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Violence **Prevention** Unit

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Wales Violence Prevention Unit Evaluation

A Whole Systems Case Study: Cardiff

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Liverpool John Moores University (LJMU), Public Health Institute - World Health Organization Collaborating Centre for Violence Prevention

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About this report

South Wales is one of the 20 areas allocated funding by the UK Government to establish a Violence Reduction Unit (VRU). Supported by additional commitments from Welsh partners, in 2019 the Wales Violence Prevention Unit (VPU) was established. To inform the continued development of the Wales VPU, the Public Health Institute, LJMU, were commissioned as an evaluation partner. This report forms one of a suite of outputs from this evaluation work programme and presents an evaluation of the whole system approach and case study approach for Cardiff. The report sits alongside an accompanying in-depth case studies report. The suite of evaluation reports are available on the VPU website (https://www.violencepreventionwales.co.uk/) and include:

- Year 1 – The development of the Wales VPU evaluation framework and whole systems report
- Year 2 – Evaluation of selected work programmes
- Year 3 – Swansea whole systems case study evaluation
- Year 4 – Cardiff whole systems case study evaluation

Acknowledgments

Terminology

Use of the term 'serious violence'
The Wales VPU encourages partnerships to refrain from using the term 'serious' when defining violence. Through a public health lens, it is important to understand that interventions (especially those in early childhood) can prevent violence in the long term, and improve educational outcomes, employment prospects and the health and wellbeing of individuals and communities. These interventions also have wider positive implications for the economy and society. As such, we will refer

to 'violence' throughout this report unless directly quoting or referencing a source which uses the term 'serious violence'.

Use of the term 'youth violence'
The children, young people and professionals who contributed to the Wales Without Violence Framework, co-produced by the Wales VPU and Peer Action Collective Cymru were clear that the term 'youth violence' was a term that has become outdated. It was felt that the term can contribute to labelling and stereotyping of children and young people as a group. As such, throughout this report we will refer to 'violence among children and young people' unless directly quoting or referencing a source which uses the term 'youth violence'.

Executive Summary

Introduction

In 2019, the Home Office funded the establishment of Violence Reduction Units across 18 police forces in England and Wales, subsequently increasing to 20 in 2022. The Units were set up to reduce levels of 'serious violence' using a 'public health' approach to violence prevention. The Wales Violence Prevention Unit (VPU) was set up with the ambition to prevent all forms of violence. South Wales Police, the South Wales Police and Crime Commissioners Office and Public Health Wales are part of the multiagency team. The VPU operating model takes a four-pronged approach (Aware, Advocate, Assist and Adopt) and ensures a public health approach is embedded across the wider system to allow for sustainable violence prevention activity that further works to ensure that a public health approach is translated into operational practice to influence sustainable system-level change.

In Cardiff, a violence hotspot in Wales, the VPU and partners are delivering a range of interventions and multiagency arrangements to reduce and prevent violence, and to take a holistic child-centred approach to children and young people involved/at risk of involvement in violence. The VPU has funded a host of interventions at a primary, secondary and tertiary level, which includes interventions that target the root causes of violence and offer support at what is considered a 'teachable moment'. These interventions sit within a system that has established a range of approaches to target violence, and include:

Sector	Intervention/programme/approach	Nature	Age
Local Authority	Safeguarding Adolescents from Exploitation (SAFE)	Targeted approach Early interventions	≥18 11-25
Criminal Justice	Teachable Moments Police Custody intervention	Tertiary intervention	10-18
Health	NHS Violence Prevention Team	Early intervention	All ages
Community	Fearless, Crimestoppers	Universal primary intervention	11-16, professionals
	Braver Choices, Media Academy Cymru	Therapeutic intervention	10-17
	Parallel Lives, Media Academy Cymru	Therapeutic intervention	8-17, parents
	Positive Masculinity, Media Academy Cymru	Targeted secondary intervention	10-17

Evaluation methods

The Wales VPU commissioned the Public Health Institute (PHI), Liverpool John Moores University (LJMU) to carry out an independent evaluation of the VPU whole systems approach to violence prevention, focusing on Cardiff. The evaluation explores how the interventions and approaches across Cardiff operate to identify individuals at risk of/involved in violence, and the measures implemented to mitigate risk and prevent further involvement in violence and crime. Evaluation activities included:

A rapid literature review to provide context to the research and aide the interpretation of research findings and development of recommendations.
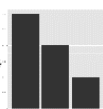
Key programme evidence, policies and operational documentation was collated, reviewed and where possible, analysed to explore the development, implementation, delivery and impact of the VPU interventions.

Interviews with key stakeholders (n=18) involved in the implementation and delivery of the VPU-funded interventions across Cardiff.

Interviews with service users (n=6) engaging with the VPU-funded interventions across Cardiff to explore the needs of individuals, barriers to accessing support, journey experiences and impact of support. Case studies (n=7) were developed for interventions.

Key findings[1]

The Wales Violence Prevention Unit (VPU) was set up with the ambition to address vulnerability and prevent all forms of violence in Wales. The VPU aims to deliver a whole systems approach to violence prevention through a four-pronged approach: Aware, Advocate, Assist and Adopt. The whole systems evaluation allowed for the exploration of the violence prevention activities, how they were implemented and delivered, and the difference the interventions have made for the young people they were designed to support. The interventions all focus on supporting young people through either preventing them from becoming involved in violence or to reduce the risk for young people who are vulnerable, or those who have already experienced violence.

Needs of the community

Identifying and understanding the wider determinants of health and contextual factors that affect young people, families, and communities in Cardiff is essential. Partners highlighted the complex needs across Cardiff and the specific groups that the interventions targeted. They described the risk factors for young people, including Adverse Childhood Experiences (ACEs), and poor mental health. High and increasing proportions of young people also had additional needs, including neurodevelopmental disabilities.

"Neurodivergence plays a massive part in offending behaviour, not just children and young people, but also adults. I think it was something like one third of adults in prison are

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[1] Quotes key: S= Stakeholder, YP= Young Person, Quarterly Reporting= qualitative data from the VPU quarterly monitoring reports

neurodivergent and half of them have experienced a traumatic brain injury at some point"
(S6)

Many young people were disengaged from school, highlighting the critical role of education in building protective factors. There was also a gap in service provision during the critical transition to adulthood for young people who are at risk of falling between gaps. The Covid-19 pandemic had increased the complexity of needs, with services reporting increased challenges for young people, including social isolation, poor mental health, and changes in behaviour. There was also an increase in violence involving social media, girls becoming more involved in violence in schools, and younger ages requiring support. Barriers for families engaging with services were reported due to mistrust in professionals, previous negative experiences and feeling overwhelmed by being involved with multiple organisations. This highlights the need for services to work together to provide accessible and wraparound whole family support.

"I've seen a trend that if they're not in school, the likelihood of them getting into more trouble is just sky high" (S2)

"There's lots of those conversations, around 18 to 21. People don't suddenly stop. You come in vulnerable when they turn 18" (S15)

"Looking at just what Covid and lockdowns did, that reduction in social interactions did to people" (S11)

Barriers to programme delivery

Understanding the contextual factors that can influence the adoption, reach and maintenance of the intervention is key to understanding what works in what circumstances. Barriers to delivery for intervention providers included recruitment delays which impacted on the implementation of interventions, the short-term nature of funding which created job insecurity for staff and working with limited resources and capacity. The impact of the pandemic was also seen to have increased complexities and service demand. Stakeholders highlighted the importance of understanding the level of work and resource required to effectively support communities. Barriers were highlighted in terms of information sharing, ensuring data is captured effectively, and that partners recognise the importance of collecting data, including data quality, to evidence impact and support the sustainability of interventions.

"A lot of young people are actually open about having quite a traumatic experience with the police and they would just never trust them" (S5)

"Within the partnership, everyone's quite good at working together, but when it comes to, you know, creating an evidence base, partners tend to be quite reluctant to share" (S14)

"What data probably is just missing in the first place? Then what data is being collected, just reinforcing the quality of that data perhaps isn't as high as it should be" (S14)

"Several times, you just hammered with different things that you need to do. And you're like, wow, okay, I've got a daily business going on" (S17)

"If you just recruit tomorrow, 20 people, even on a one-year fix contract, it's still going to take you three months to train them to where you need to be. That's really difficult. So I think they were chasing their tails a little bit, a little bit at the beginning"(S17)

Impact of the VPU

Evaluation findings evidence the extent that VRU-funded violence prevention activities lead to the intended outcomes of reducing the risk of involvement in violence and the associated harms of violence among children and young people. The VRU enabled investment to develop interventions and pathways of support to identify at-risk young people and move them into appropriate support across the system.

The interventions were designed, developed and delivered by teams of experienced staff, who were able to utilise a trauma-informed approach to build trusted relationships with young people and their families. Providing a safe and non-judgemental space was key for breaking down barriers to engage with young people. Examples were provided from all the intervention providers on how communication, sessions and resources were adapted to meet the needs of the young people. Flexibility and building strong relationships were seen as key for successful engagement, with providers reporting good uptake of the violence prevention activities. Evaluation findings acknowledge the additional work involved that goes into building relationships and consistency of care, to support young people to initially engage, and to then maintain engagement, which is often difficult to document. Having experienced and skilled staff was seen as key to this, ensuring that they could look beyond the presenting behaviour/incident to build trust and advocate for young people.

Interventions provide examples of making every contact count by using opportunities at a point of crisis, for example during an accident and emergency (A&E) visit or police arrest, to intervene and use a trauma-informed approach to look beyond the presenting issue or behaviour to understand any underlying causes. Having these statutory interventions linked to community support provides a pathway of identifying a young peoples' needs and then moving them onto a suitable pathway of longer-term care. This ongoing work provides young people with the consistency needed to maintain relationships and sustain outcomes longer-term.

"I think [we are] just trying to embed that… they're children…. they're a child first. I think that's a little bit of a… with some of the members of staff. It's a bit of an issue with others. It's not at all" (S7)

"It's about turning up when other people don't turn up" (S9)

The evaluation findings demonstrate the outcomes for the young people engaging with the interventions. This included improvements in confidence, self-esteem, resilience, anxiety, and depression. Through being supported to develop alternative coping strategies, young people reported feeling reassured, safe and listened to throughout their engagement with the interventions. Other outcomes were reported for improvements in housing for older individuals with complex needs presenting to A&E. Engaging in group activities enabled young people in similar situations to come together for peer support.

"They worked with me when no one else would" (YP)

"We have someone we trust to talk to" (YP)

"Didn't have anyone who knew what was going on" (YP)

"Feel supported and more confident within myself" (YP)

"I will talk about my feelings more" (YP - Quarterly Reporting)

Supporting young people back into education, training, and employment was a key aim for all the interventions, with stakeholders recognising the protective factors of education. Advocating for young people and adapting programmes to run within/alongside a school setting were seen as critical in preventing school exclusions and the negative long-term impacts associated with this. There were also

reports of improved behaviour in school. Findings highlighted the importance of engaging young people in meaningful activities with opportunities for diversionary activities and positive role models within the community. A strength-based approach was seen as important in enabling young people to develop new skills, and to recognise and enhance existing skills, which was seen as important in building their confidence and helping them develop their own personal aspirations that will help them to move forward with their lives.

"The biggest push to try and get young people back into education" (S15)

Improvements in knowledge was identified as a significant outcome for young people. Feedback and evaluation forms collected within services showed high proportions of improved attitudes and knowledge. Understanding legal consequences of involvement in crime, risks for exploitation, and impacts for themselves and others, enabled young people to make informed choices moving forward. Involving young people in the process was seen as an important way to help them understand their situation. Awareness of how and where to access support was seen as invaluable for young people who had engaged with targeted programmes and may require future support, as well as for young people engaging in universal workshops who now have the tools to access support should they require it. The activities also gave them awareness on how to report crimes and provided them with confidence and feelings of safety to either report anonymously or speak to professionals. This was seen as key in reducing stigma and breaking away from the 'snitch' culture. All such knowledge consisted of information of which young people have not had previous access to prior to their engagement with the interventions provided across Cardiff.

Feedback from young people suggests that they are less likely to carry a knife or weapon because they now feel safer and more confident. There were also suggestions that there had been an increase in reporting of crimes. A number of partners believed that there has been a reduction in drug use, anti-social behaviour and violence among children and young people involving knife crime. In the longer-term, stakeholders hoped that there would be a reduction in serious and violent crime, including a reduction in hospital admissions related to knife and violence, all leading to better life chances for those involved.

"A lot of them [children/young people] said, I thought you could carry a knife in self-defence, I'm going to stop carrying" (S5)

Wider impact was demonstrated in terms of improved relationships for young people with their friends and family. Examples were provided for how interventions extended to support parents, siblings, and wider family members. Parents had the opportunity to seek out additional support for the whole family through the services that young people were accessing for support. Services identified a gap in provisions for parents, especially whilst awaiting the young person's compliance in engaging in support. Examples were provided for parent-focused sessions and resources, courses, and campaigns. Services collected feedback from parents, which demonstrated how parents benefited from an opportunity to come together with other parents to share their experiences and support one another. This helped to reduce the stigma and shame that some of the parents, carers, and young people were experiencing. Parents reported having knowledge and understanding of the risks of exploitation, and legal processes to help support their children. This also gave them confidence to better manage their child's behaviour. This led to reduced fear and anxiety, and improved feelings of safety. The creation of safer spaces and environments has also led to increased feelings of safety within the community.

"Thank you for helping us to recognise the positives during this difficult time" (Parent - Quarterly Reporting)

"What they'll [community members] see is increased community activities and a lower level of crime, and they won't be victims. And I think that's hopefully what we see out of it"
(S17)

"It was very stressful for my mum and [MAC youth worker] spoke to mum too. I didn't know what was going to happen" (YP - Quarterly Reporting)

The service providers monitor engagement and outcomes through quarterly reports for the VPU and Home Office. Additional reporting is completed within organisations including routine monitoring and production of reports. This included post-session and post-workshop questionnaires, which enabled services to use the feedback collected to improve delivery and outcome tools, which helped families reflect on distance travelled. However, these were not always available for evaluation purposes. Stakeholders acknowledged the challenges with evidencing impact. This included difficulties in measuring prevention, evidencing outcomes for project sustainability, and measuring longer- term outcomes. This also included the challenges of evidencing a whole system approach across the life course, which meant that many services would not see outcomes within project timescales. It was agreed that outcomes needs to be tangible, easy to measure, and that enable softer outcomes and journey narratives, including service user voice, to be collected.

