

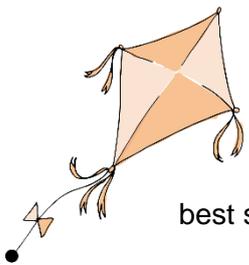


# HeadStart Kent 2019/20 year-end report: Outcomes of young people supported by HSK

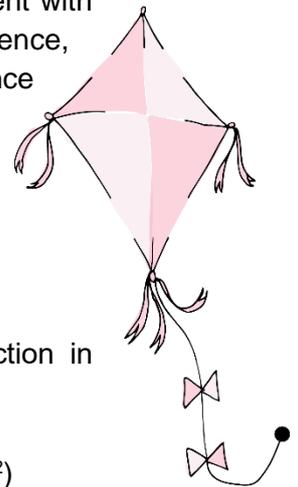
There is evidence that the outcomes of young people accessing support provided by HeadStart Kent (HSK) are improving. In particular, for the young people accessing additional support, where they reported significant improvements in their wellbeing after the interventions.

However, quantitative evidence around changes in wellbeing, difficulties, attendance and exclusions for those accessing support, mostly at the Universal Plus level, mainly showed no significant differences or a decline.

Although due to the relatively small sample sizes available for analysis at this stage, care should be taken not to interpret these findings negatively. Future analysis of the larger cohort of young people who accessed support up to the end of last year should provide more reliable results.



The key outcomes intended for young people, as a result of involvement with HSK, are that they will have improved emotional wellbeing and resilience, reducing the prevalence of mental ill-health, and improved attendance and school academic achievement giving them the opportunity for the best start in life<sup>1</sup>.



The hypothesised outcomes, as detailed in the HSK Theory of Change, are:

- Improved engagement at school (improved attendance)
- Change in school/professional's response to vulnerable young people (reduction in exclusions)
- Improved achievement (attainment progression)
- Socially significant improvement in mental wellbeing (improved WEMWBS score<sup>2</sup>)
- Reduction in the onset of diagnosable mental health disorders (improved SDQ score<sup>3</sup>)
- Decrease in maladaptive or risky behaviours (reduction in offending and A&E admissions)
- Improved employability

To describe and measure the effectiveness of HSK on the outcomes of young people up to March 2020, information has been collated from a range of sources. This includes data from internal reporting systems, monthly HSK delivery partner reports, published Government statistics and the Wellbeing Measurement Framework (WMF) school survey<sup>4</sup>. The characteristics of young people have been modelled using the 2018/19 Strategic Commissioning Analytics Children & Young Person's Integrated Data Model. In addition, evidence has been drawn from the Participation and coproduction internal evaluation which was carried out earlier in the year. Qualitative evidence in the form of case studies and quotes have also been provided.

<sup>1</sup> KCC (2016). *HeadStart Kent Phase 3: Case for Investment p43*

<sup>2</sup> Warwick Medical School (2015). *Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS)* [online] Available at: [www2.warwick.ac.uk/fac/med/research/platform/wemwbs/](http://www2.warwick.ac.uk/fac/med/research/platform/wemwbs/)

<sup>3</sup> SDQ Info (2013). *Strengths and Difficulties Questionnaire (SDQ)* [online] Available at: [www.sdqinfo.org](http://www.sdqinfo.org)

<sup>4</sup> [www.headstartlearning.info](http://www.headstartlearning.info)

## Change in the wellbeing and difficulties of young people accessing HSK support

**2,756 young people either received support or participated in HSK** between the two WMF survey periods in 2017 and 2019<sup>5</sup>.

Of those, **185 young people completed the WMF in both years** as part of the longitudinal cohort who will take part in the survey each year until 2021, when they reach Year 11. They were in Year 7 in 2017 and Year 9 in 2019.

### Young people's characteristics and support level overview



**33%** from Swale

**63%** from mainstream secondary schools (33% grammar / 4% special school)

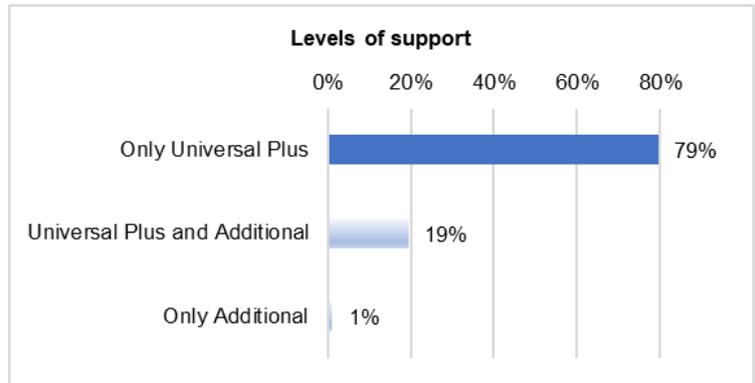
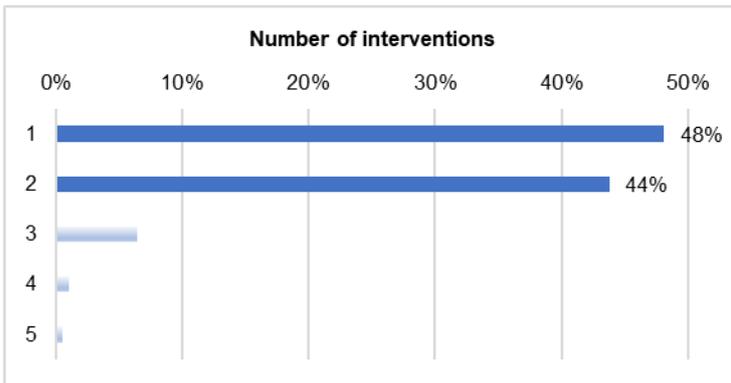
**70%** were female

**14%** were from ethnic minority backgrounds

**12%** had Special Educational Needs and Disabilities

**21%** were eligible for Free School Meals

**A majority of the 185 young people had either 1 or 2 types of support at the Universal Plus level,** such as a resilience conversation, participating in the programme or being peer mentor trained.



<sup>5</sup> Supported started between April 2017 and December 2018

## Change in the self-reported wellbeing or difficulties of young people supported by HSK

Young people who accessed HSK support had a less positive appraisal of their wellbeing in Year 9 (2019). However, this was also the case for the overall cohort of young people who completed the WMF.

Young people who accessed HSK support reported more difficulties in Year 9 (2019). However, this was also the case for the overall cohort of young people who completed the WMF for emotional and attention difficulties.

