



WomenCentre Limited: National Lottery Project ID: 20122068

Project 1125 Year 3 Report **(1st June 2022 – 31st May 2023)**

In the third year of our 1125 Project we have continued to engage and work with girls and young women who were distressed and struggling to cope, and for whom other services were not meeting their needs. Our workers have continued to listen, learn from and work with girls and young women to develop their specialist engagement and resilience building skills and to develop a range of high quality groupwork offers in the women's centres, in schools and in the community.

WomenCentre's Project 1125 is funded by the National Lottery's Community Fund for 3 years from 1st June 2020 to 31st May 2023 (now extended to 31st August 2023), to provide girls and young women aged 11-25 years living in Calderdale and Kirklees, with a range of early intervention approaches focussing on times of distress and significant transitions in their lives.

Frontline delivery is provided by two full time Project workers.

Project 1125 aims:

- Girls and young women will fulfil their potential and have a better quality of life.
- Girls and young women will build stronger and healthier relationships - at home, in school and in their wider communities.
- Girls and young women's voices will be better heard by communities and the services designed to support them.

Project 1125 continues to build on our learning from Project 1325, which was funded by the National Lottery's Women and Girls Initiative between November 2016 and May 2020.

Project 1125 builds on key elements of our past work shown to support positive change in girls and women's lives including:

- Providing holistic support and guidance at a critical time. We respond to the needs of girls and young women who are responding to the traumas they have faced.
- High quality engagement and support, offered by a skilled, committed key worker, who is in turn properly supported.
- Multi-agency buy-in at operational and strategic levels, allowing for effective referral pathways in and out, and shared learning.
- Co-production of services and delivery with girls and young women themselves.

This report provides an overview of the third year of Project 1125 including:

- A summary of project activities (pages 1-6)
- Co-production (page 6)
- Girls and young women benefitting from the Project (pages 6-9)
- Outcomes and Impact: the difference the Project has made (pages 10-18)
- Final stages and Exit Plan (page 19)
- A Finance Report: a summary of Project budget and expenditure (page 20)

1. Summary of Project Activities

This year we have worked with a total of **135** girls and young women.

1.1 Trauma Informed Casework Support

Project 1125's workers supported **48 girls and young women** through 1:1 trauma informed casework, 26 in Calderdale and 22 in Kirklees. Support ranged from a few weeks, to over one year. Throughout this third year of the Project, we have been able to deliver support in our Centres, schools, colleges, community venues and in girls own homes where appropriate.

Of these, 12 girls successfully completed their work with the Project this year, achieving positive outcomes, developing and regaining independence and increasing their ability to cope in the future (**see Section 4 for more details**).

The main themes of the support provided mirror the needs expressed by girls and young women including emotional support, complex mental health issues, healthy relationships, confidence and self-esteem, managing emotions, coping/life skills, work around gender identity and practical help including housing and supporting them to access school and further education courses.

The workers also spent significant amounts of time liaising with other professionals, e.g. schools and psychologists/CAMHS.

In all aspects of our work, close attention was paid to ensuring that the safeguarding needs of the girls, young women and their children were met. To enable this the workers received regular reflective supervision and support.

The Project has grown in confidence and maturity. We recognise that workers have developed sensitive and tailored interventions and approaches to build trust with young women and girls who have not been heard.

Mistrust, diffidence and hopelessness are key presenting factors that create barriers. Because of this, their needs can often go unrecognised. Engagement skills then open the door for girls and young women to acknowledge their own needs, fears, hopes and strengths. From this point they build their confidence, sense of identity and selfness and gain information tools and strategies to manage often difficult and complex living situations and relationships.

The same resources also enable them to make positive choices in their lives and to take on new challenges - one small step at a time.

As one young woman told us:

" it was the right person, at the right time and she gave me the right support. It turned my life around."

1.2 Schools Programme

We have continued to refine and deliver a programme of group work courses in Schools in Calderdale and Kirklees. These have been very well received by the schools.

During the year 39 girls have participated in our Confidence, Self-esteem and Emotional Health and Wellbeing Courses in schools. We held 3 groups, both in a school in Calderdale and another in Kirklees.

Based on learning from our schools programme delivery, we are keen to strengthen the impact of our schools work going forward as key project legacy.

We have also delivered another 4 week **Healthy Relationship course** which was attended by 4 girls and young women.