"It's really difficult to measure prevention, isn't it? And that's always the problem is they don't go on to commit crime. How do we ever measure that?" (S17)

"I think learning is key, because that's how you change and adapt your services appropriately to meet the needs of individuals, and our learning needs to be shared widely" (S16)

Wider impact across the system

The VPU utilises a systems approach to tackle public health problems. A whole systems approach is required to tackle complex public health issues to support a coordinated and collaborative approach that brings about long-term change. A whole systems evaluation focuses on how the VPU-funded interventions interact together to contribute to systems change.

Findings from the case study evaluation evidence the wider system impact of the violence prevention activities. The model of commissioning and delivery contributes to the wider overarching aims of reducing violence among children and young people and any associated harms to create safer communities across Cardiff. Investment from the VPU had provided added value to existing organisations to enhance existing interventions and resources and develop new ones. Funding also allowed these organisations to build on capacity and upskill their workforce to provide further reach to young people and families in Cardiff who may not have otherwise engaged with support.

The VPU has established a large stakeholder network to aid the VPU in establishing and coordinating violence prevention activity nationally. The VPU was described as bringing services together to develop networks and build relationships to work in partnership. There was a clear, shared vision amongst partners for using coordinated public health approaches to violence prevention. The development of referral pathways and formal relationships between services, including statutory services and community organisations, promoted joint working, and awareness of services. Partnership working for VPU members was seen as a key strength in Cardiff, as there was good awareness of different organisations, and partners were working well together. Examples of best practice were provided for shared learning and joint decision making.

"Partners are good. They know what they can offer" (S17)

"Everyone has the same goal, which I think helps" (S11)

"It [VPU] just ties us together, really" (S17)

Working with the VPU provided an opportunity to share intelligence. A number of stakeholders discussed the benefit of sharing data with and receiving data from the VPU and how this was used to inform decision making. This included the Wales Violence Prevention Portal for anonymised data on violence in Wales, including hospital admissions, ambulance call-out, emergency department assault attendances, and police-recorded crime. Data sharing with the VPU helps to provide a realistic understanding of the situation and provides a two-way flow of communication with multiple agencies.

"In certain areas, Cardiff is certainly ahead of the game [for data] because they've been established for so long" (S18)

"A lot of it is confirmation of this is what partners are seeing, or this is what the data is showing, this is what it actually feels like on the ground" (S17)

The Safeguarding Adolescents from Exploitation (SAFE) Partnership multiagency contextual safeguarding meeting was identified as a key platform for sharing information and intelligence and building a picture of local need to develop a multiagency response. It also allowed partners to share advice and guidance, and to have a shared responsibility to better support young people. This also increased data sharing and intelligence which in turn informed police activity, patrolling and disruption activities in hotspot areas, and tailored multiagency responses following incidents related to violence.

"[SAFE] it's to share appropriate health information so that there's a broader picture for the person and the needs requirements" (S16)

Through the recognition of the social determinants of health across the life course, place-based approaches provide a framework that addresses the needs of specific communities, by having organisations work in partnership to improve outcomes for the 'whole place', not just for a number of individuals. This ensures that a public health approach is translated into operational practice and embedded across the wider system. The funding from the VPU increased capacity within services meaning they had a wider reach to engage with more professionals and young people. Wider impact across the system also included the improved knowledge amongst professionals through establishing new relationships, sharing of information, engaging closely with the interventions, and through access to training and guidance from intervention staff. This has led to improved partnership working, improved information sharing, and increased workforce knowledge and trauma-informed practice across the violence prevention system, breaking down barriers to prevent the criminalisation of young people, to support them to move forward with their lives.

"I think the learning from it is more professional curiosity, exploring more, being aware of the type of injuries that we would actually recognise early on as being of the other concern" (S16)

"It has an impact on the NHS because they're not going into hospital. It has an impact on the prison systems because they're not all going into prison. It's having an impact on children's services because the weight is not all on just one person" (S9)

Sustainability and next steps

The VPU recognised the need to influence wider, sustainable change by influencing key agencies and stakeholders to incorporate public health approaches into their work, to improve inter-agency responses, and to embed system-level change. Evaluation findings demonstrate that without the VPU funding and support to establish and maintain pathways of support, these outcomes across the system would not have been achieved. Ongoing funding and additional investment was seen as key in allowing services and interventions to continue their work and to expand, both in terms of recruitment, as well

as in upskilling teams. Partners highlighted that without continued and long-term funding, providers would not have the same stability and reach to support young people and their families. This was flagged as a concern given the rising complexities experienced by communities and the increased demand on the system.

Education was seen as key for long-term change to reducing knife crime and other types of violence. Stakeholders agreed that more investment was needed for early years and other programmes of work with children and young people. There were also calls for investment in diversionary activities to provide young people with opportunities in the community to develop their skills and build future aspirations. This was also seen as a way to provide a safe space where they could integrate with their communities. Moving forward, continued partnership working utilising the VPU framework was seen as key in maintaining relationships and maintaining momentum for the public health approach to violence prevention. This was seen as especially important for the introduction of the Serious Violence Duty.

"I would like ideal world, most government to look really realise and recognise the work that's been done and the potential for more services and help with funding" (S16)

"What do they feel are their top priorities? What could make it better? What would help?" (S13)

"Trying to find some free activities there, especially during the holidays and this nightmare, it's really difficult" (S2)

"We've had the VPU, you know, since 2019. And it is embedded in practice. For us as an organisation, the issue is going to be how we sustain them roles when the funding dries up" (S16)

Recommendations

- Relationships with schools and engagement from education partners could be strengthened. This would support education to have a key input at partnership meetings, and increase intervention take up within schools. The VPU could support to enhance these relationships, however, this may also need government support in order to mobilise engagement.
- The development of pathways such as the VPT and Teachable Moments provides examples of effectively bringing statutory and voluntary partners together to create wraparound support and break down barriers for engagement. Learning should be taken from this model to develop future pathways and partnership working across sectors.
- Longer-term investment is needed to create stability in services and consistency of care. Violence prevention services should work alongside the VPU to develop a business case and a sustainable model beyond VPU funding.
- Investment is needed for diversionary activities and community spaces for young people to engage in activities in a safe place within their community. This is especially important for engaging young people who are not in education, employment or training (NEET).
- Investment from the VPU enabled capacity building to provide further reach within the community. It also enabled the workforce to upskill, both in terms of violence prevention and trauma-informed practice. It is important that any future work rolled out by the VPU and as part of other work, including the Serious Violence Duty, includes provision for capacity building and training opportunities for professionals.
- Evidence from the evaluation demonstrates a wealth of intelligence that is gathered through the different violence prevention activities and wider data sets across Cardiff. Further information could be provided on the Violence Prevention Portal to encourage the use of

mapping trends locally. Recommendations were made for the future development of the Portal including additional data sources and the ability to map different areas within Cardiff.

- The quarterly monitoring reports provide useful insight into the number of young people engaging with VPU-funded interventions, progress updates in delivery and outcomes achieved. However, the reports are not completed in a consistent way across the different services, making it difficult to derive impact across the system. The forms have recently changed to provide a more standardised format which will hopefully improve data consistency, this includes opportunities for capturing qualitative information.

- Long-term evaluation was seen as key to measuring the longer-term impacts of the VPU. Additionally, it is also important that this includes softer outcomes, including the distance travelled for individuals and across the system. Services should continue to collect case studies, whilst also utilising the VPU evaluation toolkit to identify a consistent way of measuring softer outcomes using quantitative data.

- The majority of interventions are subject to local and national evaluation. It would be useful for evaluation partners to come together to form an evaluation advisory group to share findings and align recruitment methods to ensure services and service users are not over researched or that too much is asked of them.

- Feedback from young people highlights the importance of the inclusion of service user voice within design, implementation, delivery, and evaluation of interventions. Service providers and evaluators should continue to keep service user voice at the heart of intervention design and delivery, where possible incorporating co-production. This should be a key focus for final year evaluations of VPU-funded activities to better understand the legacy of the VPU and in developing a sustainability plan.

Contents

1. Introduction

1.1 The Violence Prevention Unit

In 2019, the Home Office funded the establishment of Violence Reduction Units (VRUs) across 18 police forces in England and Wales, subsequently increasing to 20 in 2022. The VRUs were set up to reduce levels of violence through leadership and the strategic coordination of violence prevention activities. The Units were required to embed a 'public health' approach to violence prevention, which utilises data to understand the nature and prevalence of violence and develop interventions which address the root causes of violence victimisation and perpetration. Each VRU has invested in early intervention and diversionary activity aimed at preventing individuals from engaging in violence and wider criminal behaviour and supporting those involved in violence to make positive changes and reduce the risk of further harm. These interventions seek to address the risk factors of violence at an individual, interpersonal, community and/or societal level, whilst also promoting protective factors.

The Wales Violence Prevention Unit (VPU) aims to deliver a whole systems approach to violence prevention. South Wales Police, the South Wales Police and Crime Commissioners Office and Public Health Wales, lead the multiagency VPU team. The VPU has established a large stakeholder network to aid the VPU in establishing and coordinating violence prevention activity nationally.

The VPU utilises a systems approach to tackle public health problems. A whole systems approach is required to tackle complex public health issues to support a coordinated and collaborative approach to bring about long-term change [1, 2]. Interventions that focus on individuals alone will not address the root causes and wider determinants of violence. Identifying and understanding the wider determinants of health that affect a population is essential [3]. Place-based approaches recognise that a one-size fits all approach to tackling violence will not be successful. Through recognition of the social determinants of health across the life course, place-based approaches provide a framework which addresses the needs of specific communities through organisations who work in partnership to improve outcomes for the 'whole place', not just individuals [3, 4].

The VPU recognised the need to influence wider, sustainable change by influencing key agencies and stakeholders to incorporate public health approaches into their work, to improve inter-agency responses and to embed system-level change. The VPU operating model takes a four-pronged approach: Aware, Advocate, Assist and Adopt [5]. This model has been developed to cover VPU activity across each aspect of the public health approach and to ensure a public health approach is embedded across the wider system to allow sustainable violence prevention activity [6; 7; 8].

1.2 The role of evaluation

A key element of the public health approach is ensuring an evidence-based approach is taken, by evaluating activities and interventions, and developing evidence to inform the wider roll out of effective initiatives. As part of the grant agreements, the UK Home Office require all VRUs to demonstrate the impact of the interventions delivered and approaches taken to ensure they are effective in addressing the risk factors of violence and subsequently, in reducing levels of violence.

The VPU has made significant progress in establishing its presence in Wales and is influencing approaches to violence across the public and voluntary sectors. Over the past three years, the Wales VPU has produced evaluations of individual interventions, and has commissioned independent evaluations of the VPU whole systems approach to violence prevention [9, 10]. Evidence demonstrates that successful systems change goes beyond commissioning interventions at different levels of the system (primary/secondary/tertiary); but also depends upon the partnerships involved in adopting a

public health approach to violence prevention, and successfully embedding this across policy and practice [10].

Whilst previous evaluations have focused on exploring the implementation and early impact of the VPU, the current evaluation utilises a whole systems[2] case study approach to explore how the VPU is working to deliver violence prevention activities in Cardiff. Specifically, the VPU wanted to assess the delivery of these place-based approaches in Cardiff collectively, to capture how they operate to identify individuals at risk of/ involved in violence, and to assess the measures implemented to mitigate risk and prevent further involvement in violence and crime.

1.3 A Whole Systems VPU Case Study: Cardiff

Cardiff is the capital and largest city of Wales, with a population of approximately 362,300 in 2021 [11]. Cardiff is an initial accommodation and dispersal centre for asylum seekers, and as such, Cardiff has one of the most ethnically diverse populations in Wales [12]. According to the Welsh Index of Multiple Deprivation, Cardiff has the largest number of young children living in income deprivation when compared with the other local authorities in Wales, with 6,000 children living in these conditions [13]. There are stark and persistent inequalities in Cardiff with differences in life expectancies between areas differing by up to 10 years [14]. Large disparities in levels of unemployment, household poverty, and workless households also exist and closely align with health, crime, and educational inequalities across the city (with many young people failing to make the transition from school into education, employment, or training) [12]. In Cardiff, crime rates have fallen over the last 10 years, although many individuals remain fearful of crime. Cardiff's population needs assessment highlighted that the city's deprived communities are more likely to suffer the effects of crime [12]. In September 2023, Cardiff became the first British city to be awarded the Child Friendly City status by UNICEF [15].

Cardiff model approach and interventions

In Cardiff, the VPU and partners are delivering a range of interventions and multiagency arrangements to reduce and prevent violence, and to take a holistic child-centred approach to children and young people involved/at risk of involvement in violence. The VPU has funded a host of interventions at a primary, secondary and tertiary level, which include interventions that target the root causes of violence and offer support at what is considered a 'teachable moment'. These interventions sit within a system that has established a range of approaches to target violence, and include:

Name of intervention	Target age group	Setting	Overview
SAFE Partnership (Cardiff Council)	N/A	N/A	The SAFE Partnership is a multiagency group consisting of partners such as South Wales Police, Community Safety, Youth Justice Services and third-sector organisations.
Teachable Moments (South Wales Police and Media Academy Cymru [MAC])	10-17 years	Custody suites	Teachable Moments aims to intervene and prevent young people from becoming further involved in violence by treating the point a young person comes into custody as a 'teachable moment'. The model employs caseworkers from Media Academy Cymru (MAC) to deliver motivational interviews, involving a needs assessment and exploration of life goals.

