



*Violence is preventable, not inevitable.*

# Business Plan Draft 2020 -2021 Version 5

## Covid-19

The recent outbreak of the coronavirus Covid-19 and the subsequent impact that it will have on life and service delivery in Scotland over the next few months is not calculable at this stage. What is clear is that the ability for the VRU to deliver on all of the programmes as outlined in the paper is unclear whilst the contagion and the threat to life still remains high.

The Violence Reduction Unit will continue to operate during this time and continue to develop services and responses to tackle violence and the drivers of violence in Scotland, however, this will have to acknowledge all Scottish Government advice and take appropriate steps to ensure the safety and health of staff during this time.

Over the first quarter of 2020, there will be a number of activities paused/redeveloped to suit the new conditions

This will be activity that is basically conducted face to face such as, Navigators (A&E, Custody, and Community), the closing of the street and arrow café, no unnecessary face to face meetings, no presentations/training/seminars and ceasing the trauma therapy group work.

During this time the VRU will be, reviewing the activity and strategic planning including the development of a new document outlining the future direction which will integrate into existing strategic frameworks/plans. We will also take this time to improve our horizon scanning, research and evaluation work as the development of preventions toolbox of best practice. We will move all face to face meetings to tel/video conferencing and try out trauma support through video conferencing.

In response to Covid-19 the VRU will also undertake a number of new activities which will aid in the support for tackling the virus and the potential social challenges that it may cause. This additional activity will be assessed dynamically and maybe stopped it becomes unadvisable and risky to staff/volunteers. This includes supporting communities such as North West Glasgow in delivery of resources and food by repurposing the Street and Arrow and VRU teams, One Community delivering food parcels to self-isolating families from the BAME communities. We will be reshaping some of our local network partnerships (for example Edinburgh/East) to aid and support vulnerable communities and where appropriate police officers will aid in the front-line delivery of support to ensure contingency policing etc.

## Addressing Violence in Scotland:

Over the last 5/6 years there has been some stabilisation of the levels of serious violence in Scotland at just over 4000 recorded incidents a year from a high of over 6000, this reduction has been replicated in both the victimisation surveys and the number of admissions to hospital for violence. However, not everyone has benefited from this reduction, with it primarily being driven by changes in the behaviour of young males with weapons in the west. As a result of this change we are seeing a new pattern emerge in Scotland that is being hardened by some of the systemic challenges that still exist such as unacceptable levels of deprivation, high levels of alcohol use and addiction.

### Key Findings: Non-sexual violence in Scotland report Sept 2019

- Violent crime is rare but is experienced differently across the Scottish population.
- The likelihood of experiencing violence is higher in deprived communities than it is elsewhere.
- Violence is now patterned less by age and gender than it was a decade ago.
- Violent crime as a whole is not concentrated within a specific age group and in contrast to a decade ago, there is now no difference in the likelihood of being a victim of violent crime between those aged 16 to 24 and those aged 25 to 44 years old. Older age groups, in particular those aged 60 and above, are less likely to experience violence than others.
- As with victims of violent crime, perpetrators are not concentrated within a specific age group and there is evidence to suggest that the average age of perpetrators has increased.
- In contrast to the position a decade ago there is now no difference in the proportion of males or females estimated to have experienced violent crime in 2017-18, although sources show that males are more likely to experience some lower volume types of violence that include severe physical injuries.
- Gender does have an impact on the way violence is experienced, with women more likely than men to have experienced partner abuse (including psychological as well as physical abuse).

Most people in Scotland have benefited from the effects of violence with the reductions primarily effecting those that were likely to be a victim of violence (and indeed all crime) once or twice in their life time where by their chance of being a victim has significantly reduced. However, the same cannot be said for those living in some of our more deprived communities and those who sadly experience violence as a regular occurrence.

