

## Our Clients, Our Services, Our Impact

*Pulse* is a series of briefings from The Forward Trust for staff, partners, commissioners, and stakeholders to communicate:

- **Insight** from our research team's analysis of client data and other findings
- Examples of **innovation** and continuous service improvement
- Evidence of our personal, social and economic **impact**

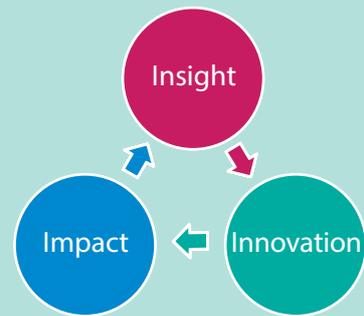
We also aim for these briefings to contribute to wider policy and practice debates.

The Forward Trust (Forward) came into being in July 2017, through the merger of two established organisations – RAPt and Blue Sky. We provide a range of care, support and employment services to people struggling with drug or alcohol dependence, or who have a history of offending. Despite our clients being amongst the most marginalised in society, we believe in everyone's ability to transform their lives and to achieve recovery from a lifestyle of addiction and crime.

This first issue of *Pulse* is based on our most recent client data across substance misuse services both in prison and the community and also our employment services. It addresses three questions:

- **Who are our clients?**
- **What services do they receive?**
- **What do we know about our impact?**

We also focus on specific items of interest and discussion points, and include a data compendium for detailed reference.



### Who are our clients?

Analysis of client data across all our services shows that we engage with a wide and diverse range of people but that our 'average' client is **male, aged 30-40**, will have been using heroin or alcohol as their primary substance, will have a long history of offending (most likely to have committed a violent offence or theft) and will have a limited employment history (one in five of our clients has never worked, at least not in the formal economy).



We have a long track record of enabling transformational change for this primary client group and have thousands of examples of clients who have left behind destructive cycles of behaviour, thrill-seeking and denial, to move forward in life with a stable family, a legitimate job, and sense of belonging.

The number of **women** we support (9% of prison clients and 31% of community clients) is representative of our target populations. We have tailored approaches in women's prisons to address the multiple and complex needs of female offenders (insight from this work will feature in a future edition of *Pulse*).



Our data shows that we engage with disproportionately fewer clients **aged 50+** than the general offender population in prison (8% compared with 16%) though in the community we engage far more from this age group, over 20% of clients. We also engage fewer clients **aged 18-20** than the general population in prison (2% compared with 5%).



In response to these insights we need to ask: How might the services we offer, and how we offer them, need to change and evolve? For example, we may need to recruit more peer mentors who reflect these under-represented populations. Or, in the case of younger offenders, to develop programmes that address gang culture.



Finally, our data shows that our clients are broadly representative of minority ethnic populations both in prison and in the community. However, there is always more we can do to engage particular ethnic groups. For example, we will be working with The Shannon Trust, which uses peer-based learning to support offenders who struggle to read, and as part of this work, are looking to engage more with the Gypsy and Traveller community (11% of The Shannon Trusts' readers in prison are Gypsies and Travellers – they represent 5% of the overall prison population – who prefer learning away from classroom environments which carry memories of stigma and discrimination). We will be undertaking a diversity review of our services in the coming months to identify other minority ethnic groups for whom we can enhance our service through innovation or partnership.

## **IN** FOCUS: Loneliness and isolation

Analysis of client data shows that 70% of our clients in prison were single prior to their imprisonment. Our clients often lack stable emotional relationships; they have many 'acquaintances' but few true friends. When people leave prison and choose to leave behind these acquaintances and their old lifestyles, they often feel isolated and alone. In desperation, they can return to old ways and old faces – bad friends are better company than no friends at all.

*"I felt so terribly lonely I wouldn't have been happy if I won the lottery"*

- Forward client on leaving prison.

Underpinning our work in substance misuse over many years is therefore a belief in the power of connection as the true antidote to addiction and anti-social behaviour – Forward has extensive experience of fostering healthy, mutually supportive relationships through fellowship and recovery communities. The success of Blue Sky (now part of Employment Services) is also underpinned by the importance of connection and mutually supportive relationships - initially, with other ex-offender employees, and thereafter with new friends made through onward employment in the real world of work.

We are also raising funds to expand and evaluate our Family Service - helping more of our clients to re-build or improve their connections with loved ones. This work will evolve into a wider strategy for improving the relationships of our clients not only with family and friends but with peers, employers and the wider community.

