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Adverse childhood experience (ACE) and trauma-informed approaches in youth justice services in Wales:

An evaluation of the implementation of the enhanced case management (ECM) project

The views and experiences of children and youth justice workers



Authors: Dr Freya Glendinning, Gabriela Ramos Rodriguez, Annemarie Newbury, Dr Rhiannon Wilmot

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Acronyms used in the report

ACE	Adverse childhood experience
CAMHS	Child and Adolescent Mental Health Services
CBT	Cognitive Behavioural Therapy
CSE	Child sexual exploitation
EAT	Early Action Together
ECM	Enhanced Case Management
FACTS	Forensic Adolescent Consultation and Treatment Service
FTEs	First time entrants
HMIP	Her Majesty's Inspectorate of Probation
OBTJ	Offences Brought to Justice
PRU	Pupil Referral Unit
TIC	Trauma-informed care
TIP	Trauma-informed practice
TRM	Trauma Recovery Model
YJB	Youth Justice Board
YOT	Youth offending team

Executive Summary

Background

Since the youth justice system was established following the Crime and Disorder Act, 1998, one of its challenges has been to find effective responses to prevent children from offending, as a result, a variety of approaches have been taken to achieve this. Historically, some of these approaches have been criticised for being overly punitive, and for focusing too narrowly on criminogenic risk factors rather than placing emphasis on children's vulnerabilities, needs and potentials. Recently, the application of 'Child-First' principles as the foundation of child-focused youth justice practice has gained more momentum, featuring in the Youth Justice Board (YJB) strategic objectives for 2020 to 2021 and the 2019 Youth Justice Blueprint for Wales. Importantly, 'Child-First' allows for a more positive and strengths-based approach, which seeks to divert children away from the formal criminal justice system and to promote individual strengths and positive outcomes. Over the last decade, the increase in diversionary measures in England and Wales has reduced the number of children entering the youth justice system for the first time. This has led to a smaller number of children coming through the system, and a greater concentration of those who present with adverse childhood experiences (ACEs), trauma and complex needs. In recognition of the need for new approaches to work with and address the specific needs of children within this group, the YJB Cymru, developed Enhanced Case Management (ECM; see Box 2), which was originally delivered in several youth offending teams (YOTs) from 2013 to 2017. Following an evaluation indicating promising results, a second ECM project commenced across YOTs within the South Wales Police Force area.

ECM is a psychology-led approach[1] that uses multi-agency case formulation to understand what has happened to a child alongside their developmental needs, strengths and protective factors. This informs the way practitioners work with and support children to achieve better outcomes and develop their strengths and potential. Building relationships between a child and the adults responsible for providing support is considered as fundamental for giving children the best chance of success. Prior to delivering the ECM approach, YOT workers attended a three-day-training programme, provided by the all Wales Forensic Adolescent Consultation and Treatment Service (FACTS), on ACE- and trauma-informed approaches and to learn how to apply the framework provided by the Trauma Recovery Model (TRM; see Box 3).

Bangor University, in association with Public Health Wales, were commissioned to conduct an independent evaluation to assess the implementation of ECM within YOTs. The primary objectives of the evaluation are:

1. To measure change in YOT workers' attitudes towards implementing trauma-informed practice (TIP), from pre- to post-training;
2. To measure change in YOT workers' confidence in working with children who have histories of ACEs and trauma, from pre- to post-training;
3. To develop an understanding of the delivery of ECM as a response to cases where complex welfare issues are evident;
4. To capture the impact of ECM on youth justice processes and practice.

Furthermore, the evaluation sought, where possible, to achieve the following secondary objectives:

5. To explore how an ACE- and trauma-informed approach has been embedded into assessment, planning and supervision of children in YOTs.
6. To develop an understanding of the progress that might occur in children supported through ECM (including perspectives from YOT workers and children).

1 The input provided to ECM was by clinical psychology.

The evaluation took a mixed methods approach: using surveys to assess objectives one and two; and interviews to assess objectives three to six.

Surveys. Fifty-seven surveys were completed by YOT workers from the South Wales Police Force Area, immediately pre- and post-training.

Interviews. A total of 24 interviews were completed. Six interviews were completed with children being supported through ECM. Fourteen interviews were completed with YOT workers supporting the delivery of ECM and four interviews with YOT workers who took part in the training, but had not yet made an ECM case referral.

YOT workers were from a range of different roles (e.g. YOT case managers, substance misuse workers, YOT police officers, reparation workers etc.). Senior YOT workers were heads of service and senior practitioners.

Key findings

Attitudes related to TIP

- On average, pre-training, YOT workers were more in favour of TIP than they were against TIP for all subscales (see pg. 23 & 24). From pre- to post-training, statistically significant increases were seen in YOT workers' favourable attitudes towards:
  - the notion that problem behaviour is adaptive and changeable rather than fixed and intentional;
  - the notion that change needs to develop from relationships, flexibility, kindness and safety rather than rules, consequences and accountability;
  - feeling able to meet the demands of working with children who have experienced trauma rather than feeling unable to meet the demands;
  - being supportive of and confident about implementing TIP rather than having concerns about implementing TIP;
  - feeling supported by the organisation to implement TIP rather than feeling unsupported by the organisation.
- YOT workers did not display statistically significant increases in attitudes towards:
  - empathy-focused staff behaviour, but they remained in favour of this rather than control-focussed staff behaviour.
  - seeking support for coping with the impact secondary trauma (i.e. trauma experienced by being exposed to traumatic events from the children they work with), but they remained in favour of this rather than coping by ignoring the impact.

YOT workers confidence working with children who have experienced ACEs

- From pre- to post-training, statistically significant increases were seen in YOT workers' confidence in (see pg. 24):
  - identifying ACEs in children lives;
  - working with children who have experienced ACEs;
  - providing intervention for children who have experienced ACEs;
  - sequencing developmentally sensitive interventions;
  - adapting their engagement style to meet the needs of individual children.
- Overall, the survey findings suggest that the training increased YOT workers' favourable attitudes and confidence in implementing TIP with children. This highlights the importance of underpinning TIP with training that aims to develop an understanding of the impact of trauma on children and how to apply this learning to practice.



Improved understanding of children's experiences

YOT workers reported that the multi-agency case formulation was one of the most critical components of the ECM process. The formulation improved information sharing between multiple-agencies, which led to the gathering of more accurate and detailed information on the child's history compared to standard assessment methods (i.e. AssetPlus), which mainly focus on assessing current 'problem' areas in children's lives. The case formulation meeting also allowed for a more comprehensive assessment of the child over a shorter period of time (i.e. within a single meeting), compared to traditional assessment (over a series of meetings), which would not always achieve the same depth of understanding of the child and their needs.

The psychologist's skills and expertise were regarded as being critical in the case formulation for highlighting more nuanced issues and making the links between ACEs, trauma and the child's behaviour. Further, the depth of this information enabled the assessment of children's developmental needs, which led to the coordination of developmentally focussed intervention plans.

Improved multi-agency collaboration and the use of existing relationships with children

YOT workers reported good attendance of professionals from a range of agencies at the case formulation, which enabled better coordination of support across the YOT and wider services. A coordinated response allowed professionals to utilise existing relationships with the child to deliver interventions, which removed the need for children to have contact with multiple professionals and reduced the duplication of work across services and interventions.

In some YOTs, there were challenges in getting partner agencies to attend the case formulation meetings (e.g. Children's services), which would leave gaps in a child's history and give an incomplete understanding of how to best support them. According to senior YOT workers, this was due to the YOT not providing enough clarity about the ECM approach and what they expected of partners, as well as existing inter-agency problems. Better attendance was reported in YOTs that had fully engaged managers and 'trauma champions'[2] to coordinate meetings and encourage effective partnership working.

Capturing children's and families' voices in the case formulation

YOT workers expressed that the ECM case formulation could be improved by giving children and their families the opportunity to express their views on the events that have happened in their life. However, concerns were raised that this could re-expose children to traumatic incidents, which has the potential to cause further harm and/or trauma to the child. Therefore, if YOTs were to include children in the case formulation process, the approach taken should be trauma-informed, ensuring that the child has a safe and positive experience.

Improved identification of appropriate interventions

YOT workers acknowledged that traditional approaches to supporting children in the youth justice system could be ineffective, with multiple interventions imposed on children who are often experiencing high levels of trauma and living exceptionally chaotic lives (see pg. 25 for a review

2 The 'trauma champions' were senior practitioners who became experts in the delivery of the ECM approach. They provided advice, guidance and support to ECM case managers to embed trauma-informed approaches in practice.

of ACEs and complexity within the ECM case referrals). YOT workers repeatedly highlighted that the children they supported in ECM were not developmentally ready to meaningfully engage with interventions that have a cognitive-behavioural underpinning.

The majority of YOT workers suggested that assessing the child's social, emotional and cognitive age in the case formulation (also called developmental mapping) helped them to understand that children were often functioning at an age much younger than their chronological age, which gave rise to significant developmental needs.

Reduction and simplification of interventions

Children reported that previously, they felt overwhelmed by a multiplicity of interventions, but as a result of ECM, they were in contact with fewer professionals and felt much *"better"* and *"happier"* as a result. The TRM was a useful tool to help YOT workers sequence interventions according to the child's needs and what they could realistically engage with. This reduced the number of interventions being delivered at any given time and the number of professionals the child was required to meet. However, YOT workers also reported working with children from any stage of the TRM, in non-sequential fashion, by adapting their interventions to be more suitable for the child. This resulted in cognitively demanding work being delivered in a simpler manner, while building relationships with children.

ECM and restorative practice

The findings indicate tension regarding restorative justice practice and the way it was incorporated into the delivery of ECM. Several YOT workers reported that restorative justice practice was not always suitable for children who have histories of ACEs and trauma. Others suggested that it could be adapted within ECM, by focusing on building a relationship first and incorporating children's developmental needs, interests and future aspirations into restorative activities.



Psychology support and 'trauma champions' are key for relationship-building

YOT workers reported that they significantly benefitted from the continued support and guidance from the psychologist. The psychologist's input was key for building closer relationships with children. Their support within supervisory sessions was considered to be particularly important when there were crises and significant changes for the child (e.g. being placed into care).

Also, the practice advice from the 'trauma champion' enabled improved relationship-building with children. Some YOT workers favoured relationship-based practice advice from the 'trauma champion', reserving psychology advice for when they needed additional specialist support.

YOT workers said that the clinical supervision from the psychologist was beneficial for maintaining their own well-being and managing emotions when developing close relationships with children who are extremely vulnerable.

Increased defensible decision-making and access to services

The psychologist's input to the case formulation added credibility to the ECM practice recommendations. This increased YOT workers' defensible decision-making, providing them with greater discretion to step away from standardised offence-based work to deliver interventions in line with the child's development and interests. It also enabled them to more successfully secure the child's access to appropriate accommodation, placements and adult services such as mental health (for children making transitions).

The formulation report could travel with the child to inform other professionals on the practice recommendations, which was particularly important for retaining a trauma-informed approach when the child moved out of an area or into custody. However, the findings raised questions about what information from the case formulation report the YOT should share with wider services, with the concern that other professionals could misinterpret the information and use it in a way that causes further harm to the child.

Increased flexibility regarding breach

YOT workers found that consulting with the psychologist when a child had missed more than three appointments increased the flexibility around whether a warning or breach should be issued, taking into account public protection, the child's vulnerabilities and the impact that has on their ability to engage with the YOT and attend appointments.

YOT workers confidence to deliver the ECM approach

Many YOT workers felt that prior to ECM their professional opinions were not valued across criminal justice and partner organisations. While the integrity of the psychologist's support adds validation to YOT workers' decision-making, it also reinforced workers pre-established perceptions of low credibility from managers and with other agencies, which appeared to create an overreliance on the psychologist to feel confident to implement the ECM approach.

Senior YOT workers raised the need for more emphasis to be placed on the role of the 'trauma champion' to guide and support YOT workers to feel confident in implementing ECM. However, this should be in addition to the psychology aspect because YOT workers stated it would be a "*step-back*" to lose psychology support. In addition, children would not benefit from the additional oversight the psychologist provided in guiding effective management of cases.

The importance of meeting children's basic needs

YOT workers suggested that when working with children who have histories of ACEs and trauma, keeping their interactions consistent, predictable and reliable, in addition to meeting children's basic needs, are fundamental principles of practice. They took children out to places where they felt safe and engaged them in activities through which they could bond (e.g. having something to eat together). They emphasised that this was key for building trusted relationships, providing safety and stability, and for increasing engagement from children. Further, children emphasised the importance of YOT workers being reliable, showing genuine care and providing stability, which they had not always had in their lives.

The findings suggest that through ECM, YOT workers were able to identify creative ways to connect with children, which led to the development of closer and more personal relationships. This enabled them to explore the child's personality and identify areas of interest, which led to the child's participation in constructive and meaningful activities (e.g. tailored work experience). As a result,

children said they felt their workers had listened to them, that they were looking out for their best interests and that they had tailored the YOT work around them and what they wanted to do.

Furthermore, YOT workers used their relationship as a vehicle for children to build positive relationships with other professionals and to establish links between the child and the wider community. As a result, children increased their efficacy to reach out to services and seek support on their own volition.

Engagement with families

The majority of children expressed that their family was the most important factor in their lives. YOT workers used TIP to engage with the family as well as highlighting the child's positive achievements and providing ways for parents and children to positively interact together. They stated that working with families enabled improvement in the child-parent/guardian relationship and increased the level of trust parents placed in the YOT.

Improvement in children's views of themselves

Children expressed that their YOT workers looked beyond their offending and always had positive things to say about them. YOT workers, challenged children's negative self-views by showing genuine care and providing positive interaction. They said that through ECM, children were beginning to change the negative perception they had of themselves and started recognising and expressing their positive qualities and potentials. They stated that the children demonstrated improved self-esteem and their body language changed from being guarded (e.g. *"limited eye contact"*) to being more open (e.g. *"things like taking a hat off in a photograph"*).

Improvement in children's emotion regulation

Children said that they greatly benefited from having that *"one person"* they could talk to, and that talking with their ECM worker had helped to calm them down. YOT workers stated that supporting children with emotional regulation and expression, by providing them with a safe space to talk about their emotions, improved their skills to cope with frustration and navigate stressful situations in a positive way.



Increased engagement from children in positive activities

Findings from the interviews with children demonstrated that they looked forward to their future and had developed aspirations, including specific career goals they were working towards. YOT workers reported that they were able to re-engage children with sport and reintegrate those out of school back into school and alternative provision. This improved outcomes for some children, including improved school attendance, completion of qualifications, and removal from the child protection register.

Improvement and challenges in transition processes

As part of ECM, children could continue to engage with YOT workers on a voluntary basis when YOT contact would typically cease. It was emphasised that this benefitted children by enabling them to disengage more naturally from the YOT, as well as allowing YOT workers more time to support children to form new relationships with other professionals. However, YOT workers described challenges in understanding how to manage risk and safeguarding concerns that had arisen during voluntary engagement. Further guidance is needed to provide clarity on roles and responsibilities.



Children reported that the continued voluntary engagement demonstrated care and commitment from their YOT worker. They also said they would prefer more time with their worker, until their life was *"on track"*.

YOT workers suggested that information from the case formulation report can help prepare adult services (such as probation) to work with the child in an ACE- and trauma-informed way. However, there were some challenges in arranging incremental transitions to the probation officer and less flexibility in the Probation service's approach to missed appointments, which children were not prepared for. The findings suggest that transition arrangements from youth to adult services could benefit by being more child-friendly and trauma-informed.

Removing criminogenic stigma

The ECM case formulation reminded YOT workers that the children they work with are children first, in need of care and positive support and should not be characterised by the offences they commit. However, they also reported that further work is needed across the criminal justice system to remove labelling language and to prevent children from being treated as fully responsible adults.

YOT police officers described how the multi-agency case formulation helped them adapt their practice to be more child-friendly and trauma-informed. However, the findings suggest that TIP can be more challenging for YOT police officers to fully implement, because their roles require them to hold people (including children) accountable for their offending behaviour.

Wider adoption of trauma-informed approaches

YOT workers reported cultural changes within their service, with YOTs working in a more ACE- and trauma-informed way, and placing more emphasis on holistic, child-centred approaches that seek to build relationships. The findings also suggest that taking a trauma-informed perspective can promote a practice culture that endeavours to understand and listen to children in order to meet their specific needs. However, senior YOT workers stated that there is more work to be done to embed trauma-informed and 'Child-First' approaches into the youth justice system.

YOT workers felt that to improve the effectiveness of the ECM approach, training on TIP should be delivered to all services to ensure that practice is consistent across all professionals who interact with children who have experienced trauma.

Conclusion

In the youth justice system, there is increasing recognition among professionals that approaches which focus on managing risk and enforcing punitive consequences often overlook the needs of the child and can be largely ineffective for achieving positive outcomes. However, some YOTs are reshaping how services are delivered to enable a 'Child-First' and trauma-informed approach to be adopted.

The findings of this report have highlighted that in Wales, there has been a shift in youth justice, with an increase in ACE- and trauma-informed awareness and practice. Training on ACE- and trauma-informed approaches and the delivery of ECM have galvanised this shift, allowing some YOTs to move towards a more holistic approach that focuses on understanding what has happened to a child and the complex issues they experience, through which they are able to improve the support they provide to children, to develop their strengths and realise their potential.

The findings demonstrate a number of benefits to the ECM approach, including a more comprehensive understanding of the child, effective collaboration across agencies, the delivery of meaningful and developmentally appropriate interventions and the provision of services that can be hard to secure for some children. Furthermore, ECM enabled YOT workers to take a more considered view of breach, and a more trauma-informed approach to various transition processes.

Overall, both YOT workers and children reported marked progression in positive outcomes as a result of ECM. Children developed positive relationships with their YOT worker and professionals from other agencies, more confidence to reach out to services using their own volition, improved emotional-regulation, greater self-worth and a positive future orientation. However, the findings suggest there is still more to do to embed trauma-informed and 'Child-First' approaches into the youth justice system as a whole.



Recommendations

The following recommendations should be considered:

- It is recognised that TIP is in its relative infancy within the youth justice system, and further research is required to build an evidence base on its use and effectiveness.

- All services dealing with children who have a history of trauma should consider training to improve their understanding of the impact of ACEs and trauma on the child's behaviour. This will allow children's needs to be better understood and a consistent application of approaches across agencies involved with the child and their family.

- Continuation of work in YOTs to embed trauma-informed approaches to working with children who have a history of ACEs and trauma, and the adoption of relationship-based approaches to meet their needs.

- Continued engagement with health and psychology services to maintain the added value that the psychology input has on the range of responses the YOT can utilise when working with children who have complex needs.

- A key role identified in supporting practice change is that of the senior practitioner or 'trauma champion' in YOTs. Further development of this role may increase YOT workers confidence and reduce overreliance on the on the psychologist for validation of their practice.

- Further emphasis on preparing and helping other services to be part of the multi-agency case formulation, with the aim of improving attendance and participation from partner agencies.

- Further guidance on what information YOTs can share from the case formulation report with other services to ensure that the information is used appropriately.

- Increased opportunity for the child's voice to be incorporated in the creation of the case formulation report. The approach taken should be individualised and child-friendly to ensure that children have a safe and positive experience.

- Consideration of the benefits of continued voluntary engagement with the YOT for children who have complex needs and are involved in various transition processes (e.g. the transition at the end of a court order and from youth to adult services). Voluntary engagement should facilitate gradual disengagement of the child from the YOT, particularly where children have significant relationships with YOT workers and longstanding YOT involvement.

- Further research is required to build an evidence base on relationship-building interventions to assess 'what works' for children with complex needs. This could be investigated in relation to positive change and could also consider the contribution of the ECM approach.

1. Introduction

1.1 The youth justice system

The youth justice system in England and Wales was established following the crime and disorder act, 1998, and is responsible for managing children who are aged between 10 and 17 years and have or are at risk of committing a criminal offence (1). In England and Wales, 60,200 children (aged 10-17 years) were arrested in the year ending March 2019, a third of which resulted in a caution or sentence (21,700) (2). From 2009 to 2019, the number of proven offences committed by children reduced by 76% and the number of children receiving their first caution or conviction for a recordable offence, known as 'first time entrants' (FTEs) fell by 85% (2). In the same period there was also a 78% decrease in youth arrests (2). While the number of FTEs, proven offences and youth arrests have decreased, the number of serious offences committed by children (such as robbery, violence against a person, and sexual offences) has risen as a proportion of all youth crime, from 59% in 2013 to 70% in 2018 (3). Accordingly, in the year ending March 2018, rates of recidivism are also higher than they were in 2008, with 38.4% of children reoffending and an average of 4.5% repeat offences per child (3).

The youth justice system has traditionally used prosecution, conviction and accountability to reduce criminal behaviour, relying on punitive approaches to deliver justice. However, there is little evidence to suggest punitive measures successfully reduce criminal activity (4). Furthermore, research suggests that punishment actively encourages youth crime because it fails to address the root causes of offending and engenders feelings of unfair treatment (4). Directing children toward formal systems such as the youth justice system may also expose them to peers who may have committed more serious crimes, which may exacerbate rather than resolve their problems (5).

The 'Risk Factor Prevention Paradigm' (6) which was introduced to youth justice policy in 1997, gave rise to assessments and interventions centred on targeting 'risk factors' for criminal activity. Risk-based approaches are characterised by the management and minimisation of the harm one individual can cause to another (or to themselves) through crime. This is known as an offender and offence-focused perspective. Evidence suggests that risk-focused approaches can be ineffective in reducing recidivism, and are a catalyst for labelling and stigma, which restrict future opportunities for children (7–9). Collectively, the operation of the youth justice system according to a punitive, offence-focused and risk-based model may lay the foundation for a trajectory of continued offending, rather than rehabilitation and change. Such approaches also fail to consider how a positive focus (e.g. promoting children's strengths, capacities and prosocial behaviour) can support children (10,11).

However, practice is developing, in 2014 the introduction of the AssetPlus framework by the YJB marked a transition away from the traditional approach of the youth justice system by providing practitioners with more autonomy in assessing children as individuals and conducting work around positive change and building on children's strengths (12).

The *Offences Brought to Justice* (OBTJ) target was revised in 2008 to focus on serious crime and was finally withdrawn in 2010. This target was originally established in 2002 to reduce the discrepancy between the number of recorded crimes and those for which there was a criminal justice outcome, by increasing the number of crimes that resulted in a reprimand, final warning, caution, penalty notice, and criminal conviction. In 2007, this target was achieved through a rise in criminal sanctions, which resulted from the police formally responding to incidents which previously would have received an informal response (13). Children were particularly affected by this change

in police practice with an increase of 22% of children entering the criminal justice system between 2003 and 2007. The OBTJ target was subsequently criticised for its propensity to increase the use of criminal sanction for minor offences (13). In 2008 the UK Government introduced the *Youth Crime Action Plan* which instead aimed to reduce the number of children entering the criminal justice system for the first time by diverting those who had committed a first offence, or repeat low-level offence away from the formal system. This change in policy, among other influences, explains the sharp reduction in the number of FTEs into the youth justice system seen in the last decade (14). Further, *Breaking the Cycle* (15) set out the UK Coalition Government's vision for youth justice. It proposed further revisions in the use of out of court disposals. This ultimately led to the Legal Aid Sentencing and Punishment of Offenders Act 2012, which replaced reprimands and final warnings with cautions and youth conditional cautions. Consequently, this increased the use of more informal disposals, even in the presence of a previous conviction, further contributing to the drop in FTEs (15).

1.2 History of ACEs and trauma among children in the youth justice system

One explanation for the proportional rise in serious youth crime and the increase in reoffending rates is the diversion and subsequent reduction of children in the youth justice system with lower-level needs and less entrenched offending (16). This had changed the youth justice cohort, which now comprises children who are disproportionately presenting with more complex needs, adverse childhood experiences (ACEs; see Box 1) and trauma (17,18). The Youth Justice Board for England and Wales (19) described these children as *"the most challenging to work with, due to, amongst other reasons, more complex family backgrounds, more mental health issues, more group or gang offending and more serious youth violence"* (p. 15).

