



**The Footsteps Project  
St Giles Trust**

**End of project evaluation report**

**By**

**AVA**

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## EXECUTIVE SUMMARY

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The St Giles Trust Footsteps project was a two-year project, funded by The Department for Digital, Culture, Media and Sport, and delivered across three key geographical areas - Yorkshire, Norfolk and London.

The project sought to make a difference to women with autism or personality disorder(s) who have been involved in the criminal justice system and who face multiple disadvantages through a) the delivery of a holistic, person-centred and trauma informed support service and b) through training and influencing multi-agency professionals and across the criminal justice system.

The external evaluation of the Footsteps project, carried out by AVA, finds that the Footsteps project supported women to lead healthier, happier and better supported lives in the community. This is to the credit of the Footsteps staff team. The following highlights some of the key findings evidenced by the evaluation.

### **The Footsteps project:**

- Increased women's access to physical and mental health support, for example, getting them to medical appointments and enabling them to access mental health services.
- Increases in some clients' health seeking behaviours, for example managing substance use, exercising and taking medication appropriately.
- Provided direct support around mental health and wellbeing through 1:1 work with Caseworkers.
- Improved clients' emotional wellbeing. Following an average of six months of additional support from Footsteps, clients generally felt *more* optimistic, *better* able to deal with daily life, *better* able to take care of them and *more* positive about meeting new people, and *less* depressed/ anxious and isolated.
- Improved women's feelings of social inclusion. Following an average of six months additional support from Footsteps, the number of clients feeling isolated or alone decreased from 65% to 37%.
- Supported women to build positive and supportive networks around them. This includes providing safe spaces for women to socialise and connect with other women through Footsteps women's group, which in turn improved participant's wellbeing. Those taking part in the weekly 'mood' assessor activity at the women's groups indicated that, following participation in the women's group, they generally felt happier and better within themselves. Further feedback gathered from some women highlights that the group enabled women to feel less anxious, more confident, and more able to deal with day to day life.

- Supported women to have contact with their children, including supporting seven women to ensure their children were returned to their care.
- Supported women to adhere to probation and bail conditions, access legal support and attend court hearings, as well as to understand and manage risk. For some women, the support provided by Footsteps prevented them from re-offending.
- Supported and worked with 12 volunteers who were embedded in various roles within the project, including providing a range of training and development opportunities. Many volunteers were enabled to complete qualifications and/or access paid work.
- Provided useful information and support to key stakeholders and other professionals in a range of sectors, enabling a number of professionals to develop improved responses to women with autism.
- Provided specialist training that was attended by 151 multi-agency professionals across diverse sectors. Where data is available, there is clear evidence of an increase in delegate's confidence, knowledge and skills around effectively responding to women with autism.

The positive impact of the project on women's lives is captured in the quotes below:

*She's helped me find myself. Without Footsteps that wouldn't have been possible. I would have lived the same life year in and year out. However, this year in 2020 I'm living a different life to every other year I've lived. I feel confident that my life is going in the right direction thanks to St Giles and all the girls who come to the ladies group on Friday. (client, end of project)*

*They are saving money really aren't they. Before I was back and forth to the doctors, in and out of prison, my kids would have been in care...actually just a little help when you first get out and support to just feel normal...Footsteps when they came in they didn't say you should be doing this and this like other services, they have a different way. There is no judgement. They have a different way of looking at it. (client, end of project)*

Key enablers to the project's successes identified by the evaluation include: taking a person-centered and non-judgemental approach; flexibility in working with clients; effective relationship building and trust building with clients; having a team which includes staff with lived experience; having embedded financial resource to support clients with essential purchases; and, having robust support systems in place for staff.

## SECTION ONE: INTRODUCTION

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In 2018 AVA was commissioned by St Giles Trust to conduct an independent evaluation of the St Giles Trust Footsteps project.

Footsteps is a two-year project, funded by The Department for Digital, Culture, Media and Sport, which has been delivered across three geographical areas in England: Yorkshire, Norfolk and London.

The Footsteps project has had the overall objective of making a difference to women with autism or personality disorder(s) who have been involved in the criminal justice system and who face multiple disadvantages. More specifically, the project sought to meet the following core objectives:

1. To improve the mental health outcomes of women facing multiple disadvantage
2. To improve levels of social inclusion for women facing multiple disadvantage
3. To decrease levels of re-offending behaviour by women facing multiple disadvantage
4. To support and enable Footsteps volunteers to gain practical skills and qualifications
5. To raise awareness of, and promote, support models for women facing multiple disadvantage
6. To improve awareness of autism across multi agency professionals working in the criminal justice system

The project sought to meet these core objectives through the delivery of following two key project components:

- **Project component one:** A holistic, person-centred support service for women facing severe multiple disadvantage.
- **Project component two:** A specialist ASD training programme for multi-agency professionals and across the criminal justice system.

This report presents the findings from the external evaluation of the Footsteps project, reporting the findings from data collated between April 2018 - January 2020. The report outlines the extent to which the project has successfully met the six objectives outlined above, as well as key barriers, enablers and conditions that have produced the indicated results. Key learning and recommendations for service delivery and national policy are also presented.

Direct quotes from clients, members of the Footsteps team and key stakeholders are presented in coloured text boxes throughout the report.

## SECTION TWO: EVALUATION METHODOLOGY

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A mixed method approach was used to evaluate the Footsteps project. This includes quantitative and qualitative methods, as outlined below.

### **A) Overview of methodology and data**

The following presents the key data collection activities being undertaken in order to evaluate the impact of the Footsteps service in line with the project's six objectives.

The text boxes throughout this section of the report highlight the interim data available that has been analysed and presented in this interim report.

### **Objectives 1 and 2: Improved mental health and social inclusion**

- Collation of key metrics identifying the number of clients worked with and the support they have received, including identification of any specialist services they are engaged with as a result of the Footsteps project.

**This report presents case management data for the time period April 2018 - January 2020, covering 296 clients who were referred into the service.<sup>1</sup>**

- Footsteps clients' responses to a service specific evaluation 'wellbeing survey' - to be completed on entry to the service and then on a quarterly basis going forwards. This survey presents seven key indicators for both mental health and social inclusion from REVA outcomes framework<sup>[1]</sup> and the Warwick Edinburgh Mental Wellbeing Scale<sup>[2]</sup>

**Wellbeing data is available for 106<sup>2</sup> individual clients across all three geographical areas of the service delivery.**

However, this report is interested in cases where there is comparative wellbeing data available, where data has been collected at two key points of service delivery. Comparative data presents an opportunity to identify if wellbeing has changed over the time of receiving support from the Footsteps service.

**Comparative wellbeing data is available for 43 women.** This represents 15% of the total client base.

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<sup>1</sup> Estimation based on the average number of pre-existing clients seen per month of service delivery since service launch in September 2018.

<sup>2</sup> 47 from Yorkshire, 21 from London and 4 from Norfolk

- On-going monitoring of the Footsteps women's groups and wellbeing of those taking part. This includes a weekly assessment at respective Footsteps Women's groups to capture clients' moods both at the start of the session and end of the Women's group session. Additional wellbeing monitoring is captured via a service specific evaluation form, completed on a monthly basis by those attending Women's group.

**13 women completed feedback forms from women's group at an interim stage and a further 8 completed at the end of project stage.** 20 out of 21 of these were from the London women's group.

**Data capturing the week by week impact on Footsteps clients' moods for 10 women's groups sessions** (6 sessions held by the London team, 4 sessions held by the Yorkshire team).

In at least one geographical area, women's groups are attended by women from other services and projects, in addition to being attended by Footsteps clients. For the data available, between 1-5 clients (average of 2) women from Footsteps took part in the activity.

- Focus groups and interviews (either over the phone or face to face) with Footsteps clients, providing an opportunity for clients to share their experiences of the service.
- Interviews with Footsteps staff team, providing an opportunity for staff to highlight achievements, learning and challenges faced.

**The evaluator spoke to 20 Footsteps clients from across the Footsteps geographical area<sup>3</sup>** via focus groups (n=4) and 1:1 interviews (n=9). Clients took part in focus groups or interviews at an interim and/or end of project stage.

**10 members of the Footsteps team across all 3 geographical areas took part in interviews with the evaluator at an interim stage and/or the end of project.** This includes frontline staff, senior management and clinical psychologist.

In addition, a cross-team Footsteps wide team meeting was held, during which the evaluator facilitated a **workshop session to capture staff reflections on key learning.**

### **Objective 3: Fewer women re-offending**

- Case studies of Footsteps clients across the three geographical areas

**25 case studies were collated** from across the Footsteps teams. This report presents a number of case studies.

<sup>3</sup> 7 women from Yorkshire team, 11 women from London team and 2 women from Norfolk team.

- Ongoing monitoring of clients' license recalls and court outcomes
- Focus groups and interviews with Footsteps clients and with Footsteps staff team, providing an opportunity for clients' journeys to be captured

**Objective 4: Volunteers (peer advisors) to gain practical skills, qualifications**

- Monitoring number of volunteers, how long they volunteer for and progression into further roles
- Volunteer survey to be undertaken at key stages in the project. This survey captures volunteers' skills, learning and development.
- Focus groups or interviews with volunteers at the end of the project

**2 volunteers have taken part in the interim volunteer survey, and 2 in the end of the project survey.**

**1 volunteer took part in a 1:1 interview with the evaluator. 2 further volunteers participated in focus groups** with clients and shared their experiences of being involved in the Footsteps Women's group.

**Objective 5: Raise awareness and promote support models (digital services)**

- Assessment of where Footsteps referrals are coming from and therefore who is aware of the service.

**This report presents referral data for the time period April 2018 - January 2020, as captured in the Footsteps case management data.<sup>4</sup>**

**Objective 6: Improved awareness of autism amongst multi-agency professionals operating in the criminal justice system**

- Post-training evaluation form for all professionals taking part in Footsteps training. This survey captures participants' awareness and understanding of autism as well as other key issues related to the client group

**Evaluation forms relating to training delivered between September 2018 - March 2019 have been shared with the evaluator. This presents data for 8 training sessions delivered to 151**

<sup>4</sup> Estimation based on the average number of pre-existing clients seen per month of service delivery since service launch in September 2018.



## multi agency professionals.

- Staff questionnaire, carried out at the start, mid and end point of the project. This survey is for all members of the Footsteps team and captures progress in awareness, understanding and learning around autism and other key issues related to the client group. In addition, members of the staff team have submitted monthly 'reflective logs' which further captures key learning and progress.

**14 members of staff completed the initial staff survey.** This included 8 frontline staff as well as a team leader, 2 managers and a trainee case worker.

**8 members of staff completed the interim staff survey.** This included 7 caseworkers and a team leader.

**10 completed the end of project survey.**

**46 'reflective log' entries have been submitted** by members of the staff team between September 2018 and January 2020.

- Stakeholder survey, carried out at the start, mid and end point of the project. This survey was for key stakeholders and professionals in the criminal justice sector who have not necessarily undertaken any Footsteps training. This survey captures professionals' awareness of autism as well as other key issues related to the client group, and also provides an opportunity for stakeholders to feedback on the Footsteps service.

**At least 17 stakeholders responded to the stakeholder surveys.** This included stakeholders from NHS health services, probation services, housing and police.

**15 stakeholders completed the start of project survey for professionals. 10 stakeholders completed the interim survey. 17 stakeholders responded to the end of project survey.** Stakeholders responding to stakeholder surveys range from representatives from housing, probation, policing.

## DATA ANALYSIS

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Data collected for the evaluation was analysed using specialist software NVivo (for qualitative data) and SPSS (for quantitative data).

## **ETHICAL CONSIDERATIONS**

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Key ethical considerations were made to ensure all those taking part in the evaluation and data collection activities had clear information regarding how data would be collected and used.

For all focus groups and interviews held, as well as wellbeing forms and client satisfaction forms completed, explicit consent was sought. Only data for which full consent was given is used and presented in this report.

Additional considerations were made for data collection activities carried out directly with clients. For example, all clients taking part in evaluation interviews were provided with vouchers as a thank you for their time. The evaluator ensured that consent was given and that clients were clear they did not have to take part in interviews and could drop out or withdraw what they had shared at any stage.

Members of the staff team participated in reflective logs detailing the work they were carrying out on the project and how they felt about their work. All reflective logs ensured names of clients were redacted and Footsteps staff identities anonymised.

Surveys undertaken by multi agency professionals protected the identity of participants. Surveys were anonymised and participants gave their consent at the start with clear information on how the data would be collected and used.

Across data collection activities a variety of questions were asked, including multiple choice based questions and open ended questions, to meet the needs of a diverse pool of clients.

All data collected was stored securely and was only accessible by the evaluation lead. Specialist Advocates' spreadsheets were password protected. All data was securely retained by AVA to inform the final evaluation report.

## **LIMITATIONS**

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- Caseworkers were responsible for collating and identifying key data around client wellbeing data. Comparative wellbeing data was available for 43 women. This data therefore only represents 15% of the women referred to in the Footsteps service; many women (n=219) are not represented in the key well-being findings presented in this report.
- Data collection around client's wellbeing was often collected inconsistently both between and within the three Footsteps teams. Furthermore, the Footsteps teams varied in size, with one team only having one Caseworkers, and others having up to five. As a result,

the majority (65%) of comparative wellbeing data available for clients' is from just one of the teams - the team in Yorkshire.

- Inconsistencies are apparent in how well-being data was collected. As a result, for the comparative wellbeing data analysed in this report, only 58% of completed forms were completed directly by the client. 34% of forms are known to be completed by members of the Footsteps team, based on conversations with clients,<sup>5</sup> and for the remaining 8% this information was not provided. This means that reports of client's wellbeing is only always based on clients' own perspectives.
- Clients who were able to take part in interviews for the evaluation are likely to be the most successful or thriving of the cohort and therefore this qualitative data does not necessarily represent the whole population of the client group.

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<sup>5</sup> For total data submitted by Norfolk, 60% were directly from the client. For London 9% were directly from client, and for Yorkshire 84%.

## SECTION THREE: OVERVIEW OF SERVICE DELIVERY

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St Giles Trust Footsteps project has provided holistic wrap around support for women in London, Norfolk and Yorkshire who have been - or are currently - in contact with the criminal justice system. The project brings a specialist focus around understanding and effectively responding to female offenders with autism and/or personality disorders and who are facing multiple disadvantage.

### A) COMPONENT ONE - FRONTLINE SERVICE OFFER

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The Footsteps frontline offer is a trauma informed service delivered by specialist caseworkers based in each of the three Footsteps areas (Norfolk, London and Yorkshire). Once referred to the Footsteps project, Footsteps caseworkers develop and provide clients with an individual support plan responsive to each woman's individual experiences and needs.

Footsteps caseworkers offered clients 'through the gates' support - meeting women as they leave prison - as well as support within the community. Women were also able to access a specialist women's group, set up as part of the project in each of the three Footsteps sites, enabling clients to connect with other women who have had similar experiences to them.