## Changing profile: Non-sexual violence in Scotland report Sept 2019

- All established sources show a notable reduction in non-sexual violence in the general adult population over the past decade, driven by decreases in the years following 2008-09 with broad stability seen more recently.
- Where violent crime is reported to the Police, the relatively narrower measure of police recorded violence (which excludes Common assault) showed a 10% increase in 2018-19.
- A broader measure of police recorded violence (including Common assault, and so closer to the SCJS definition) has shown more broad stability, with increases of less than 1% in both 2017-18 and 2018-19.
- This decrease in violence over the past decade has been driven by a reduction in younger males' involvement in violent crime.
- There has been no change in the proportion of females who experienced violence.
- The likelihood of experiencing violence for people who live in the 15% most deprived neighbourhoods has not shown any reduction since 2008-09, whilst the victimisation rate has fallen for people living in the rest of Scotland.
- Alcohol now plays a less prominent role in violent crime however sources indicate that around half of violent incidents experienced involve a perpetrator under the influence of alcohol.
- Around 1 in 3 violent incidents involved violent perpetrators under the influence of drugs, unchanged from a decade ago.
- Violent incidents where a weapon was used are less common now than they were in the last decade. Crimes of possessing, but not using, an offensive weapon in public are down over the longer term but have increased in the most recent years.
- Violence in public spaces has fallen in recent years. Violent crime which takes place in private spaces has also decreased over the last decade across most types of violent crime.

The changing of profile of violence in Scotland presents a number of challenges that we need to be equipped for as we try and reduce violence even further in Scotland.

## **Narrowing of the Age Profile**

Younger people still represent the largest population of those involved in violence (all physical violence) as either the victim and or potentially the offender (which in many cases can overlap). As the number of younger people (under 25) has reduced there has been little change to the next age group (25-44) and whilst the difference between the 2 age groups is not statistically significant according to the SCJS Victimization survey the rates per 10,000 recorded by the police still show a difference the ages of most serious violence victims 18.6 per 10,000 for 16-24 and 13.8 for 25-44. Although like the SCJS there has been large decreases in the rates in since 2008/9

This is a challenge from primary and secondary prevention activity as although this has had an impact in reducing the numbers at an earlier age it has not impacted upon those over the age of 25 (although this may be a time lag effect and we may yet see the benefit in the long term). It is more likely that due to age and experiential learning that those in the older grouping are more ingrained in the behaviour and whilst some population level activity such as advertising campaigns may impact it is more likely that this will require more in-depth activity to challenge the behavioural patterns that exist and address the underlying causes/drivers that sustain the activity.

## **Gender Profile**

Whilst the gender profile for serious violence and serious injury remains predominantly a male issue with most victims and most offenders male. There is beginning to be an equalisation in the lower level (less injurious) violence, where more women are victims of violence and there is an approximate 50/50 split (SCJS,2019)

Whilst the strategy moving forward will address the more physically damaging aspect of violence this cannot be ignored as it is as the increasing level of low level violence may be a precursor for future change, with more women being exposed to long term insidious levels of violence and control as well as the greater likelihood that the violence will escalate to more greater physical injury. What is not clear from the available SCJS research is whether or not there has been an increase in the number of female violent offenders, however, some indication may come from the Scottish Criminal Proceedings statistics where in 2009/10 9% and 6% of the convicted offenders were female for serious non sexual violence and common assault respectively as opposed to 12% and 21% in 2017/18

The continuation of the desistance programmes and behavioural re-adjustment programmes is still required to ensure that we all can live in a safer Scotland, there will be a need to revisit some of the educational programmes such as MVP, MAV and NKBL as well as the work carried out in schools by campus officers to ensure that the violence message is penetrating regardless of the gender [identity] of the individual.

## **Weapons inc. knives**

Scotland's greatest success over the last 15 years is in the reduction of the use of weapons [knives]. This reduction was primarily brought about by the significant work carried out across the country (particularly in the west where the problem was much more acute), in areas of policing, education and attitudinal change campaigns.