Box 1. Adverse childhood experiences (ACEs)

ACEs are traumatic or stressful experiences occurring before the age of 18 years. These include, but are not limited to, the experience of physical and emotional neglect or abuse, sexual abuse, living in a household affected by domestic violence, substance misuse, parental separation or mental illness and a member of the household being in prison. Research on ACEs demonstrates valuable insight into the underlying causes of vulnerability, and their relationship with problematic mental health, school absenteeism, health-harming behaviours (e.g. violence and substance misuse), and involvement with the criminal justice system (20-23).

Research shows that a large proportion of children within the criminal justice system have experienced high levels of socio-economic disadvantage (14,24) and ACEs such as neglect and abuse (25,26). Further, YJB Cymru assessed the case files of children with the most prolific offending histories, in Wales, which revealed that 48% had witnessed family violence; 55% had experience of abuse or neglect; 79% had social services involvement; 81% had no formal qualifications and 95% had substance misuse problems (27). Such early life conditions inhibit the development of positive attachment, emotional regulation and impulse control processes (28–31), meaning children who have experienced trauma and later commit criminal offences may not necessarily be choosing to misbehave, but instead struggle to regulate negative emotional reactions and understand the consequences of their actions (29-31).

Whilst legislation determines a child becomes an adult at 18 years of age, adolescent development does not stop at that point. There is growing appreciation that cognitive, social and emotional capacity continues to develop into early adulthood, reaching full maturity in the early twenties

(32,33). Whether or not a child commits a criminal offence, their psychological and brain functioning is not fully developed, which causes them to act impulsively, without considering future consequences (33).

Further, the impact of significant distress in early life can increase cognitive, social and emotional difficulties and problematic mental health in children and adults (34–37). Collectively, these factors add to the complexity of cases in the youth justice system. The historic trauma and chaotic lifestyles of children who have experienced multiple ACEs give rise to specific needs, which require careful and considered intervention. Traditional interventions offered within the youth justice system, such as Cognitive Behavioural Therapy (CBT), place significant demands on a child's ability to think abstractly and empathise with others. Given the impact of early life trauma on impairing these exact functions, CBT and other cognitive based intervention may be ineffective unless they are appropriately tailored to the specific abilities of the child (38). As such, it is important to identify approaches that genuinely address the specific needs of children within the youth justice system, and acknowledge the impact of early life trauma upon functioning and development.

1.3 A 'Child-First' approach to the youth justice system

A compelling alternative to punitive and risk-based strategies is presented in the 'Child-First' approach (39), which aims to understand and treat children as children, to meet their specific needs (as distinct from adults) and recognise their vulnerabilities. This involves acknowledging the role of contextual influences on offending, including poverty, social deprivation, poor housing and early life trauma, and supporting children to engage in positive opportunities by promoting their individual strengths and qualities. Ultimately, 'Child-First' is a child-friendly, child-appropriate model that promotes positive behaviours and outcomes, and strives to empower children to fulfil their potential (40).

Importantly, taking a positive approach to youth justice is not to reject the relevance of risk in public protection or in protecting children from harm, but to move away from focusing attention too narrowly on 'problem areas' in children's lives. A broader, more positive perspective focuses on the needs of children within their social, emotional and cognitive capacity (41), acknowledges factors that increase a child's likelihood to manifest needs and emphasises positive outcomes (42).

The 'Child-First' approach and its relationship to children's rights is established as a foundation for youth justice policy and practice in Wales. The YJB originally stated its commitment to 'Child-First' in the *All Wales Youth Offending Strategy* (2004) (43) and was re-affirmed through *Children and Young People First* (2014) and the *Youth Justice Blueprint for Wales* [3] (2019) (45). The Youth Justice Blueprint for Wales (2019) outlines that youth justice should take a 'Child-First' approach to ensure that it is child-centred rather than service focused and that trauma-informed approaches should be adopted throughout the various stages of the youth justice system, recognising and responding to ACEs and indicators of complex need (44). Furthermore, in 2017, HM Inspectorate of Probation (HMIP) (46) inspected the work that YOTs are doing to protect the public from the risk of harm and recognised TIP as a strengths-based approach through which interventions are tailored to take account of trauma. HMIP suggested that building effective relationships before moving on to offence specific work, helping children to develop personal resilience and keeping interventions simple and uncomplicated were appropriate responses (46).

3 The Youth Justice Blueprint is embodied by the Welsh Governments commitment to promoting the rights of children via the principles of the United Nations Convention on the Rights of the Child (UNCRC), with the further inclusion of the Rights of Children and Young Persons (Wales) 2011 (44).

1.4 Trauma-informed approach to a complex demand

In response to evidence of increasing complexity in YOT caseloads and the links between such cases and repeated offending, in 2013, the Welsh Government and the YJB began to test a new way of working, which incorporated a trauma-informed approach to youth justice called Enhanced Case Management (ECM; see Box 2 for more information). In brief, ECM utilises psychology to understand what has happened to a child combined with their developmental needs, personal strengths and protective factors. ECM takes a trauma-informed perspective to help professionals to identify where trauma may have shaped a child's development and to respond in a compassionate and empathic way (47). In 2017, an initial evaluation of ECM indicated that it was a promising approach and merited further roll-out (48). As a result, in March 2017, the ECM project was extended, combining the learning from the initial evaluation with the growing body of evidence and interest in ACEs in Wales. This phase of the ECM project took place within the South Wales Police Force Area across selected YOTs, in partnership with YJB, the Welsh Government, the South Wales Police and Crime Commissioner, Public Health Wales and the Forensic Adolescent Consultation and Treatment Service.

Box 2. Enhanced Case Management (ECM)

ECM is underpinned by the Trauma Recovery Model (TRM; see Box 3) and utilises psychology to help YOT workers understand the wider context of a child's behaviour. A multi-agency case formulation is conducted at the initiation of a new ECM case, whereby all agencies which have been involved with a child and their family share knowledge on the child's background and family history. The psychologists (the input to ECM was provided by clinical psychology) then use this information to draw links between the child's history and behaviour, and to indicate their level of functioning at a physical, cognitive, social and emotional level. This further informs the selection of appropriate interventions and how they are sequenced by ECM case managers in the YOT. Importantly, the formulation process also aims to identify the child's strengths, protective factors and key people within their support network.

Psychologists offer supervision to YOT case managers to support them to manage their cases that are referred into ECM, to provide practice advice and to minimise the impact of secondary trauma. Senior YOT practitioners ('trauma champions' who became experts in supporting the delivery of ECM and ECM case managers) support the psychologists in convening the multi-agency case formulations and liaise with them regarding reviews and on-going case management. They also provide advice, guidance and support for YOT workers to help them develop TIP. The ECM approach seeks to align with a 'Child-First' approach by treating children as children rather than offenders (47). The approach supports children in forming trusting and positive relationships with their case managers (and in turn other professionals) to help them to successfully engage and feel receptive to change and moving forward in a different way. A central goal of ECM is to sensitively and compassionately support children by providing them with positive opportunities. Although acknowledging past trauma is a critical part of ECM, this is to help to understand what has happened to the child, how it may be influencing their behaviour to inform how interventions can be appropriately delivered rather than labelling children in a manner which encourages medicalisation or stigma (47).

1.5 Objectives of the training on ACE- and trauma-informed approaches

In the first stage of implementing ECM, the Forensic Adolescent Consultation and Treatment Service (FACTS) delivered a three-day-training programme to 120 YOT workers in the participating South Wales YOTs. In addition, each YOT identified stakeholders who were likely to take part in multi-agency case formulation meetings and invited them to the training. The training introduced these stakeholders to the aims and objectives of ECM, the working practices associated with it, and the role they might play in sharing their knowledge and understanding of children and their family circumstances. The aims of each training day were as follows:

Day 1: To provide an understanding of the impacts of ACEs and other traumatic developmental experiences on children's attachment and behaviour. This included theories of attachment, trauma, neuro-development and the use of trauma-specific interventions.

Day 2: To provide understanding of the TRM and its underlying principles, the importance of sequencing interventions to the development of the child, the key practice principles to guide practitioners to support children with complex needs and the use of techniques to deliver TIP.

Day 3: To provide a recap of days one and two and explain how ECM would work (e.g. the process of referral, criteria for referral, and the role and function of the multi-agency case formulation, the psychologist and the 'trauma champion').

1.6 Objectives of the evaluation

The YJB Cymru commissioned Bangor University in association with Public Health Wales to complete an independent evaluation to assess the implementation of ECM. The present evaluation had the following primary objectives:

1. To measure change in YOT workers' attitudes towards implementing TIP, from pre- to post-training;
2. To measure change in YOT workers' confidence in working with children who have histories of ACEs and trauma, from pre- to post-training;
3. To develop an understanding of the delivery of ECM as a response to cases where complex welfare issues are evident;
4. To capture the impact of ECM on youth justice processes and practice.

Furthermore, the evaluation sought, where possible, to achieve the following secondary objectives:

5. To explore how an ACE- and trauma-informed approach has been embedded into assessment, planning and supervision of children in YOTs;
6. To develop an understanding of the progress that might occur in children supported through ECM (including perspectives from YOT workers and children).

Box 3. The Trauma Recovery Model (TRM)

The TRM is a framework which combines psychological and criminological approaches, drawing upon evidence regarding understanding of the youth justice system and the impact of maltreatment on child development (38). The TRM consists of several stages which comprise a similar format to Maslow's hierarchy of needs (49) in which subsequent levels are only accessible once the needs from the previous level have been met. Importantly, the TRM is based upon the idea that relational work must be undertaken first, in order to help children process trauma, before cognitive or other interventions can be implemented.

The psychologist supports YOT workers to use the TRM to determine where the child is located on the TRM framework in terms of their developmental needs (physical, cognitive, social and emotional). This understanding helps them decide how to deliver interventions and how to best to support the child. The relationship between needs and appropriate interventions is described in the TRM. Emphasis is placed on the sequential progression of children through each level, beginning with the establishment of structure via a daily routine which is consistent, predictable and reliable. For example, if a child is leading a chaotic lifestyle characterised by instability, an initial response would be to help them develop a settled routine and to feel more secure in their relationship with their worker and the YOT. Once these basic needs are met, the TRM suggests the child is able to begin building positive and constructive relationships with workers recognising this also takes time. When children feel safe enough, they may disclose experiences of current and or historical trauma. At this stage, they may require specialist therapeutic interventions. Within the context of ECM, the role of the psychologist is important at this stage in assisting YOT worker to understand how to effectively respond to help the child to process previous trauma.

The TRM proposes that once children have reached the stage when they can resolve the trauma of past experiences, they will be more cognitively able to work on consequential thinking, develop empathy and have a greater capacity to naturally reflect on their lifestyle. It is at this stage that youth justice interventions can be more successfully conducted. The final stages of the TRM suggest that once children have developed a greater sense of self-efficacy and awareness of their abilities, activities such as guided goal-setting and scaffolded support can assist children to develop a sense of self-belief and understanding of their potential as an individual. Ultimately, the TRM aims to support children in attaining greater confidence to achieve their personal goals. Irrespective of the stage they are at in the TRM, on-going supportive relationships throughout the child's journey remain key.

The model is underpinned by the belief that individuals who offend are redeemable, and can successfully transform to live healthy, independent and crime-free lives in the community.

2. Methods

The evaluation utilised both quantitative and qualitative methods via surveys and face-to-face interviews conducted with YOT workers and children who were or had been participating in ECM. Pre- and post-training surveys were utilised to assess the impact of the training on objectives one and two, while interviews were utilised to assess objectives three to six. The profile of children referred to the ECM project was also analysed.

Researchers gave consideration to the experience of YOT professionals by recruiting participants from various different roles.

The evaluation was reviewed and approved by Bangor University Health Sciences Ethics Committee.

2.1 Survey Methodology

2.1.1 Sample selection

The YJB invited YOTs to put forward YOT workers to attend a three-day-training programme on the basis they would be managing ECM cases or they were other professionals from within the team who would be interacting with and supporting children within ECM. Members of staff from the YJB utilised opportunity sampling techniques to recruit training participants to take part in the evaluation survey.

2.1.2 Participants

Training was delivered to approximately 120 staff from the participating YOTs in the South Wales Police Force Area. Of these, 57 participants took part in the survey immediately pre- and post-training. The sample comprised of 26 men and 29 women across a range of different roles (two YOT workers did not provide their gender). The age of participants within the sample ranged from 18 to 64 years of age, with the highest representation of the sample aged 35 to 44 (35%) and 45 to 54 (36%) years of age. Participants were grouped according to six job categories[4]: head of service, deputy/assistant director, YOT management board member (2%); operational manager, team leader, middle manager (16%); senior practitioner, senior specialist worker (4%); practitioner, specialist worker (64%); entry Level (support worker, administrative, student placements, etc. (4%); and other (case managers, intensive supervision surveillance coordinators, court officer, and police; 11%), the remainder were missing data. Over half of the sample (60%) had been working in the field of youth justice for over ten years, 13% for seven to ten years, 11% for one to three years, and 14% for less than a year, the remainder were missing data.

2.1.3 Materials

The evaluation utilised a pen and paper survey for the collection of quantitative data immediately pre- and post-training. The survey included a previously validated 45-item scale (the Attitudes Related to Trauma-Informed Care scale; ARTIC-45) (50) to measure YOT workers' attitudes towards TIP and five additional single-item questions about YOT workers' confidence in working with children who have ACEs.

4 Percentages are the percent of the sample each job category represents.

2.1.3.1 The attitudes related to trauma-informed care (ARTIC-45) human services measure

For ease of reporting, here we refer to trauma-informed care (TIC) as TIP. The survey containing the ARTIC-45 scale was administered by the YJB and completed forms were provided to the researcher for later analysis and inclusion in the report. The scale measured the extent to which an individual has favourable or unfavourable attitudes towards the key components of TIP. All items are measured on a seven-point bipolar Likert scale where each item that characterises a TIP-favourable attitude is paired with the opposite unfavourable attitude. The scale has five core subscales* (seven items each) and two supplementary subscales (five items each). See Table 1 for example items.

Research using confirmatory factor analysis has demonstrated good factorial validity and excellent internal consistency of the ARTIC-45 scale (50).

Table 1. ARTIC-45 subscale names, descriptions, and example items.

Subscale name	Description	Example Items	
		TIP-unfavourable attitude	TIP-favourable attitude
***Underlying causes of problem behaviour and symptoms**	Emphasises behaviour as adaptive and changeable versus behaviour as intentional and fixed	Clients' learning and behaviour problems are rooted in their behavioural or mental health condition	Clients' learning and behaviour problems are rooted in their history of difficult life events
***Responses to problem behav-iour and symp-toms**	Highlights relationships, flexibility, kindness, and safety as causes of behaviour change versus rules, consequences, and accountability as causes of behaviour change	It's best to be very strict at first so clients learn they can't take advantage of me	It's best to treat clients with respect and kindness from the start so they know I care
***On-the-job be-haviour**	Emphasises empathy-focused staff behaviour versus control-focused staff behaviour	It reflects badly on me if my clients are very upset	Being very upset is normal for many of the clients I serve
***Self-efficacy at work**	Focuses on feeling able to meet the demands of working with a population that has experienced trauma versus feeling unable to meet the demands	I don't have what it takes to help my clients	I have what it takes to help my clients
***Reactions to the work**	Supports the understanding of the effects of secondary trauma and coping by seeking support, versus minimising the effects of secondary trauma and coping by ignoring its impact	Sometimes I think I'm too sensitive to do this kind of work	The fact that I'm impacted by my work means that I care
Personal support of TIP	Endorses being supportive of, and confident about, implementation of TIP versus concerns about implementing TIP	I am concerned that I cannot/will not be able to carry out all my responsibilities with respect to the TIP approach	I am optimistic that I can/will be able to carry out all my responsibilities with respect to the TIP approach
System-wide support of TIP	Highlights feeling system-wide support for TIP versus not feeling supported by colleagues, supervisors, and the administration to implement TIP	I am concerned that I do not/will not have enough support to implement the TIP approach	I think I do/will have enough support to implement the TIP approach

2.1.3.2 Confidence in working with children who have experiences ACEs

Five single-item questions measured YOT workers' confidence in 1) working with children who have experienced ACEs; 2) identifying ACEs in children's lives; 3) providing intervention and support to children who have experienced ACEs; 4) sequencing developmentally sensitive interventions; and 5) adapting their engagement style to meet the needs of individual children. Item responses were scored on a five-point Likert scale ranging from 1 (*not confident*) to 5 (*extremely confident*).

2.1.4 Procedure

Prior to the delivery of the training, YJB staff outlined the purpose of the evaluation and explained to YOT workers that participation was voluntary. YOT workers submitted a completed consent form with the survey if they agreed to take part. YJB staff then distributed the survey for completion immediately pre- and post-training.

2.1.5 Data Analysis

Survey responses were analysed using a paired samples test on IBM SPSS v.25. Specifically, the research team performed Wilcoxon signed ranks analysis to assess the direction of change (from pre to post-training) of participant's attitudes towards TIP and confidence in working with children who have ACEs.

2.2 Interview methodology for YOT workers

2.2.1 Sample selection

The researchers utilised purposive sampling techniques to recruit participants into the evaluation, utilising YOT managers who circulated an email to all relevant YOT workers outlining the evaluation. Researchers arranged face-to-face group meetings with workers who expressed interest in taking part to discuss what their participation in the evaluation would involve.

2.2.2 Participants

The lead researcher conducted 18 one-to-one interviews with YOT workers. The majority of YOT workers[5] were utilising the ECM approach: case managers, senior practitioners and heads of service (n = 10) and wider YOT workers (e.g. substance misuse workers, special education officers and YOT police; n = 4). Other participants included case managers who had not yet utilised ECM in case management (n = 4). All participants had at least three years' experience of working in youth justice services.

2.2.3 Interview Materials

The researchers developed two topic guides, one for YOT workers who were or had been supporting one or more children with the ECM approach and the second was for YOT workers who had not yet referred or worked with a child through ECM.

ECM interview topics: 1) general experience of implementing ECM; 2) the effectiveness of the ECM processes (e.g. the multi-agency case formulation); 3) the enablers and barriers to implementing ECM; and 4) the perceived journey of the child through ECM (including any change in psychological outcomes and behaviour).

5 In this report, YOT case managers and wider YOT staff are referred to as YOT workers. Senior practitioners and heads of service are referred to as senior YOT workers.

Non-ECM interview topics: 1) perceptions of the role and responsibilities of youth justice in responding to ACEs and trauma; 2) experience of organisational change towards the use of ACE- and TIP within YOTs; 3) attitudes towards ACE- and trauma-informed approaches; and 4) experience of multi-agency working.

2.2.4 Procedure

The lead researcher sent the evaluation information sheet to YOT workers several weeks prior to data collection. Prior to the interview, the researcher asked participants to familiarise themselves with the information sheet and to ask questions if anything was unclear. The researcher explained that participation was voluntary and that all data was anonymised and stored securely by Bangor University and Public Health Wales. Written consent was required before commencing the interview. The researcher also told participants they could withdraw from the evaluation at any time.

2.3 Interview methodology for children

2.3.1 Sample selection

ECM case managers met with the children they were working with to explain the evaluation and what was required for their participation. Children were also informed that they could choose the location of the interview (subject to approval by the case manager) and that they could have anyone of their choosing remain with them for the interview duration. Once a child had expressed interest in taking part, the lead researcher met with the relevant case manager to discuss the topics they would cover in the interview. This discussion gave case managers the opportunity to raise any concerns they had over particular topic areas and to discuss the best way to engage with the child to ensure that they had a positive participation experience. Then, the case manager coordinated with the child to organise a date and location for the interview to take place.

2.3.2 Participants

The lead researcher conducted six one-to-one interviews with children who were or had been participating in ECM. The age of the children ranged from 14 to 18 years old.

These children all met the following ECM criteria[6]:

1. Have a second 'offending' event;
2. 2. The recipient of an out of court disposal, community orders or a detention and training order;
3. Six months tenure on their order;
4. Evidence of complex histories and ACEs.

2.3.3 Interview materials

The topic guide for interview with children included the following: 1) general experience of ECM; 2) experience of their ECM case manager and other professionals; 3) about themselves (present and future); 4) what is important to them; 5) their journey through ECM including any change in themselves; 6) what makes a good YOT worker; 7) recommendations to improve the youth justice system.

It is important to note that the children interviewed as part of the evaluation did not understand ECM as any particular type of work and whilst many remembered agreeing to be involved in ECM, none could

6 The intention was that the 'second offending event' would scope in children who had received an informal disposal prior to a more formal outcome provided the three other criteria were met. However, it was also agreed at an early stage that practitioner discretion would be important in determining which children to refer. It should also be noted that the six months tenure on the order could also be a mixture of statutory and voluntary engagement. The six-month period was felt to be the minimum necessary to establishing a trusting relationship with the child.

remember what this meant for them. As such, in the interviews, the researchers referred to the child's ECM case manager as a reference point to the period of work.

2.3.4 Procedure

Immediately before the interview the researcher explained to the child the different topics they would cover, that they did not have to answer any question they felt uncomfortable answering, that they could stop the interview at any point and that their participation was voluntary. The researcher also explained to the child that the interview would be recorded, transcribed and stored securely. They were also informed that the interview would be used to help produce an evaluation report for YOT staff and wider professionals to see, but that anything they say would be anonymous an unidentifiable. Consent was obtained from the child as well as an appropriate / responsible adult for children under the age of 16. Upon completion of the interview, the researcher gave children a £25 clothing shops voucher.

2.4 Analysis of interview data

All interviews (YOT workers and children) were audio-recorded and transcribed with participants' consent for later analysis. Interviews were analysed using a summary approach, whereby commonalities in narrative were explored across YOT workers and children. Areas of interest were explored in more detail to understand the participant's experiences.

Due to time limitations, the focus for analysis was on the narrative of YOT workers who had supported children in ECM. However, interviews with YOT workers who had not yet delivered the ECM approach were analysed to expand on and complement key points identified from the ECM interview. This additional analysis focussed on similarities and differences raised with regards to the implementation of ACE- and trauma-informed approaches with (ECM YOT workers) and without (non-ECM YOT workers) the support of the ECM approach.

2.5 Methodology for ECM case referral complexity analysis

The YJB examined the complexity profile of children referred into the ECM project in South Wales.

2.5.1 Participants

The YJB examined case level data from to establish the indicative level of demand for ECM. Initial projections based on YOT case level data suggested there could be approximately 61 children eligible for referral over the span of the project. Fifty-three children were referred into ECM with 44 commencing to a multi-agency case formulation. Nine children did not proceed with the ECM referral due to 1) a lack of FACTS capacity to lead the case formulation; 2) the YOT withdrew the referral; and 3) in one instance, the child withdrew consent. Forty-four cases were analysed and all met the ECM referral criteria.

2.5.2 Procedure

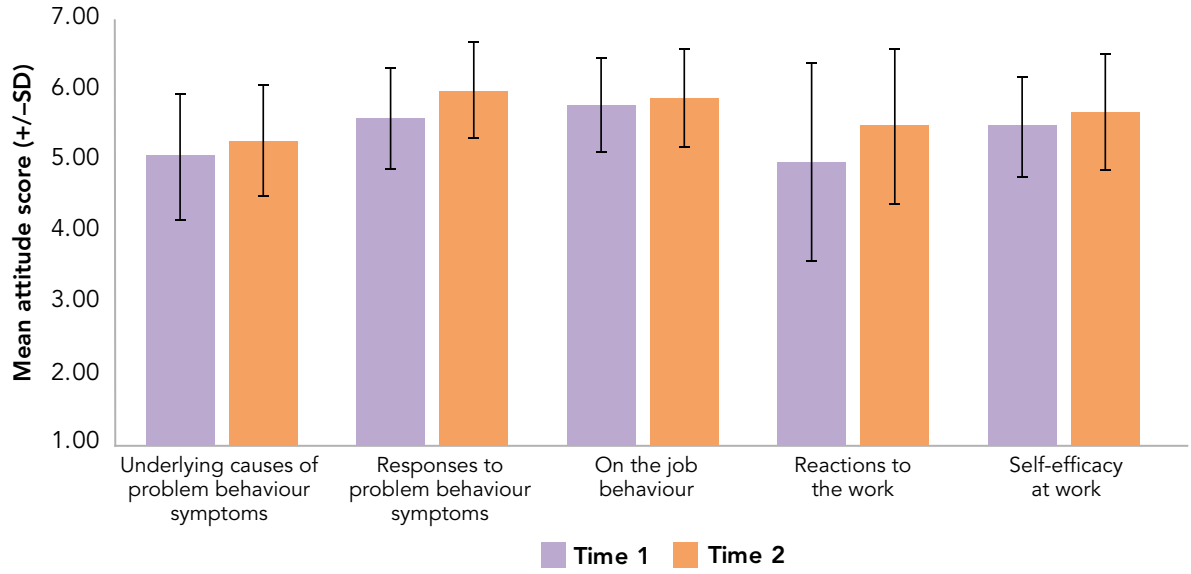
YOT workers completed ECM referral forms for children (which largely focussed on indicators of complexity); supplemented with additional information from case files including age, gender, ethnicity, type of intervention, length of intervention, Children's services involvement, substance misuse, emotional or mental health issues, brain injury, learning or educational difficulties, speech, language and communication needs, emotional abuse and ACE categories. This data was analysed on an Excel spreadsheet to determine the profile of the group.