1125 Schools Programme:

A six-week interactive programme covering core topics of:

Confidence and Self Esteem

Healthy Relationships

Emotional Health and Well-Being

Including self esteem building, understanding of societal, cultural and peer pressures,

Use of social media in safe and positive ways, healthy relationships and supportive friendship groups, boundaries and consent.

Healthy responses to health and wellbeing including self-reflection, helpful coping strategies and self-development.

1.3 Working with Colleges

This year we were invited by Huddersfield College to hold information and advice drop ins on a weekly basis. This proved helpful in a limited way and was well used by young women as a short term help.

However, this did not engage with the young women with higher levels of need so we ended this after a term's trial. There was a request for sessions at their Dewsbury Springfield site but 1125 could not commit at this late stage in the Project.

Safety and Safeguarding

1125 has enabled girls and young women to remain safe in a range of risky situations including:

- Domestic abuse in the parental home
- Stalking (themselves or close family relatives)
- Online bullying and social media pressure
- Abusive and controlling relationships
- Nighttime safety in public places

To do this:

- 1125 provides clear safety advice which it communicates sensitively and in diverse ways
- Links with local safeguarding teams for advice and referrals
- Provides long term support and a trusted place for concerns to be shared

1.4 Peers

This year we have been supported by 8 Peers as well as 2 Peer Volunteers.

Peers have been core to this year's work as we have had to reflect and think ahead for the future. They have been really clear about what has been working well, such as the one to one support and open group activities but they have made us evaluate our model of move on from individual to groupwork support. They have encouraged other group members to have their say in shaping and feeding back on our Next Stage Proposal which we developed in December 2022 and which formed a vital role in reimagining 1125 going forward to have more impact on more girls and young women.

Peers have brought incredible additional skills sets into the Project with their creativity and ability to connect with other girls and young women both emotionally and through the use of technology and social media.

Learning Points:

Peer Group Learning

1125 has developed a Peer Volunteer Training Package which includes:

- Facilitation skills
- Offering emotional support
- Listening Skills
- Safeguarding
- Working with risks and complexities

2 Peer Volunteers have been trained in the train the trainer version of this course.

Our challenge

We have not been able to role this out further owing to capacity issues for peer facilitator support and supervision.

We will share our resources with other teams as a project legacy.

1.5 Music – Tuning In 1:1 & Group Work

We have continued to work in a therapeutic partnership with the Tuning In Project which has continued to run throughout this year.

Most of this Project's referrals have come from 1125 and creative music groups have run alongside peer support groups on Wednesday evenings in Halifax and Huddersfield.

The groups have written their own songs and learnt new instruments, including the harp, keyboard and drums.

Girls and young women in very complex and difficult situations have found therapeutic relief and creative outlet through individual sessions with a music therapist.

Songs written by girls and young women will be performed at our local theatre in our Sound Women event on 23rd June 2023.

1.6 Learning and Evaluation

We have chosen an independent learning partner to work alongside 1125 Project this year, to help us deepen our reflective practice and identify our offer within a wider context. We have learned that our ambitions for 1125 far outstrip our capacity and that we have needed to think carefully about our unique offer and its value within the wider community.

This learning has been co-produced with girls and women from the project directly, through individual interviews and group sessions.

Our Learning Partner, Fiona Weir, has developed a deep understanding of the 1125 Project through in depth interviews with all team members.

This included interactions in peer group sessions, through interviews with girls and young women who have exited the service and her interviews and co-working with our Peer Volunteers.

This has been supported by desktop research both into WomenCentre data as well as wider local data and information sources.

We specifically selected Fiona as a former health and social care commissioner amongst other credentials as we wanted an external perspective on value within a wider local context.

1.7 Connecting and consulting

Returning to normal working conditions post Covid we found that working practice for ourselves and partners had become more insular. We saw that connectivity with other groups and services was important for the needs of girls and young women, and that good practice developed through 1125 could be shared. We were aware that greater collaboration could have a greater overall impact across our localities.

1.8 Social Media Campaign

As a part of our learning and evaluation process we wanted to hear from girls and young women in our communities who were not engaging with our project.

Peer volunteers and the Peer Groups developed a set of 12 key questions about life experience which were videoed alongside silhouetted vignettes of peer volunteers. These became the content of a two week Tik Tok campaign promoted with partners and through the Project. This has been a new venture for WomenCentre and one that has been spearheaded by girls and young women themselves.

We look forward to responses and to evaluating the success of social media reach.

1.9 Toolkit

We have developed so much learning and expertise through our work with girls and young women with high levels of unmet need through 1125 Project.