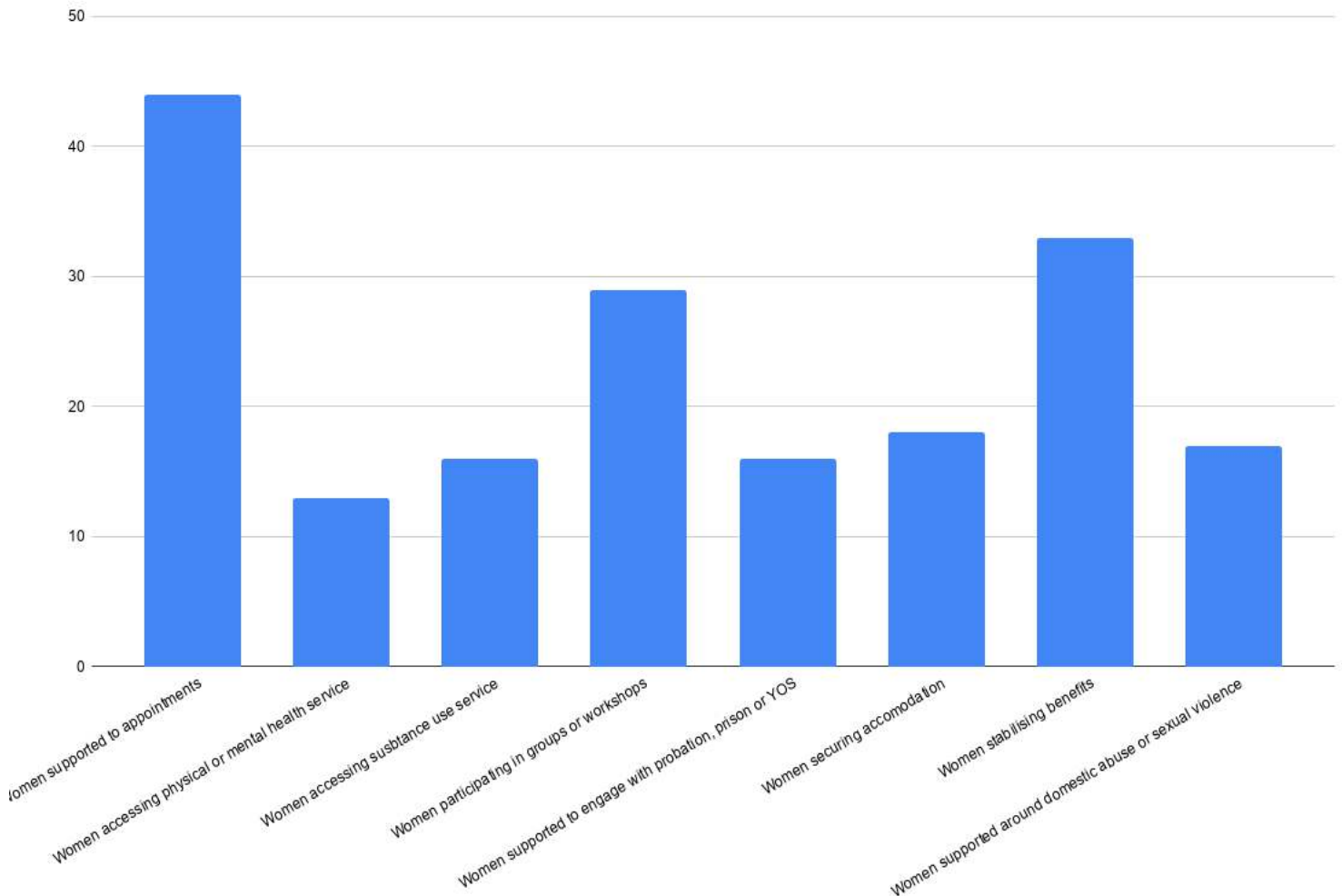
Providing a flexible and service centered service enabled Footsteps to carry out a broad range of activities in order to support clients. This included:

- Support accessing accommodation
- Support accessing specialist services and a range of appointments - including social service, health appointments, AA meetings, plus additional support with getting to the meetings and managing transport
- Support in attending court and adhering to probation
- Providing advocacy for engaging with external agencies
- Support managing and addressing issues of violence against women and girls - including fleeing domestic abuse, referring to MARAC and establishing safety plans
- Support addressing medical and health issues - including access to health interventions, managing addiction and addressing medication issues
- Support with mental ill health - including direct counselling, access to mental health services, self-harm prevention
- Support accessing benefits
- Support with relationship and network building - including access and contact with children, and access to a safe space to socialise
- Support in developing life skills - including cooking and cleaning
- Other practical support - including filling in forms, support with time keeping, managing public transport

In addition to the above, Footsteps had a specified budget dedicated to directly providing clients with key resources for clients to support them to manage leaving prison and settle in to living in the community. With this resource Footsteps was able to provide essential toiletries, food vouchers, mobile phones and other basics to support clients.

The diverse range and intensity of support provided is evidenced through the data collected. For example, case management data evidences the number of women each month being provided with different elements of support. Some of the key activities carried out in an average month are captured in the following graph<sup>6</sup>:

**Examples of average monthly activities across client group**



Analysis of Caseworkers' time sheets across all three geographical areas highlights the intensity and variety of support offered by Footsteps. A snapshot of work delivered in one month (October 2019)<sup>7</sup>, for example, evidence that clients received an estimated average of ten hours of 1:1 support.

<sup>6</sup> This reflects the case management data – representing 89% of the 296 women referred in to Footsteps.

<sup>7</sup> Data was provided for October 2019 by all teams. This was the only months that consistent data for all teams was shared.

Furthermore, 60% of Caseworkers' and Senior Caseworkers' time was spent providing direct support to clients, either face to face or via the telephone (36% face to face and 24% over the phone or other forms of communication and technology).

The following quotes from clients further highlight the range and intensity of support offered:

*(My Caseworker) helped me from the prison gates. She helped me as I was homeless and I was pregnant. So they helped me as I had a partner who was domestically violent. They helped me, they said don't go back to that danger area and they accommodated me in a hotel for a few days. Then they found me another place...where I lived pregnant until I gave birth. We made a housing application, for two or three days I was in there. I have a problem with my legs and they paid for my taxi, we went from housing to the doctor, then I had methadone. They really helped me. If I hadn't met them, I don't know what would have happened now... I still have my baby and I've changed my life. (client, end of project)*

*They are so supportive, they help me with lots of things... things I couldn't do for myself. (client, interim stage)*

The following case study presents an example of the wrap around support received by two Footsteps clients.

#### **Case study: Chloe's story**<sup>8</sup>

Chloe was released from Newhall in October 2018, and was suffering from severe depression and anxiety, as well as facing issues with housing and lack of ID. The Footsteps Caseworker met her at the gate, and has successfully engaged Chloe and provided support on these key issues.

The Caseworker managed to arrange temporary housing for Chloe, who was then waiting to move to a more permanent property. Chloe's universal credit was also sorted so that she was able to start receiving her benefits. The Caseworker also worked with Chloe to set up a bank account, arranging meetings etc. to get this sorted.

Chloe was also supported around getting her script. She had been facing problems getting this due to missing appointments and being late; however with the support of the Caseworker the script was arranged so that Chloe is now able to receive this regularly.

#### **Case study: Jessie's story**

Jessie was referred to Footsteps just prior to her release. Jessie has a history of depression, complex PTSD, anxiety, antisocial personality disorder and psychosis, as well as significant

<sup>8</sup> All names for client's have been changed.

drug and alcohol dependencies. Jessie was also long-term street homeless prior to her time in prison, and had a history of both concerns from counter terrorism police, and was understood to present a risk of violence to others.

Upon introduction, Jessie's caseworker liaised with probation to allow her to report away from her previous borough considering she was at risk of violence, meanwhile assisting Jessie to make a homeless application in London for which a birth certificate was purchased on her behalf. Jessie was linked into specific support in the local area, such as substance misuse and mental health services, and also assisted with emergency accommodation. Appeals are still being made on Jessie's behalf with housing.

Jessie is now attending the local substance misuse service and is on the path to detox and rehabilitation. She has successfully completed the licence aspect of her probation order. Her Footsteps Caseworker has continued to provide a flexible and responsive support service to her, addressing her support needs, as she often presents in crisis and requires a lot of emotional and practical support. Her Caseworker and probation officer have also successfully safeguarded her from abuse when she was the victim of an attempted tenancy hijack.

## **B) COMPONENT TWO - SPECIALIST TRAINING PROGRAMME**

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In addition to the frontline service provided by Footsteps, the project sought to increase the knowledge and skills base of multi-agency professionals working with this particular client group.

As part of Footsteps, St Giles Trust delivered a series of specialist training sessions. The key objectives for the training was as follows:

1. To increase understanding and awareness of autism
2. To increase awareness of how it can present differently in males and females
3. To develop deeper appreciation for how autistic males and autistic females may require different types of support and services whilst moving through the CJS, and specifically when exiting custody
4. To increase understanding of the complexities of identifying autistic traits amongst other co-occurring conditions, e.g. personality disorders, depression, anxiety.

The Footsteps specialist training reached over 150 professionals in a range of sectors including probation, mental health services, police, social services and diverse third sector organisations.



## SECTION FOUR: OVERVIEW OF CLIENT GROUP

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### A) DEMOGRAPHICS OF CLIENT GROUP

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**Footsteps supported 296 clients** without a history of previous support from St Giles Trust.

Key demographic data is available for 262 Footsteps clients referred into the service between September 2018 and January 2020 (representing 89% of women referred in to the service).

Analysis of the data available evidences that:

- Footsteps clients were aged 17 and over. The majority (97%) of clients were between the ages of 26 and 50.
- 26% were from Black Asian or Minority Ethnic backgrounds
- 77%<sup>9</sup> were identified to have mental ill health

### B) EXPERIENCES OF MULTIPLE DISADVANTAGE

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All clients referred to the service were involved in or at risk of involvement in the criminal justice system, and had concerns around mental ill health and/or autism spectrum disorder.

On the point of referral, case management data captured specific information in relation to clients' life experiences and experiences of multiple disadvantage<sup>10</sup>.

This finds that the client group had experienced high levels of multiple disadvantage, including contact with the criminal justice system (85%), substance use (55%)<sup>11</sup>, mental ill health – as noted above - (77%) and insecure housing (21%).

This is presented in the graph below:

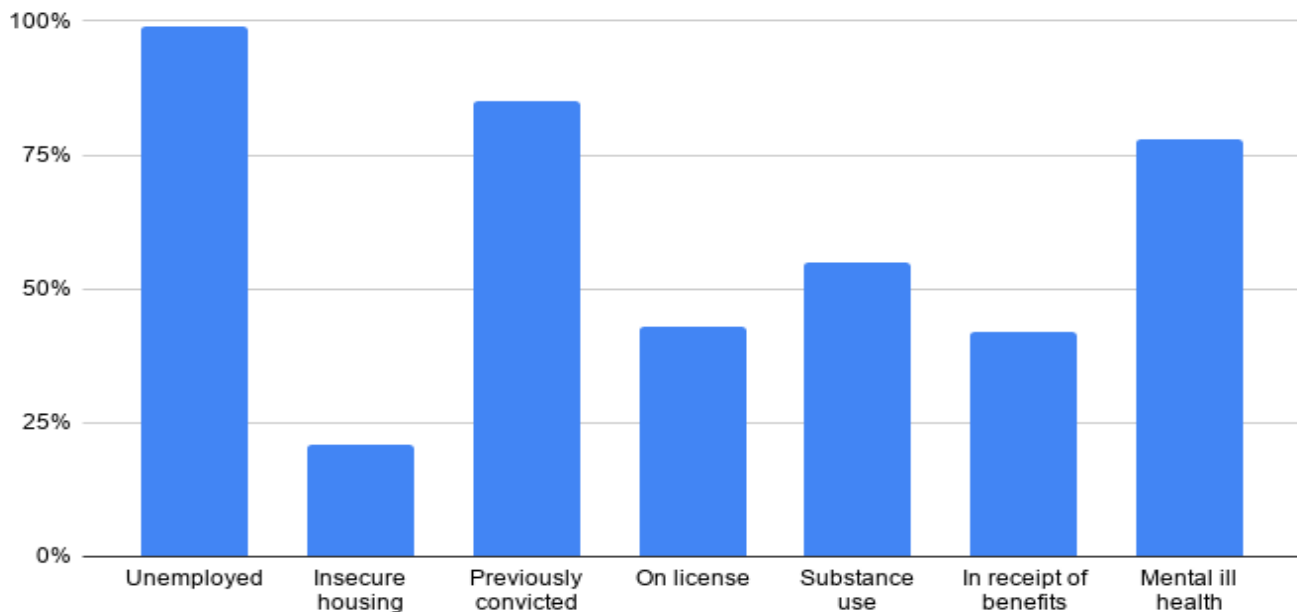
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<sup>9</sup> Data was only collected in year 2 of the project.

<sup>10</sup> Data is only available for 89% of the 296 women referred in to Footsteps.

<sup>11</sup> Data was only collected in year 2 of the project.

Client group - experiences of multiple disadvantage



### C) ADDITIONAL CONTEXTUAL INFORMATION

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Given the profile and life experiences of the client group, as indicated above, it is likely that many women in the client group have faced additional forms of multiple disadvantage which have not been captured in the above data.

Examples of additional factors that may be at play include domestic and/or sexual abuse, having children removed, and living in poverty. As a result of experiences of such severe multiple disadvantage, it is likely that many clients suffer from complex trauma and face a range of complex physical and mental health issues.

*A lot of our women have drug and alcohol issues and part of that as well, we have come across quite a lot of women who have domestic violence issues as well. A lot of victims find themselves in vulnerable situations because of drugs or alcohol or criminal court restrictions. A lot of people do not have access to benefits even if they might be entitled to it. (staff, end of project)*

Evidence around the experiences of women who have been in prison in the UK is indicative of the pervasive disadvantage many of the women accessing Footsteps will have faced. It is well documented that women in prison are more likely to suffer from complex physical and mental health conditions, compared to their male counterparts and, above all, compared to the general population. For example:

- Women in prison have disproportionately higher levels of mental ill-health, suicidal ideation and suicide, self-harm, and problematic substance use compared to both the general population and the male prison population. One Government study suggested 49% of female prisoners reported experiencing anxiety and depression (Cunniffe et al., 2012),<sup>12</sup> whilst 26% said they had received treatment for a mental health problem in the year before custody (Prison Reform Trust, 2015)<sup>13</sup>. Chronic poverty, lack of access to medical care before and during sentencing, and experiences of multiple disadvantage (Covington & Bloom, 2003)<sup>14</sup> feed into both the physical and mental ill-health of women in the prison population.
- In England and Wales, amongst female prisoners, rate ratios of suicide are 20 times higher than in the general population (Fazel, Ramesh & Hawton, 2017)<sup>15</sup>, whilst the rate of self-harm is ten times higher than that of male prisoners (PHE, 2018)<sup>16</sup>.
- Studies have found that 55% of women in prison report having experienced emotional, physical or sexual abuse during childhood (PHE, 2018)<sup>17</sup>, one in two women have reported having previously experienced domestic violence (MOJ, 2010)<sup>18</sup>, and one in three have reported experiencing sexual abuse and rape (MOJ, 2010)<sup>19</sup>.

More generally, women facing multiple disadvantage have considerably higher health and safety risks than the majority of the population, both in relation to their physical and mental wellbeing. For example:

- Survivors of abuse are at risk of physical abuse from their partner/ex-partner meaning there is a risk bodily harm of various sorts, whilst there are also long-term chronic physical ailments that can result from all forms of abuse, such as hypertension and digestive problems.
- Survivors have also been found to be at greater risk of having a diagnosed mental health condition: a three-fold risk of depressive disorders, four-fold risk of anxiety, and seven-fold risk of post-traumatic stress disorder<sup>20</sup>. One recent study also estimated that every

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<sup>12</sup> Cunniffe, C., Van de Kerckhove, R., Williams, K., & Hopkins, K. (2012). *Estimating the prevalence of disability amongst prisoners: Results from the Surveying Prisoner Crime Reduction (SPCR) survey*. London: Ministry of Justice.

<sup>13</sup> Prison Reform Trust (2015). *Relative Justice the experiences and views of family members of people with particular needs in contact with criminal justice and liaison and diversion services*. London: PRT and POPS.

<sup>14</sup> Bloom, B. and Covington, S. (2003). *Gendered Justice: Women in the Criminal Justice System*. In: B. Bloom, ed., *Gendered Justice: Addressing Female Offenders*, 1st ed. Durham: Carolina Academic Press.

<sup>15</sup> Fazel, S., Ramesh, T., Hawton, K. (2017). Suicide in prisons: an international study of prevalence and contributory factors. *Lancet Psychiatry*, 4, pp. 946-952.

<sup>16</sup> PHE (2018). *Gender Specific Standards to Improve Health and Wellbeing for Women in Prison in England*. London: Public Health England.

<sup>17</sup> *ibid*

<sup>18</sup> Ministry of Justice (MOJ) (2010). *Breaking the Cycle: Effective Punishment, Rehabilitation and Sentencing of Offenders*. London: Ministry of Justice.

<sup>19</sup> *ibid*

<sup>20</sup> SafeLives (2019). *Mental Health and Domestic Abuse*. Spotlight. [online] SafeLives. Available at: <http://safelives.org.uk/sites/default/files/resources/Spotlight%207%20-%20Mental%20health%20and%20domestic%20abuse.pdf> [Accessed 8 Nov. 2019].

day almost 30 women attempt suicide as a result of experiencing domestic violence, and three women a week take their life as a result of abuse<sup>21</sup>.

- Research from Homeless Link (2014) found that 73% of people experiencing homelessness suffered from a physical health problem, and 80% from a mental health problem<sup>22</sup>. Many of the clients also suffered from substance misuse problems, another factor in poor health outcomes.
- Substance misuse has a vast array of related health problems (both in relation to physical and mental health), with alcohol misuse being the biggest risk factor for death, ill-health and disability among 15-49 year-olds in the UK<sup>23</sup>. For those who've had children taken into care, the likelihood of mental ill-health and substance misuse is higher still<sup>24</sup>.

All of the above is exacerbated by the fact that different forms of disadvantage coexist and bring with them barriers to accessing support. Evidence suggests that there is a severe inaccessibility of services for this client group. The inaccessibility of services is due to many reasons, including pervasive lack of trust in services and professionals, negative experiences of services, professionals' reactions and responses lacking understanding of multiple disadvantage and trauma, a lack of suitable services available, and perpetrators preventing access<sup>25</sup>.