There were **no significant differences in the positive wellbeing or difficulties** of young people who accessed HSK support in Year 9 (2019) compared to Year 7 (2017).

Change in wellbeing and difficulties of young people accessing HSK support	2017 (Year 7)	2019 (Year 9)	Direction	Significant difference
Positive wellbeing	23.12	21.99	↓	No
Emotional difficulties	4.77	5.13	↑	No
Behavioural difficulties	2.68	2.82	↑	No
Difficulties with peers	2.70	2.91	↑	No
Attention difficulties	5.21	5.52	↑	No

## HSK support vs no HSK support

The 185 young people who accessed HSK support have been matched to 185 similar young people who have not received HSK support. They were matched based on their gender and wellbeing or difficulties score in 2017. The table below shows a comparison of the change between Year 7 (2017) and Year 9 (2019) for both cohorts.

There were **no significant differences in the change in wellbeing or difficulties** when comparing those accessing HSK support with those who did not.

HSK support vs no HSK support	HSK support change	Direction	No HSK support change	Direction	Significant difference
Positive wellbeing	-1.13	↓	-1.01	↓	No
Emotional difficulties	0.36	↑	0.40	↑	No
Behavioural difficulties	0.14	↑	-0.52	↓	No
Difficulties with peers	0.21	↑	-0.35	↓	No
Attention difficulties	0.31	↑	0.14	↑	No

## Comparison of characteristics of young people accessing HSK support - Gender

Females who accessed HSK support had a significantly less positive appraisal of their wellbeing in Year 9 (2019) compared to Year 7 (2017). They also reported more difficulties.

Males who accessed HSK support had a more positive appraisal of their wellbeing and reported less emotional and attention difficulties in Year 9 (2019) compared to Year 7 (2017), however the differences were not significant.

There was a significant difference in the positive wellbeing change between males and females.

Gender <sup>6</sup>	Female change	Direction	Male change	Direction	Significant difference
Positive wellbeing	-2.38	↓	1.75	↑	Yes
Emotional difficulties	0.73	↑	-0.48	↓	No
Behavioural difficulties	0.15	↑	0.10	↑	No
Difficulties with peers	0.27	↑	0.11	↑	No
Attention difficulties	0.46	↑	-0.02	↓	No

## Comparison of characteristics of young people accessing HSK support – Ethnicity

Both ethnic minority and white young people who accessed HSK support had a less positive appraisal of their wellbeing and reported more difficulties in Year 9 (2019) compared to Year 7 (2017), however the differences were not significant.

There were no significant differences in the change between ethnic minority and white young people.

Ethnicity <sup>7</sup>	Ethnic minority change	Direction	White change	Direction	Significant difference
Positive wellbeing	-1.16	↓	-1.12	↓	No
Emotional difficulties	0.92	↑	0.27	↑	No
Behavioural difficulties	0.32	↑	0.12	↑	No
Difficulties with peers	0.56	↑	0.16	↑	No
Attention difficulties	0.23	↑	0.23	↑	No

<sup>6</sup> 129 females vs 56 males

<sup>7</sup> 25 ethnic minority young people vs 160 white young people

## Comparison of characteristics of young people accessing HSK support – SEND

Young people with Special Education Needs and Disabilities (SEND) who accessed HSK support had a more positive appraisal of their wellbeing and reported fewer difficulties, except for attention which remained the same, in Year 9 (2019) compared to Year 7 (2017), however the differences were not significant.

Non-SEND young people who accessed HSK support had a significantly less positive appraisal of their wellbeing in Year 9 (2019) compared to Year 7 (2017). They also reported more difficulties.

There was a **significant difference in the positive wellbeing change between SEND and non-SEND young people.**

Special educational needs and disabilities <sup>8</sup>	SEND change	Direction	Non-SEND change	Direction	Significant difference
Positive wellbeing	2.95		-1.71		Yes
Emotional difficulties	-0.31		0.46		No
Behavioural difficulties	-0.21		0.20		No
Difficulties with peers	-0.04		0.25		No
Attention difficulties	0.00		0.36		No

## Comparison of characteristics of young people accessing HSK support – FSM

Young people eligible for Free School Meals (FSM) who accessed HSK support had a more positive appraisal of their wellbeing and reported fewer difficulties, except for with their peers, in Year 9 (2019) compared to Year 7 (2017), however the differences were not significant.

Young people not eligible for FSM who accessed HSK support had a less positive appraisal of their wellbeing and reported more difficulties in Year 9 (2019) compared to Year 7 (2017), however the differences were not significant.

There were **no significant differences in the change between FSM and non-FSM young people.**

Free school meals <sup>9</sup>	FSM change	Direction	Non-FSM change	Direction	Significant difference
Positive wellbeing	0.28		-1.40		No
Emotional difficulties	-0.57		0.61		No
Behavioural difficulties	-0.10		0.20		No
Difficulties with peers	0.03		0.27		No
Attention difficulties	-0.18		0.44		No

<sup>8</sup> 23 SEND young people vs 162 non-SEND young people

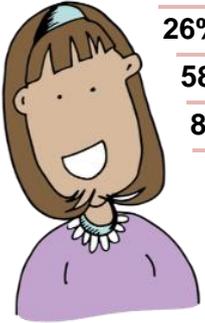
<sup>9</sup> 39 FSM young people vs 146 non-FSM young people

## Change in the attendance and exclusions of young people accessing HSK support

**1,724 young people either received support or participated in HSK** between the two academic years 2016/17 and 2018/19<sup>10</sup>.

Of those, **1,322 young people had complete attendance data for both academic years**<sup>11</sup>.