With the profile of knife crime high on the agenda south of the border and the increasing number of tragic fatal attacks with knives (particularly with young people) on the increase as well as a steep upward trend in the number of possession offences, it is clear that we cannot be complacent. Indications are that there have been increases in the numbers which will require some attention, however, fortunately so far this has not led to any real time increase in the number of homicides etc. This has also been confirmed through some of the work done through programmes with young people in schools and programmes such as the 'You decide' programme which even suggests that the UK national narrative been driven through the media is impacting on young people's beliefs in Scotland, for example when a group of young men were quizzed why they thought it was ok to carry a knife now, the response suggested that they had seen it on the telly/internet that everyone was carrying them in London.

## **Concentrations of Violence**

The evidence is telling us that violence is higher in deprived areas than it is elsewhere. However, we know that deprivation alone is not a marker of violence. Therefore, we need to develop a place-based approach in the most consistently violent areas in Scotland, making full use of local partnerships.

The concentration of violence in some of our most deprived communities is a particular concern as it is clear that the multitude of challenges that some of our communities face can be extreme. Addressing issues such as violence as well as addiction (drugs death), criminality, wellbeing, aspiration, ill health and economic uncertainty are big challenges that will require a much more holistic approach and it is unlikely that single target solutions will be effective on their own.

We must be much more holistic in our approach and understand the needs of the various communities and the drivers that sit beneath the problem sustaining the challenges and providing fertile ground for the problems to fester and penetrate all areas. A more holistic approach is required which places the needs of the community and some of the most vulnerable people at the centre.

If we are to even try to address the challenges that exist in some of our communities, we must ask ourselves some really difficult questions about how we listen to their needs, deliver services and support them to create opportunities to change. This approach needs to be community led building on the work that has been proven effective previously not just from the VRU but from all agencies and understand how we can make it better. Re-addressing the systemic problems that exist will not be easy or indeed quick as the most challenging communities have been on our collective radar for some time, yet in many cases the change has not been evident.

This is ultimately a partnership approach where the communities and the most vulnerable are at the heart of the programme, by ensuring that we can meet the needs better, by diagnosing the problems and challenges more successfully and empower communities to develop resilience to help create a place where there is an opportunity to change.

## **Alcohol and Drugs**

Over the last 10 years according to SCJS, 2019 report there has decreasing number of the violence in Scotland is solely connected to alcohol. Whilst this downward trend is welcome, at 50% there are still too many assaults connected to drunken and disorderly behaviour, and if you add in to the mix the one third of assaults connected to drug use this could be a recipe for disaster particularly when those consuming the 'cocktail' of substances are not sure of the overall effect as chemical composition and the strength are not consistent. The introduction of MUP has seen the reduction in off sale purchases which is to be congratulated, however, changes from now strong cider to fortified high caffeine wine can create additional issues as this particular product type has been linked previously anecdotally and academic research to violence.

The increasing drugs trade across the UK and the growth of 'County Lines' presents a new challenge particularly round the preying on the insecurities of vulnerable young people with promises of wealth and kinship to work as dealers and or mules, as well as the use of the cuckooing tactic which isolates people and causes significant life trauma. Moreover, [REDACTED]

Working with the operational side of policing there needs to be an increased opportunity to intervene and protect those whose vulnerabilities are being preyed upon. This is critical moving forward, by identifying those at risk, working with partners are creating more vibrant resilient communities we can hope to insulate people and create environments in which it is difficult to operate. Crucial to the development of this is more holistic place based working identifying individuals, families and communities where intervention strategies and early warning signs can be addressed quickly.

## **New Scots**

The growing new Scots community in Scotland presents a new risk with many young people and their families coming to the country not just to flee from war and atrocities from their country of origin but we are also witnessing a move from other places in the UK including London and Manchester to escape the growing levels of gang violence and spike in youth violence.