Some women may feel that they are unable to escape from the trauma and abuse they have suffered or have underlying mental health conditions/disabilities which prevent them from seeking support<sup>26</sup>. Significantly, previous research has also found that of 173 local areas in England and Wales, only 19 had access to support for women facing multiple disadvantage which could address all of the following issues: substance use, criminal justice contact, mental-ill health and homelessness<sup>27</sup>.

Experiences of being in prison are likely to exacerbate the disadvantage that women face. There is evidence that custodial sentences do not act as a deterrent, instead, women who have had more custodial sentences find themselves stuck in a revolving door cycle of release and re-entry. This is illustrated by research that shows the more previous custodial sentences a woman has had, the higher her reoffending rate: the reoffending rate for women with 11 or more previous custodial sentences is 83%, while short sentences are ineffective at reducing reoffending; the reoffending rate of women serving short prison sentences is 71%<sup>28</sup>. This

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<sup>21</sup> Refuge. (2017). *Taking Lives*. [online] Available at: <https://www.refuge.org.uk/our-work/campaigns/more-refuge-campaigns/taking-lives/> [Accessed 22 Oct. 2019].

<sup>22</sup> Homeless Link (2014). *The Unhealthy State of Homelessness*. [online] London: Homeless Link. Available at: <https://www.homeless.org.uk/sites/default/files/site-attachments/The%20unhealthy%20state%20of%20homelessness%20FINAL.pdf> [Accessed 12 Dec. 2019].

<sup>23</sup> Alcohol Change UK. (2019). *Alcohol Statistics*. [online] Available at: <https://alcoholchange.org.uk/alcohol-facts/fact-sheets/alcohol-statistics> [Accessed 8 Nov. 2019].

<sup>24</sup> Wall-Weiler, E., Roos, L., Bolton, J., Brownwell, M., Nickel, N. and Chateau, D. (2017). Maternal health and social outcomes after having a child taken into care: population-based longitudinal cohort study using linkable administrative data. *J Epidemiol Community Health*, 71, pp.1145-1151.

<sup>25</sup> AVA & Agenda (2019). *Breaking Down the Barriers*. London: AVA & Agenda.

<sup>26</sup> SafeLives (2019). *Mental Health and Domestic Abuse*. Spotlight. [online] SafeLives. Available at: <http://safelives.org.uk/sites/default/files/resources/Spotlight%207%20-%20Mental%20health%20and%20domestic%20abuse.pdf> [Accessed 8 Nov. 2019].

<sup>27</sup> Holly, J. (2017). *Mapping the Maze: Services for women experiencing multiple disadvantage in England and Wales*. London: Agenda & AVA

<sup>28</sup> Women in Prison. (2017). *Key facts*. [online] Available at: <https://www.womeninprison.org.uk/research/key-facts.php> [Accessed 13 Feb. 2020].

suggests that many of these women have experiences of being passed around the system with little effective intervention or support.

Finally, research highlights a lack of services available to support women facing multiple disadvantage in a holistic way<sup>29</sup>. This, alongside the following data relating to professional's understanding of key issues for women facing multiple disadvantage and /or women with autism, highlights the need for services such as Footsteps and the contextual realities for the Footsteps client group.

A baseline survey for multi-agency professionals was circulated at the start of the project. 15 professionals responded to this survey including representatives from housing, drug and alcohol services/rehabilitation, the Department of Work and Pensions, Police and Crime Commissioners.

The baseline survey identified that many professionals lacked knowledge about autism and/or personality disorder(s) and did not feel confident in working with women with autism. For example:

- 66% of respondents rated their knowledge of the autism spectrum as 'low' or 'very low'; 40% rated their knowledge of personality disorders similarly low.
- 47% of respondents were not very confident in talking about autism with clients, and the same number did not know anything about how to identify signs of autism.
- 40% of respondents knew nothing about appropriate language to use when talking about women with autism

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<sup>29</sup> Holly, J. (2017). *Mapping the Maze: Services for women experiencing multiple disadvantage in England and Wales*. London: Agenda & AVA

## SECTION FIVE: KEY FINDINGS

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### A) OVERVIEW OF IMPACT

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Analysis of the data collected for the Footsteps evaluation provides insight into the impact the service had on the women it supported. The following provides an overview of the difference the project made to women's lives with the support of this specialist service.

**Footsteps was able to support 296 women referred in to the service over the two years of project delivery.**

In addition, a number of women who were already known to St Giles Trust were supported. It is estimated that each month the service was supporting an average of 65 women.

Through the project, women were met on release from prison 180 times (68% of these were met at the prison gates, while 32% were met in alternative pre-confirmed locations).<sup>30</sup>

Data collected evidences the steps women were able to make towards breaking out of the 'revolving door' cycle, recovering from long term and complex trauma, and proactively making positive changes to their lives.

Clients repeatedly reflected on the difference the service had made to their lives, and how things might have turned out differently if the support had not been available to them. For example:

*I met her when I was still in prison and without them I just wouldn't know which direction I was going in and all these appointments that you have to get to. It turned out that we got along and she comes to every appointment with me, literally everything...Jobcentre, Forward Leads, anything to do with my children's social worker appointments, everything literally. I think I can do this, only because \*she is with me. (client, end of project)*

*(Footsteps has) been a god-send to me, I had a big breakdown in January and this was really the only thing I was doing until recently, so it's been like my little sanctuary. (client, interim stage)*

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<sup>30</sup> This reflects the case management data – representing 89% of the 296 women referred in to Footsteps.

Clients' gratitude for the service they received is clear. This positive experience of the service is reflected across the data. For example, **the vast majority (19 out of 20)<sup>31</sup> of the women taking part in focus groups and interviews said they would recommend the Footsteps services** for women who had had similar experiences to them.

**Similarly, women accessing the women's group stated they would recommend the service: 100% of women providing feedback via women's group feedback forms indicated that they would recommend it.**

A considerable number of clients highlighted that they *had* recommended the service to other women.

The overarching impact that Footsteps was able to make on clients' lives is also reflected in data collected by staff team members and stakeholders.

*One woman finished her probation, managed to get her children back and is attending college...She changed her whole life... I hope things keep getting better for her. (staff, end of project)*

*The Footsteps service has had a positive impact on the women worked with. I have seen first hand the difference the support has made to women upon release from prison, including being accommodated. The emotional and practical support the service gives has helped women to realise their own potential and diverted them from re-entering the criminal justice system. I have seen the impact that having positive relationships with other women has had during the art group - the supportive and empowering nature of the group to develop self expression has been phenomenal. (stakeholder, end of project)*

17 professionals responded to the end of the project stakeholder survey. Of these, eight professionals were working or had worked directly with Footsteps clients. These eight professionals ranged from those working in probation (n=3) and policing (n=1), to those working for the NHS (n=1). Analysis of responses from the eight professionals working directly with clients finds that **100% agreed that the project had had a positive impact on the women they were (jointly) working with.**

This is also reflected across the feedback shared by those attending the Women's Group.

- **100% of those responding to the Women's Group feedback form stated that they would recommend the group to other women**, and that their overall experience of the group was either good or very good.

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<sup>31</sup> The woman who did not recommend identified that she had been happy with the service, but she wouldn't feel able to recommend to others as she didn't know the exact range of things that the service offered to clients.

- **100% of respondents<sup>32</sup> stated that the group was helping them with their day to day lives.**

It is clear from that, for some women, this service was life saving and filling a much needed gap in service provision.

*I'm so grateful. It's really life saving and life changing. (client, end of project)*

## **B) KEY ACHIEVEMENTS**

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Case management data available for the Footsteps service highlights some of the key achievements and impacts of the service so far. For example, between September 2018, when the service opened to referrals, and the end of December 2019, Footsteps supported<sup>33</sup>:

- Seven women successfully gained access to children
- 20 women supported to open a bank account
- Two women supported in to part time work, and a further 3 women supported into voluntary roles or professional training
- 58 women assisted with getting ID
- Five women accessed internal grants through St Giles Trust/ Footsteps
- 13 instances where women were financially supported to improve their housing
- 107 instances of being supported in to GP, dentist or health interventions

Those taking part in focus groups and interviews also highlighted key achievements and successes of the projects. For example, staff highlighted the following key successes:

*A client of mine now has her own flat - something she never had, she was dependent on a male friend who exploited her, letting her stay at his address then chucking her out when he felt like it. She now has a place of her own which has really gave her a sense of achievement. (staff, interim stage)*

*One woman is being considered for a property (she has an arson offence). The housing company stated it is directly because of the Footsteps support that she is being given this chance. Another woman has said that she has now been sober for a year and that a lot of this was because of the support offered by her footsteps caseworker. The staff have really pulled together. (staff reflective log)*

<sup>32</sup> Two women did not respond to this specific question. 11 women did respond to this specific question, and all 11 women indicated that the group was helping them with their day to day lives.

<sup>33</sup> This reflects the case management data – representing 89% of the 296 women referred in to Footsteps.



These outcomes are particularly notable when considering the specific needs and challenges faced by the client group. This is particularly impressive, and a credit to the Footsteps project team, considering the many barriers and challenges faced by the client group (see above).

# OBJECTIVE 1: IMPROVED MENTAL HEALTH AND WELLBEING FOR FEMALE OFFENDERS WITH COMPLEX NEEDS

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## A) KEY ACTIVITIES

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Footsteps was able to support clients' around health and well-being by:

- enabling access to specialist support and interventions
- providing direct mental health support
- enabling improved health seeking behaviours

The overarching impact of the Footsteps project on clients' health, wellbeing and self esteem is evident. As one client stated:

*My self-confidence is a lot better. I still have to keep myself safe as I'm vulnerable to going down that dark road again, but it's about being aware of it. Footsteps has shown me safe places. (client, end of project)*

The overarching impact on women's health and wellbeing is also reflected by staff, for example:

*A client who had repeatedly tried to end her life now managing her mental health as a result of the project. (staff, interim stage)*

Stakeholders responding to the stakeholder survey indicated the impact of the project in this area; of the eight professionals<sup>34</sup> responding who worked with a Footsteps client, **100% agreed that the project had improved clients' health and/or wellbeing.**

As one stakeholder elaborated:

*The Footsteps service has had a positive impact on the women worked with. I have seen first hand the difference the support has made to women upon release from prison, including being accommodated. The emotional and practical support the service gives has helped women to realise their own potential and diverted them from re-entering the criminal justice system. I have seen the impact that having positive relationships with other women has had during the art group - the supportive and empowering nature of the group to develop self expression has been phenomenal. (stakeholder, end of project)*

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<sup>34</sup> Representing the following sectors: probation, police, health, housing.

The following case studies present examples of how clients have been supported with their mental health and wellbeing.

#### **Case study: Yara's story**

Yara<sup>35</sup> was referred to the Footsteps service from the resettlement team. Yara has social anxiety and was becoming very distressed at the thought of her release date approaching; she would frequently cry uncontrollably and was self harming. She was frightened of the unknown and what would happen when released.

The Footsteps case worker introduced herself to Yara before Yara's release date to start building trust with the client, informing her of what would happen at the gate pick up, and reassuring the client that there would be support and stress relievers in place to help her get in the car. The caseworker spent time with Yara, allowing her to go at her own pace. On her release, Yara was met at the gates by someone familiar. Yara was provided with toiletries on her release, which she was very grateful for, as well as a phone so that the case worker could keep in touch with her. She was supported to get to a bail hostel by the case worker, which she has since been engaging well with.

Yara has received ongoing support from Footsteps. For example, the case worker has also supported Yara to the hospital for a minor operation. With the support of the Footsteps team, Yara was able to navigate the busy hospital waiting area, which she stated she would not have been able to do before due to her social anxiety.

#### **Case study: Lily's story**

Prior to her referral to Footsteps, Lily had a long history of rough sleeping in London, as well as significant mental health and substance misuse issues. Lily was met by a Footsteps Caseworker upon release and was supported initially with a homelessness application. This was rejected for lack of information and Footsteps provided emergency accommodation in a B&B while this was appealed. Lily's accommodation was later secured.

Lily found engagement difficult and was later returned to custody, during which time she requested to be re-referred to Footsteps. She was visited by a Footsteps Caseworker in custody to make release-day plans and offer her reassurance and support. After her second release, Lily was supported with both housing and benefits applications, both of which were successful. Staff also assisted Lily through provisions of food and toiletries, by attending an ID appointment, registering her with a new GP surgery in the local area, and ensuring she was prescribed her mental health medication.

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<sup>35</sup>Not the client's real name. All names have been changed.

Lily has since told her caseworker that she couldn't have done this without the help of the Footsteps team and would have been completely lost and given up trying if she had been on her own.

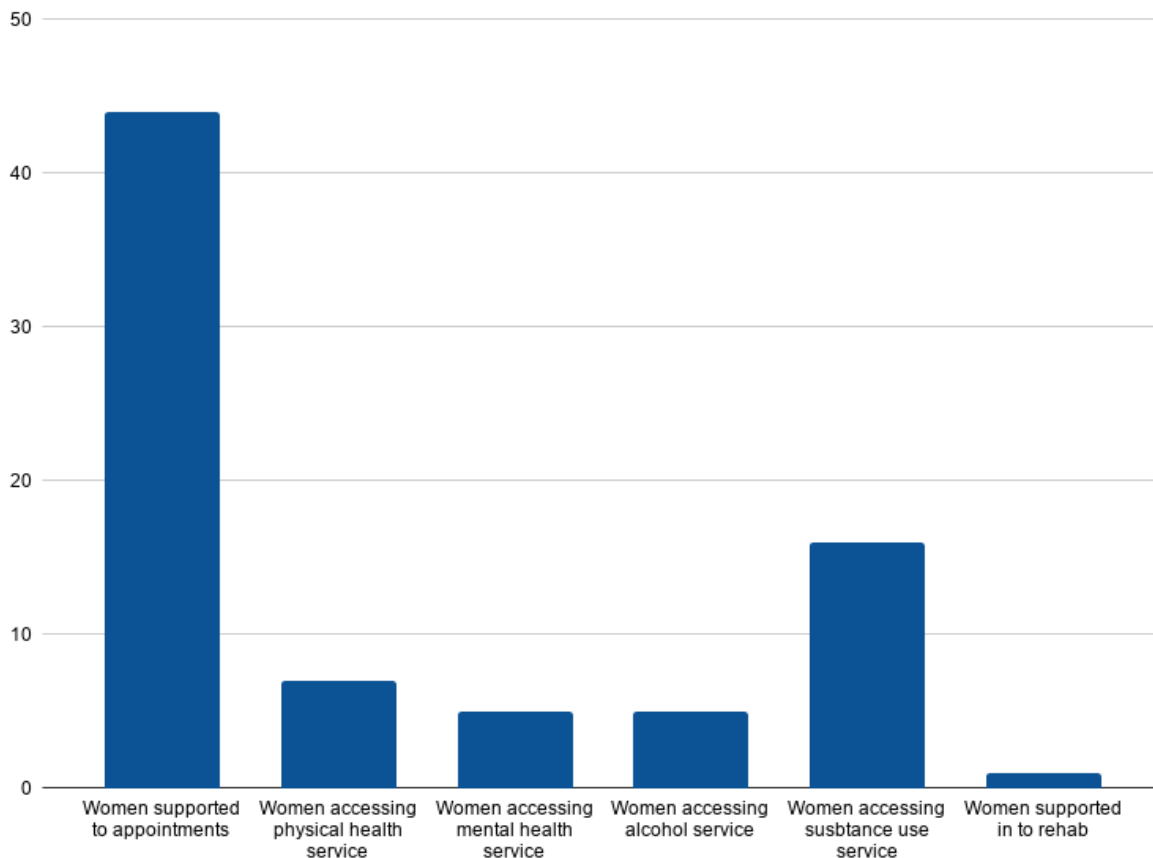
## B) ACCESSING SUPPORT FOR PHYSICAL AND MENTAL HEALTH

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One key area of support that Footsteps provided to clients was enabling access to key physical and health services and interventions.

The successes in supporting women to access such services and interventions are captured in the following graph, which depicts key activities undertaken with the client group on an average month of service delivery (between September 2019 and January 2020)<sup>36</sup>.

**In average month of Footsteps frontline service delivery:**



<sup>36</sup> This reflects the case management data – representing 89% of the 296 women referred in to Footsteps.

Case management data evidences Footsteps clients being supported to access a range of services and agencies to address their physical and mental health and wellbeing.

The above graph presents the average number of women supported each month (between September 2018 - January 2020) in relation to physical and mental health support: Indeed, case management data evidences that<sup>37</sup>:

- Footsteps caseworkers supported clients to a total of 969 appointments over the course of the project. This averages out at women being supported to 44 appointments per month.
- Caseworkers supported women to access a GP, dentist or other physical health intervention 107 times over the course of service delivery; on average, seven women were supported to do so each month.
- Caseworkers supported women to access a mental health service 85 times; on average, five women were supported to do so each month.
- Each month an average of five women were supported in to alcohol services and 16 in to drug services.
- Clients were supported in to rehab 18 times.