We have also become increasingly aware that as our awareness of the prevalence of this cohort grows so also does our awareness of the lack of appropriate support available.

We have developed our 1125 Toolkit to share widely to increase skills, confidence and inspiration for other agencies to develop through their own work. The Toolkit was co-created by Peer Volunteers which brings its own vitality. We are continuing to find ways to disseminate the Toolkit as widely as possible.

1.10 Stakeholder events

Early in June we hosted two Stakeholder Events – one online and one in person. These were developed with Peer Volunteers over weekly sessions through April and May. 61 people attended these events from a wide range of local groups, statutory and voluntary agencies as well as local councillors. The Toolkit was launched and stimulated positive feedback and questions that Peer Volunteers and workers were able to respond to. We were also able to share our Learning So Far slides – an analysis of referrals, need and women's voices. This led on to the launch of the Tik Tok consultation with links and a QR code shared with participants.

The in-person event was held at the Yorkshire Children's Centre and Peers made wellbeing bags for girls and young women.

Participants enjoyed time for networking, speaking with 1125 Peers and workers and sharing ways to collaborate to support girls and young women going forward.

We are encouraged that the Stakeholder events have created a connectivity basis for ongoing collaboration in the future which WomenCentre hopes to nurture and develop.

2. Girls and Young Women Co-producing the Project

Throughout this Project girls and young women have co-designed the content and approach in all areas. It is their experiences that are closely listened to and validated that then draw on worker responses in terms of trauma informed approaches, tools, empowerment and resilience building skills.

The work with each girl and young woman is tailored to engage with her in a positive way and over time forming the trust for working together to take place. The girls and young women see that this is their journey that Project 1125 is supporting them to travel on, facilitating their own developing awareness, self-reflection and aspiration.

The Peer groups have been co-produced by all participants and have been facilitated and guided by workers. Ideas, suggestions and open feedback have been key factors of these groups.

The role of Peer volunteers in co-facilitating groups has enhanced the impact of this approach in which girls and young women are empowered to make choices, to collaborate and to take on responsibilities. Co-production with girls and young women across the Project has been core to the development of our next steps thinking.

Our evaluator interviewed 3 young women who wanted to share their stories to support developments that would benefit other girls and young women. She also held consultation groups to complement the focus groups and feedback sessions in the Peer Groups. Peer groups were involved at every stage as the thinking has progressed and it was clear feedback from all channels that defined the one to one work as the area of greatest impact and unique value.

As mentioned before Peer volunteers have taken a lead in developing the Toolkit and in organising and presenting the Stakeholder Events. They are keen to stay involved with WomenCentre to bring Peer leadership into the next phase of this work.

Girls and young women from Peer Groups have developed questions for the Tik Tok campaign, developing questions relating to 10 aspects of life for girls and young women and advising on best use of social media.

3. Girls and Young Women Benefitting from the Project

3.1 Referrals

Referrals are sent to a Project email address and the Project Manager triages them and manages allocation to ensure this is based on need, skill set, capacity and suitability. The process is currently being reviewed.

Whilst any girl/young woman can refer herself or be referred by any agency, in general we only accept referrals and offer support to girls and young women who are not receiving support from more than one or two other agencies.

Table 1: Project Referrals by Source (June 2022 to May 2023)

Source	Referrals Kirklees	Referrals Calderdale	Total
WomenCentre	2	4	6
Family/Self	2	4	6
School/College	1	2	3
Police/Liaison & Diversion	0	1	1
CAMHS/MH Services	1	6	7
Social Services	1	2	3
Family Support/Intervention	1	1	2
Housing	0	0	0
Health/ Social Prescribing	0	2	2
Other VCS Services	1	0	1
Total	9	22	31

During the third year of Project 1125 **31 referrals** were received in total:

- 9 in Kirklees and
- 22 in Calderdale

Referrals analysis:

Last year we found we had received similar numbers of referrals from Kirklees and Calderdale. This year however we have received more than twice as many referrals from Calderdale than in Kirklees. We have considered whether this results from our better connectivity with other agencies in Calderdale resulting from the other WomenCentre pathways as well as a difference in overall capacity between the areas.

We recognise the need for specific additional development work in Kirklees and have hosted our Stakeholder Event here for this reason. Our self/family and friend's referral numbers are high, indicating a service awareness and trust being shared by word of mouth.