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[2] For the purposes of this evaluation, the term 'system' refers to the wide range of agencies across Wales who contribute to violence prevention

Fearless (Crimestoppers)	11-18 years	Any setting where young people gather	Fearless delivers educational workshops to empower children and young people to make positive, informed decisions about reporting crime. The primary aim of the service is to educate young people about crime issues that may affect them and encourage them to report crimes they have witnessed.
Braver Choices (MAC)	10-25 years	Community settings	Braver Choices works with children and young people who engage in risky behaviours, such as carrying weapons. They deliver evidence-based programmes around weapons, violence, and sexual exploitation to enable children and young people to make informed decisions, develop coping strategies, and understand the implications of their actions.
Parallel Lives (MAC)	8-17, parents	Community settings	Parallel Lives takes a comprehensive approach to addressing Adolescence to Parent Violence and Abuse (APVA). This involves young individuals using behaviours to control, dominate, or coerce their parents, which can impact on family relationships and create a hostile environment within the home. Through its four-tiered initiative, Parallel Lives provides immediate support while focusing on the long-term behavioural change of young people.
Positive Masculinity (MAC)	10-17	Community settings	Positive Masculinity is a relatively new project developed in response to toxic masculinity culture and mind sets. The programme gives young men guidance with their identity and allows them to explore how they're feeling in a safe environment, with the overall aim of encouraging and supporting young people to adopt pro-social values and attitudes towards others, irrespective of gender identity.
NHS Violence Prevention Team (VPT) (NHS and Action for Children)	Up to the age of 25 years	Emergency Department and community settings	The VPT work to identify and respond to patients with violence-related injuries. The team engage with these patients whilst they are in hospital and deliver advice, support, and guidance to encourage young people away from lifestyles encased in violence by encouraging engagement with services.

2. Evaluation methodology

2.1 Whole system evaluation aims

The Wales VPU commissioned the Public Health Institute (PHI), Liverpool John Moores University (LJMU) to carry out an independent evaluation of the VPU whole systems approach to violence prevention, focusing on Cardiff. The evaluation aimed to explore the impact of the VPU-funded activities on violence prevention at a community level and to understand how services, organisations and activities operate together to improve outcomes for individuals and their communities. For the purposes of the VPU and this evaluation, the 'system' was defined to include the wider approaches of key agencies (e.g. police and community safety partnerships).

Cardiff's whole systems approach to tackle violence and address vulnerability can be defined as a 'complex intervention' due to its different components, the interactions between them, the range of expertise and skills required to deliver them, and the groups and settings targeted by the intervention.

As a result, the new framework for evaluating complex interventions[3] was used to inform the design of this evaluation [16]. The guidance places focus on the implementation and evaluation of complex interventions in a real-world setting and recognises that evaluations should consider how interventions contribute to systems change, rather than focusing on efficacy or effectiveness alone. This increases the understanding of the process and the understanding of individual and system-level outcomes [16]. The guidance recommends that complex intervention research should consider: 1) Effectiveness - to what extent does or could the intervention produce the intended outcomes, 2) Theory - what works in which circumstances, and 3) System - how does the system and intervention adapt to one another [16]. The guidance recommends that qualitative and mixed-methods designs are used to evaluate complex interventions. The guidance framework comprises six core elements (context, programme theory, stakeholder engagement, identifying key uncertainties, refining the intervention, and economic considerations) [16] that have informed the development of the methodology for the case study evaluation.

The evaluation has received full ethical approval from the Liverpool John Moores Research Ethics Committee (approval reference: 21/PHI/023). This required clear planning for safeguarding, data sharing, data storage, risk management and informed consent. Gatekeepers supported data collection through recruitment and facilitation, and access to relevant data sources.

2.2 Understanding process and implementation

Establishing evidence about how Cardiff have implemented a whole systems approach to violence prevention is essential for rolling this approach out more widely. One-to-one interviews (n=18) with key stakeholders. This included representation from across the system including intervention/service providers and key professionals to understand involvement with, and experiences of, the wider system. Stakeholder engagement enabled the research team to gather insight into whether, the Cardiff approach produced change, how and why this change may have been achieved, and to explore what worked well, including perceived success and areas that needed improving. This approach explored stakeholders' perspectives on the quality of the Cardiff intervention, in terms of the individual components and system-level impacts and the contextual factors that affect intervention implementation and success.

In addition, programme documentation was reviewed to add further depth of understanding and context to the process evaluation. The interviews and programme documentation have been used to inform a systems analysis and to develop intervention case studies.

2.3 Community engagement to understand and explore impact

The research team worked closely with the organisations delivering interventions to identify opportunities to engage with the communities who they work directly with, and to understand the impact on and experiences of people directly and indirectly affected by their activity. The voices of six young people were captured through interviews led by youth workers. Involving the voice of young people was a key part of evaluation activities and it was anticipated that the evaluation would engage with more young people than was possible. To ensure feedback was reflective for all interventions, internally collected case studies, service user feedback and good news stories were included. Overall, the qualitative engagement with stakeholders and service users explored:

- If, how, and where the interventions engaged with communities in Cardiff

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[3] Commissioned by the Medical Research Council and National Institute for Health Research. The 2021 guidance is an update of the Medical Research Council (MRC) guidance published in 2000 and updated in 2006 and has been jointly commissioned by the MRC and National Institute for Health Research (NIHR).

- How the interventions work in partnership with each other and external agencies to promote/impact on community safety
- Perceptions of the ability of the 'system' to work in a coordinated way to respond efficiently
- How the wider context, in terms of policy, social care and broader influences affect/influence these issues

Secondary data was also included to explore the success measures defined by the VPU and to determine impact. This included routinely collected monitoring data provided to the VPU, and additional data collected within services to evidence of impact. The engagement with young people and additional impact data have contributed to the intervention case studies.

2.4 Timescales

Data collection took place between February 2023 and April 2024. Quarterly reporting included April 2022 up to March 2024.

3. Findings[4]

3.1 Overarching vision of the VPU

Stakeholders participating in the evaluation agreed that there was a united vision for preventing and reducing violence across Cardiff. They had good awareness of the Violence Prevention Unit (VPU) and the key aims of the unit, including the 'prevent and protect' public health approach to violence prevention. They believed that the VPU focuses their resource on prevention and early intervention through commissioning support for individuals who are at risk of involvement with violence, including knife crime and criminal exploitation. A number of the stakeholders highlighted that the VPU is well-funded, meaning that resources and interventions across Cardiff are funded to either establish or enhance existing support provision.

> *"It's a collaboration between universities, local authorities, home office, they get enormous amount of data, and crunch that data, they start to tie together a lot of these disparate schemes and processes that can be held with a local authority, Welsh Government, or police or private partners, and in reality is trying to get an overall picture of what that looks like and how we as a collective social entity can deal with it. And it does work"* (S17)

The VPU were able to provide funding within the community through investing in established interventions and supporting the development of new activities. Examples were provided for how successful interventions implemented in Cardiff had gone on to be rolled out in other areas, for example, the VPT intervention was piloted in Cardiff and then rolled out in Swansea.

> *"They get some great funding. It's looking at that holistic process within the community and sense checking everything that we do, and being that interface really between all of those agencies, and trying to get continuity across different work streams"* (S17)

The stakeholders felt that the VPU had involvement with key strategic and operational colleagues. The wider VPU membership ensured a strong multiagency partnership. Stakeholders participating in the evaluation described the teams they worked in as *"very passionate about violence prevention"*. Stakeholders felt that that the VPU connects partners together. They reported that partners had worked together from the start of the VPU to develop a unique model that incorporated criminal justice and health to ensure young people were safeguarded. Stakeholders believed that established partnerships through the Safeguarding Adolescents from Exploitation (SAFE) Partnership[5], the Violence Prevention Board, and the Community Safety Partnership were crucial in supporting the overarching violence prevention aims of the VPU. Key members of the VPU team were also stitched into wider violence prevention activities across Cardiff, for example the VPU lead also co-chairs the Violence Prevention Board. This close working allowed for collaborative funding opportunities, such as the VPT intervention.

> *"I think we had a good framework to start with, which I think really helps you know, and a very fertile ground to show the seeds into everyone's very receptive to new things"* (S11)

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[4] Quotes key: S= Stakeholder, YP= Young Person, Quarterly Reporting= qualitative data from the VPU quarterly monitoring reports

[5] SAFE model recognises that children and young people can be at risk of or subjected to harm through exploitation and abuse from adults and/or other peers outside of their family network. SAFE Partnership supports the city-wide approach with multiagency safeguarding meetings with key partners.
https://cardiff.moderngov.co.uk/documents/s72871/Appendix%204.pdf

"It's being involved from the very beginning, South Wales Police and health partnership, we were able to set up a very different model to elsewhere in the UK… we were very innovative" (S16)

"Because we've already got our relationships set up. Some of it has come out of the VPU conversations and we've made contacts and engaged, it's so embedded" (S17)

Communication between the VPU and partners was described as good. Examples were provided by intervention providers for being able to speak with the VPU for support. Many noted that relationships between VPU-funded interventions and wider partners were so strong that partners could often go directly to one another rather than leaning on the VPU to bridge those relationships. Media Academy Cymru, who are stitched into a number of the funded interventions described the relationship as symbiotic, in that they benefit from one another through the development and implementation of programmes while creating positive outcomes for children and young people.

"There's people that we've got direct access to within the VPU if we don't understand something, we'll just phone them" (S17)

"The PCC and the VPU and everything have all been very good. I think it's a positive working relationship" (S11)

The Violence Prevention Team (VPT) also explained how they worked together with the VPU to co-design safeguarding interventions. Another stakeholder explained that support from the VPU (and the Office for the Police and Crime Commissioner) provided key provision for police activities. One stakeholder noted that more recently *"dialogue seems to have tailored off",* reporting that communication could be improved and that the VPU involvement in the funded interventions could be better promoted.

In addition to the Violence Prevention Board, the SAFE Partnership, and the Community Safety Partnership, examples were provided for other violence prevention work that is being delivered across Cardiff, this included:

- The development of a strategy that incorporates exploitation, which is being informed by a needs assessment carried out by Public Health Wales and by intelligence/evidence-based profiles. Stakeholders across Cardiff were included to explore priorities and contribution to the delivery of the strategy objectives.
- Listening exercises that have taken place with communities, including youth service, probation, and Safer Wales, that look at how people feel about their local area, what they think the priorities should be, what they think contributes to and causes violence and the impacts of violence on individuals and within communities. Local residents are also asked what activities they think could help reduce violence.
- Operation Paramount to provide enhanced support. This was developed from the Barnardo's Invisible Walls for children with a family member who has been incarcerated.
- The launch of the Women's Safety Charter, which asks employers to sign up to ensure that female employees are safe coming into and leaving work, and to pledge to work to make safer spaces for girls, including premises, parks and green spaces.
- 'Not the one' knife campaign.
- 'Choice of a Lifetime', a touring school play that was delivered to 4,000 children and professionals from the police, fire service and probation.
- Intergenerational work across Cardiff to try and break the cycle of intergenerational behaviour and help children and young people realise that they can have aspirations.

- Prevention (pre-offence) and early intervention (at the point of arrest/bail) work to divert young people away from the criminal justice system, including the DIVERT programme delivered by Media Academy Cymru (MAC) and The Bureau (for more serious offending).

3.2 Reach of violence prevention activities

Stakeholders participating in the evaluation provided examples of the young people, individuals, and family members that they support through the violence prevention activities. They highlighted the importance of the VPU taking a public health-informed approach to ensure that young people were supported, and needs addressed through a safeguarding approach, rather than through an approach that criminalises them. This was seen a strength of the VPU. Amongst the young people accessing the activities, a high proportion have multiple needs, whilst a high proportion are awaiting assessments for additional needs.

"They're quite broad, although most of their work is targeting younger offenders, victims, because that's where the value is really" (S17)

"I am pleased that they've [VPU] acknowledged that safety at that safeguarding aspect, needs to be a part of violence prevention, otherwise it could go down a road that, you know, it's more about criminalising and stopping rather than protecting and safeguarding. So I think that's a strength" (S10)

Poor mental health

Stakeholders reported that a large proportion of the young people that they work with have poor mental health and wellbeing, including anxiety, depression, low confidence, and low self-esteem. There were also reports of young people feeling bored and frustrated. Social isolation was also raised as a significant issue for young people, which was seen as a risk factor for exploitation, and as a barrier to them engaging with services. Data from Fearless shows that young people from low socioeconomic backgrounds are often isolated and may have mental health problems, which was linked to increased risk of exploitation due to increased vulnerability. The VPT also identified a high need for housing for the older young people and adults presenting to A&E. This included homelessness and risk of homelessness and individuals with complex needs. The VPT also highlighted the challenges in supporting individuals who present to A&E in Cardiff but who reside in areas outside of Cardiff, meaning they do not have the same equitable access to support.

"Some of our cases are so complex that people just don't want to touch them, and that's the reason they've sometimes got to the complexity that they've got to, because all the services have kind of been passing this young person around" (S9)

Adverse Childhood Experiences (ACEs)

Partners also described working with young people impacted by Adverse Childhood Experiences (ACEs). This included young people living with parents who have poor mental health and/or make use of substances. Providers also reported that many had also witnessed or been victims of domestic violence. Quarterly reports that are completed by the intervention providers for the VPU also highlighted that young people can have a lack of support from families or be separated from their families. Data from Braver Choices reported that in one quarter, three out of five new referrals had been removed from the family home or had spent a period as looked after children.

"It's about working with families and parents getting out of that cycle of violence where you know Dad's in prison, then their child ends up in prison. That generational thing, which is what we see a lot of in the deprived areas in Cardiff. You can see why the children are like the way they are is because they don't have positive role models in their life... it's trying

to come up with strategies to put these positive role models, these trusted adults in these lives of these young people. So they see there's a different opportunity. There's a different choice" (S13)

Parent involvement was also discussed as a barrier, in terms of parents who are too involved and those who are not involved at all. It was acknowledged that it can be difficult for some parents to support their child due to their past experiences engaging with services, which has led to a general distrust of services and professionals. Stakeholders argued that more work is needed to both prevent ACEs, and to support young people who have experiences ACEs to ensure they do not feel alone and that they have people who they can go to for support.

"It's hard to try and build relationships with parents sometimes because they're sometimes so defensive, probably because of what they went through in the past or what they go through currently. So you can understand it" (S2)

Disengagement from education

The majority of young people referred to the intervention providers were disengaged from school. They were either not in education, employment, and training (NEET) or were on a reduced timetable in school. Many had been temporary or permanently excluded from school, and some had experienced multiple exclusions. At times, all the young people engaged with the Braver Choices programme were NEET, on reduced timetables or had previous school exclusions. Stakeholders recognised the negative impacts of multiple exclusions on young people and the long-term impacts and disruption these cause to their education and future.

