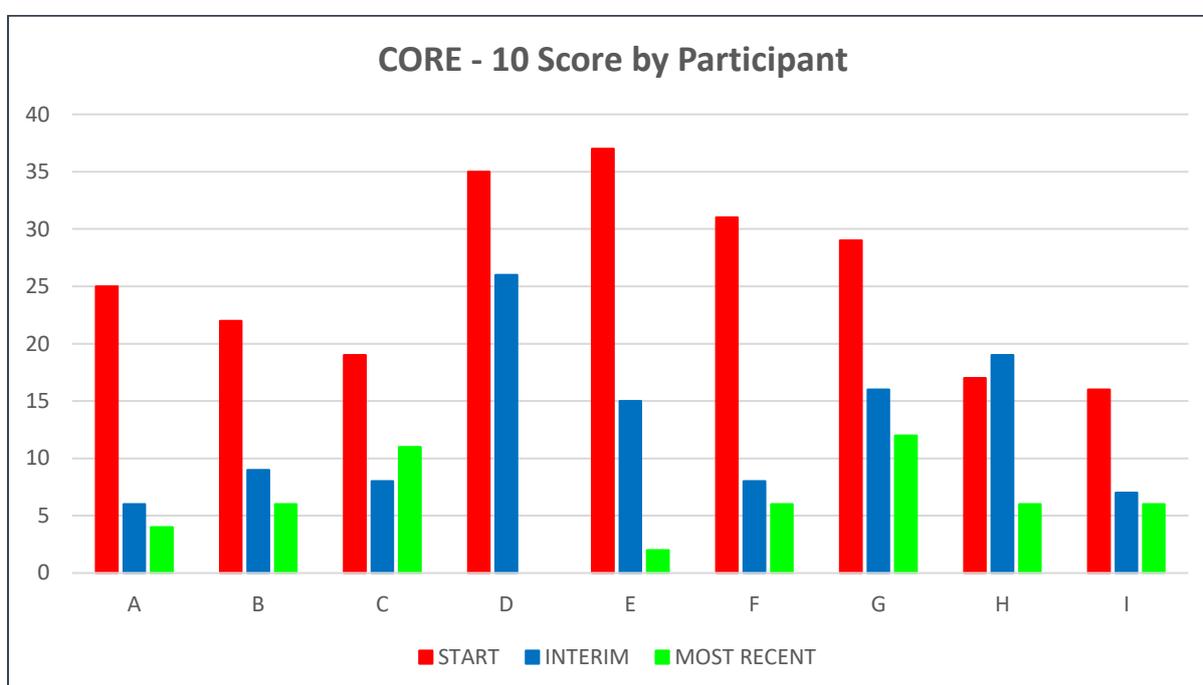
CORE - 10

As part of the 1-2-1 mentoring process, the Hummingbird practitioners also used standardised clinical scales at key stages of the programme. The CORE 10 (attached for reference) measures the psychological distress of an individual at any point in time and is measured from 0-40. A lower score indicates lower levels of distress increasing to a maximum of 40, where someone would be considered seriously at risk.

Below is a table of the scores recorded with each 1-2-1 participant beginning, 6 sessions point and current score:

Table 3. CORE - 10 Scores

PARTICIPANT	START	INTERIM	MOST RECENT
A	25	6	4
B	22	9	6
C	19	8	11
D	35	26	DISENGAGED
E	37	15	2
F	31	8	6
G	29	16	12
H	17	19	6
I	16	7	6



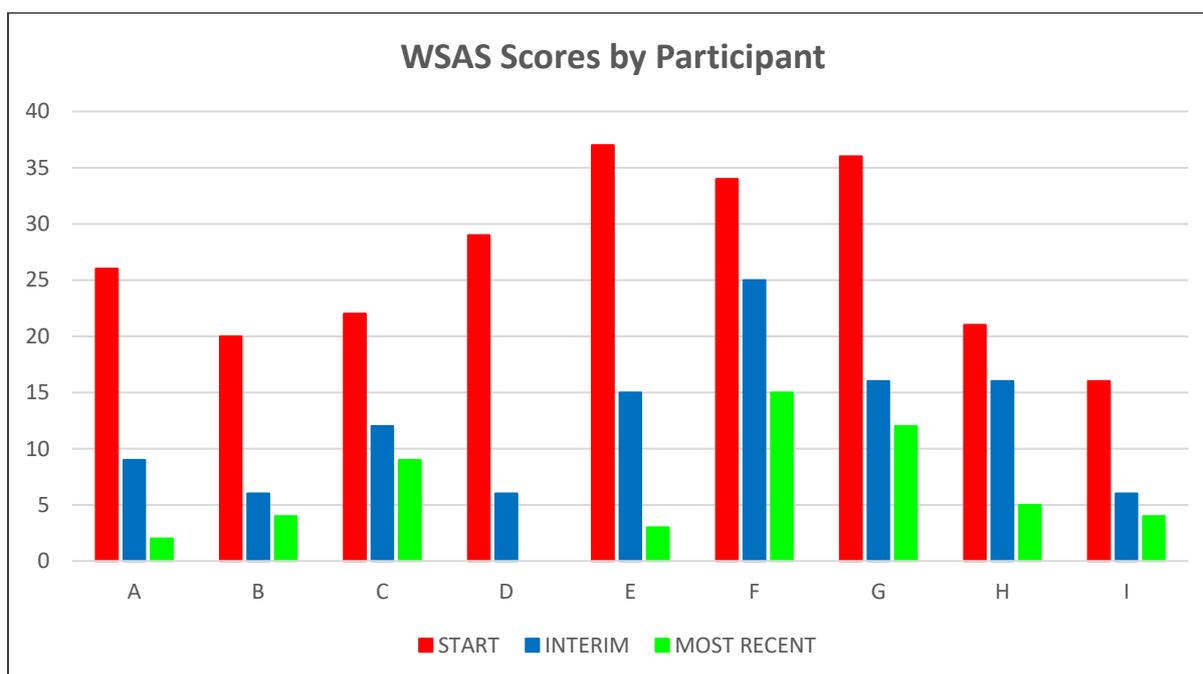
WSAS (Work and Social Adjustment scale)

Hummingbird Practitioners also recorded clinical scores for Work and Social Adjustment scale (attached for reference). This is a measurement tool that records impaired social and employment functioning from the perspective of the participant, in regards the emotional issues that they are facing. Once again it is measured from 0-40, with lower score indicting less perceived impairment and a higher score indicting that the participant feels impaired to a point of inability.