3.2 Engagement & Completions

49 girls and young women were received casework support over the year:

- 26 in Calderdale
- 23 in Kirklees

Of these:

- 12 successfully completed
- 4 disengaged before completion and 2 moved out of area
- 1 did not engage despite repeated attempts
- 1 could not be contacted
- 2 when contacted after waiting for a service, said they no longer needed support
- 29 are still open and are working towards moving on and service exits.

3.3 Key Demographics of GYW Accessing the Project

Table 2: Age of GYW Engaging with the Project

Age	Kirklees	Calderdale	Total
11-12	2	1	3
13-15	4	9	13
16-17	4	8	12
18-21	8	6	14
22-25	5	1	6
Total	23	26	49

Similar to previous years a significantly higher number of girls offered support in Calderdale were aged between 13-17 years, compared to Kirklees and a significantly higher number of young women supported in Kirklees were aged 18-25 years. This is consistent with the age balance we found on Project 1325 and might reflect the different structures and referral sources in both localities highlighted Table 1.

Ethnicity

- 32 GYW were White British
- 3 GYW were Pakistani
- 1 GYW were White & Black Caribbean
- 1 was Asian British
- 1 was White & Black African
- 1 was Indian
- 6 GYW declined to give their Ethnicity

Sexuality

- 20 of GYW identified as heterosexual
- 7 of GYW identified as bisexual
- 2 of GYW identified as lesbian
- 3 identified as pansexual
- 10 did not answer
- 6 did not know

This year we continue to notice an increase in the number of girls and young women who are identifying as bisexual and pansexual and more who are not sure of their sexuality.

Disabilities

- 5 of GYW said they had a mental health disability
- 4 said they had a learning disability
- 1 said they had a physical disability

3.4 Presenting Needs

The table below identifies all issues the girls and young women have presented with in Calderdale and Kirklees. This data indicates both the multiple nature of needs and complexity of situations that girls and young women are living in. It also highlights the high level of past and present abuse and the serious nature of mental/emotional health needs for many.

1125 recognises the trauma related impacts of abuse and workers are trained in trauma responsive approaches to support recovery and moving on.

Table 3 – presenting needs

Issue	Kirklees	Calderdale	Total
Anxiety	21	15	36
Attempted Suicide	6	9	15
Bereavement		8	8
Child Protection Plan - self	2	1	3
Child Protection Plan - child	2	3	5
Current domestic abuse	2	7	9
Past domestic abuse	9	15	24
Eating Distress	7	5	12
Family Issues	16	14	30
Honour based violence/forced marriage	1	2	3
Lone parent	1	2	3
Loneliness/Isolation	1	2	3
Relationship issues	10	11	21
Self Harm	14	8	22
Sexual Abuse - current	1	2	3
Sexual abuse in past	12	9	21
Suicidal Ideation	14	8	22
Trauma/PTSD	7	7	14
Witnessed domestic abuse as child	5	6	11
Childhood trauma	7	11	18
Gender identity/sexuality	3	2	5
Housing/homelessness	2	1	3

3.5 Group Work

During this time 84 girls and young women have attended groups. Of these, 24 are also being supported by the 1125 Project 1:1 caseworker.

Table 4 Groups

Group	Number of attendees
Calderdale Peer Support Group	17
Kirklees Peer Support Group	14
Healthy Relationships Course	4
Kirklees College Drop in	6
Eden Project Activities Days	24
Wellbeing Sessions	22

4. Project Outcomes and Impact

4.1 Project Aims

In line with WomenCentre’s vision and mission, Project 1125’s aims are:

- Girls and young women will fulfil their potential and have a better quality of life.
- Girls and young women will build stronger and healthier relationships - at home, in school and in their wider communities.
- Girls and young women’s voices will be better heard by communities and the services designed to support them.

Key impacts we hope to achieve over the lifetime of the Project are:

- Improved mental health – e.g., reduced anxiety, panic attacks and self-harm
- Increased confidence and self-esteem
- Healthier relationships – with family, friends, intimate partners and in communities
- Decreased isolation and increased social networks
- Improved ability to cope/increased resilience
- Better engagement and re-engagement with education, training, volunteering and employment
- Improved physical health
- Increased understanding of trauma responses leading to increased safety
- Improved voice, presence and contribution in communities
- Increased advocacy and peer support skills

Most of these outcomes have been evidenced through our 1:1 trauma-informed casework.

4.2 Progress Review Tools and Outcomes

We have measured outcomes with 12 girls and young women who have completed two or more progress reviews using a questionnaire with a 10-point scale. It takes a few months for participants to make progress and complete a second review. At the start of Project 1125, we simplified our tools by reducing the number of questions from 10 to 7. The tools are “Starting My Journey” and “Where Am I Now”.