"I think lots of schools are so quick to put them [children/young people] on a reduced timetable because it means that they don't have to deal with it, and I know that's really quick for me to judge because they've got a big caseload but I just think at the end of the day, those few years for the young person are huge" (S2)

"A scary amount of reduced timetables and fixed term exclusions and school moves. There have been some subject to over five school moves. It's quite significant. Permanent exclusions, not so many, but we find that the fixed term exclusion probably has more of an impact, because fixed term exclusions you can have 3,4,5 of those for 3,4, 5 days at a time. Suddenly that [child] has lost a month of school, the structure. They fall to alternative provision at that point because they're not permanently excluded" (S15)

Partners also recognised the link between being NEET and involvement in crime, highlighting the importance of interventions targeted at the criminal justice system, but also in settings outside of education to ensure that those who are NEET are not missed. Fearless gave examples of delivering sessions in community settings and in pupil referral units (PRUs). Stakeholders highlighted the important role of education in building protective factors for young people. Schools were considered an important partner, as school wellbeing officers often have *'the best relationship'* with the young person and can therefore facilitate relationships between the young person and the youth worker more effectively. Supporting young people to reengage with school was also a key part of a number of the interventions.

Disability and learning needs

Neurodiversity was raised as a significant and increasing need. Stakeholders reported working with more young people who either had a diagnosis such as Autism Spectrum Disorder (ASD) or Attention Deficit Hyperactivity Disorder (ADHD), or who were on a waiting list for a diagnosis or had unidentified mental health and learning needs linked to neurodiversity. Stakeholders highlighted the link between

neurodiversity and barriers to school attendance and attainment, suggesting that this increased the challenges for those young people disengaged from education.

Data from Braver Choices showed that up to 80% of young people supported had special educational needs and disabilities. Although relatively new to delivery, Positive Masculinity also reported that two out of three young people referred to them had an ADHD diagnosis. Partners from the custody suite Teachable Moments intervention also explained that traits of neurodiversity were common amongst the young people being interviewed in the custody suites and that neurodivergent young people were overrepresented in the criminal justice system.

Stakeholders explained the additional barriers that these young people may face. Teachable Moments highlighted that individuals with neurodevelopmental disorders may struggle in police interviews, for example, they may experience difficulties communicating and making eye contact, which may be misinterpreted by police officers. These misinterpretations can result in the needs of young individuals remaining unmet, which can subsequently result in their problematic behaviour continuing. This flagged the importance of having support staff who can understand and advocate for a young person in these situations.

> *"Difficulties that people are dealing with and they learn to mask them very, very well. But when they are interviewed by police, they'll say one thing one day and another thing another day, people would accuse him of lying, and actually they just can't recall" (S15)*

Nonetheless, it was felt that in recent years, there appears to be more awareness of neurodiversity. This was felt to be reassuring as this growing consciousness and willingness to make accommodations for neurodiverse groups could indicate a positive shift towards a more inclusive and understanding approach to supporting neurodiverse individuals. Providers described adjusting intervention delivery and resources to make services more accessible, including modifying communication and paperwork. Braver Choices adapted to meet the needs of these young people, for example, by using shorter sessions and the use of visual aids. Case workers also undertook research and training to improve their knowledge of specific needs and disabilities, including opposition defiance disorder to tailor support. Adapting and tailoring sessions were seen to build stronger relationships with children and young people and have supported engagement. Parallel Lives developed resources and complementary materials for younger and neurodivergent young people. Staff also upskilled via training to better support families with neurodiversity and mental health issues. Fearless also acknowledged that it is important for case workers to consider both language and delivery style to ensure that the content is relatable and understandable to young people. Teachable Moments showcased their new neurodiversity toolkit, Operation Erica. This toolkit seeks to validate young people's struggles and offer an opportunity to support them to change the behaviours that could lead them into the criminal justice system. This change in mind-set may lead to improved identification of specific needs and tailored interventions, ultimately fostering better outcomes for neurodiverse young people. Others provided examples of including speech and language therapists (SLT) within teams, and SLT training for staff.

> *"I think one of the most reassuring things that we've had there is the early action. At some point they've already done an assessment in relation to neurodivergence, so it is being picked up, you know, in all different spheres. So, I think it's on everybody's radar, isn't it?"*
> *(S6)*

Transition to adulthood

Gaps were highlighted in terms of support provision for young people transitioning into adulthood. Concerns were raised for young people turning 18 years of age, with stakeholders acknowledging that

many vulnerable young people are not necessarily ready for adulthood. There was a gap identified in provision for young people on the cusp of adulthood with stakeholders explaining that many of these young people 'fall between the lines' when child focused support finishes. There was seen to be a gap between young person and adult service provision. Stakeholders also explained how young people using child focused services are provided with more opportunities to engage and are met with professionals who are more understanding and willing to spend time developing trusted relationships, as opposed to young people using adult services in which they are more likely to be defined as 'closed' if they do not, or struggle with engaging with support. Stakeholders highlighted the importance of having diversionary activities for young people to engage in meaningful activities and develop and enhance skills. This was seen as a particularly important route in supporting young people to engage and re-engage with education, training, and employment.

"There is a gap and I do worry about young people, they suddenly start being seen as the exploiters rather than the exploited. How we address that within a system that doesn't always allow us to do that" (S15)

"We find the transition between 17 and 18 is some of the most trickiest times for our young people. When all the organisations pull out" (S9)

The VPT was initially designed to focus on young people and knife crime, however, they quickly established that an older age group were presenting to A&E with other violence related injuries. In recognising this gap in support, the VPU decided to widen the scope of the intervention.

Impact of Covid-19 pandemic

The stakeholders participating in the evaluation described the changing landscape and increasing complexity of need within the community. They explained that the impact of the Covid-19 pandemic and associated lockdown measures, followed by the cost-of-living crisis had increased social isolation and poor mental health which had impacted on young people's behaviour.

During the pandemic services adapted to continue to provide a service offer. This included delivering sessions online. The VPT were able to continue with face-to-face work because they were based within the A&E department. Having NHS employed practitioners in post was seen as a benefit, as it meant that staff were not furloughed or re-directed to other areas. It was also seen as essential to be able to deliver in-person support when so much needed to be redirected online. The VPT also faced additional challenges with gaining access to A&E and other hospital wards as staff engagement with the intervention was lower during this time. However, following the pandemic, other services having an option of online work was seen as a benefit, as it means that sessions could be more accessible and tailored to individual needs. Fearless also noted that they can now carry out online sessions in school with high knives presence. The VPT were also able to adapt some of their resources during the pandemic by offering education for colleagues online.

Examples were also provided for young people who were in mental health crisis following the pandemic, with higher numbers presenting to emergency services with self-harm and overdose. One stakeholder suggested that there had been an increase in violence, vulnerabilities and exploitation in Cardiff following the pandemic. The VPT reported seeing an increase in school-related assaults post Covid-19, explaining that they worked closely with school nurses.

"There is an increase around serious violence, exploitation concerns and vulnerability. How do we try and target that" (S15)

Stakeholders also reported that schools and services had seen a change in behaviour with more young people getting into trouble in school. Poverty was considered a high risk for exploitation, however,

quarterly report data showed that Fearless are seeing an increased presence in schools which were historically considered to have a higher economic wealth. Gender-specific issues were also reported following the pandemic, with reports of an increase in young males with mental health issues and toxic masculinity, which led to the developed of the Positive Masculinity intervention. Fearless also reported seeing an increase in toxic masculinity, misogynistic ideologies, and incel culture among young people since the pandemic, with the dissemination of such beliefs prevalent on social media. As such, they have developed focused delivery content with a local PCSO to challenge and dispel these beliefs. All the intervention providers reported that the majority of young people that they work with are young men. However, following the pandemic, services saw an increase in violence involving girls since the pandemic. The VPT intervention also noted seeing a 25% increase in the number of women and girls attending the emergency department. There were also increased incidents involving social media, including online bullying and threats, and filming of violent incidents. Stakeholders explained that social media platforms such as TikTok were heavily linked to risk of exploitation and violence.

"I believe it's a result of more social media. So the girls are threatening each other on Snapchat and videoing fights and stuff. I feel like they're creating content by instigating violence" (S13)

"They [children/young people] hear like on the media and especially like music has a big impact like they're hearing everyone else is carrying [weapons], so they're like okay well it must be okay" (S2)

Stakeholders also reported an increase in incidents during the school summer holidays, noting that there was a gap in community based and diversionary activities during times when schools were closed. In addition to a change in gender demographics, some of the services, including Parallel Lives and Braver Choices reported seeing an increase in younger ages presenting to the service. More recently, Braver Choices reported an increase in young people carrying weapons as a form of protection because of debt linked to substance use. Concerns were raised around criminal exploitation and young people not understanding laws related to carrying a weapon. Braver Choices and Fearless also reported increased incidents of young people taking weapons into school and threats via social media. Similarly, Fearless also noted high levels of high cannabis use in colleges and vaping in schools, increased loneliness and self-harm related to relationship breakups.

3.3 Challenges to delivery

Barriers to engaging with support

Stakeholders described the challenges on engaging young people and their families in support. A significant barrier was mistrust of professional services because of fear, previous negative experiences, lack of parental engagement and perceived stigma of engaging with specific services.

A number of stakeholders discussed the mistrust in the police, highlighting the importance of linking community services and criminal justice services together to break down some of those barriers. One stakeholder noted that this is a particular barrier for Black, Asian and Minority Ethnic communities. Limited understanding of the role of services and the legal repercussions of crimes was also seen to contribute to these barriers. Fearless also explained that they often must distance themselves from the police in order to build a rapport with young people, to engage them in sessions, and to increase the chances of them reporting a crime to the Fearless service. Stakeholders acknowledged the low levels of reporting, noting that the lack of reporting of incidents in Cardiff was seen to give an inaccurate picture of the levels of violence and exploitation that occur. They explained that there is a 'snitch' culture, whereby phrases such as *'snitches get stitches'* drum fear into young people reporting

crimes. A key aim of the VPU-funded interventions was to break down these barriers and provide young people with a safe space to report crimes.

> *"There isn't confidence in the police in a lot of communities in Cardiff - they won't report. There's underreporting - a lot of areas have become desensitised by things that are going on and would never even think it was an issue because they just see it every day. You know, there's all those systemic things that I think need attention" (S10)*

Challenges of engaging young people and difficulties that can arise if a parent or carer had other caring needs with an additional child, therefore, making it hard for them to attend to activities in person. Stakeholders also noted that individuals can find it difficult to engage with support depending on where they reside and what is available to them locally. Providers explained that individuals will often not arrive for sessions or cancel appointments at short notice, but how this eases once they engage with the service and build trusted relationships with youth workers. It was also acknowledged that there are often many organisations working with young people at the same time, which can be overwhelming and confusing for the young people and may impact engagement.

> *"Often when you meet a young person, there's so many professionals involved and they're just trying to get it so that they're not just overwhelmed, they're not overloaded" (S2)*

> *"That I can't duplicate the same support really bothers me…the problem is always postcode really isn't it" (S8)*

> *"Other barriers are lack of trust from the young people towards professionals as well because sometimes they've had so many people coming and going, so you're just another person" (S9)*

Providers described the work they undertake to build relationships and breakdown barriers to make services more accessible. Case workers who have adapted to improve engagement by delivering sessions in schools, homes, public spaces, and at community venues.

> *"We're still trying to work these young people, young people that are very reluctant to engage with services. There's a there's a real lack of trust, so we are doing all that kind of relationship-based trauma work with them, just getting them to talk to us at all. I think there's just that big push, really, isn't it? Just getting everyone on the same page" (S15)*

Implementing interventions

The stakeholders agreed that the work covers a diverse city and acknowledged that there can be challenges working across different geographical footprints, different size organisations, and different structures. For example, some organisations cover all of Wales, while some are specific to South Wales or Cardiff-only. This can create barriers when working within different organisational structures.

Whilst there was positive feedback around partnership working, stakeholders did acknowledge that all relevant partners are *"around the table, other than education".* One stakeholder also acknowledged that historically in other areas, health 'buy-in' to partnership working can also be a gap, however, they felt that in Cardiff this was not the case. Fearless, who deliver sessions in schools, reported that schools are generally receptive, however, some are reluctant to acknowledge knife crime to avoid the criticism that may follow from parents. Schools not providing education around the laws in terms of weapon carrying for these reasons was also seen to be a barrier. Making initial contact with schools was also identified as a barrier as, often, service providers will have to find a contact for the school, such as a youth worker or the head of wellbeing, before the school will consider allowing Fearless or other providers in. Braver Choices also noted that some schools will not allow a child or young person back into school until they have completed the Braver Choices programme. This was seen as a barrier given

the links between NEET and increased risk of involvement in knife crime, and the negative impacts of school exclusion on young people. Brave Choices was noted as trying to overcome this by delivering the sessions within the school, so that the school can see that the young person is engaging in the programme without having to exclude them during the programme duration.

"Health seem more engaged. The VPU over the years has definitely convinced health to be more open and sharing whether they want to or not… that's helped hugely" (S17)

"There is a definite disconnect and again comes back to raising awareness and partnership working" (S15)

"Things like getting someone from education involved because they don't seem to want to get involved despite all the evidence. We've really struggled to get education involved and it's hard to get consistent data around exclusion" (S11)

There were a number of barriers also noted for implementing Teachable Moments, including a lack of awareness from partners about the Teachable Moments intervention, or the lack of prioritising the intervention. Such barriers were reported to have led to MAC workers not being informed of the young people present in the custody suite. Providers carried out additional work to promote awareness of the intervention to secure buy in from colleagues within the custody suite. The VPT also flagged a general lack of trauma-informed emotional support for patients, highlighting the importance of their intervention in educating and supporting professionals to become more trauma aware. However, the VPT did recognise the challenges of this needing to occur in a fast-paced A&E, with a high volume of revolving staff.

Data sharing and governance

Stakeholders participating in evaluation interviews discussed the challenges of data sharing across partner organisations. They explained the importance of not sharing data unnecessarily and abiding with data protection and governance. On the whole, stakeholders discussed the benefits of sharing information between partners (highlighted in section 3.5), but they also did note that there is a fear around the security of sharing data.