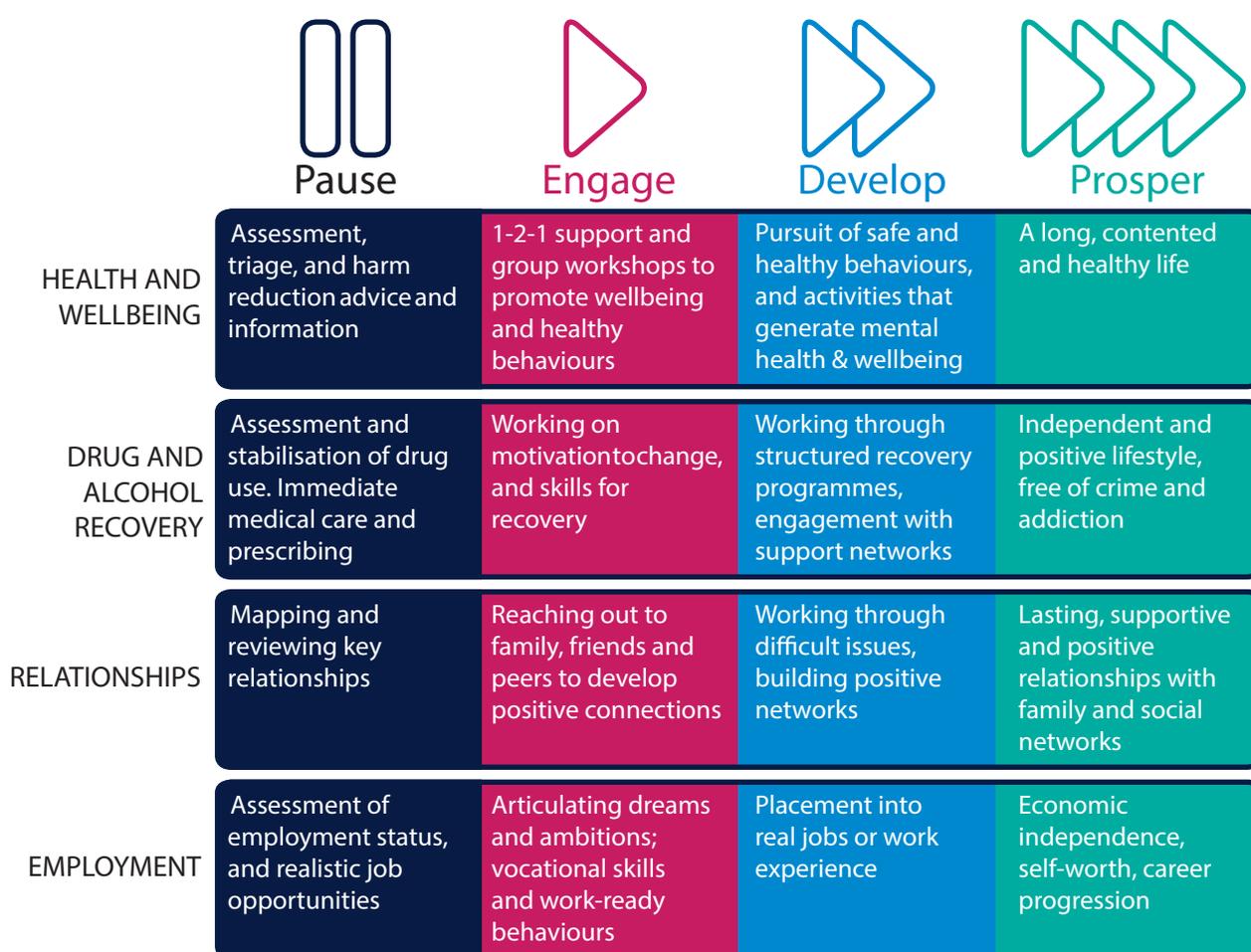
*"I've met new people through work who are on the same journey... I've made new friends, people who invite me for dinner"*

- Forward client

## What services do our clients receive?

Following our merger with Blue Sky and the expansion of our services in prison and community, Forward now offers clients a dynamic range of services that provide care and the inspiration to believe in change, backed up with clear opportunities for progression, facilitating the small steps that lead to lasting change. While every individual's journey is different, and rarely smooth, our services are designed to help clients 'pause', think about their situation, build belief and motivation, engage in interventions and programmes to develop new ways of thinking and behaving, then progress to more in-depth personal development, before ultimately moving forward with the capacity to prosper in life.