Below is a table of the scores recorded with each 1-2-1 participant beginning, 6 sessions point and current score:

Table 4. WSAS Scores

PARTICIPANT	START	INTERIM	MOST RECENT
A	26	9	2
B	20	6	4
C	22	12	9
D	29	6	DISENGAGED
E	37	15	3
F	34	25	15
G	36	16	12
H	21	16	5
I	16	6	4



Developing healthy relationships

Coming from an ACE background that has been detailed above, all of these participants were dealing with range of complex relationship issues - whether that be with family, partners or friendship groups. Many had very unhealthy and unsteady connections with those around them, with ongoing uncertainty about who they could trust and whether they would be let down. Often they would avoid building or investing in relationships, often displaying “self-sabotaging” behaviour or shutting down connections at the first sign of conflict or perceived judgement and reported feeling more “comfortable or safe” by disconnecting. 77% of the participants were dealing with the impact of an unplanned pregnancy, either as a partner, former partner or parent.

As they progressed through the programme, the acknowledgement of what a healthy, trustworthy relationship looked like and the importance of these relationships as a sustaining factor of recovery rose in all the participants. Many of them formed new boundaries, reached out to family members and moved away from relationships and connections that ultimately made them feel unsafe. By having a greater knowledge of their own wellbeing and what had a positive and negative impact on them, they were better able to manage their emotional reactions to the people in their lives, and take a more measured, long term approach to who they should interact with. This journey is still very much ongoing, but by building resilience skills and understanding of themselves, hopefully this will continue to improve as they transition to adulthood.

Examples of support included within the programme

By focusing on the needs of the participants and taking a person-centred approach, there were a number of elements involved in both the group and individual support provided. Below are some examples of support and barrier removal that were included, and who it was organised/delivered by:

Group Participation

- Transport provided to all sessions (All partners)
- Food provided at all sessions (All partners)
- Small training allowance for each session attended (PWC, Bytes)
- Group social activities (Bytes)
- Self-care activities (Bytes, THP)
- Co-Development sessions (All partners)
- Emotional resilience skills training (THP)
- Coding and game development (Kippie)
- Street to scale social enterprise project (Bytes)
- Speaker visits from other community groups (PWC, Bytes)

1-2-1 Participation (The Hummingbird Project)

- Counselling and CBT practices
- Engagement and advocacy with community and statutory supports
- GP and statutory appointment attendance support
- Flexible sessions around time and place dependant on participants need
- Regular phone/message check in to support goal achievement
- Employability support including CV and interview prep
- Referral to specialist services (e.g. addictions, NIACRO, eating disorder)
- Access to small grants from PwC to aid access to training, household necessities and transport to appointments
- Advocacy support to statutory services (e.g. Social services, Benefit agencies and NIHE)
- Action planning and task setting
- 24-hour, ASIST suicide support

Conclusions

There is no doubt that supporting these young people to achieve their goals was a frustrating, complex but ultimately hugely rewarding process. After 7 months of bi-weekly 1-2-1 sessions, they are still very much on a journey to recovery and as many of them are taking on new experiences and challenges, there will still be times where they struggle to cope and use the new supports and healthier choice options that they have gained.

For us, there are 4 aspects of the support that has been provided by the PwC Challenge that has created an environment for these young people to develop emotional resilience and exact change in their lives:

1. The lived experience approach to the mentoring process removed barriers of trust and empathy and embedded tolerance and patience when participants were not always making good choices.
2. Flexibility and control of sessions dependant on the needs of the participant
3. Collaborative relationship between practitioners and participants to set goals and overcome barriers. Responsibility and pace in setting and achieving goals was placed on the participant, giving back control and accountability for their own choices and wellbeing. THP practitioners were there as advocates, supporters and enablers, rather than making decisions or imposing solutions onto the participant.
4. The ongoing group sessions running alongside the individual mentoring process created a supportive environment between these young people, where without this they would have been overcoming these challenges in isolation. The peer support of each other when one was struggling and working together to achieve goals within the group sessions was invaluable to increase sociability, compromise and a sense of belonging.

Learning for future years of the project

Because of the incredible impact this Challenge was able to achieve with our first year, PwC have committed to fund and grow the project over the next 5 years minimum. There are all kinds of possibilities as to how a project like this could grow in scale and become a benchmark for the kind of social impact a business can have, by supporting impact focused projects that are responsive to need in real time, being truly person-centred.

Year 2 sees us at least doubling our participant numbers, keeping in place all the success contributing aspects as detailed above and also adding new person-centred pathways through group work as participants journey through the programme, to support the goals that they identify in the mentoring process. A more robust communication and journey planning system will be introduced between the partners, so that each participant's circumstances and progress will be charted and monitored, embedding a joined up, infrastructure of partnership working.

We encourage everyone to watch the video created by PwC with several of the participants, to hear from them what this project has meant to them, and how this innovative approach can truly be a Gamechanger.