"I think what's really important to remember is people's health records are confidential, and we wouldn't share information freely in meetings. The way we analyse information is appropriate, staff need to be very knowledgeable and able to make decisions about the information that they share" (S16)

Some felt that organisations can have limited awareness of rules on GDPR and similar legislations, which can lead to a general sense of unease and fear of repercussion when it comes to sharing information. Providers also flagged the challenges of developing data sharing agreements across the partnership, with examples given around current data sharing restrictions between the local authority, schools, and the police. Stakeholders also noted inconsistencies in reporting from the education sector through safeguarding portals such as MyConcern. It was noted there was also as a *'lack of agreement from schools to share exclusion figures'.*

"People can be precious about information or nervous to share information, even though there's agreements in place" (S9)

"If they're sat on information because they don't feel they can share because they don't want to betray somebody's confidence. Sometimes they're more worried about GDPR, as a reason not to share some really critical information. I think there was scare mongering around GDPR when it came in, but it does stifle information sharing on an individual basis" (S17)

"You know the relationships are pretty cordial and professional, but when it comes to data sharing, it, it just isn't as fluid as I'd like it to be. I don't know if that's just because of perhaps like a lack of understanding around what's required or if people are just quite reluctant to share" (S14)

There were also challenges with accessing data in the right format and in a timely manner. This focused around data quality and consistency. Partners working with data explained that often raw extracts of data can generally be of poor quality, *"it's like qualitative and it's pretty messy"*, and that partners working within data analysis will work with colleagues to help improve the quality of data. This includes the development of tools to standardise the data and support to interpret the data.

"Scrambling to get consistent data" (S14)

Providers also gave examples, including Teachable Moments who reported barriers with MAC youth workers not having access to Niche, a police data platform which securely holds information about people in custody. This delay in receiving information can create a number of problems, possibly resulting in fewer young people receiving timely intervention and overlooking specific needs and adjustments required by the young person. Not having crucial background details and subsequently going into a home visit blind can also pose a risk to MAC workers. Teachable Moments also flagged the potential inconsistencies between police and MAC data due to the definition of what constitutes as engagement with the intervention, highlighting the risk of having missing data that does not truly reflect full engagement with the service.

Resource and capacity

Limited resource and capacity was flagged as another barrier by partners. They recognised that the VPU funding had been instrumental in enhancing and establishing interventions. However, they reported that with additional needs in the community and limited funding in general across the sector, services were working with less resource and increased demand. It was recognised that it can be difficult to attend multiple meetings and establish partnerships due to a lack of capacity. Providers also flagged capacity as an issue for those working with schools, highlighting the challenges of working within the school calendar. There were also reports of increasing caseloads due to all services being overstretched.

"In the various meetings, I think there's a massive danger of duplication and replication of work, and you're all chasing one pot of money, fighting for the same pot to do the same thing" (S11)

The short-term nature of funding was also seen as significant barrier. Stakeholders discussed this in relation to funding from the VPU, but also in relation to other funding streams, recognising that a majority of services, especially Voluntary Community and Social Enterprise (VCSE) organisations, rely on short-term funding contracts. All individuals participating in the evaluation agreed that this caused services to compete against each other for funding, which can create partnership barriers and silo working. They also agreed that short-term funding can impact delivery, in terms of needing a contract to be in place to recruit staff, which takes time, meaning that projects can be nearing their end before a whole team is in place. This was also a barrier for maintaining a workforce, with stakeholders explaining that the uncertainty of job security was worrying for staff, and that it also meant that they needed to look elsewhere for employment as contracts were coming up to be renewed.

"But then you've got people getting seconded in post for six months or 12 months. You don't know if you will be there in 12 months' time. And are you missing out on people? People need a certainty of a job, some won't apply for six-month jobs because they can't take the risk" (S11)

3.4 Impact

Individual impact

Providing a trauma-informed approach and safe space

Partners agreed that VPU-funded activities impacted most on young people at risk of involvement with violence. Data from the intervention case studies, and stakeholder and young person interviews evidenced a wealth of positive outcomes for the young people engaging in services across Cardiff. Data from the intervention providers has evidenced good take-up and engagement with each of the services. Stakeholders also discussed the work that was undertaken to break down barriers and support individuals and their families to engage with support. Building relationships, working in a trauma-informed way, and adapting communication and resources was seen as key in increasing engagement. This was seen as essential in engaging with young people at the first point of call, and for some interventions during a moment in crisis, to make every contact count and move them into appropriate support.

Utilising a trauma-informed approach was seen as essential for effective support, as well as for breaking down barriers to provide young people with confidence and feelings of safety to report a crime. The tailoring of intervention delivery and flexible approach was seen as key to meeting the needs of the young people. Examples were provided from each of the intervention providers. One stakeholder noted that engagement and relationships worked better than in any other previous service.

> *"We also just care, that's what makes the difference is that you look, you really do care about them because this is like the generation who is going to be looking after us. When everyone speaks so badly about our young people, but actually there's a lot of good in them" (S9)*

The intervention providers discussed using a trauma-informed approach to develop and build trusted relationships with young people, explaining that time, effort, flexibility, and patience were needed to gain trust. Braver Choices gave examples of the early work and entrance sessions that are carried out to get young people on board with the programme. This was seen as especially important in easing feelings of mistrust and fear of speaking with professionals, and to ensure that young people felt safe during sessions. Other examples from MAC included linking in with established workers known to the young people for consistency and trust.

> *"Turning up doing what you say you're going to do, and if you can't do it, being honest and saying I couldn't do it or I tried and it didn't work. Being very open with the young people" (S9)*

Teachable Moments aimed to amplify the young person's voice while reducing the stigma of being in police custody. Young people participating in the evaluation explained that they had developed trusting relationships with their youth worker. One young person explained that *"they worked with me when no one else would" (YP)*, while another described feeling *"listened to" (YP)*. The VPT also provided examples of developing relationships of trust with patients, especially those who may be victims of exploitation or who have had a bad experience when engaging with professionals in the past, to help break the cycle of generational violence.

> *"We all see that cycle of violence, and if we could have stopped the parent becoming a victim before they become a parent, then why not?" (S8)*

Providing a safe space was seen as key. Positive Masculinity recognised that forming trusting relationships in a safe space is important to the success of the programme as when these are formed

within sessions, children and young people will engage in various activities, both individually and as part of a group. Due to the informal comfortable environment created during workshops, Fearless caseworkers build trust and rapport with the young people, which enable young people to open up to them. Teachable Moments also explained that carrying out motivational interviews in the cells provided a less intimidating environment than a police interview room, and that it encouraged open and honest conversations that alleviate worries and anxieties that young people may be feeling; *"it's nice to chat in cells" (YP).* The interview is also used for the caseworker and the young person to get to the root of their actions and to discourage future problematic behaviour. Young people felt that it is important for children and young people to have support in custody suites to ensure *"we have someone we trust to talk to" (YP).* The importance of this interaction leading to work in the community with MAC meant that relationships could be maintained, and ongoing support provided.

Improved knowledge and awareness

Improved knowledge and awareness for young people was highlighted as a significant outcome of engaging with the VPU-funded violence prevention activities. There was also increased knowledge and understanding of where and how to access support. Examples were provided from Fearless, Braver Choices, Parallel Lives, Positive Masculinity, VPT, and Teachable Moments for increased awareness around violence for young people, including weapon carrying, legal consequences, and impact for themselves and others. Braver Choices and Fearless reported that young people had improved knowledge of laws and legislations, which they would have otherwise not had access to (from home and school). This was seen to enable young people to make informed choices.

> *"I find a lot of them that are so vulnerable, there's a lot of them that have like no fear of the justice system. So because they think they're invincible, they think that they'd be smart enough to get away with it" (S5)*

It was recognised that many of the young people have no fear of the justice system and do not always understand the ways in which people become involved in crime, and that as such, the workshops and sessions provide them with greater awareness of the exploitation and ways in which they can become involved in the criminal justice system. Feedback from sessions delivered by Braver Choices and Fearless showed changes in the understanding of consequences of being involved in crime, with over 90% reporting a better understanding following workshops. Teachable Moments also serves to fully incorporate the young person into the process of being arrested and acts to inform them of procedures and rules, and to help them better process their experience. One young person explained that this is important as they *"didn't have anyone who knew what was going on" (YP)* before engaging with their youth worker.

Improved knowledge around how and where to report a crime, as well as increased confidence in reporting crimes were identified as key outcomes. Fearless evidence a change in attitude with 66% of young people feeling confident reporting via online secure form, with the rest choosing 'maybe'. Additionally, 100% of young people revealed that they would use fearless.org to report a crime anonymously. Providers reported increased disclosures of crimes, including domestic abuse and violent crime. Additionally, providers added that young people also felt confident in not just reporting anonymously but also in speaking with professionals. As such, breaking down the stigma associated with the 'snitch' culture was seen as essential in decreasing the barriers to reporting.

> *"I think they've made a big difference, kids wouldn't have gone to the police to press charges about something or wouldn't have reported things. And they've actually gone to court because they've felt supported, whereas beforehand they wouldn't have" (S11)*

Improved wellbeing

Stakeholders discussed the outcomes for young people engaging with interventions and programmes. They reported that young people had grown in confidence and self-esteem, and resilience. This led to an overall improvement in wellbeing, including reduced anxiety and depression. The young people themselves reported that they felt more confident because they felt supported and had someone 'on their side'. The trusted relationships developed with staff also provided them with a safe space to open up and talk about how they were feeling.

"Feel supported and more confident within myself" (YP)

"I will talk about my feelings more" (YP - Quarterly Reporting)

"Just having confidence in who they are. Being confident enough to say what they want. Instead of going along with everything that is expected of them" (S9)

The VPT also reported the increasing need of young adults presenting to the A&E department with housing issues, noting outcomes for them, including access to appropriate housing and maintaining tenancies. Additionally, they explained that for those with complex lives, the VPT intervention had been lifesaving. Stakeholders also reported that for the young people engaging in group sessions, this had provided an opportunity for them to meet other young people in similar situations. This was seen as important in helping them to develop friendships and support groups, and to learn from other another.

"Really beneficial because they [young people] can meet other people in the same situation as them" (S2)

"We have a young person that's just gone to prison, and I've been supporting them on and off for three years, but actually…they've managed to survive going into prison, and they're flourishing in prison. We were worried they were going to die and escalated it. So, an outcome for us is, they're now 18, in a safe place, put on weight, eating and clean. But it shouldn't take them going to prison for that" (S8)

A key outcome of the interventions is supporting young people back into education, training, and employment. Braver Choices were able to work with schools to conduct sessions on-site in schools to avoid young people being excluded whilst they complete the course. They reported that young people were more confident in school. Parallel Lives also reported positive impacts on young people's behaviour both at home and in school, aiming to promote a more positive learning environment for the teacher and other students. Teachable Moments also reported that support and improved confidence had allowed a young person they were working with to re-engage in education. Early findings from Positive Masculinity also evidenced work with schools to carry out specific sessions with a group of young people in a school setting.

"We have seen a general reduction in behavioural incidents in the school and the boys seem to love the sessions" (Quarterly Reporting)

The stakeholders believed that engaging young people in meaningful activities that not only provide them with support and education, but also structure, routine, and fun activities gave them a better sense of identity. Braver Choices gave examples of supporting young people to engage in clubs outside of school, such as Step into Sport, which offered activities such as mixed martial arts and boxing. This allowed them to recognise skills and strengths that they did not know they had, acknowledging that many young people were 'down on themselves'. It also provided them with new opportunities to learn more about themselves, what they like doing, and what skills they would like to learn. This created opportunities for young people to set future goals and move away from incidents in school and/or

incidents involving the police, in favour of planning for a better future. Engaging with these activities was also felt to allow young people to regain some of their childhood by allowing them to have fun. Providing young people with role models in the community, and opportunities to become those role models was seen as a way to support them to move forward, help others learn and be part of their communities.

"They are getting some of their childhoods back. I mean, you'll never get your full childhood back, but they're experiencing what it is to actually be a child, to have fun, to laugh" (S9)

Reduced risk of violence

Stakeholders explained that the violence prevention activities had led to increased feelings of safety for young people. That, coupled with increased knowledge and awareness had led to reports of young people stating that they were less likely to carry a knife. Feedback from both Fearless and Braver Choices evidence that young people had described no longer carrying weapons. Wider stakeholders also reported increased reporting of crimes, arrests, and disruptions. A number of partners believed that there has been a reduction in drug use, anti-social behaviour and violence among children and young people involving a weapon. However, they did acknowledge the increase in violence following the pandemic, but regardless, some did believe possession of weapons had increased.

"Knife crime incidents in Cardiff have gone down and possession of weapons is increased. But actual kids attacking each other with knives has gone down" (S13)

"Our knife crime is lower than it's ever been. Our murder, deaths or serious injuries is lower than it's ever been, although we are seeing this rise in knife crime, that's been brought along with county lines" (S17)

"We've been relatively reactive where we've had to be. We haven't seen massive like spikes in crime. Probably three or four years ago when there was an awful lot of knife crime… although I think Covid has massively skewed the data. I think people have changed the way they behave. So whether that data accurately reflects actually what's happening or the confounding factors are making it different" (S11)

In the longer-term, stakeholders hoped interventions across Cardiff would contribute to a reduction in the number of hospital admissions for assaults with a weapon, in police recorded crime, all non-domestic homicides especially among those victims aged under 25, and a in all violence among children and young people, as these reductions would all lead to better life chances for those involved.

"It has an impact on the NHS because they're not going into hospital. It has an impact on the prison systems because they're not all going into prison. It's having an impact on children's services because the weight is not all on just one person" (S9)

Wider impact

Support for parents was identified as a gap, and a number of the interventions rolled out further support for parents and families to address this. It was recognised that it is important to engage with parents to ensure that they understand the work that services are doing with their child. Staff at Braver Choices work with family members to advise and educate them on how to manage a situation where they think their child is being exploited.

Parallel Lives recognised a gap in the market for parents or carers that really wanted or needed their help, to support young people to engage with services and give permission for their families to be involved and have focused sessions on the needs of the parents and guardians. Parallel Lives was seen to be effective in creating a safe environment for both the parent or carers and the young people

affected by Adolescent to Parent Violence and Abuse (APVA) and as contributing towards the reduction of stigma and shame that the parents, carers, and young people might have. It also provides an invaluable opportunity for parents and children to share experiences and support one another.