This presents a challenge as Scotland on the whole is a welcoming and open country a narrative that has been expedited through the Brexit process and the national discourse, anecdotal evidence form One Community clients suggests that many have come to Scotland to escape violence, intolerance and racism to find that many of the challenges exist here as well (particularly intolerant attitudes and racism). The risk is that if we are not intervening and helping to

support young people and their families integrate into Scottish society then the young people will feel again that they are outsiders looking in with no hope and no aspiration. This is fertile ground from crime, criminality and violence to establish itself. Currently we do not have the same issues as London has and [REDACTED] but if left unchecked this is a very real possibility.

### **Not a one size fits all**

Analysis of the police recorded violence from 2018/19 demonstrated that despite the overall increase in Group 1 serious violence there was no single picture that could explain the increase. For example, in about half of the local authorities there was an increase in behavioural violence (murder, attempted and serious) whereby areas like Edinburgh and a number of the smaller local authorities had large increases, but others have no real change and even reductions such as Glasgow. The overall picture of the reduction was primarily been driven by a mix of robbery, child maltreatment and other violence (threats), but even this was not consistent with some areas for example Edinburgh having large reductions in the number of robberies.

Robbery, Child Maltreatment and 'Other Violence' has not been a focus for the VRU as behaviourally they are very different from the other types of violence. However, with this now having a not insignificant impact of the life's of the people of Scotland we need to understand this better as well as understand where best we can effect change. For example, Robbery can be viewed as a crime of desperation whereby people steal to live or even 'feed a habit' etc. this is not always the case as many robberies are just opportunistic and are linked to anti-social and other violent behaviour.

Addressing the problem of robbery and other aspects of previously not addressed Group 1 violence will require partnership and the VRU is working with different organisations including but not exclusively Police Scotland to identify opportunities to use prevention methodologies to effect change.

As the VRU continues to develop the local partnership approach, it will be attuned to the locally relevant issues and driven from the bottom up not from a one size fits all approach to Scotland.

### **Matching Activity to the challenge**

Over the next year the VRU will continue to work with partners to address some of the challenges and the changes in the profile of violence in Scotland. Historically the VRU has traditionally worked more with youth violence than any other group, however, as we have seen there has been significant reductions in youth violence with little change in those at the older age groups.

Much of the work with young people has been at a primary and secondary prevention level and this needs to continue to ensure that communities and young people remain inoculated against violence and prevent large scale increases. Education programmes and bespoke delivery such as 'You decide' are necessary steps to try and ensure this. However, much of the detailed intensive work with for example Navigator (in all its forms), Prison Interventions and Desistence



mentoring is dealing with an older age group and typically those that are steeped in violent behaviour. These are challenging groups and whilst the VRU may not have the capacity to deliver these programmes at scale (except Navigator), they represent significant opportunities to learn so that best practice can be cascade.

Over the next year the VRU will be focusing on a number of holistic place based initiatives; this is based on the wider understanding of the effects of violence and the multiple drivers that sit create the conditions for not just violence to exist but also many other social issues such as poor mental health and addiction. These approaches will not necessarily focus on any specific age group (although some individual programme activity that exists within the wider approach may do so), this is about tackling areas whereby there has been little change and they have not necessarily benefited from the overall change in Scotland violence landscape.

## VRU Draft Programme of Work and indicative finance 2020/2021

### **Navigator (Teachable moments, person-centred, trauma-informed)**

Navigator is a service based in hospital emergency departments with the aim of reducing violent offending and engaging patients with appropriate statutory and voluntary services. In the near future, the service will expand beyond hospitals to function in community, custody, and primary care settings. At the core of navigator is the intention to reach out to people who are engaged in, or are victims of, violence at a “reachable and teachable moment”. These moments occur within the context of naturally occurring events or circumstances and can cue changes in behaviour (Lawson & Flocke, 2009). The decision to reach out to those affected by violence, whilst they are within a hospital setting, is based on the idea that information that is learned at a critical period is more likely to be absorbed and retained. Navigators work with patients at a time where they have been admitted to the emergency department for violent injury. At this point in time patients can be vulnerable, are inclined to reflect, and may consider a change in lifestyle. Preliminary evidence from studies investigating behaviour change within a health setting have noted that teaching moments are associated with increased willingness and commitment to change (Flocke et al., 2014).