At each stage of the journey, progression is enabled by the 'living proof' of peer role models and by networks of support that provide encouragement and affirmation while also instilling 'real world' values of personal responsibility and accountability. (In the coming months, we will be developing a detailed catalogue of existing and planned interventions that map on to this journey.)



We reach **15,000 people** a year – in the case of drug and alcohol recovery, the service area where we have most clients and the most established data set, over 7,500 clients receive clinical and medical support and 1,600 complete structured recovery programmes. In the coming 12 months we will establish an efficient mechanism for collecting data for all service areas, enabling us to report on both the total number of people who pause and engage across the entire range of our provision, and the proportion of those who then move forward at each stage of progression.

## FOCUS: Declining participation in 12 step programmes

Forward developed a model for intensive abstinence based programmes in the 1990's - known as the RAPt programmes. By 1999 this model was being implemented in six prisons and its manual was the first to receive full accreditation from the Ministry of Justice 'CSAAP' panel. It has been refined and updated since with specific versions for those who are alcohol dependent, women prisoners, and a version for those serving shorter sentences (The Bridge).

By 2012, we had developed clear protocols for how these programmes could be delivered in the most effective way, had achieved a benchmark completion rate of 65% (despite the emotional demands of participation and frequent drug testing for compliance), and had published independent impact research that used PNC analysis to demonstrate that the one-year re-offending rate of RAPt completers (at 31%) was 18 percentage points below that of a comparison group receiving shorter, skills-based programmes.

That year, the number of prisoners in English prisons going through 12 step programmes peaked at around 1,200. With the proven success of these programmes, that number was expected to rise, but over the last five years, the opposite has been the case. In 2017, only around 500 prisoners will get access to these programmes, despite the level of drug problems in prison continuing to rise. The reasons for this decline are 1) prison regime restrictions, in which staff and Governors struggle to provide the necessary settings and support for the programme to be delivered, and 2) changes in funding priorities with less budget allocated for abstinence-based programmes.

How can we respond to these challenges? We will continue to strive to deliver the proven intensive model wherever possible, but at the same time are conducting research and development work to assess what key 'change factors' from these programmes can be incorporated into other models, and delivered in more flexible and accessible ways – for example online, or in less intensive settings.

### What can we say about our impact?

With the dedicated support of frontline staff who record our client data, Forward has an unflinching commitment to reporting impact, seeking independent third-party validation for results wherever possible. As outlined above, we are aiming to capture the number of people who engage in our services and the proportion who progress through each stage of the pathway. This data will be used to inform how and where we need to improve performance.

As well as improving performance, our ultimate aim in collecting and analysing data is to communicate our achievement of key social outcomes to partners, commissioners, funders and stakeholders. For some of these outcomes we already have independently verified data sets, for others an emerging body of qualitative and quantitative data that we will build on over time.

## Social outcome

## Existing evidence

## Evidence in progress

### Reduction in re-offending, and long term recovery



- 23% reduction in re-offending for Blue Sky employees
- 65% reduction in volume of re-offending for RAPt Substance Dependence Misuse Programme graduates
- 18% lower re-offending rate for programme graduates compared to those receiving other interventions

- Impact on re-offending and recovery from a wider range of Forward client pathways.
- Longitudinal study of long-term recovery, alongside personal accounts of recovery from programme graduates

### Improved physical and mental health



- 50% reduction in the severity of symptoms of depression for those completing our SDTP programme
- 25% reduction in severity of symptoms of anxiety for those completing our SDTP programme

- Now routinely collecting data through our 'health and wellbeing tracker' to record smoking cessation, GP registrations, etc
- New studies to assess impact on drug related deaths, Hepatitis/HIV.
- Identifying and measuring proxies for improved health such as stronger social networks, improved personal care and life skills

### Positive social contribution



- Every client who completes a job placement with Blue Sky Agency generates £18,600 net benefit to the state
- 43% of Blue Sky employees progress to permanent employment elsewhere, continuing their contribution as tax paying citizens
- 75% of Forward Apprentices moving onto permanent employment, contributing as above

- While we already have strong indicators of positive economic contribution stemming from employment, we are also looking to collect data on other forms of positive social contribution such as:

- volunteering,
- parenting,
- participation in communities of interest

We also plan further economic analysis of the benefits of moving ex-offenders into employment

## IN FOCUS: Mental health - Symptoms and responses

In 2015 Forward (formerly RAPt) published research which showed that 71% of prisoners engaging with substance misuse treatment presented with one or more mental health symptoms, with an average of 3.4 mental health problems per client. Since April 2017 we have been systematically screening all clients who engage with our services for mental health problems. (As well as informing frontline care-planning, collecting this data will allow us to better understand the needs of our clients and the impact of our interventions on clients' mental health and wellbeing.) Analysis of this client data shows that a significant proportion met the clinical threshold for depressive (44%) and generalised anxiety (45%) disorders. Just under a third of our clients would warrant referral to prison mental health teams as they experienced moderately severe or severe symptoms (27% for depression and 37% for anxiety).