In addition, the Parallel Lives intervention helps to instil parents with enough confidence to manage their child's behaviour. It additionally helps to reduce the fear and anxiety the parents and carers might have felt in their own home due to experiencing APVA. Additionally, parent and carers were seen to have a better understanding of police processes around bail conditions and release under further investigation, which were recognised as complex and proactive processes. Parents and carers were also seen to have a better understanding of the support and services available to them from their Youth Justice Services. Teachable Moments was also seen to alleviate worries and anxieties for parents and carers. One person acknowledged that the situation was stressful for their mother but that their MAC youth worker was able to provide support to the young person's mother to explain the situation and ease any anxieties. SAFE also identified the need for support for parents and the need to raise awareness of exploitation among parents. As such, they have been able to develop a parent engagement plan to overcome this and have embedded peer support groups and parent café models, designed campaigns targeted at parents, and introduced parenting courses.

"It was very stressful for my mum and [MAC youth worker] spoke to Mum too. I didn't know what was going to happen" (Quarterly Reporting - YP)

"You do need to try and establish a strong relationship and also with the parents as well, parents and guardians, they need to know what's going on" (S2)

There were also reports of wider impact for families of the young people supported by the interventions. Within the family, there were seen to be better relationships developed. Families were seen to have a *"weight off their shoulders"* following a young person's engagement in the Braver Choices programme. Additionally, young people were seen to become a role model for their sibling(s), which may prevent weapon carrying for these family members.

"We're supporting mum as well. So we don't just work with the patients, we work with their families" (S8)

Stakeholders also reported wider outcomes across communities with the creation of safer spaces and environments, which had led to increased feelings of safety within the community.

"It was really trying to understand and start to speak to some of these young people in the local communities" (S15)

"Getting the message out there in the communities. I think that'll be the benefits for communities" (S16)

System impact

Stakeholders described outcomes across the wider violence prevention system in Cardiff. Investment from the VPU had provided added value to existing organisations to enhance existing, and develop new, interventions and resources. Relationships between the VPU and other partners across South Wales also enabled co-commissioning of services. This meant expanding and upskilling the workforce and providing a further reach across the city to young people and families who may not have otherwise engaged with support. Examples were provided for co-location and development of referral pathways which had promoted joint working, awareness of services, and awareness of barriers faced by young people and individuals with complex needs. The VPU funding had supported the development of formal relationships between statutory services and community organisations including Teachable

Moments (MAC and South Wales Police) and VPT (NHS and Action for Children). It also enabled rest of the funded interventions to come together.

"We adapted and aligned ourselves to the public health approach, and it's integral to what we deliver" (S16)

"I think it's a very good partnership working in the VPU. They all reach out to one another" (S16)

Partnership working across violence prevention activities within Cardiff was described as good. Stakeholders also noted that within the VPU partnership, everyone was 'good at working together', which was seen as a key strength of the partnership. Generally, partners reported having good awareness of different organisations across Cardiff, and specifically, the VPU-funded activities. As highlighted, the VPU was seen to bring partners together, and stakeholders believed that relationships would be sustained.

"XX is our main contact in the VPU. They sit (on SAFE) and gives advice, guidance and talks about best practise elsewhere. So they're a link in that respect" (S15)

"It raises the awareness that, it's not just a children's services issue. It's not even just a community safety issue, we've got people in there from licencing, from British Transport, Police, from Cardiff City Football Club. You know, it's saying that actually this is your job as well to work together to tackle it" (S10)

Safeguarding Adolescents from Exploitation (SAFE) Partnership multiagency contextual safeguarding meeting was highlighted as invaluable in promoting a multiagency partnership. Stakeholders reported that SAFE had expanded from an initial six partners to 40 key partners from across Cardiff. This included schools, health, local authority, Community Safety Partnership (CSP), Voluntary Community and Social Enterprise (VCSE) sector partners, police, and probation. The VPU is also represented at SAFE, providing a platform to feedback to and from the VPU. Stakeholders agreed that SAFE allowed for partners to identify need, share information and intelligence, and the opportunity to develop a multiagency response and address local need. The meetings serve as a proactive way to engage with other professionals, who can share advice and guidance on how best to move forward with the young person. This meant that the response was coordinated with shared responsibility, but also tailored for need, which was ultimately considered as key for contextual safeguarding.

"It's a really good for social cohesion and then what are they going to do about it? That's the really important bit. Because often [individually] our response is very limited, it just ties it in together" (S17)

"Understanding and identification of need across Cardiff and working with young people, communities, local schools, professionals to identify really what are the contextual safeguarding concerns in relation to our young people, what's going on, but then also what's working really well in areas? What needs to happen to improve the outcomes" (S15)

Case workers from the intervention providers reported that attending multiagency meetings was beneficial to discover what other organisations and services are doing and to build connections. For example, Fearless had been finding it difficult to engage a particular school but following one of the meetings, they were able to connect with a partner who supported them to link in with the school and deliver their sessions. External feedback from wider providers also reported that SAFE allowed them to share information to better support the young people they were working with.

"We learn about different services, we learn where we can have an input. If we're seeing a spike in something. If there's training coming up. It's like a vast network of information and we can reach out to them as well if we need anything" (S8)

Bringing partners together increased data sharing and intelligence which also informed operation activity including increased police activity, patrolling and disruption activities in hotspot areas, and tailored multiagency responses following incidents related to violence. The longer-term goals of the VPU and the public health approach to reducing violence across the life course was beneficial for other organisations who focus operationally on an emergency response and who may not see the bigger picture.

"It's about the improved data capture that we've been able to put into place, because it's factual data actually working on the ground" (S16)

Examples of best practice were provided for shared learning across organisations, sectors, local authorities, and geographical areas. Stakeholders agreed that the co-location of partners with the Safeguarding Hub and MASH provided opportunities for shared working and joint decision making, which led to a more consistent approach. Another example was provided for using learning in Cardiff as leverage to build relationships with other areas across Wales, being able to build such relationships and doing it under the umbrella on the VPU was seen as a quality stamp in getting that buy-in from others.

"A useful vehicle for trying to bring those things together. You know we can in Cardiff go well we've done this. Problems that affect Barry probably affect Cardiff and vice versa. There should be benefits. If it crosses boundaries then you know, let's work together constructively rather than competitively" (S11)

The partnership working also strengthened relationships between other partners which was seen to benefit other services too. Braver Choices had built relationships with schools that helped staff to deliver their one-to-one sessions and provide teachers with resources to create and adapt an action plan to keep the young person safe. They also reported having positive relationships with South Wales Police.

In addition to improved knowledge and awareness for young people and families, there were also reports of improved knowledge amongst professionals. A number of the providers also delivered training sessions for staff. Alongside delivering workshops, Fearless felt it to be important to upskill professionals. Caseworkers will work with professionals that work with young people (such as teachers, youth workers, children's services teams, foster parents, and police youth volunteers) to train them on youth crime, the risk factors associated, and the signs to look out for. The VPT increased awareness amongst professionals through training and education so that they can recognise injuries relating to any type of violence, understand their professional responsibility to share information with appropriate agencies, and ensure that appropriate safeguarding procedures are followed.

"Better social awareness, much better connections between police, local authorities, diversionary services, third sector like Safer Wales, Action for Children… all these relationships we didn't have before" (S17)

"They come and talk to our staff as well, teaching sessions, they spread the word about their work and how it links to other stuff as well as violence, there's a domestic violence or the sexual assault, some of the self-harm things where there's a bit of an overlap and they can just have that bit more headspace and time to offer that human interaction that sometimes we are too busy and haven't got time to do" (S11)

3.5 Evidencing impact

Intelligence

Working with the VPU provided an opportunity to share intelligence. A number of stakeholders discussed the benefit of sharing and receiving data with the VPU and how it was used to inform decision making. They referenced the Wales Violence Prevention Portal[6], a digital platform that holds anonymised data on violence in Wales, including hospital admissions, ambulance call-out, A&E assault attendances, and police-recorded crime. Stakeholders believed that data intelligence around violence was well established in Cardiff thanks to the Cardiff Model for Violence Prevention[7] which explores violence-related hospital attendances and provides a framework for data collection and sharing, and that fed back to the Trauma and Injury Intelligence Group[8] (TIIG), an injury monitoring system. Stakeholders reported that the Wales Violence Prevention Portal was useful for project managers to inform strategy and intervention design. One stakeholder reported that it would be useful if the portal allowed for 'zoning in' on specific areas of Cardiff, while another thought it would be useful to access raw data sets. Similarly, a third stakeholder thought it would be useful to include education data.

"The VPU Portal is a great data source for a good number of things. For viewing Cardiff, it's a good place to start" (S14)

This has enabled partners across Cardiff to have a better understanding of assaults and where there are gaps in reporting, for example individuals coming through the hospital major trauma unit who are categorised under 'trauma' rather than 'assault'. The VPU, Public Health Wales, South Wales Police and other colleagues across South Wales are able to use this intelligence to inform decision making. Stakeholders reported that data sharing with the VPU helps provide a realistic understanding of the situation and provides a two-way flow of communication with multiple agencies. This was seen as especially important for the Serious Violence Duty. Data from the interventions, specifically the VPT intervention was seen as key in ensuring there were no gaps in this intelligence. The VPT were able to provide information to the VPU around increases in the number of cases of Child and Adolescent to Parent Violence and Abuse (CAPVA), which fed into the Parallel Lives programme.

"The data that the VPT team really enhances that information because there could be around 50, 60% of patients that they see and not on that Health Board assault data set" (S18)

"It's been really useful because it's given us an understanding actually certainly some of the more serious assaults were being missed off that set. I think we've kind of got to the bottom of it. We think it's because when they come in, they're coming into the major trauma unit, they get categorised as trauma rather than an assault" (S18)

"Trying to take a lot of data provided, education and health information, to introduce measures that will prevent, minimise and then reduce the impact of violence, usually for specific age groups and geographical [areas]" (S14)

In Cardiff, data is collated within the local authority from across the wider partnership, including local government bodies and third sector organisations, to create a picture that informs interventions and strategies going forward. Reports are derived from this which are shared with organisations working directly within the community, rather than the VPU. This role is unique to Cardiff City Council and explores a range of data from partners and data collected within the local authority, including harm

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[6] https://safercommunities.wales/wales-violence-prevention-portal/
[7] https://www.cardiff.ac.uk/documents/2665796-the-cardiff-model-for-violence-prevention
[8] https://tiig.ljmu.ac.uk/

reduction, homelessness, substance use including needle exchange, and intelligence from parks and public spaces including drug litter, drug activity, public sexual activity, and storing of weapons in public places. This involves extensive work to develop connections with partners, develop data sharing agreements, and quality assuring the data.

"Can try and tie it in with a number of different data sets, but it just depends on a case-by-case basis what whatever seems to be highlighted or whatever seems relevant" (S14)

The data collected as part of the SAFE Partnership was considered really important, in terms of individual reporting for number of referrals or safety concerns from a certain school housing project, or local authority establishment. This was seen as key to informing action from other partners, for example hotspot data intelligence for police. Data relating to offences committed, reoffending, custody data, and county lines and exploitation analysed by South Wales Police and the Youth Justice Services, was fed into the serious organised crime board, violence prevention board, knife crime board, and SAFE. The VPU was seen to be "woven through" this work, with the ability to explore gaps in intelligence. Data sets provided by the VPU were used to develop response briefings which informed operational response. The VPU also used data collected by the police to develop business intelligence data tools that link knife crime and other types of violence. It was felt that this data could be furthered harnessed.

"It's that sense check, all this intelligence, they'll (VPU) then say, we've got this increase in anti-social behaviour or certain issues … and often they correlate, and it just acts as a two-way balance of data really" (S17)

"Cardiff particularly has always had a very good information governance arrangement with the police and health in terms of sharing, you know sharing anonymised data so you could properly track the presentations and the interactions.
That was the crux of the Cardiff Model for 25 years" (S11)

"If they have a criminal footprint, we can proactively look to build up intelligence picture around those individuals, and then where it hasn't worked" (S17)

Other data sources noted by stakeholders participating in the evaluation included a population survey that asked residents how safe they feel in the city and a South Wales Police proactive listening survey, which asked people how they feel about policing in the area and general safety (linked to the South Wales Police Street Safety app that collects public opinions).

Measuring outcomes

The VPU-funded intervention providers complete quarterly reports for the VPU and Home Office. These forms provide progress updates and detail on engagement with young people, risk mitigation, outcomes, and case studies. The quarterly reports are available to the VPU who share this information with the Home Office as part of the national VRU reporting. They were also made available to the research team for this evaluation. Although they are not available to others, it was recommended that this information may be useful to the Public Health Wales team. Additional reporting is completed within organisations including routine monitoring and production of reports.

Stakeholders acknowledged the challenges with evidencing impact. This included difficulties in measuring prevention. They also discussed the challenges of a whole system approach across the life course, which meant that many would not see the impact (including intergenerational changes) within their projects timescales, or within their lifetime. One stakeholder noted that this can be a barrier for those who want to see immediate change and 'hard' measurable outcomes. An intervention provider also described the challenges of needing to collect data to support the sustainability of their service.

The provider noted that it can be difficult to 'prove' outcomes and that longer-term outcomes are not captured, since it is often inappropriate to try and contact a young person 'later down the line'.

"Coming up with appropriate KPIs [Key Performance Indicators] or just indicators where of you know where we stand in relation to these levels of offences generally speaking is pretty difficult" (S14)

"You're talking about doing something for a child that you won't see benefit for. Think there's the political imperative sometimes to bring in programmes and policy changes, isn't there? Because it might just look like you're spending money and getting nowhere. Sometimes evidence can be quite hard to show, that in 20 years' time this person was in work and didn't commit crime" (S11)

"It's hard to prove that the programme is successful sometimes and we know it's successful, but you can't just say 'oh we know it's successful'. We have to prove it all" (S2)

Partners recognised that there is an under-reporting of crimes. Stakeholders also believed that figures could increase in the short-term and that these should not be considered a negative. For example, if young people had better awareness of how to access support and felt safer and more confident to report a crime or attend A&E, this would be a positive outcome from the violence prevention activities. However, this would cause an increase in reported crimes and hospital attendances. There were also difficulties in not being able to compare Cardiff to other areas in Wales due to the differing geographical and demographic profiles.