Footsteps' successes in supporting clients into physical and mental health interventions and services is repeatedly evidenced throughout the data. For example, clients shared the following insights:

*I get really bad anxiety around doctors appointments and I went to my dentist appointment the other week and (Caseworker) came with me as I was terrified. It's really nice having someone who has been through similar situations, that we are from the same background. Without her I'd be dead, that's the god's honest truth. (client, end of project)*

*I was able to get proper medical care and attention... my mobility has improved (client, interim stage)*

*I got a diagnosis... I've been trying to get mental health help for years, and then through these guys I got referred to the community mental health team straight away,*

<sup>37</sup> This reflects the case management data – representing 89% of the 296 women referred in to Footsteps.

*and they were the ones that have diagnosed me. Now I know what I'm dealing with... and (could) learn to deal with it and get the help that I need.... (before Footsteps) I really struggled to get the professional help that I need (client, interim stage)*

In addition to supporting clients to connect in with other support services, Footsteps Caseworkers were able to provide direct support around clients' mental health and wellbeing through on-going 1:1 work support.

*She does ring me and she will chat to me and by the end of phone call she's calm and she knows what she's doing and what's happening but before the phone call she was ready to go crazy on everyone, just give up, go back to jail, just give up on everything. I tell her no we can sort that out dont worry its not a problem it's an easy thing we'll do this and that and she starts to think about it and then she starts to calm down and allows me to go and allows me to help her. (staff, end of project)*

The impact of this on-going and direct support provided by Caseworkers is clear:

*She is like a best mate, not just a worker...I met her when I was in a really bad mental health space...I had problems meeting people, especially people coming from a place of support, as I'd been let down so many times by mental health services, by my doctors ... She made me believe I can do it myself. (client, end of project)*

Furthermore, evidence suggests that Footsteps enabled clients' to increase health seeking behaviours. Those taking part in the evaluation referenced a range of increased health seeking behaviours from reducing substance use, reducing self harming and increased exercising. The following quotes from clients evidence this:

*The exercise class. On a saturday morning, it's a mixed group, it's really good. Before I would never have done that, I would have been too wary because of mental health stuff. (client, end of project)*

*I was self-harming very badly since the age of 12, well last time I self-harmed it was april and I don't think I would have stopped if it weren't for (my Caseworker). (client, end of project)*

*My Footsteps worker encouraged me when I was feeling down not to use on top of script. (client, end of project)*

Indeed, **88% of stakeholders responding to the stakeholder survey who had worked directly with Footsteps clients<sup>38</sup> agreed that they had seen an improvement in clients' health seeking behaviours as a result of the project.**

<sup>38</sup> This includes professionals from the following sectors: probation, police, health, housing.

## B) SERVICE DELIVERY IMPACT ON WELLBEING AND MENTAL HEALTH

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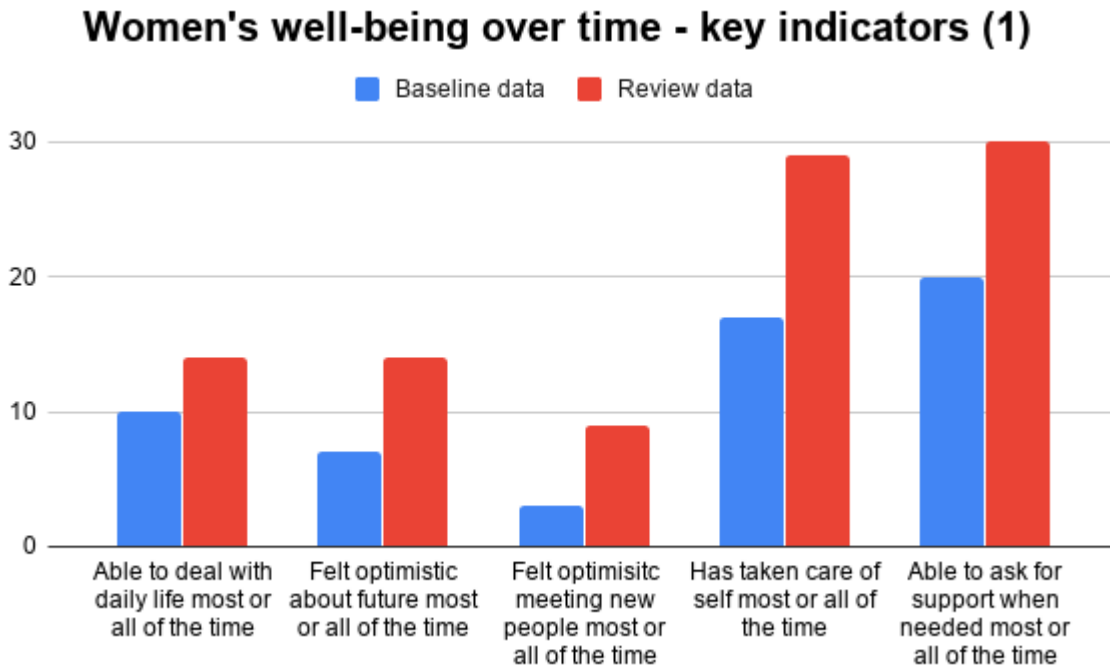
Surveys were completed by, or for, 106 clients between September 2018 and January 2020, providing a score on a scale of 0 - 5 in relation to seven key wellbeing indicators.

Comparative data - where we are able to compare how women felt at two different stages of project delivery - is available for 43 women (15% of the total client base). This comparative data provides a snapshot of how women's wellbeing has changed over time - after, on average, six months of additional support from the Footsteps team.

The comparative data shows that there are improvements across the key wellbeing indicators used for the evaluation. Following an average of 6 months of additional support, **women feel more optimistic, able to deal with daily life, able to take care of themselves, positive about meeting new people, and less depressed/ anxious and isolated.**

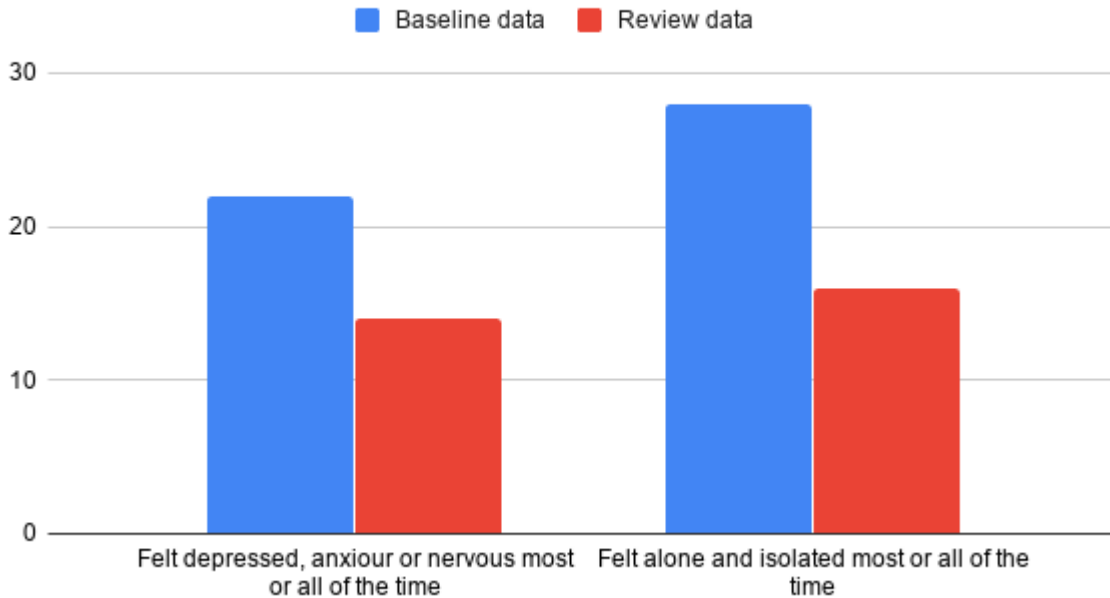
The following graphs demonstrate the difference between the 'baseline' and 'review data' for 1) the positive indicators and 2) negative indicators:

### 1) Comparison of client's positive indicators



## 2) Comparison of clients' negative indicators

### Women's well-being over time - key indicators (2)



**Following an average of six months additional support from Footsteps, the number of clients who felt able to deal with daily life at least most of the time increased from 53% to 74%.**

Furthermore, it is of note that 19 women went up on the scale of how well they were able to deal with daily life. When a statistical test was run, this increase was shown to be statistically significant - meaning that the increase is unlikely to have been down to chance, and likely to be a result of the intervention in place.<sup>39</sup>

**The number of women who felt optimistic about the future increased from 16% of women to 33%.**

Eleven women had an indicated increase in how optimistic they felt, moving up at least one value on the given scale. When a statistical test was run for this measure, the increase was found to be statistically significant (see above).

Other measures show clear changes in how women felt following an average of six months additional support, although were not found to be statistically significant. For example:

- **The number of clients taking care of themselves either 'most' or 'all of the time' increased from 40% to 67%.**  
45% of women went up at least one level on the scale of how well they were able to take

<sup>39</sup> A Wilcoxon ranked test was run to test statistical significance and the difference of means. This found that  $p < 0.05$ , therefore indicating a statistical significance in the difference between pre and post intervention data sets.



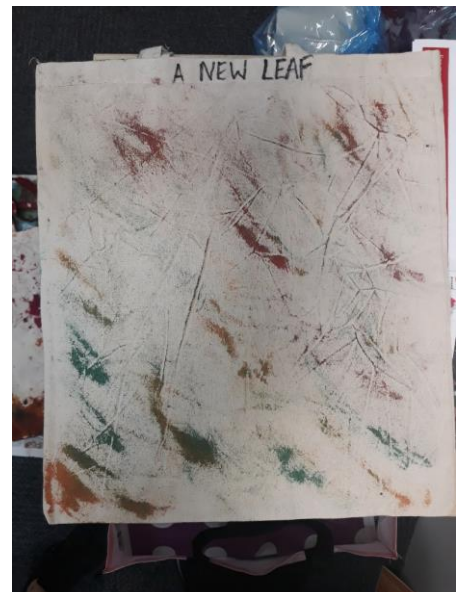
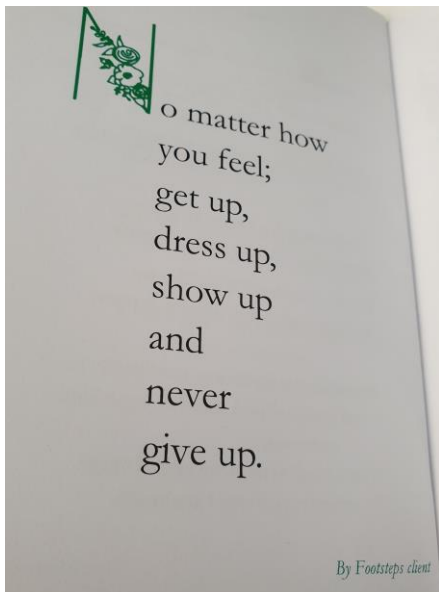
care of themselves.

- **Those able to ask for help from 47% - 70%.**  
45% of women went up at least one level on the scale of how well they felt able to ask for help.
- **The number of women feeling depressed or anxious decreased from 51% to 33%**  
16% of women went down at least one level on the scale of how depressed or anxious they felt.
- **The number of clients feeling isolated or alone decreased from 65%- 37%.**  
19% of women went down at least one level on the scale of how isolated or alone they felt.

### C) KEY FINDINGS - WOMEN'S GROUP IMPACT ON WELLBEING AND MENTAL HEALTH

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Footsteps clients across the three geographical areas had the opportunity to take part in the regional Footsteps women's group, held once a week. These groups brought women with similar experiences together to socialise and connect while providing a range of therapeutic and/or leisure activities and/or opportunities to develop life skills. Examples of activities undertaken through the women's group include: aromatherapy, arts and crafts, journal writing, creative writing, cooking lessons and cultural trips.



Additional well-being data and feedback was collected in relation to the Footsteps Women's groups, providing women with the opportunity to report on how the group was impacting their day to day lives, as well as a space to reflect on how they were doing each session.

Those taking part in focus groups also reflected on the impact the group was having on their wellbeing, self esteem and confidence. Key findings include:

- Of those responding to the relevant questions<sup>40</sup>, **100% of responses<sup>41</sup> indicated that the group helped women to manage their day to day life and had improved their wellbeing.**
- **100% agreed that they were at least 'a little' more confident as a result of attending the group.**
- **71% of responses indicated that women felt at least 'quite a bit' more optimistic as a result of attending the Footsteps women's group.** The remaining responses (29%) agreed that this was at least a little true.
- **76% of responses stated that respondents felt at least 'quite a bit' less anxious or stressed as a result of attending the group.** 19% agreed that this was at least a little true.

The on-going impact of the women's group on individuals' lives is reflected in the additional feedback provided by respondents, as well as in the focus groups held across all three Footsteps areas. For example:

*For me (the group is) part of my survival. This is something to look forward to in a week. On some days you are so depressed and everything is bleak, this is something that pulls you out of those depths as something to look forward to as it is genuinely genuinely something to uplift you. (client, end of project)*

*No matter how you turn up, you always feel better by the end of it. (client, interim stage)*

*Since joining the group I have become more confident, stronger, happier, it has made such a wonderful impact on my life, I am now a different person, much more outgoing. (client, end of project)*

Finally, during each session, those attending the group were asked to reflect on their mood and wellbeing at the start of the session, and then again at the end.

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<sup>40</sup> One Footsteps client completing the evaluation form left this question blank.

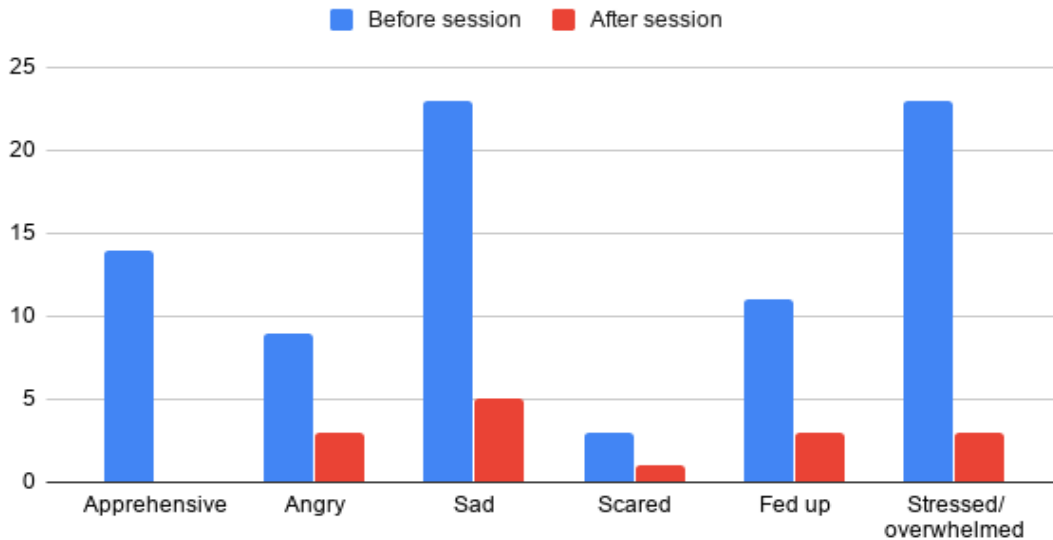
<sup>41</sup> Note that 13 responses were provided at an interim stage, and 8 at the end of project stage. These findings present the findings across both sets of respondents - but this may mean women have responded more than once.

The results from this exercise carried out in 43 sessions (22 in London, 5 in Yorkshire, and 16 across two groups held in Norfolk), attended by on average two Footsteps clients, evidences an increase in women feeling happier, optimistic and able to deal with their lives alongside a decrease in women feeling sad, angry and overwhelmed.