3. Survey findings

3.1 Attitudes related to TIP

The pre- and post-training survey examined change in the YOT workers' attitudes towards TIP. The means and standard deviations of the five core subscales* are displayed in Figure 1, and pre- to post-differences for the seven subscales are reported below. A score of one represents an unfavourable attitude towards TIP and a score of seven represents a favourable attitude towards TIP.

Figure 1. Pre- and post-training mean scores and standard deviations (SD) for the core ARTIC-45 subscales.



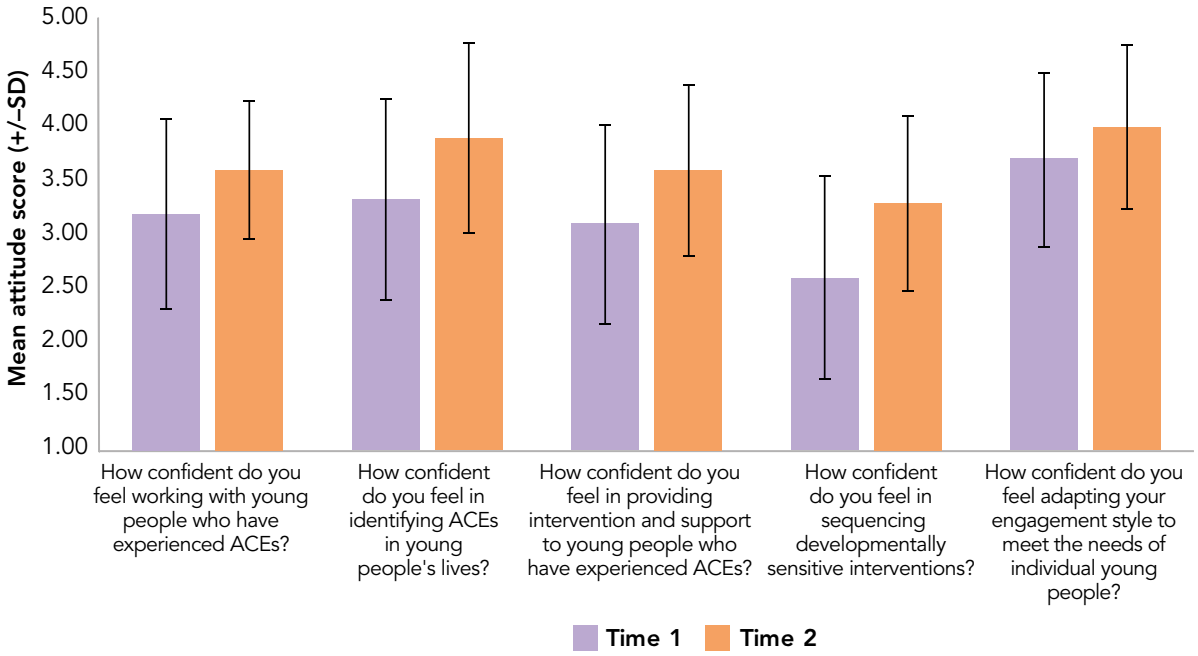
- ***Underlying causes of problem behaviour and symptoms (n = 56).** From pre- (M = 5.1, SD =.85) to post-training (M = 5.3, SD = .85), YOT workers' attitudes significantly increased (z = 2.3, p = .003), demonstrating more favourable attitudes towards children's behaviour being adaptive and changeable.
- ***Responses to problem behaviour and symptoms (n = 56).** From pre- (M = 5.6, SD =.72) to post-training (M = 6.0, SD = .68), YOT workers' attitudes significantly increased (z = 3.3, p = .001), demonstrating more favourable attitudes towards relationships, flexibility, kindness, and safety as the causes of children's behaviour change.
- ***On-the-job behaviour (n = 56).** From pre- (M = 5.8, SD = .68) to post-training (M = 5.9, SD = .70), YOT workers' attitudes did not significantly change (z = 1.3, p = .207). YOT workers remained in favour of empathy-focused staff behaviour at both time points.
- ***Reactions to the work (n = 56).** From pre- (M = 5.0, SD = 1.4) to post-training (M = 5.5, SD = 1.1), YOT workers' attitudes did not significantly change (z = 1.3, p = .207). YOT workers remained in favour of understanding the effects of secondary trauma and coping by seeking support.
- ***Self-efficacy at work (n = 56).** From pre- (M = 5.5, SD = .71) to post-training (M = 5.7, SD = .82), YOT workers' attitudes significantly increased (z = 2.2, p = .029), demonstrating more favourable attitudes towards feeling able to meet the demands of working with a population that has experienced trauma.

- **Personal Support of TIP (n = 31).** From pre- (M = 5.1, SD = 1.2) to post-training (M = 5.7, SD = .81), YOT workers' attitudes significantly increased (z = 2.2, p = .029), demonstrating more favourable attitudes towards being supportive of and confident about implementing TIP.
- **System wide support of TIP (n = 40).** From pre- (M = 5.0, SD = 1.4) to post-training (M = 5.5, SD = 1.1), YOT workers' attitudes significantly increased (z = 2.2, p = .015), demonstrating more favourable attitudes towards feeling supported by the organisation to implement TIP.

3.2 Confidence working with children who have ACEs

The pre- and post-training survey measured YOT workers' confidence in working with children who have ACEs. The means and standard deviations of the five single-item confidence questions are displayed in Figure 2, and pre- to post-differences for each question are reported below. Responses were scored on a scale ranging from one (not confident) to five (extremely confident).

Figure 2. Pre- and post-training mean confidence scores and standard deviations (SD).



- **YOT workers confidence in working with children who have experienced ACEs (n = 54)** significantly increased (z = 3.3, p = .001) from pre- (M = 3.2, SD = .75) to post-training (M = 3.6, SD = .64).
- **YOT workers confidence in identifying ACEs in children's lives (n = 54)** significantly increased (z = 4.0, p = <.001) from pre- (M = 3.3, SD = .93) to post-training (M = 3.9, SD = .88).
- **YOT workers confidence in providing intervention for children who have experienced ACEs (n = 54)** significantly increased (z = 4.6, p = .001) from pre- (M = 3.1, SD = .92) to post-training (M = 3.6, SD = .79).
- **YOT workers confidence in sequencing developmentally sensitive interventions (n = 54)** significantly increased (z = 4.8, p = <.001) from pre- (M = 2.6, SD = .94) to post-training (M= 3.3, SD = .81).
- **YOT workers confidence in adapting engagement style to meet the needs of individual children (n = 54)** significantly increased (z = 3.0, p = .003) from pre- (M = 3.7, SD = .80) to post-training (M = 4.0, SD = .76).

4. ECM case referrals - ACEs and complexity findings

Forty-four children were referred and accepted as ECM cases[7]. Thirty-seven (84%) were male and seven (16%) female. Thirty-nine children (88.5%) were reported as White British and five (11.5%) reported as Black, Asian, and minority ethnic and unknown ethnicity. Nine children were aged between 11 and 13 years (21%), six were aged 14 years (14%), eight were aged 15 years (18%), eight were aged 16 years (18%), 12 were aged 17 to 18 years (28%).

4.1 Involvement with Children's services

Forty-three children (98%) had current or previous engagement with Children's services as either being a looked after child, having a child protection plan or other Social services involvement[8]. One child had not been involved with Children's services. Thirty-six children (82%) had either a previous or current child protection plan. Thirty children (68%) were either a previous or current looked after child. Forty children (91%) had previous or current involvement with Social services. See Table 2 for all results on involvement with Children's services.

Table 2. Involvement with Children's services.

	Child Protection Plan		Looked After Child		Other Social Services	
	No.	%	No.	%	No.	%
Current	17	39%	22	50%	26	59%
Previous	19	43%	8	18%	14	32%
Never	8	18%	14	32%	2	4.5%
Not Recorded	0	0%	0	0%	2	4.5%

4.2 Maltreatment and household ACEs

Eighteen children (41%) had experienced three or more child maltreatment ACEs. Four children (9%) had experienced all four child maltreatment ACEs. Six children (14%) had been sexually abused and it was suspected in one case (2%). The majority of the children who had experienced sexual abuse had also experienced verbal abuse, physical abuse and neglect. For thirteen children (30%) sexual abuse was recorded as unknown, which may indicate that it was under reported. See Table 3 for all results on maltreatment ACEs.

Table 3. Child maltreatment ACEs.

	Child Maltreatment ACEs			
	Verbal abuse	Physical abuse	Sexual abuse	Neglect
Number of Children	29	25	6	31
% of Children	66%	57%	14%	70%

7 The YJB collected information at the point of the ECM case referral. The YJB did not update this information following the multi-agency case formulation (where additional information about the children may have been gathered).

8 Other Social services involvement relates to any intervention other than having a child protection plan or identified as a looked after child. It can also include interventions with other family members.

The most frequently occurring childhood household ACEs were parental separation (reported in all but three cases), parental drug misuse and domestic violence. More than half the children (57%) had lived with someone in the household who had been incarcerated. Thirteen children (29.5%) had experienced all six of the childhood household ACEs. See Table 4 for all results on household ACEs.

Table 4. Childhood household ACEs.

	Childhood Household					
	Parental separation	Domestic violence	Mental illness	Drugs	Alcohol	Incarceration
Number of Children	41	34	29	35	30	25
% of Children	93%	77%	66%	80%	68%	57%

4.3 Complexity of cases

The data collected also examined the prevalence of indicators of complexity[9]. The results were as follows:

- Thirty-eight children (86%) had substance misuse problems.
- Forty-two children (95%) had emotional or mental health problems.
- Four children (9%) had received a brain injury and for eleven children (25%) it was 'unknown', which may indicate it was under reported.
- Thirty children (68%) had learning or educational difficulties.
- Twenty children (45%) had speech, language and communication needs.
- Thirty-three children (75%) had experienced emotional abuse, of which 20 (60%) had also experienced verbal and physical abuse and four (12%) verbal, physical and sexual abuse.
- Twenty-two children (50%) were currently with Child and Adolescent Mental Health Services (CAMHS), 17 (38%) had received a previous CAMHS intervention.

9 Complexity means having more than one presenting problem that a single agency cannot resolve. Complex problems include substance misuse, emotional or mental health problems, brain injury, learning difficulties, speech, language and communication needs, and experience of emotional abuse.

5. Interview findings

5.1 The multi-agency case formulation and collaboration

Multi-agency case formulations are conducted to develop a better understanding of the child's history, strengths and protective factors, and to carry out a more comprehensive assessment of the child's needs. Case formulations are supported by a psychologist[10] and attended by the child's designated YOT case manager and individuals from agencies which have been involved with and have knowledge of the child and their family. The formulation examines the child's background and family circumstances from birth, as opposed to solely focusing on the situation around the current offence(s) for which they are under the supervision of the YOT.

YOT workers considered the multi-agency formulation as a critical component of the ECM process. They made a significant distinction regarding the value of the ECM formulation over traditional assessments methods (e.g. AssetPlus). Generally, YOT workers suggested that prior to ECM the YOT tended to acknowledge that children in the youth justice system have experienced ACEs, but they do not typically explore these early life experiences in any level of detail. YOT workers stated that conventional *"snapshot assessments"* of the child's recent events are *"never enough"* because traditional assessments (and criminal justice multi-agency meetings) focus on immediate risk and criminal justice outcomes for the child (i.e. desistance from crime). In contrast, the ECM formulation moves beyond "risk" assessment to a more robust assessment of the child's needs.

> ***"I mean this is completely different because every other meeting just focuses on the current behaviour. So, this completely turns that on its head so you can just literally see people sort of gaining the understanding [of the child] and the penny dropping for the agencies really. And I think it makes everybody's assessments better then because you've come to the meeting and then immediately you've got all the relevant information. Everybody has got the same information and the formulation reports travels with the young person."***
>
> Senior Practitioner [Interview 6]

One of the main advantages of the multi-agency case formulation was that it generated a collaborative understanding of the child's history, which improved cross-agency communication and information sharing. The sharing of information from all agencies involved with the child was essential to the success of the formulation because it enabled a more in-depth and holistic understanding of the child's background. For example, several YOT workers commented on the usefulness of the police providing information on the family (e.g. when the child had shared residence with individuals known to the police for sexual offences), as this helped professionals to understand the family dynamics. Further, YOT workers stated that the formulation explored areas of the child's history that would not normally be looked at (e.g. experiences in earlier childhood). They also said that formulations were especially beneficial when professionals who had previous but not current contact with the child provided information, where there would otherwise be gaps in knowledge that hindered their ability to provide the best support for the child.

10 The input provided to ECM was by clinical psychologists.

> ***"The meeting was fantastic, because I think what sometimes we find is that there'd be gaps, so there'd often be gaps in early years or primary school or the times when before the YOT had contact with the child. But by having the relevant professional we're able to access those notes or materials. So, when they were well attended and well-prepared, I think they were really, really beneficial."***
>
> Senior Practitioner [Interview 12]

Following completion of the formulation, agencies agreed a set of recommendations on the approach needed to support the child, allowing for a cross-agency coordinated response (within and outside of the YOT). Sharing information and coordinating support helped to avoid duplication of work across agencies, alleviate pressures on children to achieve the objectives of all the agencies at once (e.g. multiple interventions) and take the focus away from the needs of the individual services.

> ***"I think if you can get all agencies in the room at same time, looking at the same thing, and getting an agreed approach in that room, then everyone that is working with the young person is singing from the same hymn sheet. You can identify any duplication, because work is duplicated a lot sometimes. So I think that could be benefit to a young person."***
>
> Reparation Worker [Interview 15]

The cross-agency communication and response helped one YOT worker to understand how to avoid overloading the child with duplication of work from the YOT and CAMHS intervention plan.

> ***"The young person that I was working with at the time, they were also involved with CAMHS. But I was trying to kind of work out how I then fit in with still completing like some of my intervention as well as them doing that intervention. … And it [ECM process] just helped me to understand kind of where CAMHS place was and where my role ended and theirs took over. … And then also how to do the intervention that I needed to do alongside that CAMHS intervention. Without overloading the young person or without it kind of clashing with anything they were doing."***
>
> Substance Misuse Worker [Interview 7]

One YOT worker and child explained the benefits of reducing their involvement with CAMHS to avoid replication of work and instead receiving emotional support from their substance misuse worker with whom they had a good relationship – ***"He absolutely loves the substance misuse worker. He'll tell you that's his favourite person to engage with"***.

Children's perspective

"There was a doctor that she [ECM case manager] wanted me to see and that like other people wanted me to see … I did have a say in saying I didn't really like him. It was like this doctor from CAMHS but I didn't really see the point in seeing him because I already had a doctor. …That's why now I see the drugs and alcohol worker … he was a big one [who helped], he was a drug and alcohol worker and like a counsellor kind of thing like all come together kind of thing … I just get on with him."



5.1.1 Multi-agency attendance and contribution in the case formulation

Overall, YOT workers agreed that agencies had bought into the formulation and the ECM approach to working with children. They repeatedly emphasised the importance of the wider agencies buy-in for achieving the best results for the child and family because engagement from those professionals facilitated access to services such as mental health. It also helped to secure the right housing/accommodation for the child as well as appropriate placements. YOT workers believed that this buy-in was enabled by the respect agencies gave to the advice provided by the psychologist, and the professional integrity this brings to the formulation.

> ***"[If] people didn't attend, were invited but didn't attend meetings, never attended, then it's difficult, if you're making recommendations about things like housing, or you're making recommendations about placements, which really doesn't sit within the gift of YOTs. If you've got a non-engagement from other professionals, who have got some control or agency over that, [it] does impact on what obviously how you can influence situations."***
>
> Senior Practitioner [Interview 12]

YOT workers reported that multi-agency attendance at the formulation was good, but there were some slight variations in this across the different YOTs. Good attendance was particularly evident in YOTs that had a fully engaged operational manager or 'trauma champion', YOT workers said that this ensured the relevant professionals had received an invitation as well as sufficient information about the ECM approach. From the YOT workers perspective, the senior staff investment in the formulation gave a clear message that there was buy-in from the management team, which encouraged case managers to take more responsibility in maintaining cross-agency relationships.

> ***"I would say the high proportion were [well attended] and you would always have the established services involved, we've had previous foster carers, foster carers current, care workers, social workers, education officers, teachers. You would draw on everybody you possibly could, youth service, educational psychology, disabilities, adoption services, you would just draw in everybody involved with that young person."***
>
> YOT Case Manager [Interview 1]

However, when staff from the external agencies did not attend or were not fully aware of the information required for the case formulation, it left gaps in the child's history and an incomplete understanding of their behaviour. Senior YOT workers expressed the importance of relaying expectations to the relevant agencies to maximise the potential of the formulation. They stated that when the operational manager fully engaged with the ECM process, communication of expectations for the formulation to external agencies was better. Senior YOT workers highlighted that in the initial stages of the ECM project, there was a lack of clarity about what the ECM work entailed for the wider partnership such as Children's services. According to those staff, this may have developed some initial conflict from Children's services. As such, they said that it is crucial to ensure the sharing and consistency of messages about ECM and what the project entails. YOT workers emphasised that the YOT could increase the buy-in from other agencies by helping them to understand how they can contribute to and benefit from the approach, as well as improving avenues to share these messages.

> ***"So, I suppose it's about how you best get that buy-in, how you best get other agencies to understand what you're doing and why you're doing it, and how they can benefit. It's how they can contribute and how they can benefit. I think that presents a challenge and an opportunity for YOTs that are about to implement it, or are implementing it, about how they share the messages, train other people. That would be the way I would improve it."***
>
> Senior Practitioner [Interview 12]

Several YOT workers reported issues with engagement from Children's services, possibly due to broader issues (unexplored), which can make it difficult to establish buy-in. As above, these issues have a significant impact when the recommendations require action from outside of the YOT, for example; the need for housing and when a secure welfare order is being recommended, having more educational resources and a change in the curriculum or return to school.

> ***"We were working with the country's most hard to reach young people, the most risky young people. So, a couple of our formulation reports recommended secure welfare orders. And that caused some conflict I think with the Children's Service department who were sort of challenging those recommendations. So, we had to kind of manage that quite carefully."***
>
> Head of Service [Interview 14]

Senior YOT workers stated that existing inter-agency problems, particularly with Children's services, need to be managed very carefully because of their involvement and buy-in to the approach is critical. For example, some YOT workers reported effective co-working with Children's services – one case manager emphasised that the child received excellent engagement through the ECM process, which helped to secure the child's transient care arrangements.

> ***"This lad had a social worker and a young person's advisor from the very start of the process and they attended every meeting. … They were quite an important part of it as well. Part of the complexity of this young person was his relationship with Children's services, and his transient care arrangements and all that kind of stuff."***
>
> YOT Case Manager [Interview 16]

Senior YOT workers suggested that when case managers develop good relationships with the other professionals the ECM process works well, even with existing cross-agency problems. YOT workers stated that one of the benefits of the formulation was the opportunity to sit around the table and learn how the different agencies function and to recognise the different systems, which helped them formulate how to work with the child as a collective, whilst remaining respectful of the boundaries other agencies have - *"we all work legally and are governed by different policies and ... that's the bit that needs to be teased out"*. Understanding the limits of the different agencies increased communication between professionals and helped staff to navigate the different services in order to move forward more effectively with the recommendations.

> ***"But what I did notice is, that when sometimes even if generally things were poor or there were problems within inter-agency stuff, if there's a good personal relationships between people, things seem to work really well."***
>
> Senior Practitioner [Interview 12]

YOT workers highlighted that frequent staff turnover in Children's services and those working in residential children's homes is a challenge to consistency of practice with the ECM approach. Staff turnover in Children's services meant that social workers did not always understand the significance of progress and the gravitas of small changes. To overcome this challenge, YOT workers could revisit the formulation report and recommendations made during ECM reviews, so that new professionals would understand and buy-in to the YOT intervention plan. Senior YOT workers suggested that training on TIP should be delivered to Children's services and other services who work with children who have experienced trauma, where there is a high turnover of staff.

5.1.2 A new understanding of developmental needs and appropriate interventions

YOT workers consistently expressed that one of the most beneficial parts of the case formulation is the provision of a new understanding of how trauma may have impaired the child's physical, social, emotional and cognitive development; an exercise called developmental mapping. When all relevant professionals provide information on the child, the psychologist provides a detailed picture of the child's life experiences from birth and the impact that trauma has had on them. Having that information visually mapped out on a timeline highlighted the level of disruption and number of ACEs each child had experienced. The information reminded YOT workers that many children they work with are still developing and are functioning at an age much younger than their chronological age. Through the case formulation, professionals developed an understanding that the child's behaviour is often a reflection of their development; they stated that this is something which they often overlook when working with individuals in late childhood or adolescence.

> ***"It just reminds you how young many of our children are functioning, to remember that some of the behaviours that we're seeing, it's just a younger child's way of communicating really. That can be overlooked when you're dealing with 16/17 year olds, you can forget that actually their behaviour, their functioning more of like six, seven year olds. Their behaviour's just a mirror of that."***
>
> Senior Practitioner [Interview 13]

YOT workers stated that historically, the YOT implemented prescriptive programmes that are offence-focussed and are often punitive. They said that these approaches are ineffective for the highly traumatised children they work with, because they are often not in a position to engage in such programmes. For example, when children's lives are too chaotic and unstable or they do not have the cognitive or emotional capacity to understand all of the information provided to them and change their behaviour. Therefore, it is pertinent to look at different ways of working with these children, outside of the traditional YOT programmes and interventions.

Children's Perspective

"The paperwork was just based on questions about carrying knives, and then it was like, asking about situations if you was in them – what would I do? And then, I didn't really think it was that good. It didn't really help me."



YOT workers frequently reported that seeing the information laid out visually on a timeline promoted empathy - *"when you see him on paper [the timeline] it can be quite shocking … and it does kind of help you strip back that and get the more human element"*. For more senior YOT workers, this information served as a reminder that *"the child has gone through an awful lot … and actually they're still trying to overcome so many ACEs that are still evident"*. It was evident in the interviews that for the majority of YOT workers, the information about the child's developmental age aided a better understanding of the needs of the child and how to support them.

> ***"I was absolutely blown away when I sat there for a young person I'd had a lot of dealings with on the street as a police officer. When you recognise the problems that young person had had leading up to maybe even before he got involved with the police, was massive. … I think that's the benefit of it [ECM] really, it does certainly put us in a different mind-set about what approach that young person needs."***
>
> YOT Police Officer [Interview 11]

Some YOT workers suggested that the developmental mapping exercise helped them to sequence interventions by using their knowledge of the children's cognitive, emotional and social development age and the TRM to guide decisions about whether or not the child was ready to learn from cognitive programmes such as anger management.

> ***"You're doing the developmental mapping exercise so you kind of know where people are functioning emotionally, socially, cognitively. And then you're putting the young person on the TRM and that tells you how to sequence the interventions according to the child's developmental needs and in terms of their brain development."***
>
> Senior Practitioner [Interview 4]

Example of intervention:

One child was assessed as high risk due to: substance misuse, history of violence and aggression, as well as a suicide attempt. The YOT worker explained that following the National Standards for Youth Justice (2013)[11], a particular intervention would require the child to attend a high-level of supervision (e.g. 20-25 hours per week) and complete multiple interventions (arson, substance misuse, emotional well-being, among others). However, none of these programmes had previously worked because the child was not in a position to engage, and could not cope with the level of cognitive demand the intervention placed on them.