Given these insights, it is clear that responding to mental health symptoms should be an integral part of substance misuse treatment. That is why we have been developing a suite of interventions and resources to support our clients with their low level mental health and associated needs, including anger, sleep problems, stress and anxiety management. Mindfulness, which has a growing evidence-base, has also been incorporated into our service delivery, and we are developing a pilot eight-session module to develop its practice.

We also know that for those engaging with our Substance Dependence Treatment Programme (SDTP), the severity of their symptoms of depression reduces by 50% and of anxiety by 25% - similar benefits could be extrapolated to the Bridge (a shorter programme, six weeks as opposed to 12) and Alcohol Dependence Treatment Programme as they use a similar methodology to SDTP.

While we do not yet collect mental health statistics for clients of Employment Services, there is a wealth of anecdotal evidence from Blue Sky employees of the impact of work on their self-esteem, and of how the structure and routine of work results in a healthier lifestyle and enhanced wellbeing.

*"When I left prison I got depressed, stressed, lost weight... now I feel happier, healthier, more like the person I'm supposed to be" - Forward Employment Services (Blue Sky) client*

### Find out more

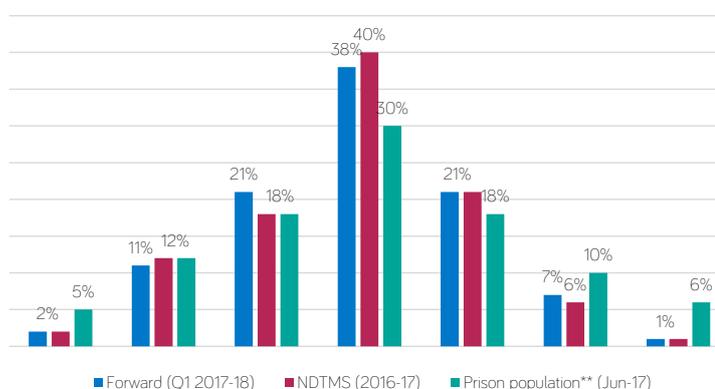
To find out more about Forward's programme of insight, innovation and impact, or to discuss partnership opportunities please contact:

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## Data compendium

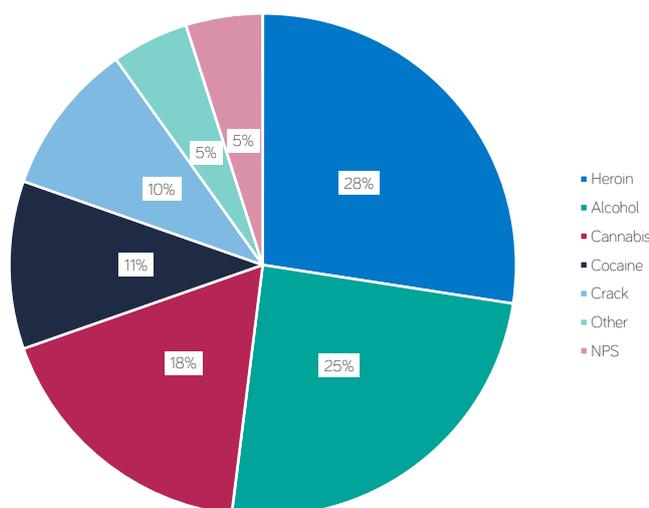
### Prison drug and alcohol services

**Age:** The largest group (38%) of Forward's prison based substance misuse clients fell into the 30-39 age group (average age = 35). This is comparable with overall NDTMS figures from 2016-17<sup>1</sup> (40% 30-39). However, the age distribution of the general prison population in June 2017<sup>2</sup> suggests that a disproportionately low number of prisoners aged 50+ have been engaging with Drug and Alcohol Services across the estate. (NDTMS age groups: 18-19, 20-24\*\*Includes 15-17 year olds (1%)



**Gender and ethnicity:** Over 90% of prison substance misuse clients were male. Three-quarters identified ethnically as white, with two-thirds as White British. Overall the ethnicity breakdown of our clients broadly matches the prison population.