This is demonstrated in the graphs below:

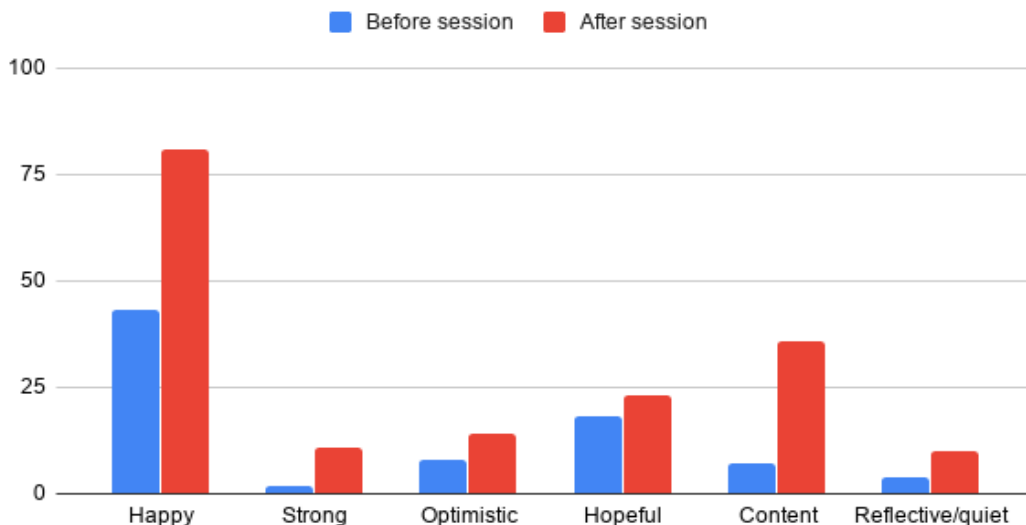
### 1) Negative emotions

Womens group - participants moods before and after sessions



### 2) Positive emotions

Womens group - participants moods before and after sessions



### It is of note that:

- **Fourteen women came to sessions feeling apprehensive, however no women left the session feeling this way.**
- **Following sessions women felt generally much happier.** Before participating in a women's group session, 43 women indicated that they felt happy; following the session(s) this had increased to 81. On average, two women a week left the group feeling happy.
- **Following women's group sessions, women felt significantly more content.** The number of women indicating that they felt content increased more than five-fold (from 7 to 36) following participation in a women's group session.
- **Women left the sessions feeling 'strong on 11 occasions.**
- **Twenty-three women came to sessions feeling stressed over overwhelmed; only three women left feeling this way.** Similarly, 23 arrived feeling sad, and this was reduced to five women.<sup>42</sup>

It is also of note that, when carrying out closer analysis of women's reported happiness over the life of the project, women's happiness generally increases over time. That is - a general trend identified in the data is that more women report feeling happy *both before and after taking part* in women's group sessions as the project progresses.

This could be due a number of reasons, including women increasingly look forward to the positive social interactions enabled by the women's group before the session begins. It could also suggest that for women who are consistently attending the groups, on-going attendance of the women's group has a cumulative impact on women's happiness.

That said similar tests were run in relation to women's reports of other moods - including stress levels, sadness, optimism and contentedness - this trend is not apparent in these other areas. Looking at moods across the board over the life of the project, improvements in women's self-reported mood is generally not linear over time. This reflects the reality that women's journeys to recovery are not linear<sup>43</sup>.

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<sup>42</sup> It was noted in additional comments provided by the staff team that in the final women's groups of the project, women felt sad because of receiving news that a worker was ending/ they were going to miss the group.

<sup>43</sup>See AVA (2019) *Breaking Down the Barriers*: <https://avaproject.org.uk/wp/wp-content/uploads/2019/02/Breaking-down-the-Barriers-full-report-.pdf>

## OBJECTIVE 2: ENHANCED SOCIAL INCLUSION FOR FEMALE OFFENDERS WITH COMPLEX NEEDS

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### A) KEY ACTIVITIES

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The Footsteps project sought to enhance social inclusion for female offenders. The project was able to do so through a number of key activities, including:

- Caseworkers building positive and trusting relationship with clients
- Encouraging women to be social and connect by taking them out for coffee and encouraging them to take part in group work
- Supporting women to connect with family members, build positive networks and receive peer support
- Providing safe space to socialise and connect via the Footsteps women's group

This is evidenced by the following reflection from Footsteps Caseworker and project case study.

*I think we've helped with their isolation, taking them out, doing nice activities. The wellbeing, I have to say it had a massive impact on their wellbeing since we started supporting them. (staff, end of project)*

#### **Case study: Dee's story**

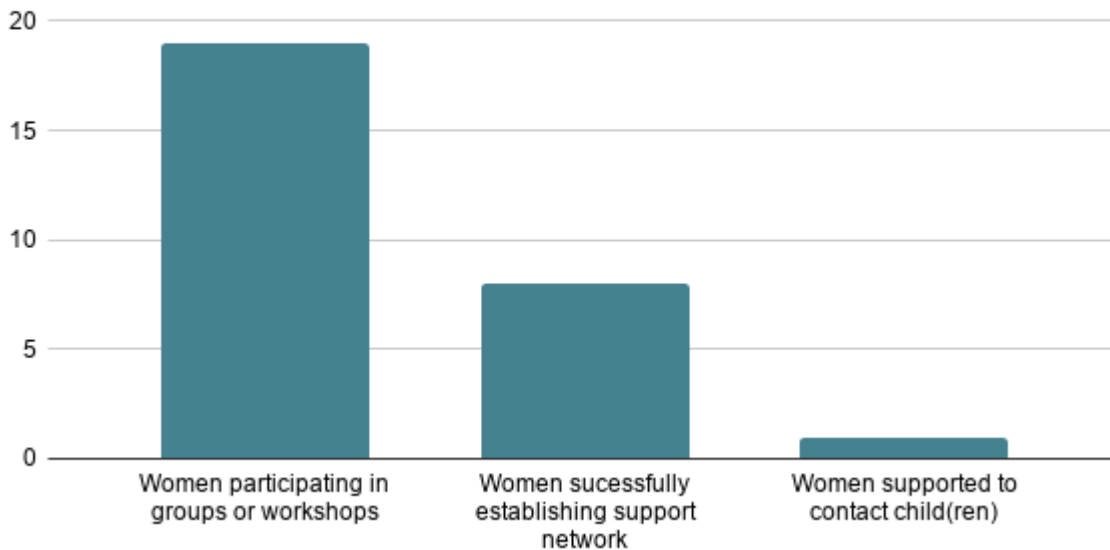
Dee was referred to Footsteps by the local prison Resettlement team so that she was able to receive support with her return to the community. Dee was met on the day of release and supported to appointments. Arrangements were made with the help of Footsteps to manage her substance use and successfully secure and move into a Dry House in the local area of her choice.

Dee started to attend the Footsteps group the week after she was released to help fill up her week with positive activities. Through the group and support received, Dee was enabled to overcome her social anxiety and contribute well to the group. The group enabled her confidence and self-esteem to build. Through the group's trauma informed approach creating a safe and sensitive environment for discussions, she was able to process and normalise her previous traumatic experiences.

With newfound confidence, Dee was supported to complete a 4 week course at a café where she now works part time.

Key activities undertaken with Footsteps clients' in an average month are captured in the following graph<sup>44</sup>:

### In an average month of Footsteps frontline service delivery:



## B) IMPROVED SUPPORT NETWORKS

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Case management data shows that each month of service delivery, **an average of eight women were enabled to successfully establish support networks and four to improve family lives.**

One huge success of the project was the outcomes for women who were able to access their children. **Indeed, Footsteps has supported seven women to successfully access their children.** As one client reports:

*(My biggest achievement has been) Getting my kids back... I wouldn't have been able to do that without Footsteps, and sober! (client, interim stage)*

Footsteps provided a range of support to enable women to make contact with their children. The project has also provided clients with support around developing life and parenting skills. For example, three women were supported to access parenting programmes.

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<sup>44</sup> This reflects the case management data – representing 89% of the 296 women referred in to Footsteps.

The data collected also evidences a decrease in clients' feelings of isolation and loneliness.

*The group has helped me so much. When I was going through the courts to get my children back I struggled with suicidal ideation and even planned my own suicide. The group stopped me from isolating myself and was a safe space to express my emotions. (client, end of project)*

For example, in comparative wellbeing data, we observe **the number of clients feeling isolated or alone decreased from 65% - 37%, following an average of six months additional support from Footsteps.**

This is also reflected in a number of case studies shared, highlighting how clients were able to use phones provided by the project to contact and re-connect with relatives living in different cities.

A reduction in clients' feelings of isolation and loneliness has also been enabled by the Footsteps Women's Group.

For example, **95% of the responses to Women's group feedback forms indicated that women had felt able to meet new people and build positive connections through accessing the group.**

**67% indicated that women felt at 'quite a bit' less isolated as a result of the group.**

Furthermore, in focus groups with clients, women shared stories of how - having been provided with a safe space to socialise - they had been able to support each other and build positive relationships with one another. Others articulated how meeting with women who had had similar experiences to them helped with their feelings of isolation and loneliness.

*Because it's a safe space, it helps me to be myself amongst other people because the rest of the time I'm isolated and there's no one to talk to, no one to just have a laugh with or even to share the everyday with. I don't have another space in my life where I can do that. I do that here and feel safe and supported and lifted. The women here are just amazing and supportive and wonderful. They actually listen, and their encouraging and don't judge and the staff as well. It's extremely extremely helpful. For me it made a huge difference. (client, interim stage)*

*I don't have a lot of friends. Whereas when you come here you can talk about literally everything. It's a good release to come here. (client, interim stage)*

*This service has helped me overcome my social anxiety in groups. I improved my confidence enough to do some volunteering in a shop. (client, end of project)*

Finally, members of the Footsteps team highlighted the importance of building trusting relationships. This was also a key relationship for clients, many of whom had lost trust in professionals and services; by building trust with clients, caseworkers were subsequently able to support service users to access other additional and external services and agencies.

One Footsteps caseworker, for example, highlighted their following key achievement;

***Most of my clients are still engaging and that I have built a trusting, professional relationship with them. (staff, interim stage)***

This was also reflected in the focus group with clients. Women highlighted how realising they could trust people made a huge difference:

***Having someone to advocate for you on that day is so much better, you feel someone is fighting your corner. I think as well just taking you away from the isolations and making you feel like you matter and somebody cares enough to take the time. (client, interim stage)***

***It's definitely changed a lot of things in my life... I am doing more, I get out more.... It's started the ball rolling, trusting with things, because you realise there's a lot of good people. (client, interim stage)***

Through building trust in Footsteps Caseworkers, the project was able to enable better and improved relationships with other professionals and agencies. The network of support was strengthened - not just in relation to friends and family networks but also other forms of support.





## OBJECTIVE 3: FEWER WOMEN REOFFENDING

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### A) KEY ACTIVITIES

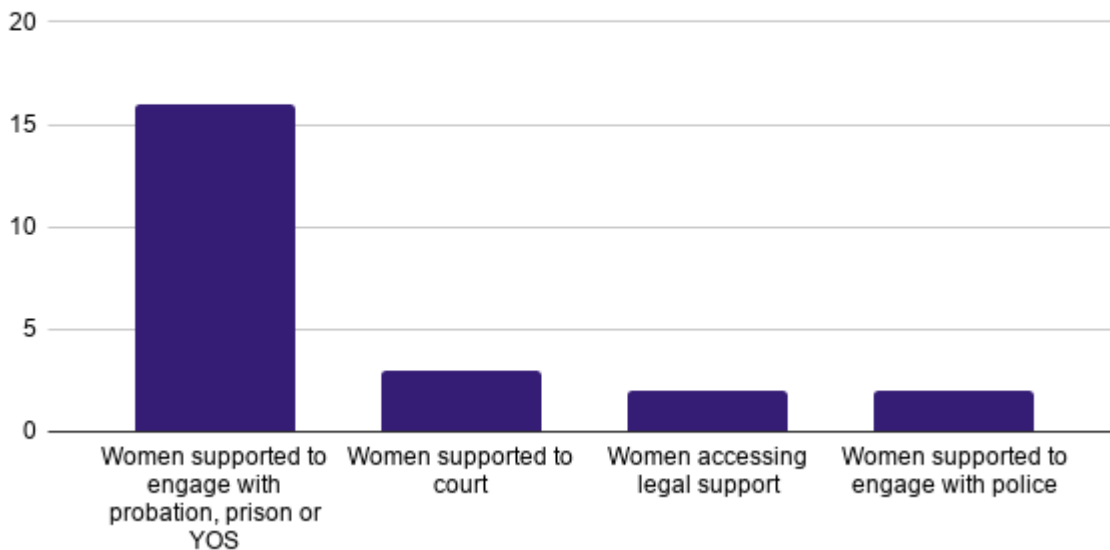
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The Footsteps service sought to reduce the number of women re-offending. Key activities undertaken to enable this include:

- Holistic 1:1 support to stabilise financial, emotional and physical wellbeing
- Support to engage with the criminal justice system and requirements, including attending court hearings and adhering to probation
- Provision of relevant interventions

An example overview of key activities undertaken with women, on average during one month of Footsteps, is captured in the graph below<sup>45</sup>:

#### In an average month of Footsteps frontline service delivery:



The following case study provides an example of work carried out with one Footsteps client to prevent re-offending.

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<sup>45</sup> This reflects the case management data – representing 89% of the 296 women referred in to Footsteps.

### **Case study: Bea's story**

Bea has been involved in the criminal justice system for assault and theft. She currently has to present at (local) police station Monday, Wednesday and Friday as part of her bail conditions.

Bea is street homeless, alcohol and heroin dependent, and uses crack-cocaine daily. She is also with a partner known for domestic abuse. She has 2 children that currently live with their paternal grandmother. Despite her level of need, Bea is not in receipt of any support from drug or alcohol services, nor in receipt of any benefits. She has been given a space at a local hostel which she does not want; she is not engaged with staff at the hostel. Bea suffers from low self esteem and anxiety.

Bea was referred to the Footsteps service. Bea's Footsteps case worker has supported her to attend the police station and adhere to her bail conditions. Bea was also supported to attend her court hearing, receiving help to engage and co-operate with court staff and probation services. The case worker has also encouraged Bea to engage with her probation officer. Bea has previously struggled with her bail conditions because she begs until the early hours of the morning and then sleeps until 11.30am; the Footsteps caseworker has been able to remind her of her appointments so that she doesn't miss them.

Additional support includes the caseworker liaising with the hostel, support to access benefits, acquiring ID in order to open a bank account and receiving support with buying food. Bea is also now able to speak regularly with her mother who lives in a different city, using the phone provided by Footsteps.

The caseworker has built up trust with Bea, enabling her to now ask for help and support when she needs it.

## **B) WOMEN ENABLED TO REMAIN IN THE COMMUNITY**

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There is little data relating to the number of clients who did or did not re-offend due to a lack of access to police reports.

However, case management data captures some key outcomes and successes enabled by the project<sup>46</sup>.

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<sup>46</sup> This reflects the case management data – representing 89% of the 296 women referred in to Footsteps.

- Caseworkers supported clients to a total of 55 court cases over the 16 months of frontline service delivery. This equates to an average of 3 clients being supported to court hearings each month.
- On average, each month of Footsteps, 16 women were supported to engage with prison, probation or local young offending services. 2 women a month were supported to engage with the police.
- Each month of Footsteps service delivery, an average of eight women a month demonstrated an improvement in their ability to manage risk . As a result women have been able to look at the consequences of their potential actions, resulting in a reduction of risky behaviour.
- Legal support was accessed by clients 32 times by Footsteps clients.

Furthermore both professionals working alongside Footsteps clients and the women themselves repeatedly highlighted how the service had enabled many women to adhere to their probation, adjust to - and remain within - the community, and break historical cycles of re-offending. It was clear that things would have looked very different for many women if Footsteps hadn't been there - particularly to meet women at the gate.

*If I didn't have the support of Footsteps I can 90% say I would be back in prison drinking... They've supported me so much with getting to court. If I'd have missed once court appearance for my children then I'd have thought 'this isn't worth it, I don't give a shit if I offend or drink...' (client, interim stage)*

*The service has been brilliant, I would have given up and been recalled months ago if it wasn't for Footsteps' help (client, interim stage)*

*I am still quite new on the journey, seven weeks I've been out .... The chances of reoffending will be a lot higher without my support worker as I rely on her more than anyone. (client, end of project)*

Members of the Footsteps team as well as key stakeholders also recognised the impact of the project on women's offending behaviours. Professionals' reflections highlight how the project's holistic approach to building of women's self esteem enabled clients to stay in the community - if not permanently then at least for longer and sustained periods of time.

Footstep's ability to prevent or defer some clients re-offending is a huge achievement, especially

given what is known regarding the high rates of re-offending for this client groups<sup>47</sup> (as outlined in Section Four (c) of this report). Any disruption to the revolving door cycle of release and re-entry for this client group is a notable success.

As one stakeholder and member of staff state, respectively:

*I have seen first hand the difference the support has made to women upon release from prison, including being accommodated. The emotional and practical support the service gives has helped women to realise their own potential and diverted them from re-entering the criminal justice system. (stakeholder, end of project)*

*We can take that person and build them back up and now that person is working, she's paying her way into society. I think that's a great achievement because if we weren't there she'd just go back in, back in, back in. It costs so much for her to stay there when we can turn her around and she's now paying her way in society, she is part of society now, she's working, she's not in that system anymore....just stopping that in and out, stop that, block that, and get them when their head is clear and they never want to go back inside. (staff, end of project)*

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<sup>47</sup> Women in Prison. (2017). *Key facts*. [online] Available at: <https://www.womeninprison.org.uk/research/key-facts.php> [Accessed 13 Feb. 2020].