> ***"None of it was clearly working anyway because there was no sort of change with him. The risks were still high. And, nothing would actually make sense to him; it would only confuse him, the multiple appointments and different subject matters."***
>
> YOT Case Manager

Following the ECM case formulation, it was recognised that the child's offending behaviour and drug use may have stemmed from the bereavement of a parent. As a result the psychologist suggested bereavement and substance misuse work in addition to relationship-building to develop consistency, predictability and reliability, which were otherwise non-existent in the child's life. The case manager stated that these more appropriate elements of practice allowed for better engagement with the child; but it also decreased the potential amount of breaches occurring as a result of the child's inability to engage with high-level supervision and multiple, simultaneous interventions.

> ***"He was struggling to keep appointments and was often missing appointments, over that time he did actually go to court twice for breach, but he probably could have gone sooner, or more often, if we'd strictly stuck to standards [in comparison to ECM]."***
>
> YOT Case Manager

Children's perspective

"There was a time when I was working with so many different people and it was just too much like. I was like look, I just can't do it, it's either me gonna' not turn up to my appointment because I genuinely can't do it, like I don't like going, or you just sort something out so I don't get into trouble and to be fair she [ECM case worker] did."



11 In the current report, participants refer to National Standards for Youth Justice published in 2013 (51) as opposed to the new Standards for Children in the Youth Justice System (2019) (52).

The majority of YOT workers expressed that the ECM approach helps to address the pressure to implement multiple inappropriate interventions, by giving them the evidence they need to advocate for alternative approaches.

> ***"The most useful part was having the evidence [from the formulation report] to be able to rip up the standards and evidence in why we are taking a different approach. So rather than saying, this young person needs XYZ, we would be able to say that based on this model the approach we need to take is this."***
>
> Reparation worker [Interview 13]



Children's perspective

"I reckon life's going better than what it used to, by a mile, it's going much better. I'm seeing less people [professionals supporting the child] and I just feel in general like. … When I started YOT and doing the programme thing I was seeing about three or four people a week and I just didn't like it, it was too many people that were taking time out of my days and it just aggravated me and then when I had less people I felt better."

However, two YOT workers reported conflict in sequencing interventions with increasing pressure from the police to implement offence-focussed work. For example, there was concern for one child whose order contained the requirement for restorative work around victim empathy. The child had negative experiences with the police (e.g. the arrest of a parent) and had a number of offences for assaulting police officers while being arrested for stealing food. The YOT worker concluded that the child was concerned with their survival and may not be in a position to meaningfully engage with victim empathy work. However, through ECM, the approach to reparation was adapted to undertake work that would provide the child with some positive experiences with police officers.

> ***"I think restorative justice, it wasn't really on his [the child's] mind I think survival was on his mind – he couldn't quite see victims, and a lot of his victims were large stores or the police. So he'd be swearing at the police or assaulting them when they're trying to arrest him. … You think, is restorative stuff actually going to be any use for this, and so, yeah, we didn't do too much on that. … We were able to use one of the police officers in our work who came in and did just talk to him so he was able to see like different types of police … so trying to get him to realise not all police were the same."***
>
> YOT Case Manager [Interview 10]

The findings also suggest that following the developmental mapping exercise, many YOT workers changed the way they delivered interventions to be more trauma-informed and to meet the children's needs more effectively. For example, YOT workers reported adapting cognitively demanding work such as anger management to be more suitable to the child's development, and delivering this work informally while building relationships with the children. Working in different ways allowed YOT workers to indirectly address the cognitive aspects of the TRM's suggested intervention level while they were interacting with children.

"Then [the child] was making indirect disclosures … that was my opportunity to explore emotions and talk about experiences and managing behaviour but in completely different way without a workbook. ... Again, I think often some of the best work came from that more informal work. So, kids are actually addressing emotions that you traditionally think about in a kind of discrete intervention. In terms of like an anger-management pack, or in that cognitive section [of the TRM], but they're starting to do little bits of it lower down the triangle [lower stage of the child's progress on the TRM], but as part of how you interact with someone as a contact. So, it's far more informal. ... By the end of the order, you've probably got the same stuff done, it just looks very different from what you might do with a kid who has got no trauma, who's fully engaged in other aspects and has got support networks. So, you can turn up and do more traditional structured work. Whereas you do the same kind of stuff with these kids on ECM it just looks different."

Senior Practitioner [Interview 12]

5.1.2.1 Restorative justice practice

There was a general lack of consensus from YOT workers with regards to perceptions of restorative justice and how they incorporate it with the ECM approach. Some YOT workers highlighted an initial conflict due to the perception that restorative justice practice tends to focus on the needs of the justice system over the needs of the child. However, they said that restorative justice could be carefully adapted and implemented flexibly within the ECM approach, keeping the best interests of the child central to practice.

"You just need to adapt what you do, use the formulation and the ECM report to structure and deliver your reparation. So, I think it's on of the face of it, because if you had the initial training and it looks like ECM may jar quite a lot with the more traditional approach. I think actually there's lots of scope to give you the flexibility. So, you can still deliver those kind of interventions, you just do it in a different way. And actually, the outcomes are the same, but I think it looks different."

Senior Practitioner [Interview 12]

"[The child] was interested in animals, so we set up them unpaid work working at a rescue centre. So they got experience in that line of work, which would help in the future in gaining employment. If we had stuck to national standards, we would have had to breach that within couple of weeks. There is no way they would been up to keep up with that. And this is a young person that already been through the system a multitude of times."

Reparation worker [Interview 13]

One reparation worker highlighted they had adapted their priorities to focus on the needs of the child when delivering reparation because of their involvement with ECM.

"So I think I'm just less prescriptive than I used to be. More flexible around the needs of the young person, rather than the needs of the YJB and my case load."

Reparation worker [Interview 13]

One YOT worker said that it is critical to build a trusted relationship with the child before attempting unpaid work, because going straight into it is *"setting them up to fail"* as they are less likely to engage with the work. Another YOT worker explained that a lot of the restorative justice work could, in effect, initially focus on relationship building:

> ***"Going to pick the young person up, taking them to the local allotment. Having a nice chat, buying them some food after … and if the child is in a position to engage in 'unpaid hours' then you can shape those hours to be something the child is interested in. … You'll do your unpaid hours because that gets your relationship with the worker. And it gets you [the child] doing gardening which you like or painting which you enjoy."***
>
> Senior Practitioner [Interview 4]

One child explained how the unpaid hours they completed was something that they enjoyed and learned from, because it felt like a job and they had a good relationship with the worker.

Children's perspective

"I have learned a lot of stuff with [reparation] … it doesn't feel like a consequence, it feels like an unpaid job because I enjoy it and I like the worker."



Others viewed restorative justice and other traditional interventions as approaches to either remove entirely from the intervention plan or to work towards and implement when the child was developmentally ready to benefit from them. Importantly, YOT workers said that the ECM recommendations provided them with evidence to go back to a Referral Order Panel and explain the child's circumstances when the child has not been in a position to engage in restorative work.

> ***"It just wasn't, I just felt it wasn't suitable to pressure this young person to have to sit in one of those meetings with a victim, when because of his trauma and experiences, he clearly couldn't cope with that. So, on that occasion, I think just from what I've learnt at ECM, I was able to sort of, say, 'actually, I know this is our process, but that's not appropriate right now, and I'm not going to make him do it'. Which kind of, caused a few disagreements with colleagues within YOT, but we sort of, talked that through. And, I think it's getting people to understand as well, that just because you don't do something now, perhaps they can do it again in the future. And, if you do something now, just to tick a box, it's not really meaningful or effective. It's looking at priorities, really. There are still some priorities, I think, we're given from YJB or whatever, which is you know, you have to have this restorative meeting, perhaps going to restorative practice, and it ticks that box that the YOT is doing that. But, that's not particularly good for this person, bearing in mind the trauma of putting them in that situation."***
>
> YOT Case Manager [Interview 3]

YOT workers delivering restorative practice stated that as a result of ECM, they had adapted their restorative approach to be ACE- and trauma-informed, taking into account prior negative experiences a child may have had with the police. For example, children may have been *"woken up at six am in the morning, just before school with 10 police officers going through the door, maybe forced the door open, and then seeing maybe their parents getting arrested"*. One police officer said that he had changed the location of restorative conferences to take place outside of the police station to increase the child's engagement with reparation hours.

> ***"We would recognise through the ECM model that this person has such a bad experience with police, and has such a negative impression of the police force, if we were to hold it, the restorative conference, at the police station, we wouldn't get the best out of that young person."***
>
> YOT Police Officer [Interview 11]

In sum, there are differences concerning the individual perception of how appropriate restorative justice is as an intervention to be implemented alongside ECM, and how suitable it is generally for children who have a history of ACEs and trauma. On the one hand, restorative justice was viewed as an intervention that can be adapted and implemented flexibly to suit the child's developmental needs, interests and future. On the other hand, workers viewed it as an intervention to work towards until the child was in a better position to meaningfully engage with the work.

> ***"I think I'm really mindful that a high proportion of the recommendations recommend that you don't begin certain pieces of work, cognitive behavioural work or prescriptive programmed work with children until obviously they're in a settled, safe environment for a period of time. So I think that does conflict with certain pieces of work, for example, on a Referral Order Plan or the different plans you've got. I think there are ways around it where you can work restoratively and you can look outside of the box, how you work restoratively with children, not just through the traditional routes."***
>
> YOT Case Manager [Interview 1]

5.1.3 Children's involvement in the case formulation

The ECM approach does not currently operate in a way that can include the involvement of the child in the multi-agency case formulation meetings. However, many case managers expressed that they would like to see more involvement from the children and their families (where possible) in the case formulation process. While YOT workers suggested that the current format of the case formulation would potentially expose children to further trauma, they would like to incorporate more opportunity for the child to give context and meaning to their own life experiences. YOT workers said this would require extreme sensitivity and that this process should also include the child's family where possible.

> ***"Because other than giving their consent really, it's [the case formulation] supposed to happen I think behind the scenes, rather than actually involve [the child], I wonder obviously you'd have to be really sensitive about doing a full formulation in front of a child, they would have to be pretty resilient to cope with that. I would like to see more involvement with children in that process. Yeah, rather than it be a practitioner led process, it's helping us understand their life experiences."***
>
> Senior Practitioner [Interview 13]

> ***"The chronologies [information about the child's life] that are developed are from professionals, so what I try and do is sit down with either parents or carer's, who know that child best and sit down with them and say, look can you draw a lifeline for me. … It doesn't happen very often, unfortunately, it's normally professionally driven but if I can, I try and do that, if I can."***
>
> ECM Case Manager [Interview 1]

Furthermore, YOT workers emphasised that the child's voice can be lost because getting feedback from them when they are in crisis can be extremely difficult. As such, one worker suggested that there is a need for better processes and toolkits that enable practitioners to support children to feel confident to speak about the help they need. They stated that children who are in crisis need support around them to open up and feel confident to speak about their wants and needs.

> ***"I think quite often, their voice isn't always heard. … I think their voice is quite often lost and yes, I think how do you reach a child in crisis to get their feedback on stuff is a real tough one. … They need the right support around them, for them to feel confident, to speak about more help."***
>
> YOT Case Manager [Interview 16]

5.1.3.1 Children's sense of agency

Overall, the children interviewed expressed that during their time spent with the YOT, they felt listened to and that they had a choice in how they participated with the YOT (e.g. having the option to decide the activities they did with their YOT workers). They also felt that the work they did was based on their interests.

Children's perspective

"It [the YOT] just wasn't really what I expected it to be, especially when I came here where they gave me a choice of what I wanted. Yeah, and they adjust the way they work to fit around you, and try and make you feel as comfortable as possible with it, as well. It is based on the person. Like, it is based on the youth, more. It is like, they do actually try and help. Well, with the people that I've worked with, I believe that's true."

"They just supported me and whatever I said, they'd never go without it, they'd change it just for the best for me."



5.2 Benefits of the psychology input, guidance and supervision

Understanding the child's development informed YOT workers on how interventions should be sequenced according to the TRM, to ensure the child's successful engagement. Having a psychologist guide and inform this process helped workers to evidence the reasons for the approach they took to working with children. Most YOT workers stated that previously they had recognised that they should be working differently with children. However, before ECM they felt they could only work in ways that aligned with the National Standards for Youth Justice (2013), despite feeling that more traditional offending work did not match the child's cognitive age or meet the child's needs. YOT workers highlighted that the TRM provided a useful framework for case recording, because previously it was difficult to articulate why they were utilising relational working in favour of other more traditional work. It was also felt that the TRM was useful for recording how the child had progressed (e.g. from unwillingness to engage to being ready to build close relationships).

> ***"People really understand when you can show them the model and that's why you're doing each thing at each stage. And that helps your case recording so it doesn't just look like you know you're not doing any offending behaviour [work] we're just taking them to the gym now. .... You can sort of say 'this person is at level one therefore I'm doing this in line with the TRM'. ... So, it's just like I guess previously it's hard to articulate because you knew that, I always knew that that was what worked with the young person. But you kind of didn't have, it's almost like you didn't have permission to do that."***
>
> Senior Practitioner [Interview 12]

YOT workers reported that the clinical aspect of the psychology support enhanced defensible decision-making and stated that this was crucial in order to be able to protect their work in front of professionals who advocated for the more traditional forms of interventions.

> ***"I think what it allowed us was to get professional recognition but from a clinical perspective that this is what the young person's circumstance is and the recommendations are about how a YOT operates with a child, around it's very prescript legal boundaries. … And I think if you can make a defensible decision about how you're going to manage the young person and their risks, based on an ECM recommendation, that's defensible decision-making."***
>
> YOT Case Manager [Interview 1]

Furthermore, ECM case managers said they had shared information from the case formulation report with other services. Sharing the report generated greater recognition and support from other professionals and enabled the provision of resources that children are universally entitled to, but may not have always been able to access, such as adult mental health (when becoming 18 years of age) and specialist learning disabilities accommodation. According to YOT workers, ECM helped secure access to some services because of the credibility of the psychologist's involvement.

> ***"[The child's] been able to access specialist learning disabilities accommodation with the right support in place, mental health services. So all this information has been literally shared with all those professionals, me going around to each door with an envelope saying here you are GP, this is the formulation report, these are this child's issues and the GP then acknowledge and accepting that formal report, as yes this is from a clinical psychologist from CAMHS and we're accepting it and we're going to take it forward. But without that, it wouldn't have happened, it just wouldn't have happened."***
>
> YOT Case Manager [Interview 1]

In addition, YOT workers emphasised that they greatly benefited from the psychologist's guidance and support, and that this was vital to the ECM case formulation and delivery of the approach. They believed that the psychologist's skills and expertise allowed them to highlight more nuanced issues and make links between trauma and the child's behaviour, *"skills that the other professionals do not have"*. For example, YOT workers highlighted that the formulations had helped to tease out reasons for the escalation in offending behaviour and substance misuse, and shaped the practice recommendations. They said that the psychologist would also support them to deliver interventions and move forward with cases during periods when they were struggling to help the child progress. Also, YOT workers stated that the continuous support from the psychologist is essential when the child is in crisis or when the child's circumstances suddenly change, for example, when the child moves away from their parents and into care.

> ***"I see a lot of [the case formulation] it's based on a psychologist's understanding of events that would have impacted him [the child], so she helps guide us with recommendations. So it's obviously got that psychological background that you need sort of constant guidance really on, because things might change as well and not being a psychologist, so having a psychologist to sort of explain things and sort of promote things for you was massively helpful really because I could then sort of adapt your, the way you sort of worked with him then."***
>
> YOT Case Manager [Interview 9]

Further, many case managers emphasised the importance of having the psychologist's input on why certain situations might be emotionally sensitive and intense for the child and how to work with the child to reduce further harm or trauma (e.g. being a better judge of what the child needed after an emotionally charged meeting).

> ***"In terms of knowing how to best support the young person, I mean I think we do need the input from the psychologist, you know, to make sure that we're not making things worse for the young people, that you're doing exactly the right thing at the right time for them."***
>
> YOT Case Manager [Interview 10]

Another YOT worker stated that through ECM, most workers had become more emotionally and personally invested in the child, which helped to manage crisis periods and relationships more effectively. This meant working longer hours to ensure the child's safety, answering phone calls outside of official working hours and making an effort to show the child they are important by remembering to send them a card or small gift on their birthday, whereas previously this would not happen. YOT workers stated it was essential to have the support and reassurance of the

psychologist on this additional investment in relationship-building, because they may not receive the same level of support from their managers - *"I think it's different with different managers really. You still get some who are like 'no, you shouldn't be doing that' so it just depends I think"*.

> ***"I think it's almost like it's kind of reassurance and confidence isn't it? Because you get a chance to think well, I did this, but I was worried about this, should I be doing that? And you've got a psychologist who can sort of say 'yes', 'no', 'yeah, what you're doing is fine'. Because you can get quite, I know a lot of the practitioners get quite emotionally involved with the ECM approach. You're quite, you know you're seeing people for a long time, you're seeing them a lot, quite emotionally invested. So, it's a chance to kind of talk that through really."***
>
> Senior Practitioner [Interview 6]

Several YOT workers also explained how important it was to have psychology supervision to help with their personal well-being, because understanding the child's trauma can trigger memories about their own life experiences. Furthermore, given the increased emotional investment YOT workers had in these children, it was beneficial for them to receive support for their anxiety concerning the child's safety, especially when there were significant worries about self-harm.

> ***"I did find that [psychology supervision] helpful with this case, because the main thing I struggled with on this case was that he's attempted suicide, and that he became suicidal particularly when he was using substances. That would be like, my worst nightmare to have a kid that committed suicide. So, I was, I would say, 'really anxious', about it, but it was always in the back of my mind, and a bit of a worry."***
>
> YOT Case Manager [Interview 3]

Overall, YOT workers reported feeling confident in implementing the ECM approach because of the support of the psychologist, as they provided them with understanding, guidance over therapeutic intervention, reassurance, and defensible decision-making when working in a trauma-informed way. However, it was evident throughout the interviews that YOT workers may have over relied on the psychologist to feel confident in their practice. YOT workers stated that they felt their professional opinion was often not taken seriously across different organisations as they did not have the qualifications or therapeutic authority a psychologist has. Examples of this included not having their decisions supported in court, by managers, wider justice systems, and partner organisations without the validation of a psychologist. This led to YOT workers describing the role of the psychologist as a *"crutch"* to their work and confidence.

> ***"It's given me more confidence. Well before, sometimes you're saying to people and you just think, do they have no respect for me. Some days you think I've been doing this job a lifetime and I still feel that nobody is listening to me and I suppose there's a downside to that as well, that when they listen to me because I mention the ECM or the psychologist or the YJB, they listen to me. I suppose I could take offence to that but I don't, anything that's going to get me the result that I want, for my young people is fine by me."***
>
> YOT Case Manager [Interview 5]

One Senior YOT worker stated that while the psychologist is essential for ECM in terms of case formulation and supervision, more emphasis should be placed on the role of the ECM senior practitioners as 'trauma champions' to support staff to build their confidence to undertake the ECM approach.

> ***"I think that there is a misconception that the psychologist will give the answer to all the problems. I accept that they are essential to the role of ECM, and I get the importance of them. But I think that it's sometimes ... about the approach itself and the confidence of staff to undertake the approach. And I think again, our senior practitioner has been crucial to that."***
>
> Head of Service [Interview 14]

In line with the above, YOT workers expressed the benefits of having a senior practitioner or so called 'trauma champion' embedded in the YOT to lead ECM practice, while reserving psychology support for when complicated issues arise.

> ***"Yes, we're lucky, we've got our ECM rep in-house ['trauma champion'], you speak with them quite regularly about your cases. So in regards to that, in terms of relationship-based practice, they are like our on the ground person to speak to because they are really experienced, really well-trained, an excellent practitioner and they always give really good advice. … The next stage of that supervision is through our ECM psychologist. … We email each other pretty regularly about cases, about ways to manage them, the complications, what's going on, what's needed from other meetings that they can give support and guidance on. I find that a better approach, for me as a person, as a practitioner, that email guidance and supervision, with complex issues, when they happen."***
>
> YOT Case Manager [Interview 1]

Overall, despite most YOT workers stating that they worked similarly to ECM before its implementation; they felt that the case formulation and the support and guidance of the psychologist allowed this work to more closely reach its full potential. While the formulation provides detailed information on the child's history to facilitate a trauma-informed intervention, having psychology supervision gave them confidence and the authority to work in this way.

5.3 Removing criminogenic stigma

YOT workers highlighted that the children they worked with had previously been subject to professionals constructing them as though they were fully responsible adults deserving of punishment, instead of vulnerable children requiring positive opportunities.

> ***"The professional language around him was - you would swear you were working with somebody who'd been in the adult estate for years, who was a very dangerous violent offender as an adult and I think professionals lost sight for a while, and actually this child had been so traumatised."***
>
> Senior Practitioner [Interview 13]

YOT workers stated that the formulation process helped professionals to move away from the concept of the child as an 'offender' by reminding them of the adversities the child had experienced and how those experiences could manifest in their offending behaviour.

> ***"It really helped other professionals understand her better, because and unfortunately our forensic team were really caught up in that kind of labelling language describing her offences, which was not helpful. So, we had many difficult meetings first to try and help people readjust to why she'd done what she'd done and how her offence occurred. So, the ECM formulation really helped professionals be reminded of the difficulties."***
>
> Senior Practitioner [Interview 13]

However, they reported that more work is required across the criminal justice system to ensure that children are treated as children and not as fully responsible adults.

> ***"I think the police … you don't want to generalise because it's not all police, but quite often with situations, even the YOT do this sometimes, we still treat … even our process is to treat our kids that we work with, as if they're adults, you know."***
>
> YOT Case Manager [Interview 3]

For YOT police, attendance at the ECM formulation changed their view of the child as it reminded them that the children they work with are often viewed as much older than both their chronological and developmental age. This initiated an adaptation in their communication style to suit the comprehension of the child and wherever possible they aimed to reduce the impact a criminal offence has on the child's life. They reported that they would also limit the use of police terminology when interacting with children and wear casual clothes instead of police uniform, to increase engagement from the child. One YOT police officer highlighted the need for the police to develop awareness of a child's negative experiences when dealing with criminal behaviour. They described an incident where they were quick to judge a child's situation and explained how talking through the incident with the child had changed their perspective and gave them insight into the reasons for the child's behaviour.

> ***"We had a young person who's recently come through the Youth Offending Bureau for assaulting a couple of members of staff in the care home and it was over the Christmas time. When we went out to do a joint visit, me and the case manager, with the young person, we sat them down and I was going there to give them a little bit of a stern word about their behaviour. When we sat them down and we had a long chat and we broke a bit of a barrier down. When we got to the bottom on why they behaved in the way that they behaved, is because the other young people who are in this care home had had family members visit them over the Christmas period and they'd had nobody. They'd had nobody visit them. I think they were 13 years old and they'd had nobody visit them over that Christmas time where everybody else had family, cousins, aunties, uncles turning up and nobody turned up to see them. So, you can see why if you look at that as a young person, then you realise then, that's why they're committing those offences. … If police officers recognise that, I think the approach of policing will be certainly better for young people."***
>
> YOT Police Officer [Interview 11]

However, the officer stated that ultimately the police have to deal with the criminal element of the offence, which limits the impact that ECM can have on their role.

> ***"It [ECM] doesn't have any impact on the path that we have to go through, the criminal justice route. … We have to still deal with that criminal element of that young person, but it would certainly explain a lot. With the people that I refer to, ECM it doesn't have any impact on the criminal involvement that they've had, if it's part of an offence. That offence would still have to run the course that it has to run."***
>
> YOT Police Officer [Interview 11]

Some YOT workers stated that since the police have received training on ACEs[12] they are moving in the right direction towards implementing ACE- and trauma-informed responses, but noted more work needs to take place in order to embed this into policing culture.