Navigator also aims to provide a trauma informed person centred service that is built on empathy and kindness. Person-centred care is about focusing on the needs of the patient, respecting their unique experiences and needs, tailoring responses to their requirements, and involving them as an equal partner in shared decision making regarding their care. An extensive literature supports the benefits of a person-centred approach (Entwistle & Watt, 2013). This perspective was deemed necessary for Navigator as their target patient group present with a range of complex social needs, and those who are perpetrators or victims of violence are disproportionately affected by adverse childhood experiences and trauma (Bellis et al, 2014). As a result, trauma-informed practice (an ability to understand and respond empathetically to the impact of trauma) is a key aspect of ensuring that individuals are effectively supported. In doing so, it is hoped that Navigators will create hope in service users by empowering and motivating them, and helping them pursue a better future for themselves and those close to them.

The ongoing qualitative evaluation of Navigator has demonstrated the value of the service to both patients and emergency department staff. Emerging themes include their approach which is perceived as being different from other services, the importance of being present in the emergency department and meeting people at a time of crisis when they may be ready to change, their lived experience which makes them relatable and trusted, their ability to increase self-esteem and self-efficacy thus helping to create the conditions for change and their reliability and determination not to give up on people. Staff comment on their ability to de-escalate situations with patients that may previously have resulted in violence within the department or on leaving and their ability to assist staff in getting investigations and treatment carried out for patients and in preventing self discharge. Staff, particularly nurses, comment that they are able to leave their shift reassured that the patients they would normally have concerns about have been passed on to a service that will provide them with support.

The quantitative evaluation this far has shown that Navigator can reduce emergency department attendance. Of the 100 patients we looked at in detail, those who engaged with the Navigator service were significantly less likely to attend the emergency department in the 12 months after meeting Navigator than they had been in the 12 months prior to meeting Navigator ( $p < 0.05$ ) (23.7% fewer attendances). Those who chose not engage with the service had a significant increase in emergency department attendance in the 12 months after refusing the offer to engage with the service (15.3% more attendances). The reduction in attendance is associated with significant cost basic savings to the NHS, the ambulance service and the police amounting to in the region of £32K just for the very basic costs of attendance.

**Primary Target Area: Repeat Victims and Offenders (Violence)**

Workstream 1: Navigator	Summary	Justification	Actions	Evaluation & Reporting	Finance 2020/2021
A&E setting	To develop the infrastructure to support the ongoing expansion of the Navigator programme in A&Es across Scotland.	As the programme has grown with the local cost of running the service transposed to the local NHS, there is a need to provide enhanced support and cover to ensure that the programme is able to provide the service committed to as well as supporting the staff delivering the programme	<p>To create the supporting structure and employ through MAV the necessary staff required to support.</p> <p>To develop the model to ensure that the support structure can support national delivery and become less reliant on Scottish Government funds over time. It is expected that this will take 3 years to reduce the cost burden on Community Safety to zero. However, the more hospitals that are on stream the lower the management share cost is per site.</p>	<p>Provide yearly progress reports/info graphs etc.</p> <p>Develop consistent recording and monitoring practices to track statistics to provide feedback to SG and NHS partners.</p> <p>To develop the funding plan to include the central support team in either the overall cost of the service or other funding sources.</p>	Core staffing budget to provide support to MAV in the delivery of the programme and the securing of long-term financing of the project.
Community Setting	To test the delivery of community Navigator working with the prison remand population and other criminal justice groupings in the Ayrshires	<p>The remand population is extremely difficult to engage with but represents a significant turnover between the community and Kilmarnock Prison.</p> <p>This approach will use the person centred trauma informed approach the A&amp;E Navigators have used to work with victims of violence.</p>	<p>Identify project partner through procurement process.</p> <p>Test the service for a minimum of 1 year.</p> <p>Develop the plans to ensure continuation of any effective practice identified post funding.</p>	<p>The VRU will not be running this programme directly as it will be managed and ran locally by an appointed 3<sup>rd</sup> party (by the cross council governance group).</p> <p>In partnership with the delivery agent the VRU will produce an evaluation of the programme to be made available in early summer 2021.</p> <p>Engagement tracking reports and basic statistics on numbers engaged etc, will be collated and reported on as well as the more detailed evaluation.</p>	No additional finance other than core staff time