The average scores of the 12 girls and young women who completed at least two review questionnaires with workers are presented in the table below. The scores indicate that significant progress has been made across all areas.

Table 5: Reported Changes in Scores for Indicators

Outcome	Increase	Decrease	No Change
How do you feel about making changes in the future?	4 (40%) 🧑🏫	3 (30%) 🧑🏫	3 (30%) 🧑🏫
How happy do you feel about your situation / life in general?	9 (82%) 🧑🏫	1 (9%) 🧑🏫	1 (9%) 🧑🏫
How is your relationship with your family / children at this time?	6 (55%) 🧑🏫	4 (36%) 🧑🏫	1 (9%) 🧑🏫
How is your self esteem and confidence?	7 (64%) 🧑🏫	1 (9%) 🧑🏫	3 (27%) 🧑🏫










Outcome	Increase	Decrease	No Change
How much do you feel you are being listened to, do you feel your voice is being heard?	8 (73%) 	2 (18%) 	1 (9%) 
How safe are you feeling at the moment?	10 (91%) 	1 (9%) 	0 (0%) 
If you are taking drugs or drinking alcohol, how much would you say it impacted on your life?	1 (25%) 	2 (50%) 	1 (25%) 

Table 5 highlights specific areas of wellbeing improvement experienced and reported by girls and young women as a result of one to one and other support. Many felt they were feeling safer, that they are generally happier in their lives and that they were being listened to. Improved confidence and self-esteem have also been recorded. More ambivalent scores can be seen in the areas of relationships, confidence in resilience and agency skills and the impact of drugs and alcohol. This may indicate the high level of challenge that girls and young women are presented with in their lives and may indicate the need for the longer-term casework frequently provided.

4.3 Case Studies

We have presented two case studies below that provide examples of the issues and presenting needs girls and young women wanted support with the support provided and the outcomes achieved.

Case Study One - Presenting Issues:

- Referral by CAMHS Crisis Team after taking an overdose of tablets, states that “everyone would be better off without me”.
- On-line and face to face bullying by girls known to her cousins.
- Falling behind in her college work – feeling overwhelmed.
- Low self-esteem and poor motivation
- Anxiety and panic attacks at the thought of going outside

Work Undertaken:

- Social exposure: encouraging and supporting N to take breaks in the garden, a steady walk around the area before eventually walking into town for coffee. This was over an 8-9 month period.
- Staying safe on social media
- Understanding the fight or flight response and strategies to manage N’s high alert.
- Liaison with the Youth Offending Team - Victim Restorative Worker and eventually meeting with the N’s offender to restore relationships.
- Liaising with school for a positive completion of Year 11

- Choosing a college and liaising with the pastoral team to provide support in college.
- Support with independent travel and social anxiety to combat low attendance and potential removal from college.
- Support with college preparation and assignment deadlines, preparation for assessment and presentations etc to increase her confidence and low self-esteem.
- Referral to the Eating Disorder Team and support to attend appointments/ hospital for blood tests/ECGs etc.
- Advocating for family with college and health appointments as mum lives with anxiety and doesn't speak English well.
- Strategies to manage stress around family disagreements.
- Meeting with numerous family members to provide a holistic approach to support i.e. eating, stress and emotions.
- Support through a family bereavement – referral for counselling.
- Encouragement to attend 1125 Peer Support Groups.
- Support to apply for university and completing her personal statement.

Outcome:

- N completed Year 11, high school and sat her GCSE exams.
- N now feels able to go out of the house on her own and use public transport.
- Family disagreements have quietened down and N has a greater understanding of how to support others rather than trying to rescue them and how to protect herself from emotional abuse – this being linked to an increase in her self-esteem.
- N has almost completed college and has been accepted at a number of universities to study Mental Health Nursing.
- N's confidence and low self-esteem has grown considerably and she wishes to share her experiences to help others by choosing a health and social care profession.
- N understands her eating habits more now. She has strategies in place to fuel her body and recognises why she uses food to manage her emotions.
- Family members are more aware of how to support N with her eating habits and strategies are working.
- Attendance at Peer Support Groups has enabled N to share her experiences, learn from her peers and to lead practice of the 1125 Project.