> ***"I think up until the police recently had training there were barriers there as well because I think with their police hats on. I do think it has changed a little"***
>
> Bureau Co-ordinator [Interview 17]

5.3.1 Children's perspectives on policing

When asked about their experience with other professionals, the children in the evaluation expressed mixed views of the police, some with negative experiences of being frequently arrested and others who had experience of working with supportive police officers – namely those who work within the YOT. One child said that officers did not consider their assault allegation, which resulted in their distinct lack of trust in the police. Children emphasised that good police officers are those who understand their situation and are nice to them and care about them.

Children's perspective



"Some sound [police officers], some bad, ones that care, there are ones who just take their power too much, if you know what I mean. Sometimes I look at police officers and how they speak to me and the way they treat you I think if you didn't have that uniform on you wouldn't do half the stuff you're doing right now, or say the stuff you would be saying right now. I feel harassed from the police 100%. … They got to understand like that some people's lives are not just with a silver spoon. … I have seen what some officers are like, some officers I can say fair do's. I understand some police officers have got to do their job, and there are some officers are there to just look to get you in trouble."

"Like when I was sexually assaulted one time they [the police] didn't do nothing. Yeah, and like just I don't get the police involved now. So, if like something was to happen to me again I wouldn't go back there. I wouldn't get help off the police. I would just go counselling or something, wouldn't tell the police about it because they don't do nothing."

12 Wales Early Action Together programme that delivered ACEs training to police in Wales: http://www.aces.me.uk/

5.3.2 ECM and breach

5.3.2.1 Breach

YOT workers consistently expressed that ECM increased the flexibility around whether to issue children with warnings and breaches for missed appointments. Some YOT workers said that before ECM, there were no processes to discuss whether they should go ahead with warnings and breaches; breaches would automatically happen in a prescriptive fashion, *"if you missed your third appointment you're going back to court no matter what"*. However, ECM provided a forum for case managers to explore whether breaching a child is in their best interest, taking into account their understanding of the child's history. YOT workers stated that when a child has consistently missed appointments, they will consult with the psychologist about whether a warning or breach should be issued, they will also take into account the child's position on the TRM and the level of progress in relationship-building. YOT workers felt that building a trusted relationship with the child was the most effective way to manage risk, and that breaching the child before they had built a trusted relationship with the YOT worker could impede risk management and their future working arrangements.

> ***"So, instead of that real focus which we've kind of been taught to do on consequences and punishment it would be sort of different. Saying, 'oh how come you missed last week, I was really looking forward to seeing you, I thought we were going to go for coffee? Oh, never mind let's go for coffee this week instead'. Or, 'well, I'll come back next week anyway just in case you do decide you want to go for coffee. I know you've said you don't, but I'll just come back because you might want to go for coffee.' And you know it doesn't take that long actually, after a couple of weeks you know this young person engaged. So, we managed to kind of like stay off the breach, we would have previously been back in court. But then after two months he was keeping every single appointment."***
>
> Substance Misuse Worker [Interview 7]

Some YOT workers reported conflict between arguing for a child not to be breached or taken back to court and the responsibility they have as part of the criminal justice system to protect the public. For example, one YOT worker said: *"as much as it's understood that relationships need to be built and they need stability and all of those things. We also have a responsibility to the public to keep the public safe and breaching and taking people back to court is part of the YOT role"*.

Further, one YOT worker explained how a lack of appropriate placements for children can add to the complexity of decisions regarding breaches and custody. Specifically, they highlighted that non-compliance combined with concerns about the child's safety, well-being and harm to others, and a lack of appropriate placements as an alternative to custody, resulted in a custodial sentence for one child.

> ***"I was very much still listing where he wasn't complying and the concerns around his behaviour, but very much still trying to keep him out of custody. And, what was felt in ECM, well it was true, he is so vulnerable, Children's services, they were still searching for a placement for him, they'd been searching for like, three months and no placements were coming up for him. And, the concern was that he was so vulnerable and unsafe in the community, let alone his offending and the risk he was to others, that perhaps the best place for him would be custody, just to keep him safe. Although, we don't put young people in custody on that basis. So, through Children's services, we were trying to go through the welfare route, and there was just no beds coming up."***
>
> YOT Case Manager [Interview 3]

Nevertheless, YOT workers described the discussion around breaches as a meticulous process that considered public protection against the child's welfare and vulnerabilities, and that this was facilitated within compliance meetings. It was evident from the interviews that YOT workers made individualised and trauma-informed judgements about how well a child was complying. For example, taking into consideration previous negative experiences with professionals as well as the level of chaos in the child's life that can affect their ability to attend appointments.

> ***"Their lives are so chaotic they're just, they don't know what time or day their appointment really is. And they're just not there so I don't think that that's necessarily their attitude to not wanting to engage."***
>
> Substance Misuse Worker [Interview 7]

5.3.2.2 Sharing case formulation information with the court

YOT workers felt that sharing the case formulation information in court had also helped judges and magistrates to recognise the child's history and welfare needs, and to consider this in their decisions about breaches and custody.

> ***"When the judge was dealing with his breaches, again he considered you know, this kid's experiences and particularly his bereavement, and his vulnerabilities around his drug use. And, I think when he did sentence him to custody after the second breach, I think he felt … he didn't do that at the first opportunity, and he was considering his welfare as well. But, I think it got to a point where it was like, 'the public need to be protected from you at this point'."***
>
> YOT Case Manager [Interview 3]

However, careful consideration is required when sharing the case formulation information in court. One YOT worker explained his experience of having the case formulation information (namely the child's developmental age) read out in court in front of the child. He reported that this damaged the child's self-esteem and that the ECM case manager had to seek support from the psychologist to help manage this circumstance. When the child is present in court, the sharing of the information from the case formulation report to magistrates has the potential to harm, re-traumatise and responsibilise the child for their offences and reinforce negative behaviours.

> ***"There was one negative, is that in the formulation obviously you've got the age of what we think [the child] was functioning at, which meant they'd heard that in court. We obviously explained it to them at the time but when they were hearing it in court they said they would find it really embarrassing and though, they thought people were making them out as if they were a five year old in a 17 year old's body, and they were raising questions like, 'five year olds don't take drugs like I do, so why are you saying that?'"***
>
> YOT Case Manager [Interview 10]

5.4 Relationships between professionals and children

Several YOT workers expressed that utilising the ECM approach enabled them to develop a more empathetic, close and trusting relationship with the child. YOT workers said they used the psychology supervision and multi-agency support to find innovative ways to engage with the child; as well as changing their practice to develop better interpersonal bonds and emotional support. YOT workers stated that they felt this made children more receptive to the work and intervention.

> ***"I always worked with the young people rather than dictate what they should be doing but I think I have got a better relationship now with young people. And when they come back, if they come back for any other time through the system, then they are more receptive to doing reparation than they were the first time."***
>
> Reparation Worker [Interview 15]

Example of intervention:

Through the case formulation process, a case manager discovered that the child they worked with used their pet (years prior) to disclose their previous experiences of trauma as well as internal emotional states. This information led to the worker using their dog to bond with the child and facilitate engagement in the intervention. The psychologist supported this approach, which was effective for the child.

> ***"There was a report written about they liked their [pet] and they used to speak through the [pet]. ... So, I started bringing my dog in and then we, it was before the formulation. And then in doing the formulation we said about that and then it was like right, we need to continue with that and it did actually work. ... They'd [the child] be like, 'oh, [dogs name] when I was' you know, and then next thing is like, so I'd sort of answer them but with the dog."***
>
> YOT Case Manager

Children's perspective

"I just enjoyed working with her [ECM Case manager] I don't know, I think at the beginning when I first worked with her I was a bit stressed and I don't think I got along with her for I think the first week. … And then she had a dog and I had a dog and then we just started talking about that. And then we started talking about animals so then we just got close from then. … Yeah, we both like similar things like we both love animals."



Furthermore, some children expressed the importance of their YOT workers displaying empathy towards their experiences. They felt that children should be supported by workers who have had similar experiences to them, who can also demonstrate how they have turned their life around.



Children's perspective

"[It helps to have] someone with past experiences to where they've been in the position of someone that's also involved in the YOT, so they can add some empathy and put themselves in the kid's shoes, to understand where they're coming from, and know what they can change for them, as they would have changed for themselves. It would better like that, than someone who doesn't know anything … and they're trying to put themselves in their shoes and go on like they know where they're coming from, and they actually don't. Much better for someone that can actually relate to them and work with them."

"Just I don't know, some of them [role models] it feels like my life started like I am and then it's changed and that's how I like them, init. Because they've pretty much gone through the same stuff that I went through."

5.5 The impact of ECM on children

5.5.1 Consistent, predictable and reliable practice

YOT workers emphasised that children within ECM have extremely traumatic backgrounds, including but not limited to witnessing the death of a family member, significant neglect, physical and sexual abuse, being bullied at school, substance misuse in the home and criminal exploitation. They explained that many of the children have unmet basic needs and have experienced a lack of stability in their lives as well as living in unpredictable environments.

Consequently, YOT workers emphasised how important it was to show consistency, predictability and reliability. They would keep their interactions consistent, be on time, use the same days and times for appointments, and reduce the number of YOT staff working with the child. They would also try and explain what each session might look like so the child knew what to expect from their meeting. YOT workers focused on how they could meet the child's basic needs and used approaches which would help to build a foundation of trust and provide the child with a stable and positive relationship. This included working in more informal settings, for example, taking the child to a location they felt safe in or a place where they could have something to eat. They suggested that ECM had helped develop an awareness of the importance of consistency, which helped the child's initial and continued engagement through their order. Many YOT workers suggested that engagement and attendance at appointments dramatically improved via this approach.

"They were like 'no way am I going to speak to you' or even bother to open the door or nothing. And so, I just kept going back and going, 'okay, well I'll come back this time next week' and I would leave a card with the appointment on, leave it there. So, we started working through that and then yeah, every week then ... she never missed an appointment, she was always there. She quite often was in crisis about certain different things and massive risk going on, but we would just work with whatever she wanted to at that time. And it got to the stage where she would wait in to see us. And I 100% would say that's from just that consistently going back … I wouldn't have necessarily known to keep doing that as consistently."

Substance Misuse Worker [Interview 7]

One child gave a short account of their life prior to their involvement with the YOT, highlighting the levels of chaos and instability they had experienced. They explained how their ECM YOT worker had provided them with stability which they felt was beneficial.

Children's perspective



*"My dad ended up going to jail eventually. And I ended up getting kicked out of most of my schools, nearly got kicked out of primary. And, I don't know, the problem was I always used to think, I used to always go to school and be like, 'why am I misbehaving?' Like, I used to tell myself, 'be good today, make sure you're good today'. Because, if I got in trouble, on the way home my dad would be like, 'why are you doing this, I don't understand? … They hated me [the child's family]. Hated me, yeah? And, I used to sit at the top of the stairs listening to what they were saying about me and stuff, and like, I had to go to family counselling and they used to just tell me how horrible I was. And, I started running away from home, and taking drugs and ****. I was like, homeless for a few months and that, and missing … I was living with [a friend] for a few weeks, not eating or nothing. Using a shower curtain as a towel every day, to dry … I ended up going into foster care because my [family member], started beating [other family members], and then they tried beating up me. And, I went into foster care. … So, I don't know. I was stealing drink off him [carer] and that anyway … and going out getting drunk all the time. Running away again still. Going out, even at that age. … And I ended up staying with my mate, telling them that my carer said it was alright. Social services found out, they moved me into another foster placement."*

Child's experience of ECM

"I get along well with [ECM YOT worker], they've taken me out for food quite a lot of times. … Stuff like that. … Just in the fact that they [ECM YOT worker] come to see me. Being reliable. Just, even though it's their job to do it, just not letting me down and them coming to see me. Just that, in a way. That's supporting me. That's making sure that they're there, they're holding up their end of the bargain to come and see me, because I'm coming to see them. That's important."

"[The additional YOT worker] came round every week, and I would learn again how to bake a new cake. … I don't think it was like, teaching me stuff, it was building a stability. But, that's the only thing that I could say that really benefited me. … Because, I haven't always had stability, so stability's good."

"They've got their GCSEs which is just amazing … a really bright kid, and I think they've just had that stability, and at the same time, they've decided that they wanted to do well, and they worked really hard as well. … They did successfully complete their order without reoffending. I think the main way that ECM has helped with them, is just maintaining that… for them not to have suffered a loss of relationships that they had [previously experienced]."

YOT Case Manager

5.5.2 Children's perception of themselves

YOT workers noted that many of the children belonged to anti-social peer groups, which given the importance children placed upon fitting in with their peers, could lead to experimenting with alcohol and drugs from a very young age. YOT workers linked involvement with anti-social peer groups to going missing and being at risk of criminal exploitation. They also described some children as seeing themselves as a *"gangster"*, motivated by gaining respect from peers and having a sense of *"kudos"* from their criminal behaviours. YOT workers viewed the children as having minimal self-esteem and confidence. They reported that many of the children were unsure of what their interests were, regarded themselves with little importance and expressed their low self-esteem through indirect communication: *"their hoods would be up"*, they would give *"limited eye contact"*, and the conversation would consist of *"one-word answers"*.

> ***"Their confidence is really low, they think everything is their fault. They don't have yeah, they look very negatively at themselves I would say most of the time."***
>
> Substance Misuse Worker [Interview 7]

YOT workers said that through relationship building, they would challenge criminal ideas (such as negative peer involvement) by offering supportive and trustful interactions to help children recognise their strengths within a prosocial world. They would continually reinforce the child as a likable person, with whom they enjoyed spending time with; this was reflected in the children's interviews where they said that their ECM YOT workers had seen past their offending behaviour and always had positive things to say about them.

> ***"Kind of explaining to them that like I've enjoyed the session with them. I'm sure that they know that they have to see us. But actually, I try and take that away and it be like, 'well, that was a really good session, I really enjoyed like spending that hour with you.' Or, 'I think that was really clever what you did.' And ECM has definitely made me much more aware to do that kind of thing."***
>
> Substance Misuse Worker [Interview 7]

Children's perspective



"They'd [ECM workers] always have something good to say, there's never a bad thing that they'd say, they're just general nice people aren't they … the first time I met [ECM case manager] I just - I felt like I didn't want to go and as I say we both got on and I went and done it and it turned out better than I actually thought. … It was just like, it was all laughing, smiling and it was just - I just felt it was nice to be here like."

"She [ECM case manager] just done her job. She spoke to me truthfully, like, open. I don't know. She was just, she didn't make me feel like I was just a youth offender. … She welcomed me in and she like, I don't know, I feel like she invested herself into working with me."

5.5.3 Changing the way the child viewed themselves

YOT workers reported relationship-building as a vehicle to change children's view of themselves and also to role model and provide positive attachment. For one child, who was a victim of sexual exploitation, YOT workers identified the need to re-frame her perception of what constituted a trusting relationship, by providing positive interaction and promoting change in the way she viewed herself.

> ***"[She would] almost like that attention of the older boys, because she'd seen that attention, not as her being the victim of sexual exploitation, but being wanted and liked and needed. From the back of the ECM we recognised that her behaviour and her pattern of behaviours was the fact that she didn't have that kind of support. So, the case manager then built a very good relationship up with the young person and again, tried to change her thought process. That was very rewarding to see her changing and her opinion changing on herself and getting more empowered in believing in herself really."***
>
> Substance Misuse Worker [Interview 7]

YOT workers also reported that as a result of ECM they were more conscious about working in ways which avoided reinforcing children's negative self-perceptions, as well as the labelling and stigma that some of these children had previously experienced. The avoidance of reinforcing negative self-perceptions was considered difficult in some instances where behaviours had to be immediately addressed, but YOT workers stated that they addressed behaviours by carefully framing the conversation in such a way that it mitigated feelings of guilt. This was helped by the support and continual guidance from the psychologist.

> ***"They were very close to one of our workers, they'd [the child] made a few inappropriate comments to them [the worker] and we just wanted to like see how we could bring it up to them without them feeling guilty or remorseful but also knowing that it's wrong and it was inappropriate."***
>
> YOT Case Manager [Interview 10]

Overall, YOT workers reported some change in how the children viewed themselves. Often this was expressed by a change in body language. For example, children seemed less guarded and would engage in and initiate conversation. They also said children developed improved self-value, which again, was enabled by building trusting relationships and providing supportive interactions.

> ***"Things like taking a hat off in a photograph, things like that that you can't measure and maybe don't mean anything to anybody else but when you see that happening, it is massive. Like I said that boy last week making me a cuppa, that was just, you know, you can't measure that can you."***
>
> Special Education Officer [Interview 8]

YOT workers expressed that given the short time in which they work with children, and the level of trauma that children have experienced, it can be difficult to completely change a child's underlying self-concept. However, by providing them with lots of opportunity to try things, children make some progress and develop more confidence in themselves. YOT workers said that a change in confidence was demonstrated when children started to look to the future, and wanted to engage in education, training and achieve qualifications. Furthermore, children successfully engaged in a number of activities during ECM which helped to shape their aspirations and positive outlook for the future.

Children's perspective



"I reckon life's going better than what it used to, by a mile, it's going much better … because I can see what I was like last year and now what I've changed, it's just mad."

"I'd like to work with animals, have my own place and a car."

"They've taught me a lot – well since I've been going to YOT, I started calming down a bit because it's like, I don't know, I can go in there and do my bricklaying and all that, get my qualifications ready for college."

"Hopefully when I go back to college, get higher marks and go into construction … it's achievable if I try, yeah, hundred percent."

One YOT worker said that they started to see children telling them positive things about themselves, and asking to go on educational training courses on their own volition.

> *"Yeah, I think well, you almost notice, you get to a stage where you notice them kind of telling you positive things about themselves that you've maybe told them earlier that you didn't think sank in. And this young person just recently, I've been working with him for a long time now. But sort of education and training was always like a massive issue and he kind of just rang me out of the blue now. Again, young people don't generally ring people anyway, so I would always previously go through his mum like, 'he's got an appointment tomorrow' and he would keep the appointment. But he would never have rung me himself, but he just rang me. It was like, 'can you get me on that [education] course?' So, it's like real like a) that he's now willing to use the phone, he kind of trusts someone enough to ring and ask for their help. Rather than you just sort of trying to give them the help, he's actually asking for the help."*
>
> Senior Practitioner [Interview 6]

Children's perspective



"I'm doing welding. I'm trying to do welding. There's a job that I want to get. … Going underwater and like, welding together … the first time I welded, the man goes, 'is that the actual first time you've ever welded?' I said, 'yeah', because I thought he was going to say, 'oh, I can tell'. And, he was like, I've never seen anyone do that, for the first time. Let me show you what it's meant to look like when you first do it'. And, he was like, 'look how perfectly you've run that', and I was like, 'mad'."

5.5.4 Difficulty identifying and understanding emotions

YOT workers also described children as having exaggerated difficulty in the regulation of positive and negative emotions, and that they would commonly express negative emotions through

anger. They said they would be there to listen to the child and also facilitate informal conversation by naming and acknowledging different emotions in different situations. YOT workers used the formulation to help prepare the child for anniversaries of adverse events (e.g. bereavements) and aimed to identify the reasons for particular feelings. They said that focussing on the underlying causes of the child's emotion, as opposed to telling them about the consequences of their behaviours, fast-tracked engagement from the child. One YOT worker highlighted that by implementing conversation-based work around emotions, they could help alleviate some of the anger the child was feeling, which negated the need for any formal anger management programmes.

Children's perspective



"My emotions aren't normal. Like, obviously it's [the child's brain] not been wired properly. When I've grown up, it's not been made the same way as other peoples. It's weird, when I get angry, I get angry, and then I'm not angry at all. And then, I don't really get upset and like, cry or anything yeah, but when I do, if I cry, sometimes I cry for ages. Sometimes I can cry for a little bit. Sometimes yeah, I could feel proper upset about something, serious that I should be in tears about for ages, and cry for like, a split second and then just be fine again. Or like, be really happy and I don't know … but my emotions are unstable in my head, and that's the problem."

The children expressed difficulty in identifying and describing their emotions; some said their emotions felt like *"one big massive burst"* and explained that they found it difficult to calm down when something had made them angry. However, they generally felt that they were now better able to calm down. They said it helped them to be able to talk to their YOT worker when things were not going well or when bad things had happened.

Children's perspective



"I used to bottle everything up and I think that's why I used to do what I did back then. I used to assault a lot of people like because I used to get everything bottled up, I didn't tell anyone. But now I just tell everyone straightaway and I think that's why I'm so calm now. And I had [ECM case manager] to talk to, and I've calmed down now ever since working with [ECM case manager]."

"We have chats and he [ECM case manager] helps me with stuff. I don't know, someone to talk to and sort stuff out. If something happened or if someone kicks off, he helps me. Because he listens to me. … It's important to have [a YOT worker] who listens to you, understands you, takes you to places and stuff."

"Because last year I couldn't remember I was always angry, I don't know what for, I was just angry at everything and now I see myself as a happier person in general."

Some YOT workers highlighted that substance misuse exacerbated children's difficulty in regulating their emotions. For some children, drug use also increased their risk of self-harm and suicide attempts. As such, substance misuse work was often set as a priority alongside initial relationship-building work due to the need for immediate harm reduction. Many case managers also highlighted the importance of helping the child to reduce their use of drugs because it can hinder the relationship-building process, engagement in YOT appointments and positive opportunities. There were two instances where different YOT workers reported a significant reduction in the child's use of drugs and an increase in engagement as a result. However, working with children to reduce the use of alcohol and drugs proved challenging for several workers, due to the significant work required to help improve aspects of the child's life that have led to their substance misuse. For the two cases above, the reduction in drug use required a change in the environment, as well as continued work with the substance misuse worker.

"Well, definitely for my first boy, his substance misuse [affected his engagement]. And, I can really understand that, and see that more now, because he's not using as much, he's just an entirely different person. And, the way he's engaging with us, is really different. I can see how … it kind of, reinforces how bad it was before, and how chaotic he was. He just couldn't engage."

YOT Case Manager



Children's perspective

"I used to like smash up my house a lot, I have been arrested a few times from smashing my house up and stuff and there are times when I've been in hospital, going nuts in hospital, my mum and my YOT worker and people working with me would come in and help me and stuff when I was kicking off. … Well I stopped doing all drugs, that was a big part of when I was going nuts, at the time I didn't see I was thinking no you're all just doing my head in, but now I can kind of see it a bit more now."

"I think for him at the minute, it's just a big achievement for him maintaining reduced drug use. It is, it's massive. Because, he's managing his problems and things better, without his aggression escalating. That's a massive achievement in itself, for him. He's not reoffended at this point. … The fact that he's engaging well at the minute. He's quite stable in comparison to what he was. I think they're massive achievements for him, and it's helping him to maintain that. ... [And] you can tell he's happy in himself. He's playing [sports], which he really enjoys. … Him and his mum are getting along much better. ... And, I think you can say he's finding his YOT more manageable. He feels like he can cope with what he's being given."

YOT Case Manager

5.5.5 Providing the child with positive opportunities

YOT workers also offered the children opportunities to express their interests as well as shaping new ones. All YOT workers described this process as child-led, allowing them to say what they wanted to do and talk about in conversation. Also, YOT workers spent time helping the children develop ideas about their future. This often led to tailor-made work experience (such as animal rescue and construction) for the child, offering them meaningful opportunities to engage in. Many YOT workers highlighted that the case formulation helped to identify some of the child's interests (e.g. participation in sport). Two YOT workers said that the formulation had identified participation in sport as a positive factor, from which the children had disengaged. As a result, they made efforts to reintegrate sports and leisure activities back into the children's lives.

> ***"It became quite clear early on as well, that actually, they were very good at sports, very good at music and art, but over the past year, had lost interest in all of that in favour of using drugs and partying. … So, the motivation to sort of, do any of their old hobbies just went. … We've become aware it was their [parent] that took them to all these activities, and none of us knew that. And then, [their parent] died and they stopped. … They've got a lot of good points, they're still very talented at sports, arts, music, and they have to be really encouraged in that a lot because they could drop it easily, just without encouragement. So, they are still pursuing some of those."***
>
> YOT Case Manager [Interview 3]

5.5.6 Improving attachment between children and professionals

YOT workers noted that the child's increased ability to reach out to services and independently ask for help was one of the most marked improvements resulting from ECM. Through the relationship they had built with the child, YOT workers begun to introduce them to activities in their local area by taking them to do things they were interested in and encouraging their access to libraries, cafes, community centres, and other provisions. This work aimed to help children increase positive (and prosocial) interactions between people in the community and develop a local support network. Further to this, YOT workers stated that they would use their trusting relationship with the child to slowly introduce other key professionals into the child's life and that this improved the child's relationships with those professionals and their ability to develop other positive relationships.