"I imagine some of the outcomes for the rest of Wales could look slightly different to what they look like in Cardiff. It's a very different landscape in that respect, but I think it is that there's tangible outcomes when you look at reduction of offending, but then those kind of softer outcomes around young people and communities feeling safer" (S15)

One stakeholder felt that there were gaps in learning from work that is being undertaken to enable the VPU to identify gaps in the system. The role of evaluation was highlighted as key in ensuring that an independent and robust evidence base was developed.

"It's essential to be able to evaluate, and analyse all the work that's being done, I draw out good practice best practice learning. You know, I think that's essential, really, and that absolutely needs to continue" (S16)

"In terms of that sort of that whole system is, how everything links together. So you know how do all elements fit together to give us that whole approach and then where are the gaps within that? And so that's sort of cyclical sort of process of how you, how we're learning from that, which I'm not sure we're doing particularly well at the moment. You know that sort of cyclical approach of actually and where's the gap within that circle that's maybe things are falling through" (S18)

Stakeholders believed that outcomes need to be tangible and easy to measure, but also highlighted the importance of collecting softer outcomes and the narrative of journeys. A number of the providers noted that whilst quantitative data collection was important, it is the qualitative data that truly captures the difference that interventions have made to the lives of service users. They agreed that services should be capturing service user voice.

"So I think that's what is the richness, it's not just quantitative, it's the qualitative stuff that makes the difference, really, isn't it? Because it gives all the data meaning because you're able to share the journey that is a true person has gone through" (S16)

"We use a lot of quantitative data, and I think it should be qualitative" (S5)

Fearless reported collecting surveys at the end of each workshop to demonstrate changes in knowledge and understanding. This was seen as an important way to gather direct feedback from young people and what participating in the workshop meant to them. Braver Choices also utilised life mapping and held a session focused on evaluation. Feedback sessions and tools were seen as a good way to understand what issues young people are facing, which enabled the intervention providers with opportunities to adapt and shape their delivery content and resources. Positive Masculinity gave examples of how they also had adapted the programme based on feedback.

"What we feel they [service users] need and what they actually feel they need could be miles apart, you know, the voice of the individual is absolutely essential because we should be providing services to them, and what they need, not what we think they need" (S16)

Parallel Lives work with families to create a Wheel of Life, a self-assessment tool that provides a visual representation of the various aspects of a person's life, such as "self", "family", "health", and other attributes. Completing outcome tools with young people and families was seen to help them reflect and see the distance they have travelled, which was important in helping individuals feel positive about maintaining changes beyond programmes.

"I think that's the main benefit, seeing their progress and seeing how … after a few weeks the young person really does change" (S3)

3.6 Sustainability and next steps

Ongoing funding and additional investment was seen as key in allowing services and interventions to continue and to expand, this included capacity building in terms of recruitment and upskilling teams. Whilst stakeholders did discuss the barriers of short-term funding, they did acknowledge that investment from the VPU had provided stability for services, with stakeholders arguing for longer-term and more stabilised funding streams in the future.

"We need to sort of invest money in is programmes to break that cycle or have incentives to encourage parents to come along to programmes where we teach them the violence isn't the answer" (S13)

"Can I build a partnership for something next year because I have lots of ideas that I want to implement. But when there's like that insecurity, sometimes it can be obviously that bit harder" (S5)

"My main concern is sustainability…if there's no other funding there to sustain it… there is going to be a heck of a lot of work to ensure that all the agencies are able to continue to sustain a service that they've put in place. When you think of all the data, the research that's been done around this area, to think that potentially that could all be lost. That's a travesty… I think will have an impact" (S16)

They saw a three-year funding period as optimum in enabling services to grow, effectively recruit and maintain staff, and to give time to be able to evidence outcomes. Stakeholders also thought this was important for consistency of care, acknowledging the detrimental effects of building trusted relationships to support someone to engage in services, only to have those services withdrawn.

"It just goes down to the frustrations all around the inconsistency of funding and the uncertainty. Reliability so that people feel that they can put something in place that will be there in 12 months' time and buy into it. That's not just the staff, but patients, the victims,

the perpetrators. You're trying to say to somebody who will support you, but next week they're gone. It's hard to have credibility when you do that, isn't it?" (S11)

"Staff consistency with funding is always going to be a massive thing, because people are always looking for because they're potentially on a year's contract, they are looking for another job because they don't know if they're to have funding" (S8)

"Sometimes, people think should I leave so I can get something more secure. But then you've already built such a rapport with the young people that takes it away from them"
(S5)

Whilst partnership working and awareness of violence prevention activities was cited as good, stakeholders did agree that the VPU would benefit from further promotion of the work they do and the interventions they fund. They suggested colleagues from the VPU attended project team meetings. There were also plans to develop further Communities of Practice events via the SAFE Partnership which was identified as an important way of promoting reflective practice.

"I do think they need to be. Yeah. More promotion and more kind of dialogue and conversation around this is what we can [all] offer" (S15)

Education was seen as key for long-term change to reducing knife crime and other types of violence. Stakeholders agreed that more investment was needed for early years and other programmes of work with children and young people. Stakeholders hoped to see better engagement and sharing of information with education. They acknowledged that there needed to be a stronger collaboration between interventions and schools. Parallel Lives highlighted that by fostering a proactive approach to identify and address potential issues in the school setting before they escalate into challenges at home and creating a more supportive network that includes schools, the intervention would be able to assist the families in navigating and resolving issues more effectively.

The intervention providers also made a number of programme specific recommendations, including building capacity with services, targeting Fearless sessions to smaller groups, and SAFE developing partnership working with organisations representing the voice of minority groups. Placing VPT staff in other healthcare and wider settings was also considered, noting that learning could be adopted from Swansea. The VPT flagged the importance of rolling out the intervention across all hospital sites where possible to ensure that there was equitable support between areas and that a proper handover can be carried out when patients are repatriated to their own area from Cardiff's A&E department.

There were also suggestions that young people need more extracurricular opportunities within the community to reduce boredom and therefore reduce violence. They called for more investment in community activities including a venue where children and young people can attend to play games.

"We don't want to criminalise people if we don't have to criminalise them. That's the bottom line. We know that if we start criminalising 13, 14, 15-year-olds, then they're going to be criminals for life. Trying to have that diversionary tactic in place. So if we give everyone the best opportunity not to end up in that repeated lifestyle" (S17)

"I think sometimes in numbers like it, it has to be targeted to those, those kids that are getting involved in it rather than just to the entire year" (S5)

Stakeholders acknowledged the impact of the VPU and the collaborative working across violence prevention activities in Cardiff. They discussed the importance of maintaining momentum moving forward, ensuring that the work is not lost. Stakeholders had concerns about sustainability once the VPU's funding ends and hoped that the Welsh Government would recognise the impact that the VPU has made and potentially offer more funding to services. They acknowledged future ambition

through a local development plan, the 'Wales without Violence Framework', and the introduction of the Serious Violence Duty. Stakeholders recognised that strategy should be realistic and evidence-based and that the work carried out by the VPU and its legacy forms an important part of this.

"There is that reduction in violent offending, you know. And we have had a reduction since last year, which has been amazing to see, but it is about that continued reduction" (S15)

"I want this strategy to be something that is implemented, that works well, that has an impact, that makes a difference, where you can measure the outcome. So in say two years' time we can see that because we've implemented this strategy this has reduced…this is improved…Ultimately people feel safer in Cardiff" (S13)

4. Understanding the outcomes of an effective violence prevention system in Cardiff

To further understand the role of the violence prevention system in Cardiff, the findings from the evaluation have been used to develop a logic model. Developing a programme theory is key to evaluating complex interventions [16] and this logic model provides an understanding about how and why we expect the VPU's Cardiff violence prevention activities to lead to the short, medium and longer-term outcomes. This includes information about the broader context in which the interventions are delivered, the mechanisms of the change, and the enabling of external factors.

4.1 Cardiff Logic Model

Key stakeholders	Key Programmes/ Approaches and Activities	Outputs	Outcomes		
			Short-term	Medium-term	Long-term
Communities (e.g., young people, families, the public, survivors of violence) Police Academic partners Health Boards Youth Justice Services	**SAFE** – The SAFE Partnership supports the development and implementation of a city-wide approach for contextual safeguarding, consisting of safeguarding mechanisms to respond to individual risks and multiagency safeguarding meetings with key partners. It engages with and supports partner organisations and commissioned services to ensure clear processes are in place for young people to access the right support at the right time, and to develop mechanisms to monitor and evaluate the impact of the support delivered	*Case studies/local assessments* of impact - collected by programmes / approaches *Quarterly data returns to VRU (via proforma)* that look at project activity, outcomes, risks, and learning. These include: - No. of referrals (inc. accepted and suitable) - Onward referrals made - The main types of specialist support needs that individuals engaging with the project/service have and how this is measured, including	**INDIVIDUAL/COMMUNITY** Increased feelings of safety Increased awareness and understanding (through education) of the risks of violence perpetration and the consequences Positive changes in the thinking and attitudes of children and young people (through increased knowledge and awareness) Increased feelings of empowerment to prevent violence through community-based programmes	**INDIVIDUAL/COMMUNITY** Increased feelings of safety for communities Increased access to early intervention for those at risk of violence Improved / enhanced family and interpersonal relationships Improved mental health and wellbeing Increased confidence to report violence Reduced drug use/ dependency upon drugs	**INDIVIDUAL/COMMUNITY** Successful rehabilitation Reduction in the generational cycles of violence Reduction in re-offending Reduction in violence related injuries Improved criminal justice outcomes

Crimestoppers Public Service Boards The Media Police and Crime Commissioners Public Health Wales Home Office Prison and Probation Service Welsh Government Voluntary, Community, Faith and Social	**Criminal Justice, Teachable Moments Custody Suite Intervention –** This service takes place within police custody suites where MAC caseworkers conduct Motivational Interviews to assess the needs of young people and to explore any goals and ambitions they might have. Ongoing support offers opportunities, pro-social activities, and guidance on various issues such as careers and housing **Fearless, Crimestoppers –** The primary aim of the programme is to educate young people about crime issues that may affect them and encourage them to report crimes they have witnessed. Fearless case workers deliver group-based workshops to young people in education / community settings, which take an upstream approach to crime, discussing and educating young people on topics such as exploitation, hate crime, knife crime, and county lines	- Service user demographics – age, ethnicities - Cases opened and closed at the end of each quarter - Case studies - Summary of activity undertaken each quarter - Summary of any feedback to the current model for delivery and key changes made to the service model - Outcomes and impacts of the service (service users and other key stakeholders) - Identified risks / issues - No. of individuals supported who are 24 years and under and 25 and over - Summary of key learning during the quarter - Forward planning and sustainability	Increased support for survivors of violence Improved peer relationships Developing confidence in and relationships of trust with professionals Children and young people are empowered to make informed decisions and feel positive about the future Increased awareness of how to identify those who are or may be at risk (e.g., raised awareness around exploitation) Increased awareness of how to support these individuals in a safe way Increased sense of community Improved wellbeing	Reduced presentation at A&E Bystanders are empowered to safely intervene Improved education outcomes (attainment, attendance) Children and young people understand and know where to get help if they are involved in criminal activity and violence Increased awareness within communities about where to access help / support and how to safeguard young people Increased early identification of vulnerable children and young people so they can receive support to prevent involvement in violence or drug-related crime Increased access to education, training, and employment	Improved health outcomes associated with wider determinants Reduced stigma for families affected by someone involved with the criminal justice system Reduction in ACEs experienced by children and young people

Enterprise sector Local Authorities, including CMET, Contextual Safeguarding, Education and Social Care Services	**Braver Choices, MAC** - A 12-week community knife crime programme targeted at any children or young people in Cardiff who are at risk of / engaging with weapons, providing a fast track to bespoke, strengths-based intervention and support. The programme aims to minimise the risk for young people engaging with weapons, establish the root cause of why they are potentially carrying weapons, enable them to make informed decisions, develop coping strategies, and understand the implications of their actions **Parallel Lives, MAC** – Parallel Lives provides immediate support around Adolescence to Parent Violence and Abuse (APVA) while focusing on the long-term behavioural change of young people. The programme aims to addresses various aspects of APVA including physical, verbal, emotional, and financial abuse. The programme's sessions cover techniques of communication, emotional literacy, positive parenting,		Increased reporting of violent crime (e.g., knife crime, domestic violence) Increased visibility of children and young people Increased identification of ACEs in children and young people		
			WIDER/SYSTEM Increased collaborative working across partner organisations Organisations and professionals are better informed locally and have a greater understanding of the needs of their communities Increased understanding of service delivery across organisations Improved alignment and consistency of communication across organisations Improved awareness and understanding of trauma-informed approaches to violence prevention Improved understanding of the data	**WIDER/SYSTEM** Increased ability to effectively identify criminal networks Greater opportunities for partners to work together when responding to violence and supporting those affected Increased ability to respond to the underlying causes of violence rather than the behaviour / crime Improved understanding of the level of all forms of violence including 'hidden harm', leading to their reduction Reduction in the vulnerabilities which increase the risk of involvement with violence	**WIDER/SYSTEM** Reduction in demand on policing due to fewer incidents of violence Reduced financial cost of violence across services Reduction in all forms of violence Reduced health inequalities Increase in economic productivity Service delivery is informed by service user

cognitive functioning, active listening, and creative writing **NHS Violence Prevention Team (VPT) -** The VPT are based in Cardiff's University Hospital of Wales A&E department raising awareness on the prevalence of knife and drug related violence. This is achieved through delivering education and training sessions directly to A&E staff (incl. other members of the University Health Board), creating a referral pathway, and providing a visible presence within the department to assist with any queries **Positive Masculinity, MAC** - The Positive Masculinity Initiative was implemented to broaden and raise awareness on issues of misogyny and the 'manosphere' and is underpinned by contextual safeguarding. The programme gives young men guidance with their identity and allows them to explore how they're feeling in a safe environment, with the		Increased analytical capabilities within organisations Increased ability to provide both early intervention and prevention support as well as reactive responses to situations that are occurring within local communities A reduction in the number of people carrying knives Increase in safeguarding Increased engagement with the most vulnerable people in communities	Increased access to support for vulnerable, at-risk groups Reduction in number of first-time offenders entering the criminal justice system Increased confidence to respond to violence and knife crime in school (schools) Harm reduction	voice (children and young people)

	overall aim being to encourage and support young people to adopt pro-social values and attitudes towards people, irrespective of gender				

4.2 Effectiveness - To what extent does or could the intervention produce the intended outcomes?

The Wales Violence Prevention Unit (VPU) was set up with the ambition to prevent all forms of violence in Wales. The VPU aims to deliver a whole systems approach to violence prevention through a four-pronged approach: Aware, Advocate, Assist and Adopt. The whole systems evaluation allowed for the exploration of the violence prevention activities, how they were implemented and delivered, and the difference the interventions have made for the young people they were designed to support. The interventions all focus on supporting young people through either preventing them from becoming involved in violence, or to reduce the risk for young people who are vulnerable, or those who have already experienced violence and/or violence among children and young people.