Case Study 2 - Presenting Issues:

- Past abusive, controlling behaviours in the family home from mum's past partner.
- Strained relationship with father due to mum's ex-partner who had become threatening to father.
- Step-sister's relationship with dad and A feeling isolated.
- Mum's miscarriage and a lack of processing of this sadness due to A's age and circumstances in the home.
- Disappointment with mum that she hadn't been assertive with partner to protect both herself and A.
- A's relationship with mum was struggling and there would often be conflict. Furthermore, Covid has affected mum and daughter relationship due to A isolating with dad.
- Feelings of helplessness in relation to witnessing mum's stress and unhappiness.
- Partner stalking mum and A bumping into him locally causing high levels of anxiety which can present both physically and emotionally with bouts of anger.
- A tends to push people away where she feels there is potential for them to emotionally hurt her.
- A is dismissive of romantic relationships and is fearful of men in general.
- GCSEs preparation presenting anxiety and stress.

Re-opened case:

- A states she feels drained all of a sudden and feels rubbish. She had decided she 'hates' men in general and is tired of putting in the effort. 'I'm shutting down again, I just feel like crying all the time and I don't know why the littlest things upset me'.

Work Undertaken:

- A was wary of working with me so we agreed boundaries and how I would be respectful that A was in the middle of revising for her GCSE's and didn't want to 'turn over' all her emotions at this time. I let A initiate conversation which came quickly and easily between us once the pressure was removed.
- We produced a revision timetable that incorporated A's social activities, so she knew when her GCSE exams were, what revision needed to take place beforehand and when she had free time to alleviate overwhelm.
- We found ways to manage stress levels and to identify triggers.
- We explored the importance of self-care and how to be kind to ourselves.
- A has a rather complicated family tree and we drew together on a piece of paper 'Who's important to A to help identify the support around her.

- A has had lots of uncertainty and loss in her family/close family friends and she gave me an overview of the family unit and how she found herself needing emotional support to process these family/friend dynamics. We tried to put a name to her feelings and A was able to identify that she was feeling lonely, isolated and out of control.
- We explored her expectation of needing to feel in control.
- We explored the term 'positive regard' and tried to put ourselves in the shoes of others ie. immediate family to try and understand their actions and behaviours to process these easier.
- Investigated how to build on her relationships with mum and dad moving forward.
- Referred A to 'Tuning In' Music Therapy with Emily as A loves music/singing and hopefully this will give her an opportunity to write her thoughts down in the form of lyrics.
- We explored what makes a good relationship and considered what A valued in a person so she was aware what was important to/for her.
- We identified boundaries and putting these in place to protect our values.
- We were able to define a healthy relationship
Acknowledged her own friendships/relationships
What makes a good friendship/relationship and how to make good choices.
What makes a good partner - qualities in others
What are abusive traits in others and ourselves.
What A would like and not like from a relationship
To question what we can often find ourselves accepting in current relationships over time.
Healthy relationships and what to look for in an ideal partner
- We explored her expectation of needing to feel in control and how Aisey doesn't have to 'protect' and 'save' everyone but to concentrate on finding herself and what works for her.
- Generally exploring and challenging her thoughts and feelings and recognising the child in her, soothing that child and learning from past situations to serve her well in the future.

Re-opened Work:

- Considered What was Important To and What was Important For A as sometimes these can be very different and cause conflict in day to day life.
- We also considered what was Working and What Wasn't Working so that we could set some small targets to make changes.

Outcome:

- A feels her anxieties are at the 'tail end' of this difficult time and says she wants to meet this by being strong and pushing herself to be the best she can be.
- A has written a song about her special elderly friend who passed away recently and would like to share this with Emily in the Music Therapy sessions.
- A has now implemented new arrangements for staying with dad one week and mum the following week and she said this seems to be working OK for all parties
- A has prioritised some quality time with both mum and dad so all parties know when they are going to see each other and that time is protected. This has helped with her relationship with her step-sister also.
- She feels she can manage her anxiety and that it is lots better than it was back in January-March.
- A recognises the need to be kind to herself and from this decided to change her choice of college to one where her friends were going as she no longer feels she has to push herself out of her comfort zone as a way of moving forward.
- A agreed she was in a much better place and the partner mum had, she is no longer fearful of bumping into as she feels empowered to stop conversations with him and to walk away.
- A recognised that relationships aren't perfect and that there will be some negative aspects however, she can easily define what is unacceptable abusive behaviour.
- A's relationship with mum is now on track. A gave me permission to speak with mum (the referrer) to ask how she felt her relationship with her daughter was now. Mum was pleased with the work A and I had covered over the past few months and she felt that A was now in a different place and thanked us for the work we had done.
- A is now working as a mentor in school supporting other pupils. She is considering working as part of our Peer Mentor Group for the 1125 Project of which she would be amazing.