Interestingly, one child who had previously felt overwhelmed from seeing too many professionals suggested that having a group meeting with multiple professionals and other children in the community could help children to open up, change their lives and ultimately reduce crime. While maintaining their preference for fewer appointments (i.e. fewer one-to-ones), this may be a reflection of the child's progress with building positive relationships and being willing and able to engage with more people towards the end of their order.

Children's perspective

"I reckon they should instead of one-to-ones I reckon they should ask if you want to get put into group sessions and have group sessions once a month instead of just you three or you two going and coming back … pretty much like meetings but you've got other people there with you, so then I reckon if like one of the kids open up they could change that kid's life then isn't it, it could happen … because then you get to know people that's in your community and if you pretty much know everyone, less crimes are going to be caused init."



5.5.7 Improving engagement in education

Many YOT case managers attempted to gradually reintroduce education for children who weren't attending school. This reintegration took place naturally and was often initiated by the child's desire to obtain GCSEs and other qualifications. In many instances they waited until the child's life had become settled enough to reintroduce education and to avoid adding any additional pressure to the child. This was also recognised and supported by the YOTs special education workers. However, for one child gaining his GCSEs was extremely important to him and although parts of his life remained unsettled, the YOT worker advocated for his return for to the Pupil Referral Unit (PRU) and opportunity to sit his exams. Many YOT workers stated children involved in ECM made progress with regards to education.

> ***"So, the one young person I referred so as I say he stopped going missing. His attendance at education went up from something like 5% to 76%, he gained GCSE's, BTECH qualification. He got one part of the Child Sexual Exploitation e-course, came off the child protection register. He had a better relationship with his family, good relationship with Youth Offending Service."***
>
> YOT Case Manager [Interview 6]

Children's perspective

"I went back into school straight away, because I knew that I needed it, because I'm not saying I'm like, smart, or ultra-intelligent or something, but I knew that I was capable of passing my exams, and I didn't want to throw it away because I was so close to finishing school, like, all the years that I have done, what's the point in wasting it away? Yeah, I think they helped me get back onto the PRU. I used to work on the PRU, it was the YOT that helped me get back into it."



5.5.8 Engaging families in ECM

YOT workers highlighted that, where possible, they would engage with the children's family and support them by using positive promotion and trauma-informed approaches, as they too had experienced trauma and were living in the same conditions as the child.

> ***"I think the ECM has made people think more about the family. I think sometimes people can think, oh parents are really letting this family down but when the experience of ECM and doing the formulation and looking at parents experience as well, and you can see it's quite often generational. And it's not about putting blame it's about supporting families to be as good as they possible can be and recognise what strengths they have rather than all the things that they've done wrong in the past."***
>
> YOT Case Manager [Interview 5]

YOT workers stated that working with the family through ECM increased engagement from parents and their trust in the YOT, which in turn, increased engagement from the children.

> ***"Now, I feel like him and his mum are actually … quite trusting of me. They know I'm not going anywhere, at least until his order ends. Yeah, so I'd say we've got quite a good relationship now. And, they both feel now, that the YOT supports them, instead of, I think at one point they were very, just felt like we were always trying to catch them out, or get them into trouble, you know."***
>
> YOT Case Manager [Interview 3]

YOT workers also stated that working with families enabled the improvement of the child-parent/guardian relationship and bond. They discussed the child's progress with parents by showing them their work experience achievements and telling them about their positive behaviours. They said that this process can improve the YOT worker-parent relationship and increase praise for the child's positive activities from the parent. Further, through ECM, one YOT worker had provided a way in which a child and his mother could positively interact and play together:

> ***"She [mother] liked seeing the things that we were doing together and how happy he was doing it. I had taken [play equipment] for him to play with, so this was another key moment as well … we were playing with this [play equipment] and … he just loved it. So gradually she [mother] kind of came over and I said to her, 'do you want to have a go?' 'Oh, I don't think I'll be any good at it.' I said, 'Well, it's good fun though, have a go.' So they had a game together and … the two of them were hysterical … and then there was a little park just opposite, and he said, 'Oh, Mum will you come and play in the park with me?' 'Oh, alright,' and they went and they played in the park together, and he just laughed, and laughed and laughed, and I just thought, I'd never seen an interaction like that between them. So by the next time I went she'd [mother] gone and she'd bought [play equipment] herself and they were playing with it when I arrived."***
>
> YOT Case Manager [Interview 10]

> ***"To show the parents what the young person has done as well. So that they can get a bit of a positive feedback. Because … some of the stuff we do is phenomenal. Really positive things in the community. And our building skills programme that we get young people on in the reparation, sometimes goes into schools and [they] build castles and play equipment. And they are not little castles. We are talking big piece of play equipment. So to show a parent what the young person has achieved is gold."***
>
> Reparation Worker [Interview 15]

YOT workers recognised the important role of families and reflected that, while home environments can be chaotic, it is the child's preferred choice to remain at home with their family. In support of this, the majority of children expressed that their family was the most important aspect of their lives. Children also felt it was important to have continued support from trusted family members and good relationships with their parents and siblings.



Child's perspective

"I made it [the change in himself] mostly for my brother, I don't want my brother seeing coppers come to his house for his brother all the time."

"I never used to get on with my mother but now as I've got older, we're all like close, yeah. … We just used to argue all the time. We used to have arguments all the time but I don't know she's just nicer to me now I've got a better person."

"I just want to be here for my kids really when I'm older… and I want to tell them all my mad stories. … Just being there for your kids really innit … and making sure that they have everything they need."

5.5.9 Desistance from crime

Some YOT workers reported that during ECM children completely desisted from crime, others stated that they believed the ECM approach decreased the seriousness of the offence as well as the frequency of offending. They explained that desisting from crime does not happen quickly because the process of positive change for children who have complex needs can be slow and non-linear. Several YOT workers stated that it can be difficult for a child to progress through the TRM, beyond meeting their basic needs. This is because for many cases there is still a lot of chaos in the child's life, even after engagement with the YOT. However, YOT workers stated that ECM was effective at helping children desist from crime or significantly improving their otherwise predicted outcomes having entered the youth justice system (e.g. escalation in offending).

> *"He had then a huge gap in desistance. I can't remember it was kind of eight or 12 months at one point. So, he did reoffend but again, you have to look at what that, it was quite a low-level offence and there had been a big gap. So, yeah, I noticed a big difference I think you know with him the prediction was his offending was going to escalate. And he would probably be one of the young people who would end up in custody. But yeah, his desistance, he came off the child protection register, everything at the same time."*
>
> YOT Case Manager [Interview 3]

5.6 Transitions

YOT workers reported that there had been a *"big shift"* in transition processes through the ECM approach, including transitions from youth to adult services, from and within secure settings and the transition at the end of an order/intervention with the YOT. This was due to the input of the psychologist in facilitating a more incremental process for the child, and reinforcing the importance of maintaining a relationship through what could be a potentially difficult period.

5.6.1 Continued voluntary engagement with the YOT

YOT workers noted that the improvement in the transition process was a function of the continued voluntary engagement, which could be agreed on a case-by-case basis. Previously, once a statutory order had ended, so would the relationship between the YOT worker and child. Now, the child and YOT worker could opt to continue their relationship on a non-statutory and voluntary basis to support transition to increased independence, and mutually agree on a point when YOT

support will withdraw. YOT workers stated this was in order to provide the children with a natural end where they can begin to disengage from the YOT as other parts of their life settle down, and the child reaches some stability.

> ***"I think it needs to as well [continued engagement from the YOT] because you can't suddenly open these children's lives up in this process [of relationship building] because the role has ended, off you go, you've got to follow it through as a natural course until you're almost not needed and I think that you've just got to follow that journey and it may only be monthly appointments or it maybe only a bit here or a bit there. But it's that process, that link that's still there and they know they've got you until they tell you, 'I don't want you anymore'."***
>
> YOT Case Manager [Interview 1]

YOT workers explained that the continued engagement from the YOT demonstrates to the child that their relationship is genuine. This is important to children who have experienced many fractured relationships. One YOT practitioner explained that their approach to non-statutory engagement involved checking in on important events and communicating positive opportunities that align with the child's interests - *"you remember the birthdays, you might just send a text"* and *"If courses come up, I'd offer him to go on the course and I'd transport him [the child] there. … I'd just take [the child] him to different appointments that were important to him".*

> ***"Often the young person doesn't actually contact you that much or want you to visit them that much. But knowing that you kind of want to rather than saying, 'oh, actually I don't want to see you anymore because your order is over now.' So, it was only you know a job I was doing while you were on the order."***
>
> Senior Practitioner [Interview 6]

The children's continued non-statutory engagement was recognised by one child as their YOT worker showing care and commitment to them. Furthermore, two of the children, whose statutory orders were coming to an end, said that it would be better for them if they could have a bit more time with their worker.

Children's perspective



"Obviously [the YOT] it was made out to be like, 'oh, you have to go up this place, and youth offending' … it's in the name, isn't it? 'Oh, youth offending, it's all bad'. And, when you go up there, it's just like, a bunch of people doing their job, trying to help kids get out of the street, basically. Obviously, some people are just doing it as a job, but some people actually do care, and commit to what they're doing. I don't even have to see [ECM Case Manager] now, but she's like, still making efforts to come and see me and that. And, she like, still comes down and takes me out to have a chat with me, like, keep up with me and that."

"I would like to keep working with [ECM Case Manager] though for a little bit longer. Just until I get my life on track."

YOT workers also said that voluntary engagement allows time for new relationships between the child and other professionals (e.g. probation officers) to form, with the continuation of YOT support. One participant said he had focussed on helping the child to develop relationships with other services that he may need to access in later life by helping repair pre-established negative perceptions the child had of these agencies. YOT workers noted the trusted relationship with the child was used as a platform to enable the child to build better relationships with the wider services.

> ***"Towards the end it was kind of preparing him for transitioning to adulthood and the way he was always going to be involved with agencies through his life that he needed, so the way he could form relationships with agencies for his benefit really because they were there to support him, and sort of - yeah, help him, yeah, just build relationships really because he only had sort of unhealthy relationships with professionals, he didn't really have proper peers or anything like that."***
>
> YOT Case Manager [Interview 10]

Despite the benefits of the flexibility in transitions that ECM brings, it also poses some new challenges for case managers with regards to risk management processes. For example, one YOT worker said that there was a lack of clarity around how to manage risk and safeguarding concerns when working on a voluntary basis with a child who had turned 18. An issue had arisen and the worker was concerned that completing a safeguarding referral could conflict with confidentiality; they were also unsure if there was a need to continue reviewing their assessments on the child. As such, they stated YOT policies and procedures should provide guidelines on how to respond when a new safeguarding issue arises after a statutory order has ended.

> ***"As YOTs we do need to think about well, yeah what about our assessments? Do we still carry on reviewing your assessment if you're still involved with them past the three-month period? I guess YOTs need to think of their own processes in terms of that really. ... They've finished the statutory order, do you open up a new voluntary intervention? Or do you just keep that one open for the recording, case recording? And are you still going to case record?"***
>
> Senior Practitioner [Interview 6]

5.6.2 The exit and 'wrap around' strategy for transitions

Many YOT workers felt that having flexibility around the length of involvement with a child and the potential for a period of voluntary engagement facilitates a more effective exit and 'wrap-around' strategy. Some stated that traditionally the exit and wrap-around strategies are not as thorough as the ones that ECM facilitates. YOT workers said that ECM has more emphasis on ensuring children are safe and have some stability when their contact with the YOT has formally ended. Having a greater emphasis on safety is also crucial because at the point of ending some children are still *"too fragile"* and many are living in chaotic circumstances. YOT workers stated that the credibility of the psychologist's input and the sharing of the case formulation report had enabled successful transitions by opening doors to services that can support the child upon their disengagement from the YOT.

> ***"I think the ECM process has given clinical credibility to good practice, working with children, our most vulnerable children who need, not just our support when we're the YOT but as young adults and as adults for their future, to make sure there are services in place, all the way through and follows them through in terms of that transition. Universal services, not just those softer services, benefits, access to health, access to all those services out there which they're entitled to but traditionally may not always been able to access and the ECM process have really galvanised that now and opened those doors, so without a doubt, it's been brilliant."***
>
> YOT Case Manager [Interview 1]

One YOT worker explained that the psychology support helped them to communicate with several professionals to gain access to out-of-county services and adult mental health for the child. The worker stated that the ECM psychology guidance helped them source relevant contacts and it gave them confidence to reach out to relevant services and effectively explain what was required.

> ***"I couldn't have done it otherwise and especially the transition side of it … because I know I'm not just a support worker but I'm just a support worker you know. They've [the psychologist] trained, they've got the experience, the knowledge of what to say."***
>
> YOT Case Manager [Interview 2]

5.6.3 Transition to and from custody

The ECM approach additionally emphasised that adult services must demonstrate a greater understanding of the needs of children who are transitioning into their care. YOT workers highlighted that they would share information from the case formulation report with custody staff, to help them to support the child in a trauma-informed way.

> ***"The formulation happened before that young person went to custody but when he was there, it gave them additional tools to work with that child. It advocated the need for that child to stay in the young person's wing, rather than be transferred to the adult wing when he turned 18 because his needs were best met there."***
>
> YOT Case Manager [Interview 1]

Several YOT workers stated that the information from the case formulation report also helped inform the way in which the transition was handled for children being released from secure establishments to accommodation in the community.

> ***"I think just with planning his release, what I mainly took from the recommendations from ECM, was just again, being mindful of what the interventions are that we needed within the community, and sequencing them, and him not feeling sort of, too pressured when he was released. That was really important for him. And, that worked well."***
>
> YOT Case Manager [Interview 10]

One YOT worker explained that the formulation report had identified a child's previous residential placement as a positive factor in her life, which she lost when she went into secure accommodation. The case formulation recommendations highlighted the importance of preparing for the child's transition out of secure accommodation and into a suitable residential placement; it helped them to set the child up in her own accommodation with 24 hour support. Another YOT worker highlighted that the formulation helped them to be mindful about priorities and to not overwhelm the child with multiple interventions and professional contact on resettlement.

One YOT worker was working with a child who had been released from custody while transitioning into adulthood (turning 18 years of age). They described spending considerable time sharing information from the case formulation report with other professionals and linking in with mental health services. Sharing this information had allowed them to successfully secure specialist learning disabilities services and accommodation that could support the child. The child involved expressed the importance of the work that the case manager had done to put this support in place, and noted it was a positive experience - *"they sorted me somewhere to live, helped me out with training appointments and stuff".*

> ***"Traditionally a lot of young people we're working with who turn 18, wouldn't have necessarily had access adult services but because this process [ECM] was to follow this young person all the way through, he's been allocated an adult social worker which is really unique, it doesn't happen very often. … He's been able to access specialist learning disabilities accommodation with the right support in place, mental health services."***
>
> YOT Case Manager [Interview 1]

5.6.4 Transition to the Probation service

Many YOT workers highlighted that when the children they work with turn 18, they are not ready to transition to the Probation service and other adult services and thus require significant transition periods to prepare them.

> ***"This thing of our young people leaving us at 18. They don't function [as adults] at 18, they shouldn't be going to probation at 18, I've had trauma about a young person who's so frightened because he's 18 and going to crown court."***
>
> YOT Case Manager [Interview 5]

YOT workers expressed the importance of staying involved when the child transitions into adult services such as probation, as opposed to the case being handed over to the probation officer, without retaining any contact. Also, some stated that using information from the case formulation report had helped prepare probation officers to work with the child using a trauma-informed approach. However, two workers from different YOTs experienced a number of failed attempts in arranging for the child to meet with and eventually transition over to the Probation service. Also the Probation service took a less flexible approach to missed appointments and breaches in contrast to the approach taken by ECM. In one case, the unsuccessful transition led to the child's difficulty in keeping appointments with the probation officer and consequently they were sentenced to custody.

> ***"He [the child] missed a few appointments and then he got sent to prison then for being unable to complete his order which, yeah, it was pretty bad outcome for him really. … Because of the way we were working with him was much more relaxed and we were trying to drill into him that he needed to keep appointments but he just, he wasn't able to. And whereas with us, if he just turned up we'd see him, he was turning up and probation they were like, 'look, you haven't got an appointment, you're going to have to go,' and so he struggled with that. So transitions were really hard."***
>
> YOT Case Manager [Interview 10]

5.7 Management Support for ECM

Many YOT workers stated that they had full support from their managers to implement the ECM approach. They said that management support was essential, particularly when an ECM recommendation conflicted with the National Standards for Youth Justice (2013). They said that managers were more inclined to support YOT workers' decisions because ECM was supported by the YJB and was being trialled across other YOTs; giving a sense of unity in its delivery. Generally, YOT workers felt that ECM was implemented from the top down, which ensured a united approach to practice that ultimately alleviated conflict across the YOT processes. YOT workers said that they were fully supported in providing flexible transitions for the children, allowing them to travel out-of-county to continue implementing consistent, predictable and reliable support. Some YOT workers said that prior to ECM they felt that their managers did not fully support their decisions about how to practice with children, but that their involvement in ECM has encouraged managers to give YOT workers greater discretion in alternative ways of working. YOT workers believed that managers were more respectful of ECM recommendations because of the psychology input and multi-agency involvement in the case formulations.

One manager highlighted that they supported the core philosophy of the ECM approach, as it has given YOT workers new person-centred ways to interact with children when more traditional interventions were not appropriate. Also, it has improved the transition process, ensuring that the YOT does not abandon children during these challenging stages and that the child's needs are at the forefront of their work.

> ***"To me it [ECM] made sense, for me it was about treating children like children and not as offenders and about that child-focused approach. That partnership working and people having clarity together in terms of the journey of a young person and understanding that. So, no I fully supported it and will continue to."***
>
> Head of service [Interview 14]

5.8 Using the ECM approach for all children

The majority of YOT workers stated that they now universally implement aspects of ECM for all of the children they work with (e.g. relationship-based practice and sequencing of interventions) They reported that ECM was a catalyst for increased support from managers to implement the principles associated with TIP across their entire caseload. This level of support has also coincided with added flexibility in the new Standards for Children in the Youth Justice System (2019).

> ***"But of course, once you've referred to ECM I then use that approach with all my, they don't have to be referred to ECM for me to use that approach. So, I use it with all of my young people now. So, I wouldn't be like, 'okay, you're not ECM, I'm going back to doing anger management with you.' I will actually follow the same approach using the same theories but I'm just not able to refer them to ECM."***
>
> Senior Practitioner [Interview 6]

YOT workers said that TIP and relationship-based practice is also being implemented by case managers who are operating outside of the ECM processes. They explained that this is because they have become increasingly aware of ECM and now take ACEs and trauma into consideration during their work with children. It was also suggested that the ECM approach should be provided to more children at the earliest opportunity.

> ***"I think all case managers, whether you're running an ECM case or not, are aware of sort of, ECM approach and TIP, and we apply that as much as we can to all of our cases now. I think I mentioned earlier, even in our compliance panels now, we consider trauma and will refer to sort of, what was discussed in the ECM if it is an ECM case. So, it's definitely trickled down I think, to general practice in the YOT, and our own high risk planning meetings. And, I think the other professionals that we work with, you know, they take all that into consideration in the work that you do."***
>
> YOT Case Manager [Interview 3]

5.9 General YOT culture: ACE- and trauma-informed practice

Almost all YOT workers who were interviewed as part of the evaluation had received the training on trauma-informed approaches (one participant had not received the training). However, at the point of evaluation, several participating YOT workers had not yet worked with children referred to ECM. The purpose of these interviews was to establish any similarities or differences in the use of TIP, within and outside of ECM implementation. Interviews revealed that all YOT workers were implementing trauma-informed approaches which are holistic, child-centred and based on relationship-building. YOT workers stated that in the period following the training, the YOT culture has shifted towards applying an ACE- and trauma-informed perspective, including the use of the child's history to inform and adapt interventions so that they are more child-focused and appropriately tailored to their needs. However, one senior YOT worker stated that further effort is necessary to embed trauma-informed approaches and relationship-building into YOT practice.

> ***"I think it has changed [YOT culture], I think it's certainly changed in the last couple of years since we've had the trauma-informed training. I think there's still more to do, I think that there's definitely been a shift in practice. That has really shifted along with changes in our risk assessment so AssetPlus and the priorities around desistance and strengths-based practice. So, I think that to some extent there is a different culture in relation to how we form and use the practice compared to the way we do currently. So, I think that in many ways there is a more trauma-informed base practice within the YOT at the moment than previously. … When I randomly look at the occasional referral or report or intervention, I sometimes see that there's more to do to embed that trauma-informed approach, that relationship-based approach, as opposed to the risk model. But generally, we're going in the right direction."***
>
> Head of Service [Interview 14]

YOT workers said that when they operated outside of ECM, they lacked the support and guidance of the psychologist along with the benefits of the multi-agency case formulation meetings. For example, non-ECM YOT workers reported that they struggled to gather enough information about the child in one session; explaining that it would often require several meetings over several weeks. Moreover, even if YOT workers obtain some information, they are often unable to assess how accurate this information is, until at least a month of regular relationship-building.

> ***"You can't fill that Asset in, I don't think with one basic assessment, I think you need to be going back and forth. We have the option here obviously that we can go out maybe two or three times before we actually get in, especially if it's a bureau intervention. We won't have a huge amount of time, but I try to go out twice if I can."***
>
> Non-ECM YOT Case Manager [Interview 18]

YOT workers operating outside of ECM do not have access to psychology support and the credibility that this brings when developing an intervention plan that conflicted with the more traditional routes of *"off the menu"* interventions. They reported that this perceived lack of validity made it harder to justify a deviation from a traditional YOT intervention plan and thus affected the extent to which they could apply trauma-informed approaches, particularly when the interventions they delivered were cognitively based.

> ***"I think there is still some concern when young people aren't meeting statutory appointments, where they feel maybe they've got to cover their own backs if it comes to decision making and checking why decisions have been made. It can be considered, well you're not doing your job properly I guess."***
>
> Non-ECM YOT Case Manager [Interview 19]

YOT workers said that they noticed other wider improvements as a result of ECM, such as non-ECM YOT workers being more able to engage in discussion with managers to waive children's statutory appointments. However, advocating to waive appointments was reported to be more successful for YOT workers with ECM cases, and so further improvement is needed to widen this aspect of TIP to all children.

> ***"I think there definitely has been an improvement since ECM, yeah it definitely has. I think now you can sit down with managers and look to waiver statutory appointments. I think you could go further down the route, sort of only the ECM cases seem to be able, where you can have the discussion about wavering that. I think we are getting there and I think people are more able to recognise that we can start from a different perspective where we can just look at improving relationships, self-esteem base it on that, yeah."***
>
> Senior Practitioner [Interview 16]

Also, one non-ECM YOT worker said that having greater access to a therapist or psychologist to support them in delivering therapeutic work would help them to develop more confidence when working with children who have experienced ACEs and trauma. This participant explained how previous access to this support had provided her with additional therapeutic techniques.

> ***"Right I've come to a bit of a brick wall with this young person and having advice from a psychologist or therapist to, 'actually maybe you could try this model or that model.' I know I've worked with young people who've been sexually abused previously and again nothing was working and I had consultation from a therapist and she was saying, 'just clear the room of all toys and just bounce the ball onto the floor, against the wall and just do that constantly' and I thought that's a bit weird that, but it worked, it was really good."***
>
> Non-ECM Case Manager [Interview 17]

In support of the above, ECM YOT workers highlighted how having regular one-to-one supervision with the psychologist had helped them to implement informal bereavement work after some initial nervousness.