## **OBJECTIVE 4: VOLUNTEERS TO GAIN PRACTICAL SKILLS, QUALIFICATIONS**

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### **A) KEY ACTIVITIES**

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Objective 5 of the Footsteps project is to provide volunteers with opportunities to gain skills and qualifications.

Between the launch of the service in September 2018 and January 2020, **12 volunteers supported the Footsteps project.**

**Each month Footsteps was supported by up to two volunteers and up to six community based Peer Advisors.**

It is evident that the picture of volunteers working for Footsteps is greatly varied for the different regional teams. As outlined above, it was noted by members of the Footsteps management team that recruiting appropriate volunteers had been a key challenge of the project to date for some of the teams.

The recruitment and retention of appropriate volunteers was most effectively carried out in the Yorkshire team. **An estimated 83% of the Footsteps volunteers are based in the Yorkshire Footsteps team.**

It is of note that the vast majority of volunteers are women with lived experience.

### **B) KEY FINDINGS**

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#### **1. Overview of achievements**

Data shared by the Yorkshire team highlights a number of key successes and achievements for the ten volunteers who have worked for Footsteps in this geographical area. It is of note that nine out of ten volunteers for Yorkshire Footsteps are women with lived experience.

- **All volunteers in the Yorkshire team have completed key training and development activities** - for example, completing an online safeguarding course and shadowing case workers.

- **Volunteers have all completed awareness sessions on a range of issues** including domestic abuse, mental health, alcohol and substance use, suicide and self-harm, criminal justice.
- Some volunteers have completed additional training on top of this. For example, **four volunteers have completed a level 2 autism awareness** course as well as the trauma informed workshop and Autism in Women in the Criminal Justice System training.
- **Three volunteers have gained the IAG3 qualification.** A further four have taken steps towards gaining this qualification.
- **Five volunteers have been enabled to secure paid employment.** This includes four volunteers securing a job with St Giles Trust following their volunteer placement, and one volunteer securing a job with the police.
- **Three peer advisors were involved with delivering the Yorkshire Footsteps women's groups,** thereby gaining additional groundwork experience.

While schemes for volunteer involvement were not established in Norfolk or London based Footsteps teams to the same extent, two volunteers were supported the work of the London team. One who had been supported to complete her IAG3 prior to Footsteps successfully secured paid employment with the Footsteps team.

The impact of having this peer advisor on the team was clear; women taking part in the women's group repeatedly praised /reiterated the value of this team member.

## **2. Supporting volunteers personal and professional development**

The opportunities presented to volunteers to learn, develop new skills, and acquire new knowledge are also evident.

The invaluable work experience offered to volunteers is evidenced by the following volunteers comments when responding to the end of project volunteer survey stated:

*(My experience) will help me succeed in paid work and deliver a good professional support service. (volunteer, end of project)*

As two volunteers respectively stated:

*I feel like my eyes have been opened up. Just when I think I can't learn anymore or I'm not surprised, I am. I just find that there are nice people who unfortunately get into bad situations, and that's not different to people in prison, so my tolerance and understanding has gone way up. And my respect has gone up, so much, the respect I've got for them dealing with everyday life is just amazing. (volunteer, end of project)*

*Being able to do some volunteering and be able to give opportunities to women... I think you gain a lot from it and from the support. It's something I always look forward to.... I'm involved in setting up a hostel in Brixton; I'm hoping to be able to use some of the skills I've developed here to be able to work with the women in the hub there. (volunteer, interim stage)*

As well as key learning and development opportunities, the data collected highlights a number of other ways in which volunteers benefited from the experience of supporting the delivery of Footsteps.

Volunteers responding to the volunteer survey at key stages of the projects were asked to record their goals for working with Footsteps, as well as the skills they had gained. Examples of skills gained shared by respondents include:

- handling case load
- confidence when dealing with clients issues
- developing empathy and understanding

Volunteers taking part in data collection activities for the evaluation also described how their experience working for Footsteps had been an empowering experience that had enabled them to gain confidence.

*Working with Footsteps has been very positive. It helps me find myself as a person and put qualities to use. (It's) given me the confidence to do things I may not have been able to do before. (volunteer, end of project)*

*It's definitely done wonders for my confidence. As I said, I was struggling between prison and coming out and when I came out I was struggling with differences in you know technology and transport... Working with different people aside from people I talked to in prison has made a massive difference to me, it brought me out a bit more... I'm just so grateful of being given the opportunity to have a role in the organization and ultimately being given that chance to change my life. I didn't think I'd get that when I was coming out and I thought well if people know my background they're just going to write me off. (volunteer, end of project)*

It is evident that for some volunteers, their time working for Footsteps had helped them on their own journeys to recovery and adjusting to living in the community. One volunteer responding to

the end of project survey, for example, stated that the project had brought them “*happiness knowing I can make a difference to someone's life*”.

This was also reiterated by one member of staff stated in their reflective log:

*I have collated feedback from a peer advisor stating that she was very satisfied with the support she has received, that it has helped her sustain her own recovery, and that she feels more hopeful and confident now. (staff, end of project)*

### **3. Additional benefits for the Footsteps project**

Members of the Yorkshire Footsteps team highlighted a number of other successes of having the volunteers as an integrated part of the project.

For example, it was highlighted that having volunteers as part of the Footsteps service can be beneficial to clients too, providing the opportunity for them to connect with peers advisors who have had similar experiences to them. Another highlighted benefit for clients was the empowering experience of peer advisors working as part of the Footsteps team.

*Clients see them running a group and disclosing their experiences. It gives them a massive amount of confidence (staff, interim stage)*

This was also evident in the phone interview held with one client, who described how the Footsteps service had inspired her to seek further qualifications through St Giles Trust.

*I'm looking into doing IAG with them in September... They've really inspired me and I really enjoy the work that they do. (volunteer, interim stage)*

Furthermore, having volunteers as part of the project was also of help to case holders; it was reflected that allowing peer advisors to take on lower risk clients freed up time and capacity for other members of the team.

As the successes of setting up and working with volunteers have varied between the three Footsteps teams, opportunities for shared learning between the teams have been identified.

The following provides insight into the Yorkshire team's approach to recruiting volunteers, where this process has been the most successful to date, highlighting learning for other Footsteps areas.



### **Case study: establishing volunteers in Yorkshire**

The Yorkshire team recruit through the St Giles Trust Peer Advisor Centre – a pre-existing centre for people with lived experience, who train to gain the IAG3 qualification whilst volunteering.

The Peer Advisor Centre team work closely with the Footsteps team, and are based within the same office to allow for effective co-working.

They advertise for volunteers on specialist websites, such as Doing Good Leeds and Do-It.org, as well as via Volunteer Fairs and universities.

A thorough interview process has been embedded to ensure appropriate volunteers are recruited.

The senior worker manages the volunteer once they start and they are also supported by the Peer Coordinator, so any issues/concerns are addressed quickly.

## OBJECTIVE 5: RAISE AWARENESS AND PROMOTE SUPPORT MODELS

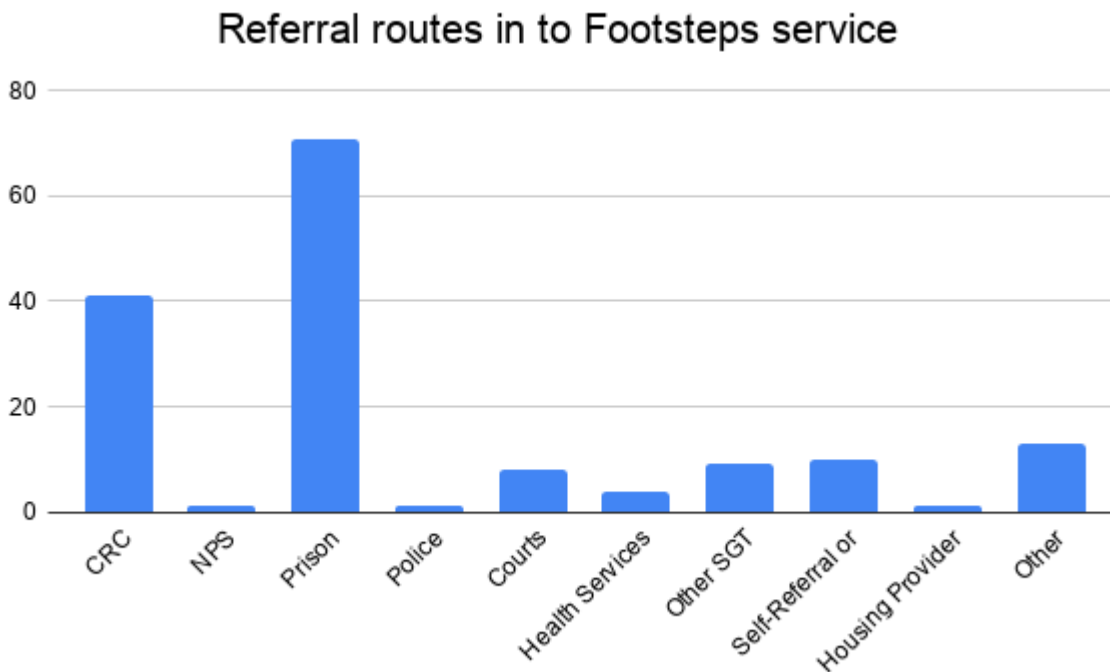
The Footsteps project sought to raise awareness and promote support models for women facing multiple disadvantage.

Key activities to ensure that multi-agency professionals were aware of the Footsteps project, as well as other support options, were taken as follows:

- Promoting the Footsteps project through local partnerships
- Establishing cross sector partnerships and referral pathways for clients
- Providing information via Footsteps specialist training

In year two of project delivery, key data around referral processes and routes was captured. This evidence demonstrates that professionals across a range of different sectors were aware of - and able to refer into - the Footsteps service.

In year two of the project, for example, referrals were received from a range of services including (in order of frequency): prison, CRC, courts, health services and police. Many women also self-referred. Routes for referral are captured in the graph below<sup>48</sup>.



<sup>48</sup> This reflects the case management data – representing 89% of the 296 women referred in to Footsteps.

*(I) built a really positive relationship with the prison and is now receiving regular referrals from them. This is an indication that they see real value in the service. (staff reflection log, end of project)*

Similarly, the Footsteps project raised awareness across its client group in relation to what support models were available to them. Footsteps staff were able to connect women in and establish referral pathways for clients into a range of services and agencies.

*I've had support with signposting to other agencies that might be able to help me which was really valuable. I had help with the service making phone calls and emails on my behalf. That's invaluable, those are the things I really needed and I couldn't do them myself. (client, end of project)*

*We've referred her to a lot of organisations which I've worked for in the past and you know now she does have that support that. I think that she's got an understanding that she does have rights. (staff, end of project)*

Analysis of the impact of Footsteps training and its impact on professional's knowledge around responding to women facing multiple disadvantage is captured under Objective 6. This evidences an increase in professionals' confidence to respond appropriately to the client group following the training. It could be assumed that this includes knowledge of relevant support models and interventions for the client group.

Finally, the Footsteps project team will be seeking to share learning from the Footsteps service delivery following the end of the project in 2020. This will include through a learning event (or events). Due to timing there is no corresponding data for such event(s), however, this will present a key opportunity for the project to further raise awareness and knowledge around appropriate support models.

## OBJECTIVE 6: IMPROVED AWARENESS OF AUTISM AMONGST MULTI-AGENCY PROFESSIONALS

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### A) STAFF TEAM LEARNING AND DEVELOPMENT

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In order to develop the staff team's awareness and understanding of key issues, Footsteps staff have completed a range of specialist training. For example, all Caseworkers and Senior Caseworkers, as well as one Trainee Caseworker and one of the area managers, attended the four day Footsteps induction training programme. This programme covered a range of topics including:

- ASD awareness
- Personality Disorder and Mental Health
- Formulation training
- Trauma informed practice
- Psychopharmacology

Additional training attended by some members of staff or individuals in the team ranges from domestic abuse awareness training, multiple disadvantage, universal credit, and supporting homeless women.

Members of the Footsteps team were asked to complete surveys at the start of the project, mid point and end of the project. This captured key learning about how the project was going, as well as any shifts in staff member's levels of confidence and understanding in responding to the client group.

This evidence shows that at the start and mid points of the project, members of staff had expressed lack of confidence speaking to clients about both mental health and autism. By the final questionnaire **100% of staff respondents stated they felt above average in confidence speaking about the topics of autism, mental health, personality disorder and complex trauma with their clients.**

An increase in confidence and knowledge is also implied by the fact that, by the end of the project, members of the team were more likely to seek advice and support in relation to client's experiences of autism, trauma and mental ill health from their colleagues at Footsteps, rather than other places. At the start of the project, staff were more likely to look for resources online.

## B) MULTI AGENCY PROFESSIONALS

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The Footsteps project provided opportunities for building effective referral pathways and enabling partnership working. As one member of the staff team reflected:

***Building positive working relationships with other services has been rewarding and has helped achieve hard outcomes for the clients. (staff reflection log, end of project)***

Through effective partnership building and multi-agency working, professionals from across sectors who worked alongside Footsteps were able to learn and develop their understanding and practice in relation to women with autism and/or personality disorder(s) facing multiple disadvantage. This is clear from the key findings captured in the stakeholder survey, which includes responses from probation, police, housing and health.

- 100% of survey respondents agreed that working with the Footsteps team had been beneficial to the service that they deliver. The vast majority (11 out of 12) indicated this to be 'very true'.
- 75% of responding stakeholders agreed that the Footsteps project had helped them to develop their responses to women with autism and/or personality disorders; the same number also felt that the project had enabled them to develop responses to women facing multiple disadvantage.
- 58% of stakeholder respondents felt more confident to effectively respond to the client group as a result of the information they had received through Footsteps.
- 58% of stakeholders also indicated that the organisation or service that they worked for had been able to develop their practice as a result of learning and information gained through the Footsteps project.

Some stakeholders provided further information indicating the specific ways in which they had been able to develop their professional or organisational practice:

***The organisation or service I work for has been able to develop it's approach to working with women with autism as a result of the Footsteps project. (stakeholder, end of project)***

There are direct implications for these stakeholders in terms of increased capacity and knowledge base; the majority indicated that they work directly with women with autism (83%),

women with mental ill health and complex trauma (92%), and women in contact in the criminal justice system (85%).

## C) TRAINING PARTICIPANTS LEARNING AND DEVELOPMENT

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Footsteps also took a targeted approach in developing multi-agency and professional capacity and knowledge in relation to women with autism facing multiple disadvantage. A key focus of the project was rolling out and delivering a series of specialist training sessions dedicated to this.

**Between October 2018 and January 2020 at least 8 specialist training sessions have been held across the three Footsteps geographical areas, including within prisons.**

**These training sessions reached 151 professionals.**

**Delegates taking part in the training include representatives from a range of statutory and voluntary services, both based within prisons and within the community.** Sectors represented at the training include (in order of representation) - mental health, probation, volunteers in prison, health, police, social services and prison services.

More specifically, attendees to the Footsteps specialist training included professionals from the following: Prison Service, Mental Health In Reach Teams, Prison Health Care teams, Prison Officers Substance Misuse teams, Police, Probation, Housing, Domestic violence case workers, Homeless services, Victim Support, Together Women Project, Behind Closed Doors.

Feedback surveys collated from training show that **professionals found specialist training on autism extremely useful, and increased delegates' confidence when working with women with autism.**

Professionals evidently found the training useful and insightful to enable the development of improved responses to this client group.

- **88% of participants agreed that the training was very helpful to them, scoring it eight or above out of ten.**
- **Furthermore, 92% agreed that the content met their needs in relation to developing responses to effectively responding to women with autism.**
- Participants' positive experiences of the Footsteps training is further reiterated by the fact that **97% of delegates stated that they would recommend the training to other professionals.**

Delegates provided feedback outlining how they would take learning from the training forward and apply this to their day to day work.

*I will be more vigilant when working with clients... I feel more equipped and have a better understanding. (training delegate)*

*(The training) will help when working with women with ASD females or those we suspect may be on the spectrum. (training delegate)*

*I've already tried to use the consolidated learning in my role... helping myself and my team deal with particular individuals. The information will be very helpful. (training delegate)*

Additional data collected for one of the specialist training sessions - held in August 2019 - captures further detail regarding the impact of the Footsteps ASD training sessions.

Pre and post training surveys were used to capture participants' level of understanding and confidence in key areas as a result of the training. 14 participants responded to the pre training survey, and 20 to the post training survey.

This snapshot evidences that, for this training session, where feedback was provided:

**100% agreed that their knowledge of women with autism and personality disorders had increased as a result of the training**

**100% agreed that their confidence in responding to the client group had increased**

**100% agreed that they had gained new skills as a result of the training**

**91% agreed that they had gained practical tools that they could use in their day to day work**

Furthermore, this snapshot evidences an increase in understanding and confidence responding to women with autism.