**Primary drug of choice (N = 3,835):** 28% of our prison caseload reported heroin as their primary drug, while another 21% reported cocaine or crack, and 25% reported alcohol as their primary problem substance.



In 2016, User Voice published research<sup>3</sup> stating that ***“Spice is the most popular drug of choice in prison, eclipsing heroin and cannabis use, with 1/3 using in the last month”***.

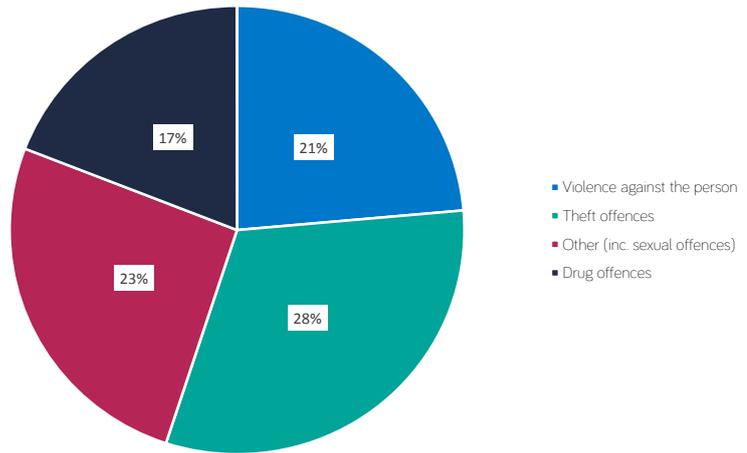
Despite these and other prevalence estimates of NPS abuse across the estate, only 3% of Forward's caseload reported NPS as their primary problem substance.

<sup>1</sup> NDTMS Adult Prison Quarterly Treatment Report 2016/17

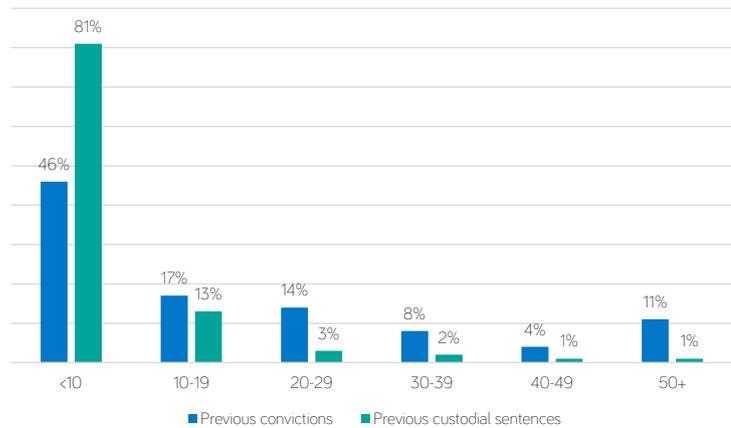
<sup>2</sup> MOJ Offender management statistics quarterly: January to March 2017 (Prison Population: 30 June 2017) <https://www.gov.uk/government/statistics/offender-management-statistics-quarterly-january-to-march-2017>

<sup>3</sup> User Voice. Spice: The Bird Killer (May 2016) <http://www.uservoice.org/wp-content/uploads/2016/05/User-Voice-Spice-The-Bird-Killer-Report-Low-Res.pdf>

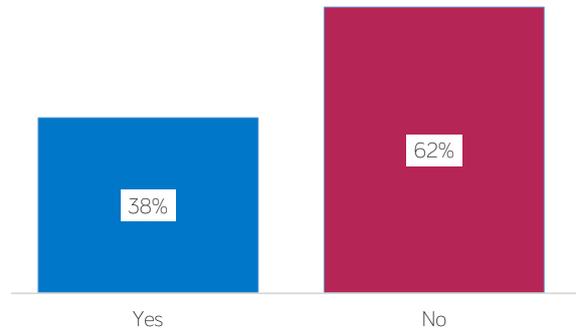
**Offending history (N = 3,555):** Over 30% of Forward's caseload had committed violent offences against the person. Due almost certainly to the strong link between substance misuse and acquisitive crime, Forward works with disproportionately more individuals convicted of theft offences than would be representative of the general prison population (28% vs. 14%).