### Young people's characteristics and support level overview



**26%** from Ashford

**58%** from mainstream secondary schools (24% primary / 13% grammar / 4% special school / 1% PRU)

**85%** from HSK schools

**56%** were female

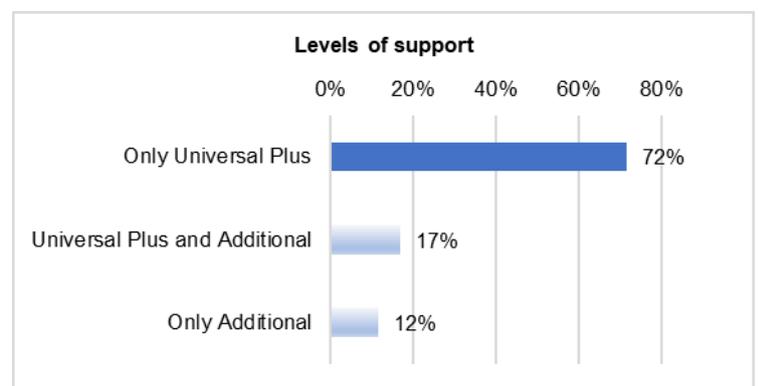
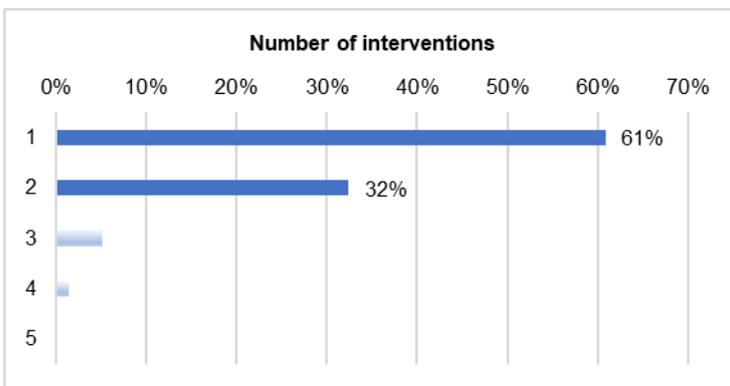
Average age **12 years old** (at 01/09/17)<sup>12</sup>

**11%** were from ethnic minority backgrounds (88% white / 1% unknown)

**26%** had Special Educational Needs and Disabilities (73% non-SEND / 1% unknown)

**28%** were eligible for Free School Meals (71% non-FSM / 1% unknown)

**A majority of the 1,322 young people had either 1 or 2 types of support at the Universal Plus level,** such as a resilience conversation, participating in the programme or being peer mentor trained.



<sup>10</sup> Supported started between September 2017 and August 2018

<sup>11</sup> 66 young people were not in CYPE Integrated Dataset, 47 had missing 2016/17 education data, 277 had missing 2018/19 education data and 12 had both years of education data missing

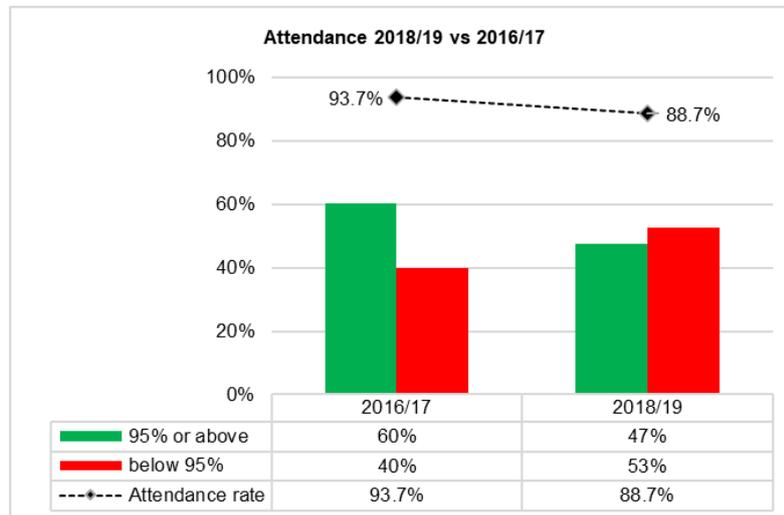
<sup>12</sup> Youngest age 7 and oldest age 15

## Change in the attendance of young people accessing HSK support

In 2016/17, the **attendance rate for young people who went onto access HSK support was 93.7%**, with 60% of young people attending school 95% of the time or more.

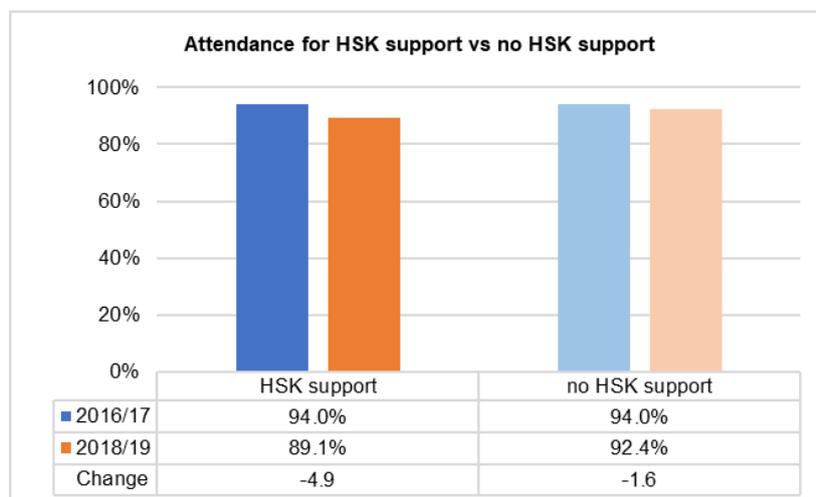
This **reduced to 88.7% in 2018/19**, with 47% of young people attending school 95% of the time or more.

**63% of young people who accessed HSK support had a lower attendance rate in 2018/19. 37% improved or stayed the same.**



The young people who accessed HSK support have been matched to similar young people who have not received HSK support. They were matched using their age and attendance rate in 2016/17<sup>13</sup>.

The **comparison showed a greater reduction in attendance for those that received HSK compared to those that did not**. However, the emotional or educational challenges faced by the cohort who did not access HSK support is not known and may, or may not, be comparable to the cohort who did access HSK support. It is also worth noting that if different young people were selected for the comparator cohort, the findings may have been different.



The attendance rate across secondary schools in England remains steady at 94.5%<sup>14</sup>. However, attendance across Kent secondary schools<sup>15</sup> has declined slightly (from 94.4% in 2016/17 to 94.1% in 2018/19).