- Before the training only 7% of respondents rated their overall understanding of women with autism as high. Following the training, 39% of respondents rated this as high.

- We also see an increase in people's knowledge base for using appropriate language to talk about autism and personality disorders and responding appropriately to this client group: for both we see an increase from 7% to 39%.
- There is also an increase in participants' knowledge base around identifying key signs of autism. Before the training 14% felt at least quite confident in identifying signs; following the training this was true for 42%.

This snapshot also evidences an increase in confidence in relation to working with women with mental ill health. For example:

- Participants' confidence in responding to clients with complex trauma increased. Before training, 43% felt at least an average amount of confidence. This had increased to 78% by the end of the training.
- Participants felt better able to identify signs of mental ill health by the end of the training, with an increase from 29% to 53% of participants feeling at least quite confident to do so. Participants also felt better able to use appropriate language when talking about mental ill health. The number of participants who felt at least quite confident in this area increased from 7% to 33%.



## SECTION SIX: WHAT WORKS WELL

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In focus groups and interviews, clients, staff and stakeholders were asked to share thoughts on how the project is being delivered, and any recommendations for development. All those interviewed by the evaluator were extremely positive about the approach taken by the Footsteps team.

*They've been amazing, I can't fault anything that they've done. (client, end of project)*

*It has been the best support I have ever had (client, end of project)*

Clients and staff in particular described a holistic and person centred service that was open and non-judgemental, and provided welcomed consistency and routine. Particularly of note was the value clients placed on the service providing them with a consistent caseworker.

*Just being picked up, being shown you are important...even taking you places, or just having someone on the other end of the phone to talk to and say yeah today hasn't been good and thinking of ways to get through it. (client, end of project)*

### 1.Relationship-building

Relationship building was considered key to the progress clients made. The time and ability to form a relationship was something clients and staff discussed as fundamental to the trust and support established. For example, clients stated:

*All credit to the staff here that when we walk in here I don't feel that there is an authority approach towards me. Its pure support, it's not even like how can I help you it's like I'm here to help you. In other organizations i've been to there's more of an authoritative atmosphere or approach and that doesn't really help. It delays the progress I make in myself. The approach here is like im meeting my loved family members. (client, end of project)*

*It feels more like a friend, rather than somebody with authority. If they say they are going to be somewhere, they're there. And they are always at the end of the phone. And they've done anything I've asked them to do. I trust them. I have been able to show them myself and be open and honest with things actually going on. (client, end of project)*

Staff members acknowledged the importance of relationship building as a powerful tool to women's trust in other services.

*I would like to think that we've instilled in them that you can trust people, and that people will see the good in them as well. A lot of our women have come from domestically violent relationships and have experienced lots of trauma. Just to have someone that did see the potential in them, if women just leave the project knowing that, that someone was working with them that had the best interests at heart and wanted to see them succeed in life. (staff, end of project)*

Clients particularly discussed how the non-judgemental approach taken by the caseworkers was fundamental to feeling heard and like they could be themselves with their support worker. Many of the clients made special note of how they felt safe to disclose and discuss their needs and their problems as a result of the supportive and empathetic approach taken.

*Everyone is just so friendly and they make you feel at ease. You don't feel like you are being judged (client, end of project)*

*She is an easy person, she tries to help how she can, she says what she thinks. For me it's hard to be like myself, but with her I feel I can say what I think. (client, end of project)*

For many, this was enabled through having support provided by caseworkers and professionals who had similar experiences to them. Several clients and staff members mentioned how shared experience and deeper ability of certain staff members to empathise with the journeys and life experiences of the clients, was crucial to the trust built between clients and caseworkers.

*She is like a best mate, not just a worker....She made me believe I can do it myself...It's really nice having someone who has been through similar situations, that we are from the same background. Without her I'd be dead, that's the god's honest truth. (client, end of project)*

Members of the Footsteps team (including one volunteer) highlighted having women with lived experience as part of the team as a key enabler for the projects successes. For example:

*I think lived experience works well as we can relate to the client and understand on a deeper level of their issues and needs. (staff questionnaire, end of project)*

*They don't feel like you judge them, or like you're preaching to them because you know, you've been through it and you know...If you've lived what they are living, and you are forthcoming, you're the best person to help them because you've been through it and you know the best steps to get to a happy place. (volunteer, end of project)*

The consistency of support caseworkers were able to provide allowed these relationships to be built. This was something clients mentioned in regards to always being able to contact their support worker, not be written off if they didn't engage for periods of time, and the notion of caseworkers always 'being there'.

The women-only nature of this project was also mentioned as a key factor in the relationships and trust that were built.

*I love it because I feel safe. Because I know its women only. (client, end of project)*

## **2. Person-centered support**

This intense support was also brought about through taking a person-centred approach to work. Caseworkers spoke of how catering their work to each individual client was crucial to the progress made. This was enabled through:

- 1:1 nature of the support work
- capacity to do intensive outreach
- catering to the pace of each individual client
- the importance of being able to keep cases open, even when clients were not engaging

Members of the Footsteps team discussed the benefits of this approach. For example:

*Thinking outside the box. Being able to offer support beyond licence, being able to put wellbeing first, not focusing on targets. Being able to support clients for long periods of time, person centred (staff reflective log, end of project)*

*(Clients) know we are not there to judge them. We are there to support them. We aren't there to tell them what to do, and I think they quite like that because they see a very clear difference between us and, say, like, probation. We will continue to be there for them. We aren't just going to close them if they don't engage, that has a really positive impact on the women. (staff, interim stage)*

Staff and stakeholders specifically noted how not being too directed or driven by targets allowed for flexibility in service delivery. Flexibility was discussed as key to providing the space for the women to define their own journeys.

Professionals also discussed how the work was trauma informed through this flexible outreach and engagement style, taking things slowly with the clients and supporting them through accommodating the complex trauma they might have experienced in engagement and service delivery approach.

*The project is very client-focused and enables the women to make choices about the support they require whilst empowering women to be able to cope better for when the support is no longer available. The case workers consider what the women need and how this can be achieved rather than what telling them what we can offer (staff, end of project)*

*It's more trauma informed. It just allows people to engage when they're ready really rather than just turning them away. They just react to the individual rather than saying this is how we work - like it or move on. (staff, end of project)*

Clients themselves spoke appreciatively of the understanding nature of the outreach, a product of the trauma-informed perspective the staff team espoused;

*If I arrive outside of the time I'm received with love and respect and understanding that these things happen - and other places don't do that. (client, end of project)*

*It's a lot different - just their outlook on things. The way they welcome you and talk to you. You have time to sit and talk through your problems. They listen first, they don't jump in you know like sometimes when you talk to someone and they jump in and make it about them. They listen to you. (client, end of project)*

Finally, numerous clients mentioned how they felt their support worker was proactive and helped them to organise themselves prior to problems arising. This meant that crises were often averted and clients were supported to not give up when struggling.

### **3.Support accessing services**

For many of the clients, the ability for the caseworkers to support them to other appointments was the most useful aspect of the service.

Alongside general assistance and supporting clients to appointments, caseworkers also spent a considerable amount of time advocating on behalf of their clients. Caseworkers described the extent to which they spent time challenging the decisions of external agencies in order to get support for these women - something many of the clients would not have had the time or capacity to do themselves.

*Giving them a roof over their heads, some food, those who have drug and alcohol issues to refer them to the right place - helping put that in place because you know they are also used to not doing things for themselves as well if they have been in prison for a while. Everything was set up so they don't know. If they have been in for quite a while there are also hurdles of like the housing shortage, it can be quite*

*challenging when you have to do that and you haven't had to speak for yourself for quite a long time and you are having to do that and you have to face all these things, your alcohol problems, your housing problems, your health problems, your mental health problems, all by yourself. Having someone to advocate for you on that day is so much better, you feel someone is fighting your corner...making you feel like you matter and somebody cares enough to take the time. (staff, end of project)*

Both staff and clients discussed the help with support to access services in relation to the idea of 'filling in the gaps'. Caseworkers, through their flexible person-centred approach, were able to hold the clients as they navigated their next steps.

*I feel like I join the dots up for clients. I am able to communicate with all agencies involved so the client gets a holistic wrap round service. (staff reflective log, end of project)*

Members of the team also mentioned that the advocacy and support they provided was more effective for this client group as they provided a service that was non-statutory. Many of the clients had a deep mistrust of statutory services and felt more comfortable with the flexible and organic style non-statutory services such as this are able to provide.

*Because we're not statutory and it's women's choice whether or not they engage with us...She (one client) said to me the other day when she found out the project was coming to an end, that actually, without me, she doesn't know what she would have done the last six months because she is really struggling with accommodation, she's struggling with her mental health. (staff, end of project)*

Overall, assistance with housing services appeared to be the most valued and beneficial support for the clients, ensuring for their safety at the most basic level. Assisting clients into housing was considered by the staff to be the first step to helping women on the road to recovery and breaking cycles of re-offending.

*I think she made a massive difference with getting me housing and stuff. She didn't give up on me so I didn't totally give up, and showed me that I had things to live for...I don't think that I would be where I am if it wasn't for her reminding me that I can go forward and to not give up hope really. (client, end of project)*

#### **4.Resources**

The resource attached to the project allowed staff to contribute to key costs for the women and provide for their practical needs. In interviews, staff and clients described various ways this money was spent. Examples included:

- food vouchers
- travel costs
- furniture and bedding
- clothing
- sanitary and hygiene products

Being provided with support to access transport such as providing bus passes or taxi fare allowed clients a greater chance to attend appointments and start rebuilding their lives after prison.

As one client reflected:

*Coming here I got the bus here and I got my pass funded by footsteps...even that, funding a pass, that got me to my appointments. Stuff like that is massive, it's the little things. (client, end of project)*

Staff also recognised the importance of the resourced attached to the project for women's access, engagement and recovery:

*She's in a wheelchair and she's living in a hostel which isn't wheelchair adapted. She's not getting any support, I'm literally her main support you know...I bought her a coat the other day...Now she's warm now, she can go and sit in the garden and she's not cold. It's small things that make a big difference to the women. (staff, end of project)*

In addition to supporting clients through supplying much needed resources, caseworkers also provided practical support alongside the provision of funds for transport or devices (phone, tablet). For those who had spent extended periods of time in custody, they had to re-learn how to navigate new technology and transport systems. Caseworkers spent time providing this practical support and guidance - for example, one client described how her caseworker took the time to sit with her on a computer during their meetings and help her fill out digital forms.

*I'm not very good at reading and writing and um I just have needed a lot of help with forms and things like that. Here (they help) writing support letters for me and even like I just feel so comfortable and confident here I can just say how do you spell tomorrow. (client, end of project)*

## **5.Through the Gates**

The Through the Gates service was considered essential to the work the caseworkers were able to do. The fact of 'being there from the start' was mentioned repeatedly, both by staff and clients, as a reason for why relationships were able to be built and trust maintained.

Clients frequently discussed how being met at the gates was crucial to breaking a cycle of reoffending and/or substance use. For other clients, having someone to support them from the moment they left prison helped them not return to abusive partners or negative support networks.

*If they hadn't met me at the gate I definitely would have had nowhere to go. I would have met the guy I live (with) and gone using again...I don't know where I (would) be today. (client, end of project)*

*That gate pick up is massive actually. That probably saved my bacon,. If any of my family had picked me up. I had that space to get a plan in my head, and I went to probation and things. Actually it just gave me time to reflect a bit. More families are chaotic and negative and when I see my mum...that pressure would have been there straight away. (client, end of project)*

Many of the clients left prison without any practical clothing, housing options or service recommendations. The Through The Gates service provided the clients with both practical support, through the provision of a mobile phone and other essentials, as well as emotional support during a difficult time.

*She gave me sanitary towels and hair shampoo and things when she met me which was awesome. I think I literally cried. (client, end of project)*

Staff recognised that women's experience of leaving prison on their day of release was a pivotal moment for them; the through the gates service provided a lifeline to support them in the community.

*It's probably one of the toughest times for the women just because they are coming out of prison. I find myself in situations coming to get women out of prison who don't have any money with them, don't know where they are going or what they are going to do, have been in for quite a while and are completely disorientated. You know they don't know how to buy a ticket or an oyster card because maybe when they went in it was different. Some don't have clothes...I think at that time it's like thank god we do have a budget for small things for the women, food and clothes and things like that otherwise it would just leave them if we didn't have these things (staff, end of project)*

## **6.Women's group**

For those who sought more long-term support, the women's group was considered essential to their progress, and appeared to work well in all sites.

Many of the clients were establishing new lives away from previous support networks and friends, while others were suffering from isolation as a result of mental ill health. The women's group provided an opportunity for clients to bond with those in similar situations and speak about their emotions openly without feeling judged.

*The continuity.... It makes you feel secure. You feel part of, you feel you belong in a way. (client, interim stage)*

*We can be real. This is somewhere I can be real and others have been real with me. So you can laugh at your clumsiness or your foibles and that's good because by sharing it it lightens it. For me this is the only place once a week where I can come out and it's about me, not an agency, not about some other kind of responsibility, not about being a number, it's about me. (client, end of project)*

Stakeholders repeatedly mentioned how the provision of arts and crafts worked well in the women's group. Clients similarly expressed gratitude for a space to relax and be creative outside of their daily routine.

*The art group in particular that the Footsteps worker ran, created a bond between the women as well as a safe therapeutic, environment, encouraged engagement & had an overall positive impact on them all. (stakeholder, end of project)*

## **7. Team support and staff wellbeing**

Although there were issues in some of the staff teams around staff turnover and management, many of the staff mentioned how the support and advice they gained from their team was essential to the impact they were able to have. For example, one caseworker stated that they have seen how 'valuable' clinical supervision had been for staff, as well as volunteers and peers.

*The great thing as well is the clinical supervision, that has really been helpful in...reminding me that i'm only human and reminding me of my own limitations...that has been really good for my mental health, that is something that St G does wonderfully well (staff, interim stage)*

Volunteers also spoke of the supportive and accepting environment created by the staff.

*When I shared my story it was really humbling that they didn't look at me differently even though I'm working in line with the case workers. I am still a woman that's there as well, there was no judgement, I found I was accepted. (volunteer, end of project)*



## SECTION SEVEN: CHALLENGES AND BARRIERS

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Challenges and barriers were discussed in interviews with staff members, during the Footsteps-wide reflective workshop and in staff monthly reflections. The following presents key themes arising from the data. Clients were also interviewed, but considering the overwhelmingly positive feedback they provided, they are less represented in this section.

### **1. Staff capacity**

Across all three geographical areas, members of Footsteps teams highlighted the challenges of managing high caseloads. Staff felt that rising caseloads were impacting what they were able to offer to, and achieve with, their clients, and was resulting in clients receiving inconsistent support - with the level of support varying from week to week, and some women getting access to more support than others. It was noted that in some cases this was impacting women's levels of engagement, as well as impacting staff ability to respond to new referrals.

*I feel that some clients may have benefited if we were able to give them more time during the week... we have taken on bigger caseloads and more responsibility, this has cut down on the amount of appointments that we can offer. On a few occasions I have felt that some clients may have restrained from criminal behaviours, and may have engaged more fully with drug services if I had been able to see them more often during the week. I have sometimes been unable to offer them even one appointment in the week and I feel this has been problematic. (staff, interim stage)*

Members of the team also brought up issues around capacity in regards to promotion of, and embedding, the learning from the project. The staff turnover was mentioned by members of the management staff as hindering the ability for learning to be taken forward, as well as leaving little time for staff to promote the project to broader services.

*The weaknesses or missed opportunities of the service have mainly been down to a lack of consistent staffing. For example, promoting the service more in the community was difficult without sufficient capacity to do that promotion and deal with any resulting client referrals. (staff, end of project)*

Capacity was raised as a particular issue in the context of the Norfolk team, where there was just one frontline member of staff. Without a wider team, the caseworker was stretched to deliver across all key outcomes.

High staff turnover was something clients were also aware of. Clients across all three sites stated that they felt worried about staff leaving and found it difficult having made attachments.

This was something staff members also acknowledged in relation to issues around building trust and relationships that cannot be taken forward.

## **2. Staff support**

Many staff stated that they feel well supported. However, across all teams, at least one member of the team highlighted a need for increased opportunities for peer support as well as opportunities for self-care.

*When it varies how much you see your co-workers, it is hard to maintain good peer support (staff, interim stage)*

Challenges related to support in place for staff were particularly highlighted for the Norfolk and London teams. For the London team, confusions around management were acknowledged as at times leading to confusion and a sense of isolation for caseworkers, while lone-working was found to be extremely challenging and at times very stressful for Norfolk team members.