Evaluation findings evidence the extent that VRU-funded violence prevention activities lead to the intended outcomes of reducing the risk of involvement in violence and the associated harms of violence among children and young people. The VRU enabled investment to develop interventions and pathways of support to identify at-risk young people and move them into appropriate support across the system.

The evaluation findings demonstrate the outcomes for the young people engaging with the interventions. This included improvements in confidence, self-esteem, resilience, anxiety, and depression. They were supported to develop alternative coping strategies. Young people reported feeling reassured, safe and listened to during engagement with the interventions. Other outcomes were reported for improvements in housing for older individuals with complex needs presenting to the A&E department. Engaging in group activities enabled young people in similar situations to come together for peer support. Supporting young people back into education, training, and employment was a key aim for all the interventions, with stakeholders recognising the protective factors of education. Advocating for young people and adapting programmes to run within/alongside a school setting was seen as critical in preventing school exclusions, and the negative long-term impacts associated with this. There were also reports of improved behaviour in school. Findings highlighted the importance of engaging young people in meaningful activities with opportunities for diversionary activities and positive role models within the community. A strength-based approach was seen as important in enabling young people to develop new skills and recognise and enhance any existing ones, which was seen as important in building their confidence and developing aspirations to move forward with their lives.

Improvements in knowledge was identified as a significant outcome for young people. Feedback and evaluation forms collected within services showed high proportions of improved attitudes and knowledge. Understanding legal consequences of involvement in crime, risks for exploitation, and impacts for themselves and others, enabled young people to make informed choices moving forward. Involving young people in the process was seen as an important way to help them understand their situation. Awareness of how and where to access support was seen as invaluable for young people who had engaged with targeted programmes and may require future support, and for young people engaging in universal workshops who now have the tools to access support should they require it. The activities also gave them awareness on how to report crimes and provided them with the necessary confidence and feelings of safety to either report anonymously or to speak with professionals. This was seen as key in reducing stigma and breaking away from the 'snitch' culture. More importantly, it was noted how young people have not had previous access to this knowledge before these interventions were provided across Cardiff.

Feedback from young people suggests that they are less likely to carry a knife or weapon because they feel safer and more confident. There were also suggestions that there had been an increase in reporting of crimes. A number of partners believed that there has been a reduction in drug use, anti-social behaviour and violence among children and young people involving knife crime. In the longer-term, stakeholders hoped that there would be a reduction in violent crime, including a reduction in hospital admissions related to knife and violence, all leading to better life chances for those involved.

Wider impact was demonstrated in terms of improved relationships for young people with their friends and family. Examples were provided for how interventions extended to support parents, siblings, and wider family members. Engaging with support via services for the children, led to parents having opportunities to seek out additional support for the whole family. Services identified a gap in provisions for parents, especially whilst awaiting the young person's compliance in engaging with support. Examples were provided for parent-focused sessions and resources, courses, and campaigns. Services collected feedback from parents, which demonstrated how parents benefited from an opportunity to come together with other parents to share their experiences and support one another. This helped reduce the stigma and shame that some of the parents, carers, and young people were experiencing. Parents reported having knowledge and understanding of the risks of exploitation, and legal processes to help support their children, which in turn also gave them confidence to better manage their child's behaviour. This led to reduced fear and anxiety, and improved feelings of safety. The creation of safer spaces and environments has also led to increased feelings of safety within the community.

The service providers monitor engagement and outcomes through quarterly reports for the VPU and the Home Office. Additional reporting is completed within organisations including routine monitoring and production of reports. This included post-session and workshop questionnaires, which enabled services to use feedback to improve delivery and outcome tools, which helped families reflect on distance travelled. However, these questionnaires were not always available for evaluation purposes. Stakeholders acknowledged the challenges with evidencing impact. This included difficulties in measuring prevention and evidencing outcomes for the purposes of project sustainability and the measurement of longer-term outcomes. This also included the challenges of a whole-system approach across the life course, which meant that many would not see the outcomes within their project timescales. It was agreed that outcomes needs to be tangible, easy to measure, and that they should focus on collecting softer outcomes and journey narratives, including service user voice.

4.3 Theory - What works in which circumstances?

Identifying and understanding the wider determinants of health and contextual factors that affect young people, families, and communities in Cardiff is essential. Partners highlighted the complex needs across Cardiff and the specific groups that the interventions targeted. They described the risk factors for young people, including Adverse Childhood Experiences (ACEs), neurodiversity, and poor mental health.

High and increasing proportions of young people also had additional needs, including support for neurodiversity. Many young people were disengaged from school, highlighting the critical role of education in building protective factors. There was also a gap in service provision during the critical transition to adulthood for young people who are at risk of falling between gaps. The Covid-19 pandemic had increased the complexity of needs, with services reporting increased challenges for young people, including social isolation, poor mental health and wellbeing, and changes in behaviour. There was also an increase in violence involving social media, girls becoming more involved in violence in schools, and younger age groups requiring support. Barriers for families engaging with services were reported due to mistrust in professionals, previous negative experiences, and feeling overwhelmed

due to being involved with multiple organisations. This highlights the necessity of services working together to provide accessible, wraparound, whole-family support.

Understanding the contextual factors that can influence the adoption, reach and maintenance of the intervention is key to understanding what works in what circumstances. Barriers to delivery for intervention providers included recruitment delays which impacted on the implementation of interventions, the short-term nature of funding which created job insecurity for staff and working with limited resources and capacity. The impact of the pandemic was seen to have additionally increased complexities and service demand. Stakeholders highlighted the importance of understanding the level of work and resource required to effectively support communities. Barriers were highlighted in terms of information sharing, ensuring data is captured effectively, and partners recognising the importance in collecting data, including data quality, to evidence impact and support the sustainability of interventions.

The interventions were designed, developed, and delivered by teams of experienced staff, who were able to utilise a trauma-informed approach to build trusted relationships with young people and their families. Providing a safe and non-judgemental space was key for breaking down barriers and engaging with young people. All the intervention providers gave examples on how communication, sessions, and resources were all adapted to meet the needs of the young people. Intervention flexibility and strong relationships were both seen as key for successful engagement, with providers reporting good uptake of the violence prevention activities. Evaluation findings acknowledge the additional work that goes into building relationships and consistency of care to support young people to initially engage, and the additional work involved in to then maintaining engagement, which can often be difficult to document. Having experienced and skilled staff was seen as key to upholding engagement, as they are equipped with the skills needed to look beyond the presenting behaviour/incident, to build trust, and to advocate for young people.

Interventions provide examples of making every contact count by using opportunities at a point of crisis, for example during an A&E attendance or police arrest, to intervene and to use a trauma-informed approach to look beyond the presenting issue or behaviour to understand any underlying causes. Having these statutory interventions linked to community support provides a pathway whereby the needs of a young person are quickly identified, and that the young person is then moved into a suitable pathway of longer-term care. This ongoing work provides a consistency for young people to maintain relationships, engagement, and to sustain outcomes in the longer term.

4.4 System - How does the system and intervention adapt to one another?

The VPU utilises a systems approach to tackle public health problems. A whole systems approach is required to tackle complex public health issues, to support a coordinated and collaborative approach to bring about long-term change. A whole systems evaluation focuses on how the VPU- funded interventions interact together to contribute to systems change.

Findings from the case study evaluation evidence the wider system impact of the violence prevention activities. The model of commissioning and delivery contributes to the wider overarching aims of reducing violence among children and young people as well as any associated harms to create safer communities across Cardiff. Investment from the VPU had provided added value to existing organisations to enhance existing and develop new interventions and resources. The investment allowed them to build on capacity and upskill the workforce to further reach young people and families across Cardiff who may not have otherwise engaged with support.

The VPU has established a large stakeholder network to aid the VPU in establishing and coordinating violence prevention activity nationally. The VPU was described as bringing services together to develop networks and build relationships to work in partnership. There was a clear, shared vision amongst partners for using a coordinated public health approach to violence prevention. The development of referral pathways and formal relationships between services, including statutory services and community organisations, promoted joint working, and an awareness of services. Partnership working across VPU members was seen as a key strength in Cardiff, as there was good awareness of different organisations and partners, which in turn enabled them to work alongside each other more effectively. Examples of best practice were provided for shared learning and joint decision making.

Working with the VPU provided an opportunity to share intelligence. A number of stakeholders discussed the benefit of sharing and receiving data with the VPU and how it was used to inform decision making. This included the Wales Violence Prevention Portal for anonymised data on violence in Wales, including hospital admissions, ambulance callouts, emergency department assault attendances, and police-recorded crime. Data sharing with the VPU helps to provide a realistic understanding of the situation and provides a two-way flow of communication with multiple agencies.

The Safeguarding Adolescents from Exploitation (SAFE) Partnership multiagency contextual safeguarding meeting was identified as key platform for sharing information and intelligence, building a picture of local need to develop a multiagency response. It also allowed partners to share advice and guidance, and to hold a shared responsibility to better support young people. This increased data sharing and intelligence which informed police activity, patrolling and disruption activities in hotspot areas, and tailored multiagency responses following incidents related to violence.

Through recognition of the social determinants of health across the life course, place-based approaches provide a framework which addresses the needs of specific communities through organisations who work in partnership to improve outcomes for the 'whole place', not just individuals. This ensures a public health approach is translated into operational practice and embedded across the wider system. The funding from the VPU increased capacity within services meaning they had a wider reach to engage with more professionals and young people. Wider impact across the system also included the improved knowledge amongst professionals through establishing new relationships, sharing of information, engaging closely with the interventions, and through accessing training and guidance delivered by intervention staff. This has led to improved partnership working, improved information sharing, and increased workforce knowledge and trauma-informed practice across the violence prevention system, all of which were seen as enabling the breaking down of barriers to prevent the criminalisation of young people, to support them to move forward with their lives.

The VPU recognised the need to influence wider, sustainable change by influencing key agencies and stakeholders to incorporate public health approaches into their work, to improve inter-agency responses and to embed system-level change. Evaluation findings demonstrate that without the VPU funding and support to establish and maintain pathways of support, these outcomes across the system would have not been achieved. Ongoing funding and additional investment was seen as key in allowing services and interventions to continue and to expand, this included capacity building in terms of recruitment of future staff and the upskilling of current teams. Partners highlighted that without continued and long-term funding, providers would not have the same stability and reach to support young people and their families. This was flagged as a concern given the rising complexities experienced by communities and the increased demand on the system.

Education was seen as key for long-term change in reducing knife crime and other types of violence. Stakeholders agreed that more investment was needed for early years and other programmes of work

with children and young people. There were also calls for investment in diversionary activities to provide young people with opportunities in the community to develop skills and future aspirations. This was also seen to provide a safe space where they could integrate with their communities. Moving forward, continued partnership working utilising the VPU framework was seen as key in maintaining relationships and maintaining momentum for the public health approach to violence prevention. This was seen as especially important for the introduction of the Serious Violence Duty.

4.5 Refining the intervention - recommendations

- Relationships with schools and engagement from education partners could be strengthened. This would support education to have a key input at partnership meetings and increase intervention uptake within schools. The VPU could support to enhance these relationships, however, this may need government support to mobilise engagement.
- The development of pathways such as the VPT and Teachable Moments provides examples of effectively bringing statutory and voluntary partners together to create wraparound support and break down barriers for engagement. Learning should be taken from this model to develop future pathways and partnerships working across sectors.
- Longer-term investment is needed to create stability in services and consistency of care. Violence prevention services should work alongside the VPU to develop a business case and sustainable model beyond the VPU's funding.
- Investment is needed for diversionary activities and community spaces for young people to engage in activities in a safe place within their community. This is especially important for engaging young people who are NEET.
- Investment from the VPU enabled capacity building to provide further reach within the community. It also enabled the workforce to upskill, both in terms of violence prevention and trauma-informed practice. It is important that any future work rolled out by the VPU and as part of other work including the Serious Violence Duty, includes provision for capacity building and training opportunities for professionals.
- Evidence from the evaluation demonstrates a wealth of intelligence that is gathered through the different violence prevention activities and wider data sets across Cardiff. Further information could be provided on the Violence Prevention Portal to encourage to the use of map trends locally. Recommendations were made for future development of the Portal, including having additional data sources and the ability to map different areas within Cardiff.
- The quarterly monitoring reports provide useful insight into the number of young people engaging with VPU-funded interventions and progress updates in terms of delivery and outcomes achieved. However, the reports are not completed in a consistent way across the different services, making it difficult to derive impact across the system. The forms have recently changed to provide a more standardised format which will hopefully improve data consistency, this includes opportunities for capturing qualitative information.
- Long-term evaluation was seen as key to measuring the longer-term impacts of the VPU. As such, it is important that softer outcomes, including the distance travelled for individuals and across the system are also monitored. Services should continue to collect case studies, whilst also utilising the VPU evaluation toolkit to identify a consistent way of measuring softer outcomes using quantitative data.
- The majority of interventions are subject to local and national evaluation. It would be useful for evaluation partners to come together to form an evaluation advisory group to share findings and align recruitment methods to ensure services and service users are not over researched and that not too much is asked of them.
- Feedback from young people highlights the importance of the inclusion of service user voice within design, implementation, delivery, and evaluation of interventions. Service providers

and evaluators should continue to keep service user voice at the heart of intervention design and delivery, where possible incorporating co-production. This should be a key focus for final year evaluations of VPU-funded activities to better understand the legacy of the VPU and in developing a sustainability plan.

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