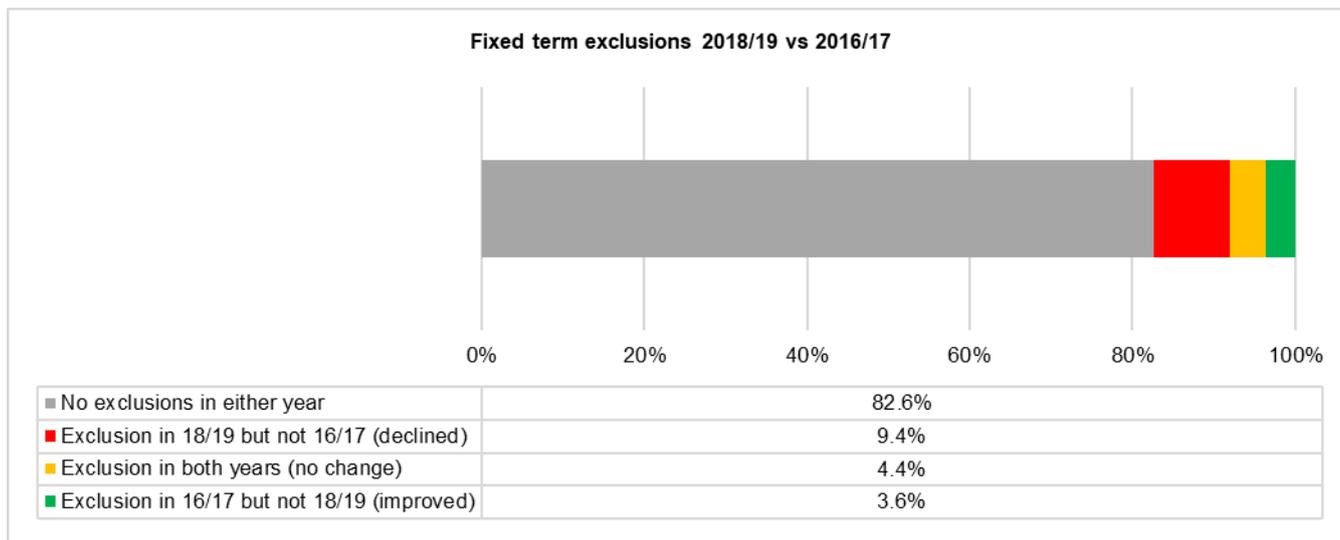
<sup>13</sup> 111 young people aged 14 in 2016/17 have been excluded from the comparison as they were above school age in 2018/19 and did not have attendance data

## Change in fixed-term exclusions of young people supported by HSK

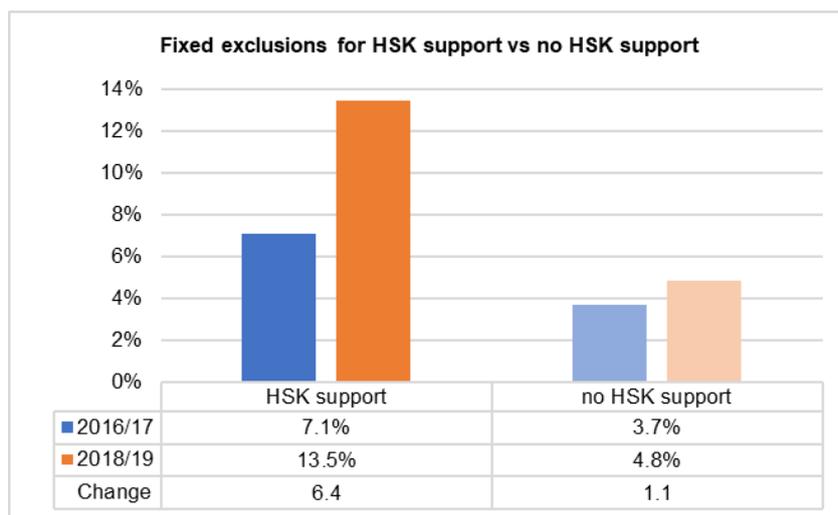
In 2016/17, **8.0%** of young people who went onto access HSK support had one or more fixed-term exclusions. This increased to **13.8%** in 2018/19.

Although a majority of young people (82.6%) did not have fixed-term exclusions in either year, **9.4% were excluded in 2018/19 but did not have an exclusion in 2016/17.**

3.6% improved and did not have an exclusion in 2018/19, which means 45% of those that had an exclusion in 2016/17 did not have one in 2018/19.



When comparing those that received HSK support to those who did not, findings showed that a **higher proportion of young people who accessed HSK had one or more fixed-term exclusions.** Although, as with attendance, the emotional or educational challenges faced by the cohort who did not access HSK support is not known and may, or may not, be comparable to the cohort who did access HSK support. It is also worth noting that if different young people were selected for the comparator cohort, the findings may have been different.



The fixed exclusion rates for England and Kent state-funded secondary schools are increasing, however permanent exclusions remains stable<sup>16</sup>.

<sup>14</sup> DfE (2020). *National Statistics Pupil absence in schools in England: 2018 to 2019* [online] Available at: <https://www.gov.uk/government/statistics/pupil-absence-in-schools-in-england-2018-to-2019>

<sup>15</sup> Excluding PRUs and special schools

<sup>16</sup> DfE (2020). *National Statistics Permanent and fixed-period exclusions in England: 2018 to 2019* [online] Available at: <https://www.gov.uk/government/statistics/permanent-and-fixed-period-exclusions-in-england-2018-to-2019>

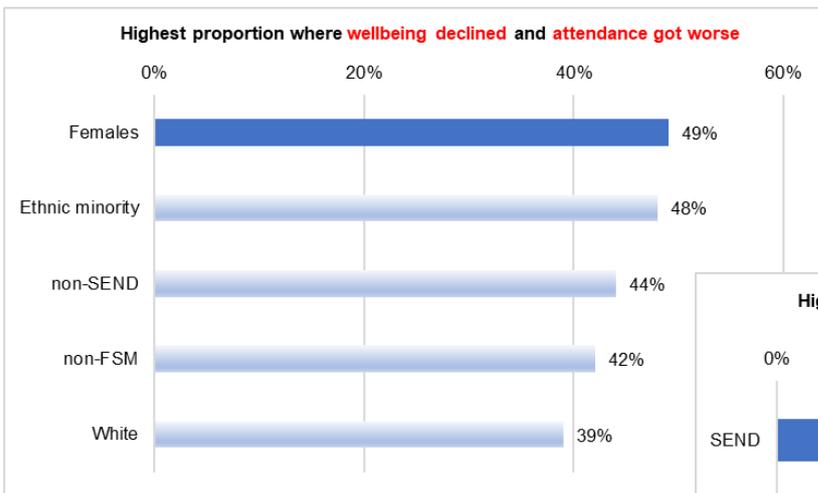
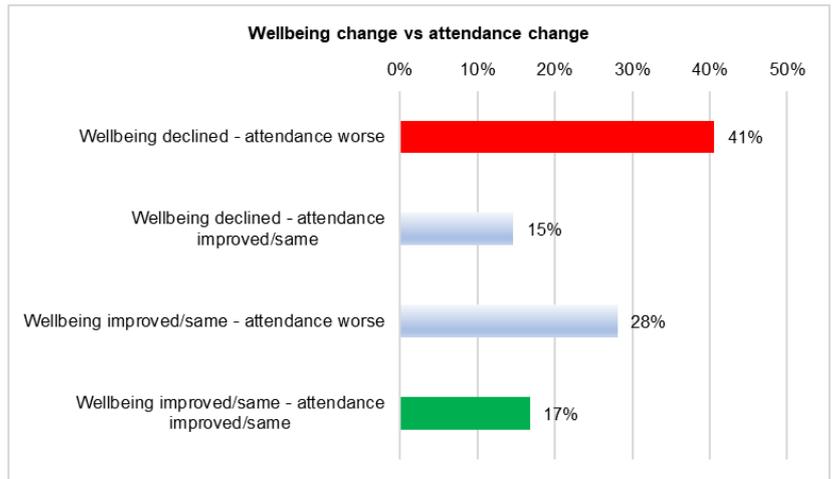
## Wellbeing compared with attendance and support levels