*Sometimes I felt that we were drifting a little bit sometimes. (staff, end of project)*

The work was often emotionally taxing for the staff, dealing with a client group with complex trauma. This was something staff brought up in relation to needing more time for reflection and support around difficult content.

*When supporting clients that have suffered terrible abuse, it is difficult to leave all that at the office you end up taking it home with you (staff reflective log, end of project)*

*Some clients you know...they may get angry, they may be upset, they may be overwhelmed by just coming out of prison, you don't know how people are going to react...some of the clients can be quite intense... It is quite intense...You can have clients where all they talk about is their negative experience, having someone tell you negative things for six hours or eight hours in the day whilst trying to get housing sorted and CGL sorted and you are trying to give them respect and attention as well. (staff, end of project)*

## **3. Administration and IT**

A further challenge highlighted in the interim data collected was around the current IT systems and administrative processes. This was particularly of note for the Yorkshire team, where case-holders spent much time travelling between far spread locations. It was felt that clunky and

labour intensive paperwork that had to be carried out at the end of the day was taking away from client work.

Colleagues in both Yorkshire and Norfolk highlighted the need for better access to IT services and equipment.

*Laptops are too heavy especially when outreach working. Could tablets be considered please. (staff, interim stage)*

*Having access to better services such as laptops, scanners could be very useful and save time in our day which we could spend taking a break (staff, interim stage)*

#### **4. Geographical spread**

Those working in the Footsteps Yorkshire team faced a unique challenge of having to work over a large geographical area. This has meant staff members spending a lot of time on transport rather than with clients and lead to inconsistencies in the level of service delivered. Some also found that juggling long distance drives with case work created additional stress

*Working in two cities 50 miles apart, you end up neglecting one city. It's hard to be in 2 places at once (staff, interim stage)*

The large geographical spread also meant that some women wanting to access a Footsteps women's group may have been unable to do so, as the geographical location where the group was held is not accessible to all clients.

This appeared to have been resolved in the second year of the project. Staff from the Yorkshire team would refer forward any potential cases outside of an agreed geographical range to other organisations.

*That's got a lot better. If we do get referrals in the South Yorkshire side we refer them on, but let them chat to us on the phone or come and meet them but then there is always someone else to come over and meet them if we can't. (staff, end of project)*

#### **5. Challenges of client group**

When asked to reflect on the challenges of working on the project, staff from across teams noted the challenges of working with the particular client group. Due to the multiple disadvantages and chronic disempowerment faced by those referred to the Footsteps service,

caseworkers repeatedly faced challenges in keeping women engaged with the service; it was noted that many women disengaged within the first few days.

*(One challenge is) engaging clients and managing multiple stressful clients. Clients would stop engaging for a few weeks, and then re-engage and want support immediately, which is difficult when I've already set out appts for other clients. We get a lot of no shows and cancellations from client so it's hard dealing with feelings of helplessness and uselessness. (staff, interim stage)*

Other challenges specific to this client group included;

- Difficulties tracing women if they go missing
- Managing women's 'aggressive' or 'confrontational' behaviours
- Working with clients who's options were limited by criminal records or past behaviour
- High levels of substance abuse making engagement and planning sporadic
- Clients with agoraphobia or anxiety meaning activities involving other professionals or travel away from home were difficult to arrange
- Lack of identification making housing, health support and benefits applications complex and often 'impossible'. Lack of address incurred similar issues
- Older clients with no previous history of support making it harder for them to engage with the early intervention type frameworks generally in place for this client group
- Helping clients access Universal Credit when many were not computer literate or don't have access to the internet

*I think there are always a lot of challenges, just the complexity of the women that we deal with. I mean, there are personalities and time constraints, we can't do everything...even in terms of our budget, there are things they want us to do that we can't do...So we work with other agencies to provide other types of support...so there are a lot of challenges but I suppose you work through that. (staff, end of project)*

## 6.External agency response

Members of the staff team highlighted a number of challenges faced in relation to external agencies, a) in how professionals perceived the Footsteps project, and b) in how professionals, agencies and wider systems responded to the client group.

*Another key challenge is when clients are already known to services and they are not willing to give them another chance or they will bring up past issues and problems that they faced, setting them up to fail before they try. (staff reflective log, end of project)*

Some members of the team felt that expectations around referrals were not always clear to external agencies; for example, sometimes organisations would refer to Footsteps on the basis

the client needs help getting to an appointment. Another example presented in the data is external agencies blaming Footsteps staff when specific interventions have not been successful, without regard for other factors at play.

*Probation officers have been very demanding recently, and quite blaming when interventions aren't successful (e.g due to client engagement). This has been very challenging, as it can make me (and i'm sure other individuals) feel quite useless at my job, or like we aren't being effective. (staff reflective log, end of project)*

Others highlighted how external agencies and services were repeatedly 'letting women down'.

*Mental health services are like an uphill battle to get anyone seen by CPN, and I don't know anyone that's been able to be taken on by adult social care. You can see the cuts to services. There was a woman in particular that needs to have an out of the box approach - she doesn't fit the mould of how services work. This woman was the number one woman for revolving door in prison - every two weeks in and out, in and out - significant mental health issues. It was just like, psychiatry can't see her in prison as you need to be in for at least three months, the community mental health team wont come into prison as its not their jurisdiction - so its like, well she's just pinballing down and no one is seeing her. That was an eye opener. I realized mental health support is really failing for our clients (staff, end of project)*

Staff repeatedly gave examples of how other services were not trauma-informed and often inactive. Clients were regularly not considered a priority, were placed in unsuitable accommodation (often around others using substances), or treated in a way that did not accommodate their mental ill health or complex trauma.

*A lot of professionals out there that are not up to the standard I would expect them to be in terms of managing risk and supporting women with trauma...There are services out there that are not trained or knowledgable around working with women with autism...There is no flexibility for women that do have that diagnosis and it just kind of sets them up to fail (staff, end of project)*

Furthermore, one staff member noted how clients were often released from custody on a Friday. This made it especially difficult to assist clients as many agencies closed earlier or were less active, leaving the clients without support/housing on the weekends.

## **7. Access to provision**

Members of the Footsteps team also noted barriers and challenges faced in relation to the service provision available to clients. Lacking mental health and housing provision was mentioned most frequently.

Members of every staff team similarly flagged concerns regarding the lack of emergency accommodation and safe housing available, leaving women housed in unsafe accommodation or without housing. This was often related to previous convictions the women had whereby clients already known to the housing officials would have limited options.

*The frustrations have been the red tape from other services- namely, severe lack of suitable accommodation/emergency accommodation for vulnerable women. Other services lack understanding of safeguarding or working with ASD women. Poor legal aid representation for our women throughout the court process. (staff questionnaire, end of project)*

*One of the key challenges that women face is housing especially when they come out of prison. One of the reasons for this is that the client is already known to the housing service and they are not willing to house them as they have previously broken the rules or the housing available is out of area. (staff reflection log, interim stage)*

Furthermore, the housing options made available to clients was often unsuitable and unsafe, especially for those struggling with substance misuse issues.

*The main barrier the ladies face on leaving custody is finding suitable housing sometimes the clients are housed in emergency housing where people are taking drugs or drinking and this can be very hard as a lot of the ladies are in recovery (staff reflective log, end of project)*

Difficulties around access to Universal Credit were also brought up by regularly by staff, often in relation to how clients were left vulnerable to reoffending when left with no money or provisions.

*The other main barrier is claiming universal credit as they are often left with no money and this can lead them to want to commit crime to get by. (staff reflective log, end of project)*

## **8. Recruiting and supporting volunteers**

Members of the Footstep management highlighted that recruiting appropriate volunteers had been a key challenge of the project to date for some of the teams: notably, teams where there were not pre-existing structures with clear referral pathways in place for recruiting volunteers.

Effectively recruiting and then managing volunteers was identified as a huge challenge in the context of a small team with limited capacity.

Staff members also mentioned how greater support was needed for the volunteers, especially considering their position in relation to the clients and the emotional content of the work.

*I do think peer support workers need more protection and support with what they are doing, and boundaries. It's very difficult to work with other women who are in prison as well and manage the boundaries between them (staff, end of project)*

### **9. Project length and set up**

Finally, the short-term nature of funding impacted this project. This created challenges and anxieties around ending support with clients, as well as referrals having to be turned down over the last six months of service. Footsteps teams closed down referral routes into the service between October and November 2019 (depending on geographical area).

The clients had come to trust their support workers - in many cases the first time they had felt able to do this. Understandably, they were worried about the end of the project and the life changing support they had received.

*You are the professional that people have invested in and you worked with them and then you are suddenly not going to be there - that isn't good either. I know people change jobs, but there is that thing about, you're just going to go aren't you and abandon me again. That's a tough one and that needs to be taken into consideration with short term funding. (staff, end of project)*

Support workers and managers expressed their concern for the length of the project repeatedly. This was discussed both in relation to fears around support being removed from clients in a way that was not trauma-informed, and anxieties around job security. All staff expressed regret that the project was coming to an end, with all agreeing that the project appeared to be at its very strongest considering the learning and experience gathered throughout the course of the project.

*I think that the project has helped a lot of women. It does feel sad that it's coming to an end when it's massively needed. Everything we are hearing back from professionals is like we're sorry to hear you go, who is going to fill the gap when you guys are off. (staff, end of project)*

## SECTION EIGHT: RECOMMENDATIONS

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### A) RECOMMENDATIONS FOR DELIVERING OUTREACH PROJECTS SUCH AS FOOTSTEPS

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While across the board staff members, clients and stakeholders were extremely positive about the approach taken by Footsteps a number of suggestions for service delivery were put forward.

#### **Staff recommendations:**

- Additional or repeated training opportunities for staff, specifically around: ASD, housing, trauma informed approaches. A thorough induction training package should also be rolled out to all staff.
- Prioritise funding for through the gates provision.
- Streamline processes and systems for ease: for example, allowing staff to use credit cards to spend on clients.
- Embed robust and regular processes for peer support across teams, as well as opportunities for regular clinical supervision.
- Update technology options: for example, lighter laptops or tablets for outreach workers

#### **Client recommendations:**

- Increase profile of the project so that more women are aware of it.
- Ensure counselling offered is accessible in terms of time and location.
- Increased opportunities to get involved in project delivery, such as through helping with women's groups.
- Additional resources and information to map out local services and support options for women.

#### **Stakeholder recommendations:**

- Increased capacity for project delivery to meet the high demand.

#### **Additional recommendations for service delivery, based on learning from the evaluation:**

- Establish maximum case-loads for Caseworkers and a waiting list for accepting new clients.
- Consider restrictions to geographical spread and capacity of team members.
- Audit staff training and knowledge base to identify areas for further training, and support staff to progress in line with findings.
- Establish opportunities and mechanisms for sharing learning from Footsteps project delivery within the wider St Giles Trust organisation, as well as with other organisations and agencies in the criminal justice sector.
- Ensure resource is available for provision of project management staff with strategic oversight of project delivery, including back up resource in case of staff absence or sickness.



## B) RECOMMENDATIONS FOR COMMISSIONING AND WIDER SERVICE DELIVERY

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- **Commission long term, gender sensitive and trauma informed outreach services to provide on-going support for women facing multiple disadvantage and who have historically been unable to access services.** Findings from the Footsteps project highlight the impact and benefits of specialist assertive outreach work with women facing multiple disadvantage. This report evidences what can be achieved when clients have access to a person centered and non-judgemental support.
- **Commission specialist through the gates services for women leaving prison.** This was repeatedly identified as an invaluable element of the Footsteps project.
- **Local authorities should ensure there is suitable and adequate gender specific provision for women facing multiple disadvantage.** This report highlights the challenges and barriers that women had historically faced in accessing external agencies and services. It is essential that these services are set up to understand and meet the needs of women facing multiple disadvantage. Gender specific provision for women facing multiple disadvantage should include services for those with a 'dual diagnosis' of mental health and substance use, as well as women specific substance use services. Furthermore, in order to better support women to access mental health support and services, all mental health trusts should have a women's clinical lead.
- **Roll out Housing First, as an alternative to hostel accommodation, with appropriate gender specific support.** Findings from Footsteps evidence the challenges and barriers that women experienced in accessing housing, with many women leaving prison and/or entering the service homeless. While Footsteps was able to support many clients into safe housing, housing options were not always immediately available, and clients were not always prioritised despite their high level of need. Schemes such as Housing First are important in order to ensure appropriate and timely housing is available for women.
- **Ensure women in prison and in the community have access to timely and appropriate mental health support and therapeutic options.** The evaluation of Footsteps found that many women accessing Footsteps had slipped through the gaps and had not been able to access mental health assessments, interventions of services.
- **Thresholds and criteria for support should be reviewed by all services** to ensure women experiencing abuse and multiple disadvantage are not disproportionately excluded from the support they need. Access to safe housing and access to mental health services is a particular concern highlighted in this report.

- **Providers working with women facing multiple disadvantage should consider ways to make the services more accessible and service delivery more flexible.** Footsteps' flexible approach was a key enabler to the project's successes in engaging and supporting women facing severe multiple disadvantage.
- **Establish and promote services that prioritise employing people with lived experience.** Again, a key enabler for Footsteps' successes was the approach taken by St Giles Trust to employ those with lived experiences of the criminal justice system.

## C) RECOMMENDATIONS FOR NATIONAL POLICY

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- **Embed a cross-government approach to women experiencing multiple disadvantage** in order to ensure that the specific needs of women are addressed in relevant areas of policy and funding programmes. This would address a number of challenges highlighted in this report, including siloed working, and support services and agencies to take steps towards meeting the needs of women facing multiple disadvantage.
- **Steps should be taken to enable separate payment arrangements of each member of a couple under Universal Credit, removing the 5 weeks wait for payments, and ensuring the process for application is accessible.**
- **Promote and embed a gender-informed approach to women in the criminal justice system.** This should include a clear strategy and commitment for reform of women's justice, prioritising a reduction in the number of women in prison.
- **Ensure prioritisation for housing is given to women facing multiple disadvantage,** such as violence and abuse, substance use, mental ill health. Such factors increase risk of offending; furthermore, as highlighted in this report, access to housing was a key enabler for helping women on the road to recovery and breaking cycles of re-offending.

## CONCLUSION

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This report presents the findings of the external evaluation of the St Giles Trust Footsteps project. Analysis of the data collated between April 2018 and January 2020 evidences a holistic, flexible person-centred service for women facing multiple disadvantage that was able to meet individuals' needs.

It is clear that, for many Footsteps clients, the project was life changing and provided a crucial life line. Through Footsteps, women found access to diverse support, opportunities to connect with others and to improve their wellbeing. Clients taking part in evaluation activities were extremely positive about the support they had received, praising the service for its non-judgemental and flexible approach. Stakeholders were similarly positive about the project, identifying it as a crucial service that addressed a key gap in service provision.

The through the gates service offered was repeatedly highlighted as an essential service for women leaving prison.

### **Examining the data in relation to the projects key objectives, the report finds that the Footsteps service has:**

- Increased women's access to physical and mental health support, for example, getting them to medical appointments and enabling them to access mental health services.
- Increases in some client's health seeking behaviours, for example, managing substance use, exercising, and taking medication appropriately.
- Provided direct support around mental health and wellbeing through 1:1 work with Caseworkers.
- Improved client's emotional wellbeing. Following an average of 6 months of additional support from Footsteps, clients generally felt *more* optimistic, *better* able to deal with daily life, *better* able to take care of them and *more* positive about meeting new people, and *less* depressed/ anxious and isolated.
- Improved women's feelings of social inclusion. Following an average of 6 months additional support from Footsteps, the number of clients feeling isolated or alone decreased from 65% to 37%.
- Supported women to build positive and supportive networks around them. This includes providing safe spaces for women to socialise and connect with other women through Footsteps women's group, which in turn improved participants' wellbeing. Those taking part in the weekly 'mood' assessor activity at women's group indicated that, following participation in the women's group, they generally felt happier and better within themselves. Further feedback gathered from some women highlights that the group enabled women to feel less anxious, more confident, and more able to deal with day to

day life.

- Supported women to have contact with their children, including supporting 7 women to ensure their children were returned to their care.
- Supported women to adhere to probation and bail conditions, access legal support and attend court hearings, as well as to understand and manage risk. For some women, the support provided by Footsteps prevented them from re-offending.
- Supported and worked with 12 volunteers who were embedded in various roles within the project, including providing a range of training and development opportunities. Many volunteers were enabled to complete qualifications and/or access paid work.
- Provided training and insight for Footsteps staff team, who felt more confident in discussing key issues such as autism, mental ill health and trauma by the end of the project.
- Provided useful information and support to key stakeholders and other professionals in a range of sectors, enabling a number of professionals to develop improved responses to women with autism.
- Provided specialist training that was attended by 151 multi-agency professionals across diverse sectors. Where data is available, there is clear evidence of an increase in delegates' confidence, knowledge and skills around effectively responding to women with autism.