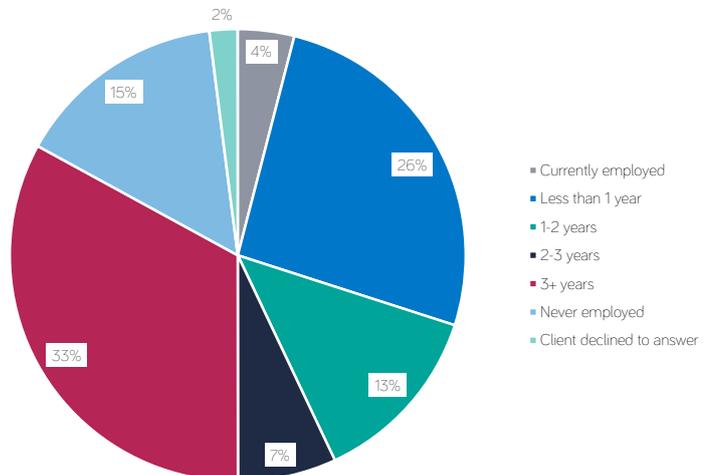
**Number of previous convictions/sentences (N = 2,181/2,215):** Forward clients most commonly reported being previously convicted or sentenced less than 10 times. However, more than 200 individuals (11%) reported having more than 50 previous convictions.



**Employment history (N = 2,993):** Over 60% of Forward's caseload indicated that they had not been working legally prior to coming into prison.



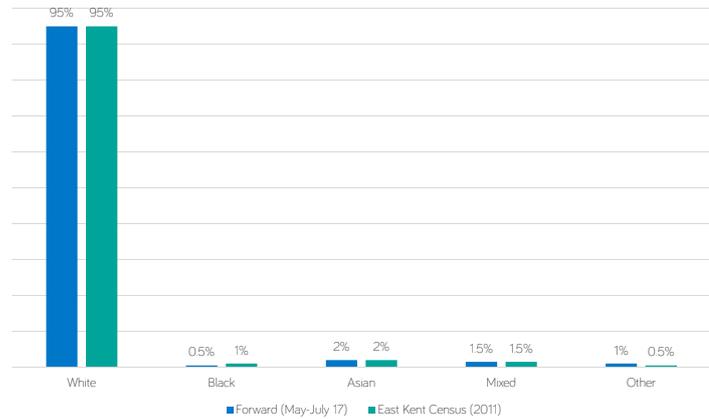
Of the 1,261 clients that were asked this question, a third (the majority) indicated that it had been three or more years since their last period of employment. Only 4% were currently employed.



## Community drug and alcohol services

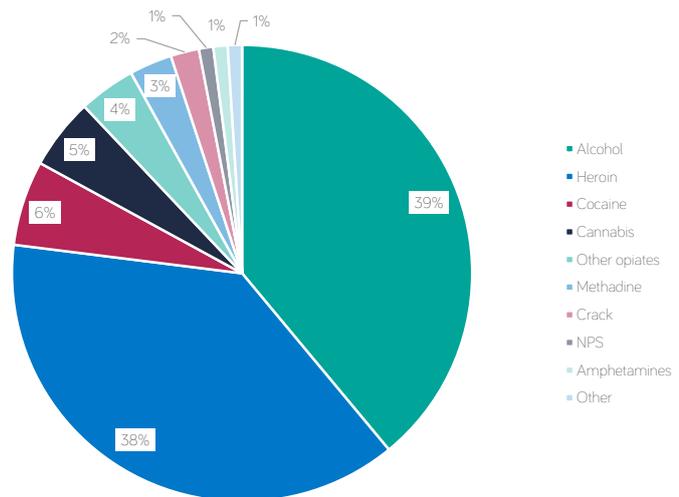
**Age:** The largest group of the approximately 3,000 clients of our community substance misuse services fell into the 30-39 age group. However, almost the same proportion fell into the 40-49 category and more than 20% were over 50. This indicates an older client profile than has been seen in our prison services.

**Gender and ethnicity:** 95% of our East Kent community service users were male and 31% were female. 5% are from BAME backgrounds, reflecting the population breakdown in the regional areas in which we work.



### Primary drug of choice (N = 2,890):

In terms of drug use, community clients showed a similar pattern to our prison services, in that the highest proportion reported to be either primary alcohol or heroin users (39% and 38% respectively). In contrast to the prison services, community clients have more frequently been reporting misuse of prescription medication including opiate-based analgesics and benzodiazepines.



### Employment status (N = 2,208):

The majority (38%) of community clients were recorded as unemployed and seeking work with a further quarter identified as long-term sick or disabled. The same proportion (26%) reported to be partaking in regular employment.