A comparison has been made to the change in wellbeing and attendance of the 185 young people who completed the WMF in 2016/17 and 2018/19 and also had attendance data for both years.

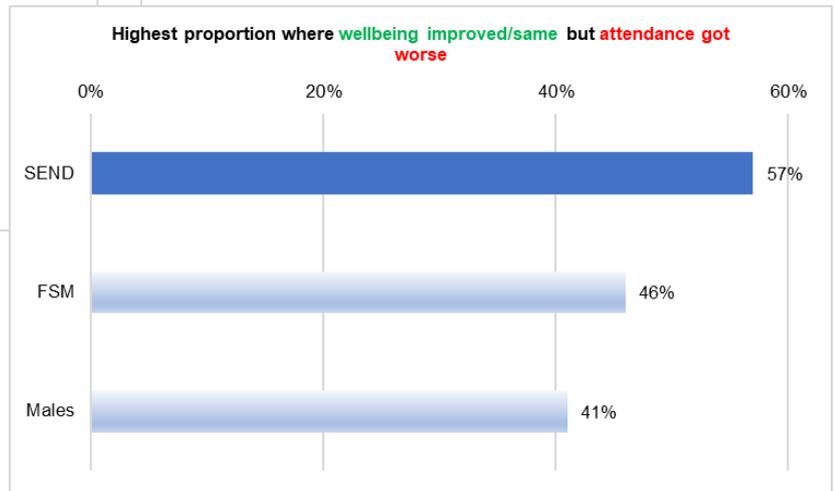
**For a majority of the young people, their self-reported wellbeing declined, and their attendance got worse (41%).**

**However, 17% of young people reported improved wellbeing and attended school more.**

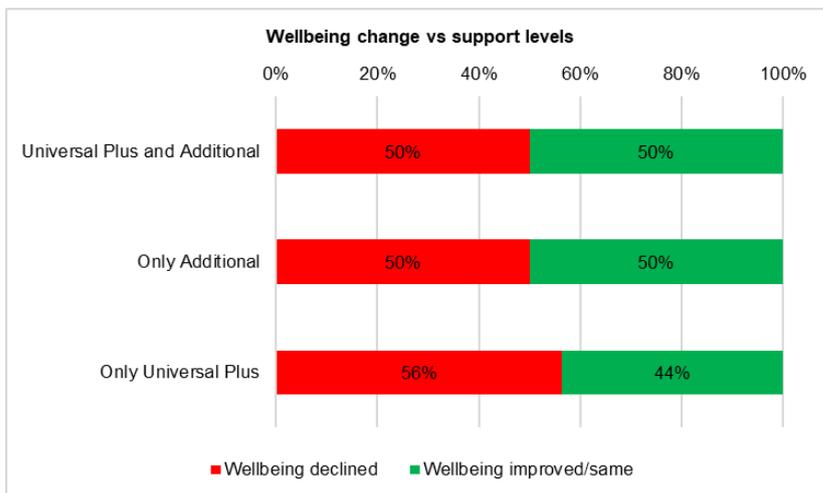
So young people who reported a decline in their wellbeing were more likely to have worse attendance than those whose wellbeing improved or stayed the same.



Comparing the sub-groups, **females had the highest proportion reporting a decline in their wellbeing and whose attendance got worse (49%).**



**SEND young people had the highest proportion where their wellbeing improved or stayed the same, but their attendance got worse (57%).**



A majority of the 185 young people only accessed Universal Plus support (79%).

**Across all levels the proportion whose wellbeing improved or stayed the same or declined was roughly equal. However, there was a slightly higher proportion reporting a decline in wellbeing for those only accessing Universal Plus support.**

## Offending of young people supported by HSK

5,777 young people have either received support or participated in HSK<sup>17</sup>.

Of those, **3.3% (193 young people) had a proven offence and were known to the Youth Offending Team<sup>18</sup>.**

### Young people's characteristics overview

**31%** from Swale or Thanet

**54%** from mainstream secondary schools (19% PRU / 11% special school)

**69%** from HSK schools

**65%** were male (33% female / 2% unknown)

Average age **14 years old** (at first offence)

**8%** were from ethnic minority backgrounds (72% white / 20% unknown)

**37%** had Special Educational Needs and Disabilities (41% non-SEND / 22% unknown)

**34%** were eligible for Free School Meals (43% non-FSM / 23% unknown)



1.8% (102 young people) received a relevant outcome before HSK support.

1.2% (70 young people) committed an offence and received a relevant outcome after HSK support.

**23.5% of the 102 young people that offended before support, also offended after HSK support (24 young people).**



In 2017/18 in England and Wales 38.4% of juvenile offenders re-offended. 34.8% re-offended in Kent<sup>19</sup>.