> ***"I was nervous about how you address that with him [parental bereavement], because you wouldn't want to make it worse for him. … What was really interesting, and I think most effective for me. … That advice that the psychologist gave around, how to do that bereavement work with him, not as a formal piece of bereavement work, was quite key for me. Because, then I actually did that with – kind of deliberate – but he for some months, he kind of, ran with that, with me."***
>
> YOT Case Manager [Interview 3]

ECM YOT workers clearly felt that they had benefitted from having access to psychology and to lose that support would *"be a step backwards"*. However, YOT workers practicing inside and outside of ECM suggested that that there is still a huge need for some children to access direct therapeutic counselling in order meet their needs.

> ***"I worry that there's not enough therapeutic direct counselling therapy work to support with what we're doing. I think it's a brilliant way to work [ECM] and I 100% agree with it and love practising in that way. But I think there's only so far it can go without sometimes being able to refer young people into specialist services that they need."***
>
> Substance Misuse Worker [Interview 7]

5.10 General barriers to implementing ECM

YOT workers stated that many of the external agencies who attend the case formulation are governed by different policies, legal processes and cultures, which can make it challenging to implement some of the recommendations from the report. One senior YOT worker suggested there was some resistance towards the formulation report from Children's services: *"Sometimes the contents of that report would be at odds with Children's services looked after reports and their assessments and pathway plans*". Senior YOT workers felt that this was when there were recommendations for secure welfare orders within the report, and emphasised wider issues about the availability and access to secure accommodation at a national level.

> ***"So, the principle of ECM and the trauma-informed approach to ACEs was good, but I think that we could have been better in how we engaged with partners. So, heads of Children's services for example would raise an eyebrow at some of the suggestions in some of the reports."***
>
> Head of Service [Interview 14]

Many YOT workers also expressed that they felt the ECM recommendations were undermined by a lack of appropriate residential placements. One worker stated that placements would be more appropriately managed and effective for children whose behaviour stemmed from traumatic experiences, if residential workers followed the TRM. Instead, they said that children were being moved frequently across placements, being moved out of their local authority and that placement providers were not catering for the children's needs.

> ***"I guess there were some limitations in terms of some of the recommendations where some young people have been placed in housing projects which weren't necessarily working for them and recommendations to look for alternative placements and putting them in a stable unit, rather than where they are but those recommendations weren't accepted by that agency who control that arrangement. Or a young person to be placed in a secure environment because of CSE concerns and really the agencies involved weren't really wanting to follow that route."***
>
> YOT Case Manager [Interview 1]

Frequent placement moves contributed to the levels of chaos and instability in the child's life; as well as making it complicated for YOT workers and children to work effectively together. Also, when children are placed outside their home local authority (due to a lack of local placement availability), YOT workers felt that it can make it harder for them to maintain contact and work with the child.

> ***"A lot of our young people are placed [in] the north of England and elsewhere. ... So, I accept that it is very difficult to bring any consistency to that, but where you can, you can. It's the capacity really to stay in touch and to make sure that there's continuity where you can get it. But it's difficult when you haven't got the young person within your own area, to actually undertake that work."***
>
> Head of Service [Interview 14]

YOT workers suggested that the effects of unstable living arrangements could be ameliorated by improving their collaboration with Children's services and housing agencies to enable stable environments for children. Helping children to establish a relationship with core services such as general practitioners, and introducing them to community services such as libraries and youth centres was also intended to provide additional resilience resources for the child, by providing a local support network which promotes stability.

> ***"If they've got a familiar face in a certain provision you take them to for a coffee, they can always say 'hi how are you'. ... It's that sort of link into their communities, it's that citizenship aspect of their life and it builds up resilience."***
>
> YOT Case Manager [Interview 1]

Another reported challenge was difficulty in gauging progress with each child, as expected outcomes involve abstract constructs. For example, improvement of self-actualisation and self-esteem can be difficult to measure or articulate, and progress can be as small as a child engaging with their YOT workers and attending (rather than missing) appointments.

> ***"You see sort of slowly their self-worth and their confidence improving. And you can almost see people move on to start yeah, making plans for their future or yeah, thinking they might want to talk about going on a training course ... talking about you know 'when I get a job' and 'when I have a family'. ... For that young person he was going missing all the time, so he stopped, eventually he stopped going missing completely. He stopped missing school and started engaging with a one to one tutor at home. So, there wasn't you know getting expelled, then there weren't so many arguments with his family. Because his relationships with his family got better. Then his substance abuse gradually reduced, he wasn't in and out of court anymore. So, things just become gradually, gradually more stable. He came off the child protection register, Children's services closed the case."***
>
> Senior Practitioner [Interview 6]

Nevertheless, YOT workers stated that despite some barriers, they felt that the ECM approach was successful in shifting practice away from implementing a large number of standardised interventions towards the use of quality, tailored and holistic approaches to intervention that acknowledged the child's history, context and needs.

> ***"Every young person that came through the system would go on these big projects. ... But now ... our caseloads are a little bit smaller than they ever have been before. But every young person that comes through now, their reparation is tailor-made for them. So if they have got interest in painting or gardening work, then that is what they will do. If they want to go with catering as a career, I will find something in catering for them."***
>
> Reparation Worker [Interview 15]

6. Discussion

Youth justice strategy and practice is changing in England and Wales, moving away from approaches that deliver punishment and narrowly focus on managing the risks posed by children, towards a 'Child-First' approach that recognises the underlying vulnerabilities, needs, strengths and potentials of the child.

There is also a growing interest in developing approaches to working with children who have a history of ACEs and trauma in youth justice and criminal justice services. Increasing emphasis placed on diverting and preventing children from formal contact with the youth justice system has resulted in a smaller cohort and greater concentration of children who have more complex needs, and significant experiences of ACEs and trauma (17,18,27). The YJB Cymru acknowledged that a new approach was needed to effectively work with these children to address their specific needs and to help them achieve positive outcomes. This led to the development of the ECM approach (see Box 2), in Wales.

Importantly, ECM seeks to align with the YJB's definition of 'Child-First' principles and practice (39). The findings of the evaluation were mapped against these principles, outlining where there is possible alignment and tension (see Table 1, Appendix 2).

6.1.1 Attitudes towards TIP

Organisational change theory states that successful programmes of change are those that target and are effective at modifying employees' attitudes towards desired behaviours (53). As such, the evaluation sought to understand the impact of the three-day-training on YOT workers' attitudes. YOT workers were asked to rate their attitude in favour of, or against TIP immediately pre- and post-training.

On average, pre-training, YOT workers were more in favour of TIP than they were against it. Post-training YOT workers attitudes significantly changed, demonstrating more favourable attitudes towards the notion that problem behaviour is adaptive and changeable rather than fixed and intentional, and that change needs to develop from relationships, flexibility, kindness and safety rather than rules, consequences and accountability. These findings were reflected in the interviews, which demonstrated YOT workers' preference for building caring and trusting relationships with children to foster safe and stable environments.

Post-training, YOT workers' attitudes significantly increased towards feeling able to meet the demands of working with children who have experienced trauma; being supportive of and confident about implementing TIP; and feeling stronger system-wide support for implementing TIP. However, YOT workers were no more or less favourable in their attitudes towards the emphasis of empathy-focused staff behaviour and coping with the effects of secondary trauma by seeking support. The interview findings suggest that YOT workers practiced with compassion prior to participation in the training and the delivery of ECM. As such, pre-existing favourable attitudes towards empathy-focussed behaviour may in part explain a lack of change here. Interestingly, while there was no change in favourable attitudes towards seeking support for secondary trauma, the interviews highlighted that one of the key benefits of psychology supervision was the well-being support it provided to YOT workers to help them cope with the impact of working with children who have history of ACEs and trauma. In line with these findings, research suggests that

receiving support from a psychologist can provide appropriate expressive channels for emotions experienced when working with children who have complex needs within the youth justice system, which is essential for maintaining a healthy workforce and to support effective practice (54).

6.1.2 Confidence working with children who have ACEs

The evaluation also examined YOT workers' confidence to work effectively with children who have a history of ACEs. Following the training, YOT workers were significantly more confident in identifying ACEs; working with children who have experienced ACEs; providing intervention and support to children who have ACEs; sequencing developmentally sensitive interventions; and adapting their engagement style to meet the needs of the individual child.

The interview findings highlight that YOT workers who received the training but had not yet worked with ECM were also able to implement trauma-informed techniques and knowledge into their practice, highlighting the importance of underpinning practice with appropriate high-quality training programmes.

6.1.3 Multi-agency case formulation and collaboration

Overall, YOT workers considered the multi-agency case formulation to be one of the most critical aspects of ECM. YOT workers stated that the ECM case formulation moves beyond more traditional risk-focussed YOT assessments (e.g. AssetPlus) to a more detailed and robust assessment of the child's underlying needs, based on an understanding of their history and circumstances from birth. The formulation identified the potential impact of any ACEs and trauma on attachment and behaviour, as well as the child's strengths and existing positive factors (e.g. talents, interests and key relationships). Guided by the psychologist, there was more emphasis on tailoring intervention planning around the developmental needs and interests of the child as opposed to an overriding focus on criminal justice outcomes.

Capturing the full breadth of information on the child's background and history was unique to ECM, and enabled by multi-agency information sharing within the formulation process. YOT workers practicing with non-ECM cases reported significant difficulty in gathering accurate information to complete assessments in a timely manner, whereas the ECM case formulation provided workers with detailed and accurate information about the child within a single meeting. Further, YOT workers felt that traditional YOT assessments do not look at the depth of information covered in the ECM case formulation and are therefore more likely to have gaps in the child's history.

The case formulation also generated a collaborative understanding of the child's history between professionals from multiple agencies (e.g. Children's services, CAMHS, education and youth justice). This understanding shaped a common language to support the child and the implementation of an agreed set of recommendations for consistency of practice. This increased effective communication across professionals working with the child, which prevented duplication of work across the YOT intervention plan.

6.1.4 Benefits of the psychology input and the identification of appropriate interventions

A key element of ECM was the significant input from the psychologist. YOT workers stated that the psychologist's guidance and support were vital to the multi-agency case formulation and delivery of the approach. The psychologist's skills and expertise enabled them to highlight more nuanced issues and make the links between ACEs, trauma and the child's behaviour.

YOT workers stated that a key advantage of the formulation was the developmental mapping exercise whereby the psychologist will interpret information provided by professionals and evaluate the child's social, emotional and cognitive age in comparison to their chronological age. This exercise helped professionals to understand that the behaviour is often a reflection of the child's life experiences and development. As such, guided by the psychologist, YOT workers said they would sequence their interventions to suit the child's developmental needs.

The present findings suggest that recommendations for sequencing interventions (in line with the TRM) also alleviated pressures for YOT workers to simultaneously achieve all of the criminal justice objectives (e.g. offence-focussed work, address substance misuse and provide reparation etc.). This removed focus from the demands of the criminal justice system, and allowed YOT workers to concentrate on the needs of the child (e.g. stability and safety). Children also stated that a reduction in multiple intervention was extremely beneficial to their well-being because they previously felt overwhelmed when working with numerous people and struggled to cope with the volume of intervention prior to ECM. These findings offer an alternative perspective to approaches which encourage multiple interventions because of the various factors identified in assessments. Utilising multiple interventions increases the number of professionals with whom the child has contact, which is in conflict with a trauma-informed approach, for example, minimising the number of professionals involved and focusing on the quality of the child/worker relationship to support change. The ECM approach aligns with the 2017 HM inspection on YOT public protection, which suggested that all YOTs should have the capacity to identify and respond to trauma and other adverse events, by simplifying YOT interventions and focussing on building relationships with children (46).

Interestingly, while the findings suggest the ECM approach reduces the use of multiple and developmentally inappropriate interventions through 'sequencing', they also indicate that adapting interventions to better suit children (e.g. informal conversation on emotions) could negate the need for formal intervention at a later date (e.g. an anger management programme). Many YOT workers adapted cognitively demanding work (such as work on emotions, drugs use and problematic behaviour) to be simpler, which meant they could tailor interventions from any stage of the TRM (including the cognitive readiness stage; see Appendix 1, Figure 1) and apply them in a non-sequential fashion. For example, working more informally on children's self-esteem, confidence and reintegrating education while building a relationship with them. The YOT workers increased ability to adapt interventions enabled them to work in ways that were child-focused, developmentally attuned and meaningful to the child. As such, the findings raise questions about whether it is more effective to sequence interventions according to cognitive readiness (e.g. when the child can meaningfully engage) or adapt all intervention to be simple and developmentally appropriate. This question is important to consider in the context of the evidence base for 'what works' with children involved in the youth justice system.

Nevertheless, a large proportion of YOT workers highlighted that before ECM, they did not always have the discretion to work in ways that prioritised meeting children's needs (e.g. relational working) as opposed to meeting the National Standards for Youth Justice (2013) (51). Also, YOT workers noted that the TRM was as a useful framework to assist them with TIP, to case record why interventions were being delivered in a particular way, for evidencing reasons for not completing specific interventions and articulating the child's positive progress through relational working.

6.1.5 Benefits of the psychology supervision

YOT workers benefited from the psychologist's continued guidance on delivering TIP. The psychology supervision helped YOT workers to develop closer and more personal relationships with children, maintain professional boundaries and to utilise techniques to help children process trauma (e.g. the bereavement of a parent).

Research suggests that it is often difficult for YOT workers to obtain specialist mental health support for children from services such as CAMHS, due to high demand and high thresholds (55). However, YOT workers felt that ECM helped secure provision of such services because of the clinical credibility attached the psychologist's interpretation of the child's need for such services, and their ability to advocate from this basis. YOT workers said they had shared information from the ECM formulation report with other services, which generated greater recognition and support from other professionals and enabled access to services that have traditionally been hard to obtain, such as for specialist learning disabilities, accommodation and mental health services. Furthermore, the formulation report travelled with the child, which was especially beneficial in services where there was high staff turnover and when the child moved location (e.g. placed in a different local authority), as it served as a constant reference to the child's needs and enabled improved consistency of practice.

Overall, despite most YOT workers stating that they worked in a child-friendly way before the implementation of ECM, they felt that the case formulation and the support from the psychologist allowed their work to more closely reach its full potential. While the formulation provides detailed information about the child's history to inform TIP, having a psychologist supervising YOT workers through each step gave them confidence and the authority to work in this way and provide effective responses to working with children who were in crisis.

6.1.5.1 Increased flexibility regarding breach

YOT workers consistently expressed that ECM enhanced their defensible decision-making regarding the child's engagement and compliance, if the decision was that breaching the child was not in their interests. Workers from some YOTs noted that before ECM, there were few opportunities for them to discuss warnings and breaches when a child was not complying and had missed more than three appointments. However, through ECM, they could consult with the psychologist about whether a warning or breach should be issued, taking into account:

- the child's history
- the child's position on the TRM
- current life circumstances that can affect the child's ability to attend appointments (e.g. previous negative experiences with professionals as well and high levels of chaos in the child's life)
- the level of progress in relationship building
- any significant public protection concerns

YOT workers felt that building a trusted relationship with the child is a more effective way to manage risk and increase engagement, as opposed to breaching them in a prescriptive fashion. They added that the YOT should have more flexibility around warnings and breaches for non-compliance when ACEs and trauma are present and that this should not just be available for children in ECM. However, some YOT workers reported conflict between advocating for a child not to be breached or taken to court and the responsibility they have as part of the criminal justice system to protect the public. Although breaches concern compliance with an order, some YOT workers referenced not breaching a child and increased risk to the public as synonymous. This association suggests that some workers assume that not breaching a child increases risk to the public, whereas breaching decreases it. This is a perspective that aligns with the risk management agenda, which has the potential to restrict 'Child-First' practice.

6.1.6 YOT workers confidence in delivering the ECM approach

YOT workers reported confidence in delivering the ECM approach, but it was evident throughout the interviews that they may have developed an overreliance on the psychologist to feel confident in their practice, despite the training they had received. YOT workers stated that prior to ECM there were occasions when their professional opinion was not taken seriously because they did not have the qualifications or therapeutic authority that a psychologist has. This included not having their decisions supported in court, by managers, wider justice systems, and with partner agencies. As a result, YOT workers described the role of the psychologist as a *"crutch"* to their work, which appeared to reinforce their pre-established lack of credibility.

All YOTs were supported by ECM senior practitioners who became 'trauma champions'. These workers were part of the ECM project and were recruited to provide additional support to case managers across the participating YOTs. They developed expert knowledge of trauma-informed youth justice practice by working alongside the psychologist at formulations and in later reviews of the child's progress. They also provided additional support to YOT case managers in the management of their cases, to retain the trauma-informed focus. YOT workers who received support from these 'trauma champions' expressed the benefit of having on-the-ground advice to assist them in building relationships with children and to support the implementation of the ECM approach. Interestingly, some YOT workers seemed to favour relationship-based practice advice from the ECM 'trauma champion', reserving psychology support for when children were in crisis (e.g. moving into care). This is possibly because the 'trauma champions' were also practicing YOT workers, who understood TIP and could help others to relate it to their own work. This suggests that that role of a senior practitioner in the YOT is potentially important for embedding the approach and increasing YOT workers confidence to deliver ECM.

6.1.7 Relationship-based practice as the foundation of ECM practice

YOT workers used relational working as the foundation of all their practice within ECM and as a vehicle for positive change. As part of building relationships with children, YOT workers kept their interactions consistent, predictable and reliable, as well as focussing on meeting the child's basic needs to build a foundation of trust (e.g. taking them out for food and to places where the child felt safe).

Through their experience of working with children and learning from the training and the multi-agency case formulation (e.g. the need for children to form positive attachments), YOT workers said that practice that focusses on relationship-building was critical for children's engagement with the YOT and their receptiveness to positive opportunity. Importantly, increased engagement through relational working can make children less likely to receive a warning or be breached for not complying (i.e. avoiding or missing appointments), preventing further criminalisation of the child.

All YOT workers (e.g. case managers, substance misuse workers, YOT police officers and reparation workers) reported more close and personal relationships with children as a result of ECM. Improvement in these relationships was facilitated by the psychology supervision, the increased emphasis on flexibility around relationship-building, the contribution of the 'trauma champion' and the support of YOT managers in facilitating practice change. Importantly, research suggests that a child's difficulties (e.g. lack of trust in adults) that may present as a consequence of adversity (e.g. lack of adequate parenting) and a lack of opportunity to develop resilience, can make it hard for them to engage in positive opportunity. Moreover, engaging in constructive activity requires children to feel safe around adults, develop relational skills, regulate their emotions and take on information from cognitive lessons (56). YOT workers stated that relational working enabled them to build on the pre-existing strengths of the child, and provide them with stability and positive opportunities. All YOT workers reported continually reinforcing the positive attributes of the children by showing genuine care, providing positive interaction, congratulating them on their

progress and raising aspirations by helping them to understand their potential. Children also expressed that their ECM YOT workers had looked beyond their offending and always had positive things to say about them. The findings suggest that relational working with children can provide them with opportunity to think past their lived experience of trauma by enabling them to trust practitioners and understand their potential for a positive future.

As a result of relational working and positive promotion, the children who were interviewed felt that that they were listened to and that their case managers considered their best interests because they based activities around what they wanted to do. Building trust also provided a safe space for YOT workers to indirectly address the child's behaviours to help them understand the behaviour and its consequences. Guided by the psychologist, they used techniques to communicate this information sensitively and in a way that avoided placing blame on the child.

Given that many of the families were reported to be experiencing trauma and similar environments to the children, YOT workers also utilised a trauma-informed approach with the child's parents/guardians, which improved the level of trust that parents and children placed in the YOT and increased their engagement with the YOT worker. The majority of children in the interviews expressed that their families were the most important part of their life. YOT workers acknowledged the significant role of families in supporting children and spent time highlighting the child's positive achievements and providing ways for parents and children to positively interact together, which enabled improvements in the child-parent/guardian relationship.

6.1.8 Removing criminogenic stigma from practice

The findings suggest that for YOT workers, prioritising the child's developmental needs over a limited focus on offending behaviour and consequences, increases the acknowledgement of the child's individual characteristics, including their age, level of cognitive function and readiness to engage in the interventions on offer. YOT workers stated that delivering interventions that are cognitively focused or inappropriately matched to the developmental needs of the child is *"setting children up to fail"*.

The developmental mapping exercise also proved key in changing the concept many YOT workers had of the children. For example, some YOT workers highlighted that prior to ECM the children they worked with were often constructed as though they were small adults who are fully responsible for their offending behaviour and were thus subjected to continual offender labelling. YOT workers suggested that while they generally aim to practice in child-friendly ways, the ECM case formulation reminded them that children in the youth justice system do not have the same level of functioning as an adult and are in need of care and positive support. Collectively, the findings highlight that ECM enabled YOT workers to take a more trauma-informed perspective to working with children, which developed a culture which seeks to understand the child in order to address their needs and to help them make positive progress.

However, YOT workers felt that more work is required across the sectors to improve how other professionals interact with children, and to ensure that they are treated as children and acknowledged as having different needs to adults. One YOT police officer suggested that their attendance at the multi-agency case formulation improved how they approached children because it enabled them to adapt their communication style and to use empathy-focussed practice. However, trauma-informed approaches often conflict with the role of police officers, given that police are required to hold people (including children) accountable for their actions. As such, more understanding is needed about how police can minimise 'responsibilisation' of children within the policing system, which could be explored via diversionary approaches and improving relationships between police officers and children in communities.

Importantly, when reflecting on their relationships with professionals, children expressed mixed views about their experience with police officers. They highlighted a number of bad experiences including frequent arrests and the police using negative communication. However, children stated that their positive experiences were characterised by police officers showing genuine care and consideration of their background. In Wales, there has been a significant effort to improve how agencies respond to individuals affected by ACEs and trauma, with a large investment in transforming police systems, processes and practice under the pan-Wales Early Action Together (EAT) programme (57,58). As part of this programme, training was delivered across Wales to ensure that police and multi-agency partners have the appropriate knowledge and skill to respond to vulnerability (57,58). Evaluation of this training demonstrated improvements in police awareness of ACEs and trauma, as well as the impact this may have on an individual throughout their lifetime, which enabled them to more confidently respond to vulnerability using an ACE- and trauma-informed approach (57,58).

6.1.9 Multi-agency engagement with the ECM approach

Overall, YOT workers reported good attendance and buy-in to ECM from the other agencies, which enabled them to develop a holistic picture of the child's history. The ECM multi-agency case formulation also provided staff with opportunities to understand the culture and procedures that govern other agencies. This helped professionals to navigate around the restrictions of each service in order to progress with the formulation recommendations, which improved cross-agency communication, professional relationships, and allowed workers to provide better support for each other. However, senior YOT workers reported some tension between Children's services and the delivery of ECM. Given the high-level of complexity of children within ECM, there had been cases where the psychologist recommended that the child should be placed in secure accommodation on welfare grounds, which Children's services did not agree with. Senior YOT workers said that they have to manage this conflict carefully because buy-in from Children's services is critical to the progress of the child and access to services that have high thresholds for intervention. Staff suggested that the YOT could alleviate this tension by strengthening communications with services on what engagement in ECM would entail as well as the benefits of the multi-agency process. At the individual level, senior YOT workers suggested that some workers successfully managed this conflict by developing good professional relationships with individuals from the participating agencies.

6.1.10 Challenges with the ECM case formulation report

YOT workers stated they would like to see more involvement from the child and their families in the case formulation process, so that they can give meaning to their own life experiences within the (psychologist's) report. However, workers explained that it would be inappropriate for children to attend the formulation in its current format because it could cause further harm and/or trauma to the child, and responsibilise them for behaviour that they may have moved on from. The findings suggest that this would be counterproductive to the objective of the meeting, which is to understand the underlying causes of current offending in order to retain the child's best interests and to respond through a trauma-informed approach. Therefore, if YOTs were to include the child in the formulation process, the approach taken should be trauma-informed, individualised and child-friendly, ensuring that they have a safe and positive experience.

YOT workers shared the formulation report to help secure the child's access to universal and mainstream services. In many cases, sharing information from it with other services helped YOT workers to advocate for the needs of the child. However, those services may have received this information outside the context of the case formulation meeting. Other professionals, who have different workplace cultures and procedures could wrongly interpret the aims of the formulation report and view the child's offending behaviour as being a result of their shortcomings and

subsequently treat the child in a deficit-focussed way. Furthermore, as demonstrated in this report, the sharing of the formulation information to magistrates who then communicate the child's developmental age in court (with the child present), has the potential to harm the child.