Further Outcomes:

- Revisited work around relationships and setting boundaries.
- A decided to leave Sixth Form college and to look for an apprenticeship in Health and Social Care to forward her chosen career as a paramedic.

4.4 Direct Feedback from 1:1 Work

Feedback from Girls & Young Women:

"I was at A and E every weekend coz I was suicidal and hurting myself. my like was in a pit. Adele helped me get back on track. She showed me ways to cope with how I was feeling, and she helped me make my life better."

"I was going missing and doing stuff that was risky. My family weren't there for me they had their own issues. The staff from hospital said I wasn't a good fit for their service. My worker from 1125 was there for me when no one else was. She helped me get my life back on track. I'm doing good now."

" I wasn't ready to talk about the stuff I'd been through. My worker understood that and still helped me. The first time I met her she sat on the floor with me, and we planned what support I could have. I felt she understood me."

"It was the girls only space that made a difference. I felt safe to be me and work on my issues."

GYW age 16 after first session: 'what did you just do? I can't believe I've just spoken to you for over an hour. I was so nervous about seeing you, I felt I had nothing to say and couldn't put it into words. I felt so comfortable then just sharing my life with you. What we gonna do next time?'

GYW age 15: 'You just get me, you understand I can be a bit weird at times. I can talk to you about anything, you just make me feel safe. You are me and I am you! You're always calm, you never put me down, just a great listener'. I've been with lots of different services and I don't even want to share with them now, they can't help me, it's over before its even begun'.

A young girl in school. When I first met her I was advised to keep the office door open so staff could come to my aid if needed. She walked into the room, sat down and tears rolling down her face. She looked tired, drawn and sad and she told me I should get use to her crying when we meet as this was her. I replied 'no this isn't you, trust me we've got this'.....She said "I wrote to my GP when I was 13 years old to say the mental health system had to change and that I wasn't getting the help I needed, I was hurting, I was in so much emotional pain. I never got a reply! I had been referred into many services and their timescales made me feel pressured to 'sort myself out'. The 1125 Project has set me free, you walked along side me and I can't thank you enough. It's taken me years to get this support. The best part is there is no time limit, you're been there for as long as I needed you. You've taught me to move on from my past, learn from it and be the best I can be. I was deemed a 'mis-behaving' child but you listened and I felt understood, there was no rush. I'm now leaving school with my head held high and all my exams finished. I now feel able to give something back to the WomenCentre and I want to help other young girls in my situation'.

"You have helped me so much n this difficult journey. Your advice has been invaluable to me and you have encouraged me to believe in myself ... something I never thought possible."

Feedback: From a Parent

'having the consistency of that one person I can turn to, someone that understands what I'm going through woman to woman and also a mother. You have been a life saver to me like wearing a life jacket, I've got you'. You've listened to me when I've felt no-one else will understand, you've been at the end of the phone so I can air my feelings rather than keeping them locked in my brain'. 'My daughter and our family trust you and the confidence we feel that you have our daughter's best interests and that you care for her is just wonderful'.

4.5 Feedback from School Group Work:

School Feedback

- Yes, very happy, the programme was well organised, engaging and interesting. Student feedback about the project was very positive.
- The programme covered a range topic that affect girls in their daily lives.
- Have you noticed increased confidence and empathy towards others. A sense of belonging and empowerment.
- The support and intervention from Project 1125 benefited our most vulnerable female students it gave them confidence and increased their self-esteem.

Session participant evaluations summary comments

Overall the feedback was very positive from the girls and we got 90% response

1. What have you enjoyed the most?

"Drawing around someone and trying to make them perfect – it doesn't exist"

"Talking about how I feel and seeing what others think"

"Being in a room with people that related to me and was in similar situations to me"

"Talking about all the issues it made me feel better"

2. If you were going to give advice to a friend, from what you have learnt – what would it be?

"To let it out and be confident"

"Don't be tight to others and respect other people and what you have to say"

"Treat others how you want to be treated. Be kind and have respect"

"What to do if your friends are paranoid and what you can do to help. What to do if you're being bullied. Also, around safety"

"To just love yourself and be confident"

“To be confident and even though you might be scared to put your hand up un lesson just do it as it’s not that you are going to die from doing it”