### A&E attendances

A&E attendances of 10 to 16-year-olds per 1,000 population fluctuate across the years, however they have **decreased in all HSK districts, except for Ashford, in 2019/20 compared to the year before HSK was delivering in those areas<sup>20</sup>.**

	2015/16	2016/17	2017/18	2018/19	2019/20	Change <sup>21</sup>
<b>Gravesham</b>	426.9	435.4	420.8	419.2	392.5	<b>-34.4</b>
<b>Swale</b>	445.5	454.2	418.3	414.5	385.2	<b>-60.4</b>
<b>Ashford</b>	280.9	273.8	254.2	280.3	288.6	<b>14.9</b>
<b>Canterbury</b>	232.7	224.6	221.5	239.1	222.4	<b>-2.2</b>
<b>Folkes &amp; Hythe</b>	465.2	498.8	504.9	502.9	491.1	<b>-7.7</b>
<b>Maidstone</b>	278.6	288.9	288.3	289.5	284.3	<b>-4.0</b>
<b>Thanet</b>	352.3	336.7	295.1	303.5	282.7	<b>-12.4</b>
<b>Kent</b>	<b>348.9</b>	<b>358.1</b>	<b>347.6</b>	<b>351.4</b>	<b>344.8</b>	

<sup>17</sup> Excluding those accessing online support through Kooth who are unidentifiable due to confidentiality

<sup>18</sup> Up to 23<sup>rd</sup> June 2020

<sup>19</sup> MOJ (2020). *Proven re-offending statistics: April 2017 to March 2018* [online] Available at:

<https://www.gov.uk/government/collections/proven-reoffending-statistics>

<sup>20</sup> KCC Public Health Observatory (2020). *Hospital Episode Statistics (HES) accessed through the Data Accessing Environment (DAE).*

<sup>21</sup> 2019/20 vs the year prior to HSK delivery

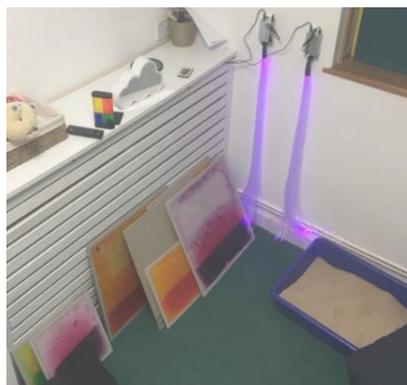
## Outcomes of young people accessing Universal Plus support

### Safe spaces



St Peter's Primary School in Thanet have refreshed an overly bright and cluttered space and have turned it into a **serene, calm and welcoming space**. Students access small group work around their emotional health and wellbeing and different mindfulness quotes are displayed in the room weekly. **The students have been observed reading and enjoying this evolving resource.**

Pastoral staff at Bromstone Primary School in Broadstairs are present in their safe space at break and lunch time. Students know the **space is there for them to access if they need some time to reflect or talk to someone.**



Christ Church Junior School in Ramsgate have been very proactive in making their safe space somewhere that everyone will be able to **relax and unwind**. There is a selection of **sensory equipment and soft furnishings and lighting**, as well as the resilience notice board outside.

Staff at the school say the impact has been notable and **young people feel the benefits of the calming environment it provides.**

### Peer mentoring



At St Laurence Junior Academy in Ramsgate, there are **16 playground mentors**. They support games and help those who don't have anyone to play with. Since being a mentor, the **students have gained confidence and are better at problem solving**. They have also **developed their team building and communication skills**.

As a result, there have **fewer incidents at lunchtime and the students feel happier and more supported by their peers.**

*"I like helping people"*

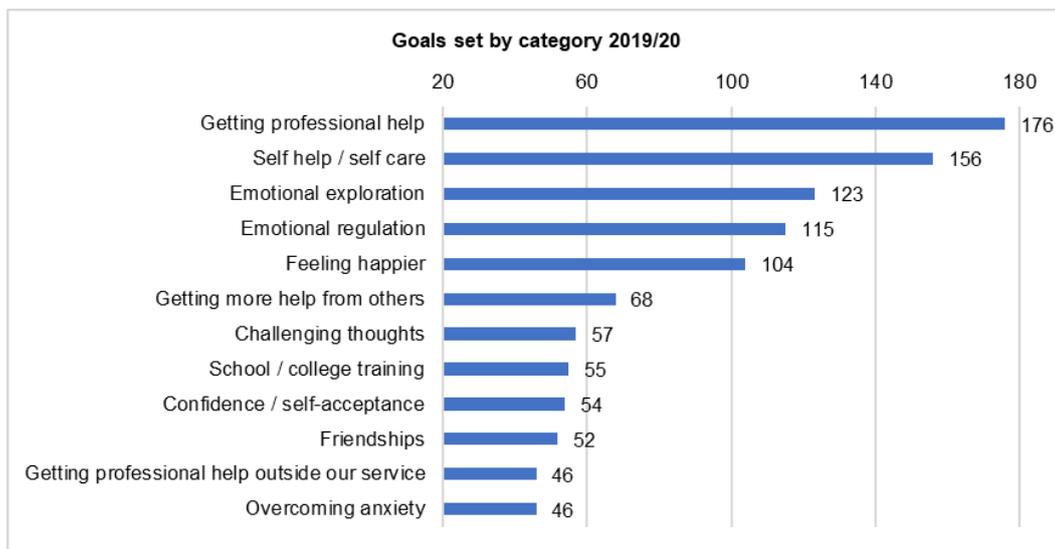
*"I have played with new people"*

## Online support and counselling (Kooth)

During online counselling sessions, young people are encouraged to set goals.

Goals start with a score of 0 and rise to 10 depending on if they feel they are achieving their goal.

**323 young people created or changed the existing score of 748 goals. The average goal movement was 5.6<sup>22</sup>.**



Start (0)

Achieving goal (10)



**Average goal movement 5.6**

## Participation



It is recognised that individual young people have different reasons for participating in HSK and their personal development and outcomes will vary depending on these reasons. However, **both the young people and staff said the main outcomes achieved related to improved confidence, building resilience and dealing with emotions, as well as learning new skills and developing friendships.**

Having the **chance to lead within HSK has built the confidence of some young people.** They have gone onto putting themselves forward for more challenging roles, such as progressing from initially attending the local SpeakOut groups to being elected to vice-chair campaign and project groups within the central Kent Youth Voice.

**Exposure to different situations and a wider range of young people and adults than normal has helped to improve their communication skills and has equipped them to be better able to deal with situations in later life.** Many expressed career aspirations which potentially may not have happened without the support of HSK staff<sup>23</sup>.