While the formulation report may contain information on the child's strengths, interests and recommendations for strengths-based practice, further consideration is required to ensure that other professionals do not take the information on the child's traumatic experiences out of context. The YOT must consider the potential of sharing information to secure critical access to services alongside the risk that agencies may misuse this information or use it in a way that harms the child. The case formulation meeting may provide an opportunity for the YOT to agree on what information they share and how it is shared. For example, whether or not the participating agencies have a copy of the case formulation report written by the psychologist, and whether or not the YOT share it beyond the formulation group.

6.1.11 Challenges with restorative justice

The findings indicate some tension between restorative justice practice and the ECM approach. Some YOT workers reported restorative justice as an intervention that can be adapted and implemented flexibly to suit the child's developmental needs, interests and future aspirations (e.g. reduced hours and unpaid work in a vocation they wish to pursue). Other staff viewed restorative justice as an intervention to implement when the child had achieved some sort of stability and was better able to engage in the work (i.e. to be sequenced according to progress along the TRM). Whereas some YOT workers perceived restorative justice as an inappropriate intervention that they should avoid altogether for children who have experienced significant ACEs and trauma. YOT workers expressed this view in particular reference to victim empathy work, where it becomes more difficult to avoid criminogenic stigma and the responsibilisation of children. A more in-depth understanding is required on how to implement restorative practices alongside the ECM and trauma-informed approaches.

In line with the apparent tension in the evaluation, recent research highlights the complexity of restorative justice practice for children who have offended (59). While some research demonstrates 'favourable' outcomes from restorative justice intervention, such as the accountability of the child for their actions, other research has shown that aspects of restorative practice (e.g. restorative conferencing) are ineffective at eliciting a sincere apology and reduction in offending (59-62). Further, there is very little evidence to assess the efficacy of restorative conferencing in achieving outcomes for children who do not have sufficient cognitive and developmental capacity (59).

6.1.12 Transitions

Overall, YOT workers reported that ECM had influenced the way in which transitions were managed; from the youth justice system and into the community at the end of their court order; from youth to adult services; and from and within secure settings. Overall YOT workers suggested that these changes benefited the children.

One of the aspects of transition that ECM advocated for was an incremental disengagement from the YOT, which included the option of continued voluntary engagement with children who had been supported through ECM. This enabled the child and YOT worker to continue their relationship on a non-statutory and voluntary basis, to a more natural ending where the child could progressively disengage from the YOT as other parts of their life settled down or as they progressively engaged with the adult service. This allowed YOT workers more time to build an effective exit and 'wrap around' strategy for the child by securing access to services as the child transitioned out of the YOT and into adulthood, and by helping the child to build trusted relationships with other relevant professionals. However, YOT workers expressed some confusion

over their role in managing risk and safeguarding concerns within the voluntary and non-statutory engagement with the child. This is an area that might benefit from further guidance generally (and for ECM specifically) in terms of clarity on roles and responsibilities in this context.

ECM supported the consistency of workers throughout the child's order and any of the transitions they were going through. When children were required to move out-of-county, managers supported trauma-informed transitions by allowing case managers to continue face-to-face contact with the child. This helped to reduce further instability in the child's life, which workers considered crucial because many of the children had experienced multiple fractured relationships in their lifetime.

Furthermore, YOT workers stated that because of the integrity of the formulation report and the guidance they received from the psychologist in communicating the needs of each child to the wider services they were involved with, they were able to obtain appropriate accommodation and support for transitions into adulthood and successful resettlement from custody. However, they reported problems with children who transition into the Probation service. For example, two YOT workers experienced difficulty organising appointments for children to meet with and eventually transition over to probation. One worker reported that an unsuccessful transition resulted in the child missing multiple appointments with his probation officer, which meant he was unable to complete his order and received a subsequent custodial sentence. This is important because the emphasis within youth justice is to recognise children's specific needs, including the need for developing trusting and positive relationships (52). ECM is flexible around missed appointments and breaches, allowing for greater use of worker discretion. However, researchers have highlighted that the Probation service provides significantly less support than YOTs and there is a substantial difference in expectations – this difference has been described as a 'cliff-edge' of support on transition (63). Crucially, the vulnerabilities present in children also extend to young adults (63), as such, researchers suggest that the provisions offered to support children should also be extended (64).

In line with the above, HMIP (2019) highlighted that children's transfer to the Probation service was not properly supported and that *"more needs to be done to support children through transitions into adult services"* (65). In support of this, the Standards for Children in the Youth Justice System (2019) (52) emphasises that relevant agencies should minimise *"any potential negative impact that any transition may have"*. Furthermore, transitions should be individualised and targeted to the child's specific needs (65,66). A trauma-informed approach to incremental transition from one worker to another is one way in which this could be achieved.

6.1.13 The impact of ECM on children

Children, whether they are involved in criminal activity or not, have immature cognitive, emotional and social functioning and thus have a lower ability to control their impulses when compared to adults. The analysis of ECM case referrals demonstrates that the children in ECM are also extremely vulnerable, have experienced a high number of ACEs and are among the most complex cases in the youth justice system. Such early life conditions inhibit the development of emotional regulation and impulse control processes, meaning children who have experienced trauma and later commit criminal offences are not necessarily choosing to misbehave, but simply struggle to act in a more pro-social way. In addition, children who are in contact with the criminal justice system are likely to have been subject to continual offender labelling, social injustice and exclusion from society (66). Collectively, these life experiences will contribute to the way the child thinks about themselves and the world around them.

The way in which the child views themselves (e.g. as an offender) coupled with their existing vulnerabilities, can act as a barrier to positive change (66). In line with this, prior to any significant relationship building work, YOT workers described the children they worked with as having minimal

self-esteem and confidence, with a general negative perception of themselves. However, by providing positive and trusting interactions, they believed that children changed how they valued themselves, by looking to pursue interests and career prospects, wanting to engage in education and training, achieve qualifications and pursue career goals. Findings from the interviews with the children demonstrated that they had developed aspirations related to their work experience and felt hopeful about their future.

Furthermore, it was evident from interviews (with YOT workers and children) that the children had difficulty in identifying, communicating and managing their emotions, which led to unhealthy coping mechanisms and challenging behaviours. However, following the work delivered by ECM, YOT workers and children reported improvements in emotion regulation, for example, an increase in the child's ability to calm down when they are feeling angry and upset. These findings are significant because they support practicing in a way that encourages the child rather than a way that punishes or problematises them. Other researchers suggest that providing children with constructive positive interactions can help them to understand the consequences of their actions, how to control their emotions and behaviour, and as a result, reduce criminal behaviour (67). In support of this, many YOT workers reported that during ECM, children had either completely desisted from crime, or had a reduction in the number and severity of offences.

It is not easy to gauge the exact progress children make through ECM, particularly regarding positive outcomes such as improved confidence, future orientation, and self-worth. YOT workers highlighted that children's increased engagement with the YOT was in itself a vast improvement. Other benefits noted from the ECM approach were marked improvements in children's efficacy in reaching out to services, engaging with other professionals, asking for help on their own volition and engaging in positive activities where there was previous disengagement (e.g. sports, education, training and employment).

6.1.14 Barriers to children's positive progress

6.1.14.1 The need for more appropriate accommodation placements

Many YOT workers expressed that a lack of appropriate accommodation placements can undermine the ECM approach. They reported that children were being moved frequently across placements due to residential staff's inability (e.g. due to a lack of training) to manage the child's behaviour. YOT workers used information from the case formulation report to explain that the child's behaviour was a result of their experiences and to demonstrate the practice required to meet the child's needs. However, ultimately it was felt that residential staff need to receive training to develop their understanding of the link between ACEs, trauma and behaviour to improve their approach to children with complex needs. Additionally, due to constant placement changes, and a lack of suitable placement availability, children can sometimes be placed outside their local authority area which can make it hard for YOT workers to continue to build and maintain a relationship the child and to maintain consistency of practice. This adds to the level of chaos and instability in the child's life.

6.1.14.2 The need for more therapeutic counselling

ECM case managers felt that they had benefitted from having access to psychology support and to lose that would *"be a step backwards"*. YOT workers benefited from having the psychologist guide them with trauma-informed approaches and techniques. However, YOT workers practicing inside and outside of ECM suggested that that there is still a huge need for some children to be able to access direct therapeutic counselling to support the work the YOT are doing. YOT workers felt that ECM helps children at a crisis-driven time, but that it does not deal with the acute, core issues of trauma that require direct specialist therapy. In addition, involvement with the YOT is time limited, and some children require significant long-term support to come to terms with past life events.

6.1.14.3 Measuring children's positive progression

Recidivism remains the primary outcome of concern for the youth justice system (16). The evaluation was unable to assess re-offending rates, but research highlights reoffending is a measure of reduced negative activity and therefore does not take into account any increase in positive prosocial activity (16). As such, focus on reoffending alone, can overshadow meaningful progression made by children. However, the inclusion of positive measures of progress (e.g. measures of improved self confidence and self-efficacy) may tell a more accurate story of the child's journey to engagement in positive opportunity, the development of skills for the future, and a subsequent reduction in criminal activity.

Capturing quantitative improvement in positive outcomes for children in youth justice may be difficult (68). However, future research should develop a meaningful and child-friendly way of measuring positive outcomes that are related to healthy and positive lifestyles (16). As such, in line with recommendations from other research, the youth justice system could consider placing more emphasis on positive outcomes as indicators of YOT intervention 'effectiveness' (16), which will in turn give rise to 'Child-First' practice. Finally, research highlights that YOT inspections have an important influence on practice and have traditionally focussed on monitoring adherence to processes and procedures that concern safeguarding, risk of harm to others, and the likelihood of re-offending (69). As such, to continue the development of a positive youth justice, YOT inspections must also consistently consider strengths-based approaches in the assessment of quality of work.

6.2 Limitations of the evaluation

- There was a small sample size for the pre- and post-training surveys, and no follow-up survey (e.g. six or 12 months later), which may lead to bias.
- A lack of a control condition to compare the outcomes of the survey means any observed impact cannot be solely attributed to training participation.
- Questionnaire/survey data were self-reported. As such, survey responses are liable to recall capacity of the training and self-desirability bias.
- There was a large number of missing data in two subscales of the ARTIC-45. The reason for this is unknown.
- The questions used in the survey were derived, where possible, from validated sources (i.e. the ARTIC-45 scale to measure workers attitudes). However the questions about workers confidence were created for the purpose of this evaluation, which affects the reliability of those survey results.
- Findings regarding the implementation and impact of ECM relied on retrospective and qualitative feedback.
- At the time of the interviews, some YOTs were going through significant changes to the way they operated, which may have impacted on the ability of some YOT workers to deliver the ECM approach.
- Due to time limitations, quantitative data on positive outcomes was not collected.

6.3 Conclusion

In the youth justice system, there is increasing recognition among professionals that approaches which focus on managing risk and enforcing punitive consequences often overlook the needs of the child and can be largely ineffective for achieving positive outcomes. However, some YOTs are reshaping how services are delivered to enable a 'Child-First' and trauma-informed approach to be adopted.

The findings of this report have highlighted that in Wales, there has been a shift in youth justice, with an increase in ACE- and trauma-informed awareness and practice. Training on ACE- and trauma-informed approaches and the delivery of ECM have galvanised this shift, allowing some YOTs to move towards a more holistic approach that focuses on understanding what has happened to a child and the complex issues they experience, through which they are able to improve the support they provide to children, to develop their strengths and realise their potential.

The findings demonstrate a number of benefits to the ECM approach, including a more comprehensive understanding of the child, effective collaboration across agencies, the delivery of meaningful and developmentally appropriate interventions and the provision of services that can be hard to secure for some children. Furthermore, ECM enabled YOT workers to take a more considered view of breach, and a more trauma-informed approach to various transition processes.

Overall, both YOT workers and children reported marked progression in positive outcomes as a result of ECM. Children developed positive relationships with their YOT worker and professionals from other agencies, more confidence to reach out to services using their own volition, improved emotional-regulation, greater self-worth and a positive future orientation. However, the findings suggest there is still more to do to embed trauma-informed and 'Child-First' approaches into the youth justice system as a whole.



6.4 Recommendations

The following recommendations should be considered:

- It is recognised that TIP is in its relative infancy within the youth justice system, and further research is required to build an evidence base on its use and effectiveness.

- All services dealing with children who have a history of trauma should consider training to improve their understanding of the impact of ACEs and trauma on the child's behaviour. This will allow children's needs to be better understood and a consistent application of approaches across agencies involved with the child and their family.

- Continuation of work in YOTs to embed trauma-informed approaches to working with children who have a history of ACEs and trauma, and the adoption of relationship-based approaches to meet their needs.

- Continued engagement with health and psychology services to maintain the added value that the psychology input has on the range of responses the YOT can utilise when working with children who have complex needs.

- A key role identified in supporting practice change is that of the senior practitioner or 'trauma champion' in YOTs. Further development of this role may increase YOT workers confidence and reduce overreliance on the on the psychologist for validation of their practice.

- Further emphasis on preparing and helping other services to be part of the multi-agency case formulation, with the aim of improving attendance and participation from partner agencies.

- Further guidance on what information YOTs can share from the case formulation report with other services to ensure that the information is used appropriately.

- Increased opportunity for the child's voice to be incorporated in the creation of the case formulation report. The approach taken should be individualised and child-friendly to ensure that children have a safe and positive experience.

- Consideration of the benefits of continued voluntary engagement with the YOT for children who have complex needs and are involved in various transition processes (e.g. the transition at the end of a court order and from youth to adult services). Voluntary engagement should facilitate gradual disengagement of the child from the YOT, particularly where children have significant relationships with YOT workers and longstanding YOT involvement.

- Further research is required to build an evidence base on relationship-building interventions to assess 'what works' for children with complex needs. This could be investigated in relation to positive change and could also consider the contribution of the ECM approach.

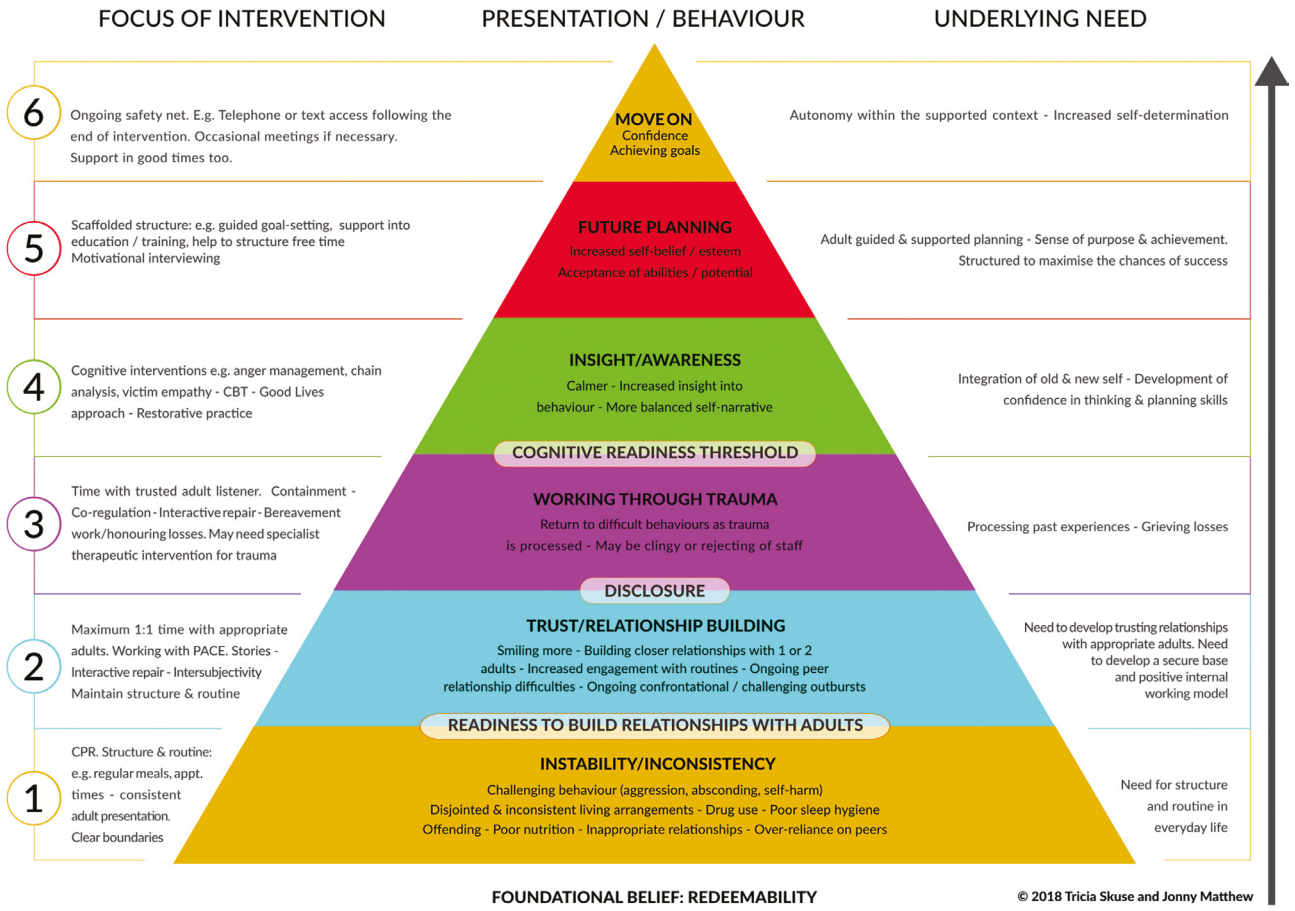
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Appendix 1

Figure 1. The Trauma Recovery Model (https://www.trmacademy.com)



Appendix 2

Table 1.Evidence aligning ECM with the YJB's definition of 'Child-First' Principles.

'Child-First' Principles (YJB Principle)	Evidence of consistency	Evidence of inconsistency
Prioritise the best interest of the child, recognising needs, capacities, rights, and potential. All work is child-focused and developmentally informed.	YOT workers suggested that the ECM case formulation helped reinforce their perception that the children they work with are vulnerable and in need of positive support rather than punishment. The findings suggest that during case formulations, the reasons for offending were explored by understanding what the child has experienced. Assigned interventions were derived from these experiences as well as further consideration of the child's physical, cognitive, emotional and social needs. Positive factors in children lives were also explored (e.g. strengths, talents and prosocial activity) and emphasis was given to promoting them. During the ECM process, YOT workers aimed to provide stability for the child and a relationship that they viewed as reliable and trustworthy, as well as the sequencing of interventions to match the child's needs and cognitive ability. YOT workers stated that the psychology led developmental mapping exercise, whereby the psychologist would evaluate the child's emotional, social and cognitive age, helped them to deliver traditional interventions (e.g. anger management) in ways that were developmentally appropriate and trauma-informed (e.g. informal conversation about emotions).	The findings demonstrate that the conditions placed on orders (notably reparation) and the requirement to follow National Standards (the 2013 version) could sometimes be in opposition to the ECM approach (and recognising the child's needs). This was because they were too demanding or inappropriate for some children given their experiences of trauma and their physical, cognitive, emotional, and social abilities. Nevertheless, ECM case management allowed for flexibility in determining what was appropriate for the child and enabled defensible decisions to be made if activities were not in the best interests of the child or if the child was not in a position to meaningfully engage.

Promote children's strengths and capacities as a means of developing their pro-social identity for sustainable desistance, leading to safer communities and fewer victims. All work is constructive and future-focused, built on supportive relationships that empower children to fulfil their potential and make positive contributions to society.	The findings suggest that the foundation of ECM is for YOT workers to build positive and trusting relationships with the children they are working with. This is done by workers showing consistency, predictability and reliability in their engagement with the child. As part of the relationship building process, or once a relationship has developed, YOT workers engaged the child in activities that interested them. This included vocational activity to help the children to develop their personal strengths and abilities and to help them view the future with hope and optimism. YOT workers stated that they were aware that the children's past experiences of services may have been negative. They aimed to gradually introduce the child to participation in social activities with other professionals, to shift any negative perspectives and to support the development of trusted relationships with individuals from wider services.	YOT workers shared the formulation report with relevant partner agencies to obtain additional support for the child (e.g. appropriate accommodation and mental health services) and to communicate the child's needs to professionals from wider services. However, different cultures and processes govern the wider agencies, which raises questions about what information from the case formulation report the YOT should share beyond the case formulation meeting. This is important because there is a risk that other professionals could communicate this information in a way that harms the child (e.g. sharing information from the report in court, with the child present). They could also misinterpret information in the formulation report and view the child's offending behaviour as resulting from their perceived failings and subsequently treat the child in a deficit-focussed way, which is counterproductive to the objectives of the ECM approach.
Encourage children's active participation, engagement and wider social inclusion. All work promotes desistence through co-creation with children.	As part of reparation work and relationship-building, YOT workers explored the interests of the children and provided positive opportunities for them to engage in. They also focussed on building positive networks of support for the children. For example, YOT workers would introduce children to wider services and local provisions (e.g. encouraging their access to libraries, cafes, community centres etc.), and help them to integrate sport and other interests into their lives. The findings suggest that as a result of ECM, there was a reduction in the use of multiple and inappropriate interventions and a focus on increasing meaningful engagement from children. This resulted in intervention plans being more manageable for children. The ECM approach helped YOT workers to build trusted relationships with children, which also led to improved engagement and a reduction in children missing appointments (and the need to breach).	The findings suggest that whilst the child may be able to have some control and choosing power of the selected activity, engagement in some activities are not by choice but rather by court order following restorative justice principles. The findings also suggest that restorative justice may not be suitable for children who have experience of ACEs and trauma, as well as high-level development needs. As such, there is a wider question as to whether it is meaningful to deliver it to children who are not cognitively ready to engage in it. Children (and their families) do not attend the initial case formulation meeting and it would be difficult (and potentially damaging) to include them. However, it is recognised that future implementation of the ECM should consider developing a safe way for children to share and apply their own knowledge and interpretation of their lived experiences.

Promote a childhood removed from the justice system, using pre-emptive prevention, diversion and minimal intervention. All work minimises criminogenic stigma from contact with the system.	This was achieved by YOT workers showing consistency, predictability and reliability in arranging and during appointments as well as advocating for the needs the child within breach and court processes. As part of the relationship building process, or once a relationship was developed, YOT workers engaged children in activities that interested them. This involved vocational activity to help children to develop their personal strengths and abilities, which helped to promote more positive views about their future. Workers also assisted children to widen their support networks and to engage with community based services and services away from the criminal justice system. As noted above, through ECM, there was a reduction in the number of interventions imposed on the child. Further, the case formulation enabled a coordination of support across the YOT and wider professionals, which promoted the use of pre-existing relationships to deliver interventions. The reduced the number of professionals working with a child at any given time. Through ECM and with the support of the psychologist the YOT worked in ways that would minimise accountability of the child for their behaviour, by using methods such as indirect conversation about sexually inappropriate behaviour towards staff and by maintaining positive interactions with the child. Through ECM, a consistent multi-agency response to the child was formulated. For example, YOT police officers also suggested that ECM had given them more consideration of the child's needs and the reasons for their behaviours (e.g. resulting in them using empathy-focussed practice and adaptation of communication style).	The ECM process showed promise in increasing positive aspects of the child's life that may lead to desistance from crime and further criminal activity (e.g. future career aspirations). However, when children enter the formal youth justice system, the principles of the ECM approach may be more beneficial if they are provided to any child who has experienced trauma and not just those who meet the ECM criteria. Specifically, relational working and interventions that are flexible and informed by the child's life experiences, social circumstances and development needs should to be provided at the earliest opportunity to further shape and cement positive outcomes for these children. YOT workers felt that despite working in child-friendly ways through ECM, there remained some pressure from wider criminal justice professionals to implement offence-focussed work with children, which the ECM practice recommendations had deemed inappropriate. They also suggested that further work is needed across the criminal justice sector to prevent children from being subject to offender labelling, having unrealistic expectations placed on them and for children to be viewed as children and as having needs that are distinct from adults. The findings also suggest that for YOT police officers it may be difficult to fully implement trauma-informed approaches as they can contradict with the role police have to hold people (including children) accountable for their actions.

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