“To always talk about your issues”

3. Did you feel comfortable and included in the sessions?

All responses said they felt comfortable

4. Suggestions for future sessions?

Maybe- more activities , buy paint type of things to learn and maybe different games

No- because they were good and helpful, kind and nice, understanding”

5. Name as many things you are going to take away, that was really helpful/useful/important to you:

“To be confident, to trust people and to be happy”

“Don’t be a bully online and be kind or it could affect someone’s mental health”

“Don’t believe everything online, don’t bully others on social media and think about what others want”

“Don’t be tight and don’t believe everything and think of what other people are going through”

“Not everything you see or read online is true and don’t share everything, be safe”

“Social media isn’t always real, so don’t believe everything you see. Having mental health problems is normal and don’t let other opinions about you bother you that much”

“To open up if you’re not ok and to always be supportive to people who are upset”

“Confidence, happier, helpful, not as bad in school and has helped with me talking back at school.

“To open up to people”

5. Final Stage Delivery and Exit Plan

We have re-focused delivery over Year 3 and will continue to make progress with school group work, peer social activities, peer support volunteers, evaluation and developing the toolkit.

Year 3 (July 2023 – August 2023) – Delivery and Exit Plan		
<p>Direct work with girls and young women Working with brief interventions and planned endings with girls and young women who still remain on caseload after a period a gradual wind down.</p> <p>Signpost and refer any remaining high-risk cases to appropriate services with care to promote successful engagement</p>	<p>10 GYW</p> <p>Max 2 GYW</p>	<p>July- August</p>
<p>Peer Volunteers Peer volunteers linked in to other WomenCentre activities and volunteering team.</p>		<p>July - August</p>
<p>Social media campaign Collation of all feeds to form a consultation report to inform work going forward.</p>		<p>June/July</p>
<p>Toolkit dissemination to local partners</p>		<p>June - August</p>
<p>“Tuning In” Project Girls and young women from Tuning In Project to participate and perform own songs in public Sound Women event.</p>		<p>23rd June</p>
<p>Monitoring and reporting End of year report produced.</p>		<p>By Sept 30th</p>
<p>Evaluation Full Project Learning and Evaluation Report produced</p>		<p>By mid Sept</p>
<p>Sharing Learning: Evaluation report and Toolkit to be posted on WomenCentre. WomenCentre members and partners 1125 event to share learning, outcomes and future aspirations.</p>		<p>July - August</p>
<p>Schools Programme Continue partnership development work with identified school for whole year preventative input for all girls in Year 7 for start in October 2023.</p>		<p>July- August</p>
<p>1125 Celebration Event</p>	<p>1125 Team, peer volunteers and girls and young women</p>	<p>End August</p>

6. Finance Report

Table 6: Project 1125 Year 3 Budget and Expenditure

Expenditure	Budget £	Expenditure £	Difference £
Salaries NI & Pension	99,346.40	98,767.16	579.24
Staff Travel	2,800.00	3,131.27	-331.27
Staff Training	300.00	215.40	84.60
Staff Clinical Supervision	480.00	1,105.00	-625.00
External Evaluation	9,690.00	5,250.00	4,440.00
Resources for Group Work	240.00	448.78	-208.78
Rent for Accommodation Kirklees	3,150.84	3,150.84	
Direct Project costs	1,064.10	878.21	185.89
Mobile Phones	370.00		370.00
Volunteer/ mentor expenses	211.24	50	161.24
Marketing - promotional materials/Publicity	100.00	149.98	-49.98
Consultancy- Development of Toolkit	2,000.00	3,300.00	1,300.00
Subtotal	119,752.58	116,446.64	3,305.94
Overheads			
Staff overhead	12,915.03	11,420.18	1,494.85
Accommodation overhead	11,921.57	11,149.85	771.72
Total Overheads	24,836.60	22,570.03	2,266.57
Capital			
Capital - office equipment	-	-	-
Total Capital Costs	-	-	-
TOTAL COSTS	144,589.18	139,016.67	5,572.51
Income			
National Lottery Grant (Year 2)	134,134.00	139,016.67	-4,882.67
Balance carried forward to Year 3			5,125.42
Balance carried forward to Year 4			242.75

Explanatory Notes

Most costs are in line with the budget.

Clinical Supervision Costs –these are higher as both workers are having monthly clinical supervision.

Evaluation Costs are lower as the evaluation work is going to be completed in the final year of the project

Project 1125 Team

22nd June 2023