*"I think it definitely makes you more open to new people and new experiences."*

*"The HeadStart programme (SpeakOut) has been really important to me. It made me feel part of something [...] I have been able to use my own experiences and struggles with mental health, to help others. I have also learned more about myself and how to manage situations, and I know that I'm in control, developing my own resilience for difficult times."*

<sup>22</sup> Kooth (2020). Kent Kooth Services 2019/20 Aggregate Report

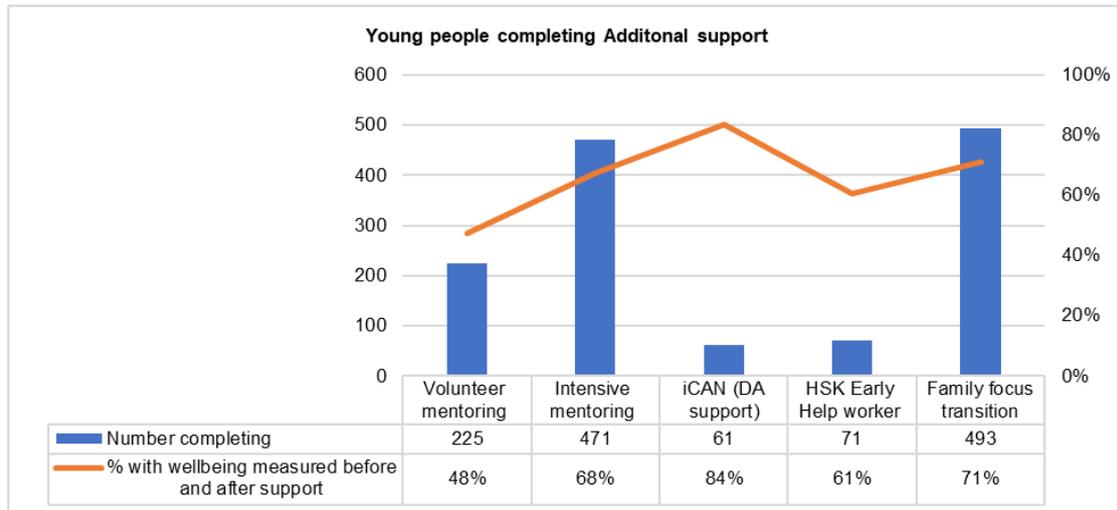
<sup>23</sup> KCC SC Analytics (2020). Participation and coproduction: what effect do they have on the outcomes of young people?

## Outcomes of young people accessing Additional support

### Length of time supported

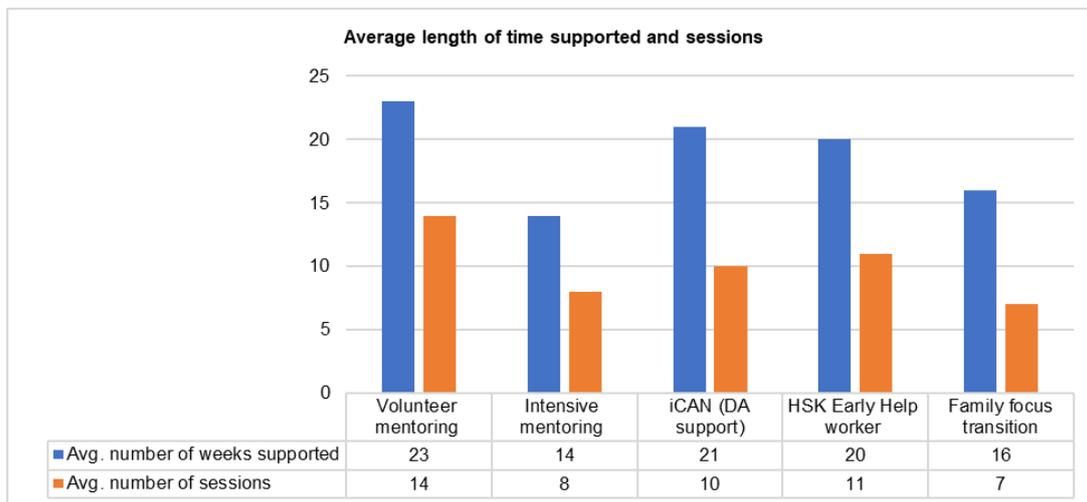
Across the five additional support interventions below, **Family Focus Transition** had the highest volume of young people completing the support<sup>24</sup> (493 young people).

**iCAN**, the support for young males exposed to domestic abuse, had the highest proportion of young people with their wellbeing measured both before and after they received the support (84%).



On average, **volunteer mentors supported young people for the longest period (23 weeks or just under 6 months), with 14 sessions completed.**

**Intensive mentors supported young people for the shortest period (14 weeks or 3½ months), with 8 sessions completed.**



*“My Mentor has helped with my emotions and feelings around friends and family.”*

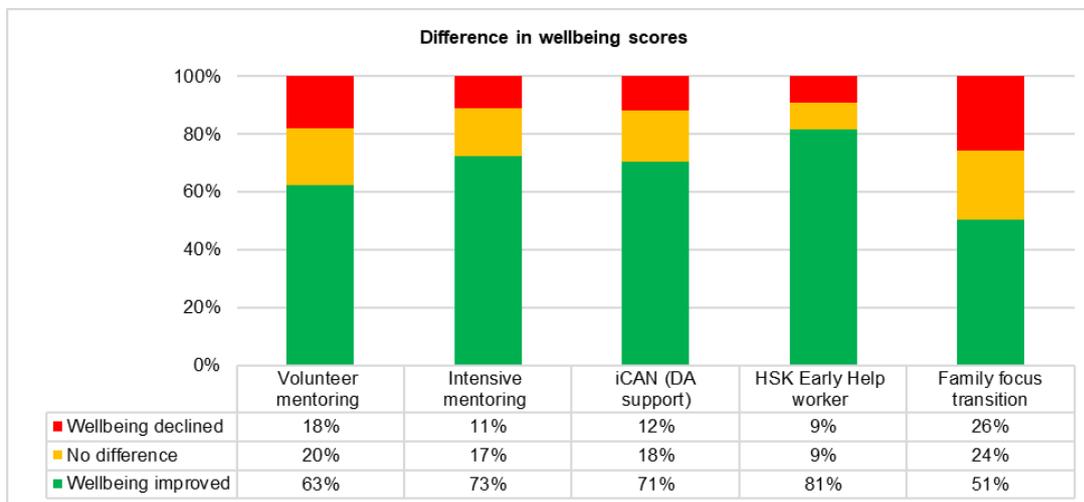
*“Having a mentor has helped a lot with my goals...I can now deal with a lot more situations and not get angry or emotional.”*

<sup>24</sup> Completing in a planned way or supported ended for other/unknown reason

## Outcomes of young people accessing Additional support

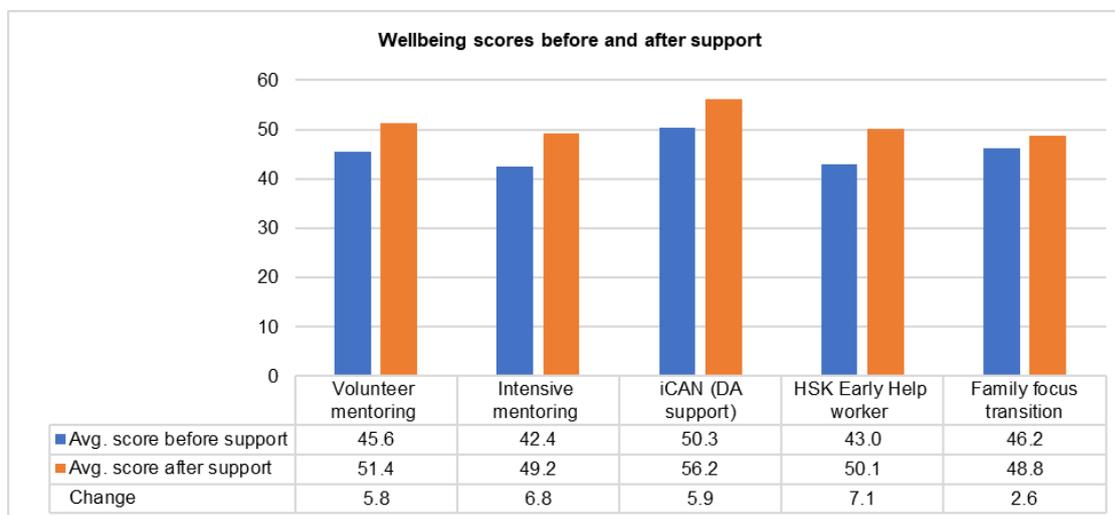
### Change in wellbeing

A high proportion of the young people reported an improvement in their wellbeing across the five interventions (measured through the Warwick-Edinburgh Mental Wellbeing Scale)<sup>25</sup>. The highest proportion were supported by the HSK Early Help workers (81%).



There was a **significant improvement in wellbeing across all interventions**.

The **largest improvement in wellbeing was reported by young people supported by the HSK Early Help workers** (43.0 before support and 50.1 after support)<sup>26</sup>.



*"It has helped to talk about my problems and manage them so I can let it go."*

*"[My mentor] is the best, he helped me with my anger, knowledge of my feeling of anger, and with my relationship with my brother. He is friendly, very funny and is my friend."*

<sup>25</sup> Warwick Medical School (2015). *Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS)* [online] Available at: [www2.warwick.ac.uk/fac/med/research/platform/wemwbs/](http://www2.warwick.ac.uk/fac/med/research/platform/wemwbs/)

<sup>26</sup> Scores range from 14 to 70, with a higher score indicating a more positive appraisal of wellbeing

## Talents & Interests grants



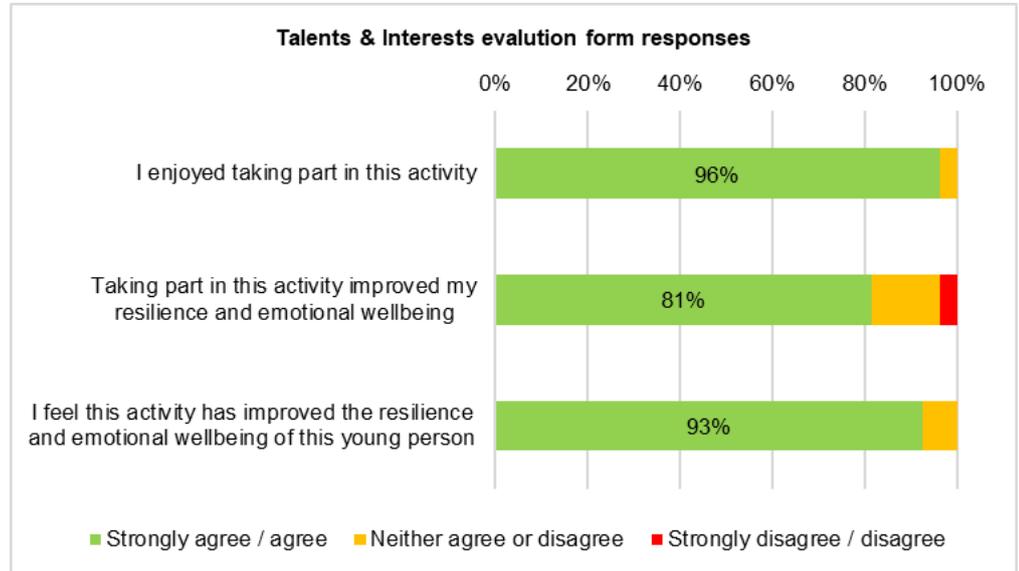
A majority of young people used their grant to access sports or music (81%), such as gym membership, golf lessons, horse riding or singing lessons.

A short evaluation questionnaire was sent to the adults and young people who applied for the grant to find out what they thought of the support they received. **231 questionnaires were sent and 12% were returned (27).**

A majority of young people strongly agreed or agreed that they enjoyed taking part in the activity (96%).

A majority of young people strongly agreed or agreed that taking part improved their resilience and emotional wellbeing (81%).

A majority of the adults strongly agreed or agreed that the activity improved the resilience and emotional wellbeing of the young person (93%).



*"[The activity] has helped me manage my anger and feel better in myself"*

*"I didn't want to go as I thought I would be lonely but I tried the first day and really liked it. I learnt that I can make friends and to try things."*

## Pay It Forward grants

163 applications for Pay It Forward grants were received in 15 rounds. After being reviewed by young people, **114 grants were awarded, totalling £98,314.**



Young people created hampers filled with treats to drop at 11 local elderly people's homes across Folkestone & Hythe and spent time with the residents. The residents and staff enjoyed spending time with the young people. **Taking part boosted the young people's confidence in speaking to older people and made them appreciate their own families.**

*"It's helped me with my own wellbeing, I feel really good. It's been good to hear the resident's stories and to share stories and hear from others."*

A success of the project has been an invitation from the homes visited to continue the link which has been made between Folkestone School for Girls and the local homes. One manager stressed that **projects like this which build links between old and young are so important.**

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