		The remand population for violence in Kilmarnock prison is predominantly repeat offenders within the older age groups as the younger offenders tend to go Polmont			
Custody Setting	To test the delivery of Navigator within a custody setting of Police Scotland	Police Custody presents an opportunity to engage at a potentially reachable moment. This type of approach has been tried by the DIVERT project in England. However, the custody nav will be using lived experience mentors unlike DiVERT which uses youth workers and ex police,	To work with the delivery partner(s) (Police Scotland & SACRO) to test the service for a minimum of 1 year. Develop the plans to ensure continuation of any effective practice identified post funding.	The VRU will not be running this programme directly as it will be managed and ran locally  In partnership with the delivery agent the VRU will produce an evaluation of the programme to be made available in early summer 2021.  Engagement tracking reports and basic statistics on numbers engaged etc, will be collated and reported on as well as the more detailed evaluation	No additional finance other than core staff time
GP setting	To test the delivery of A&E Navigator within a GP setting.	The GP surgery is a good opportunity to build relationships with those that have experienced violence predominantly focussing on those who are victims of repeat violence, including but not exclusively victims of domestic violence etc.  Using a similar model developed within A&Es this person centred trauma informed approach	To identify partners and potential test site. To secure funding and resources to deliver the test service.  During the test phase we will establish the most effective partnership model with the GP link workers. As it is key to understand how these roles can coexist or where or not there is duplication/overlapping of responsibilities.	The VRU will be involved with the set up and the project specification/on going governance however, it is anticipated like the other Nav projects that it will be run by a third party supplier  In partnership with the delivery agent the VRU will produce an evaluation of the programme to be made available in early summer 2021.  Engagement tracking reports and basic statistics on numbers engaged etc, will be collated and reported on as well as the more detailed evaluation	No additional finance other than core staff time

		enables creates opportunities for people to seek specialist help and support to deal with the multiple issues that drive violence and other connected challenges			
Total Cost					£0 funding allocated to MAV

**Desistence from violence**

It is important to understand which factors protect against re-offending, and to use this information to inform the development of programmes that aim to support the desistance process. People with convictions face barriers and challenges to finding and staying in work. This is problematic as evidence suggests that the extent and frequency of offending lessens when these individuals obtain employment, and that stable employment which offers a sense of achievement, satisfaction or mastery can be particularly beneficial during the desistance journey (Ministry of Justice, 2013). Research findings also emphasise that unless employment is combined with social, educational, health, and motivational support – to help address other barriers to desistance and keeping a job – then employment programmes are less likely to be effective. This support can be provided via mentors who have lived experience of navigating the criminal justice system themselves.

The use of formal mentoring relationships has been highlighted as an important tool in supporting people with convictions to desist from offending behaviours. Mentors with lived experience can act as a positive role model and provide both direct (i.e., helping building new social networks) and indirect assistance (i.e., signposting to support organisations) that will support the desistance process. Promising evidence suggests that pairing those who have recently been released from custody with a role model who has lived experience may reduce the likelihood of re-offending in both mentors and mentees (Sapouna, Bisset, & Conlong, 2015).

Street and Arrow aims to support desistance and reduce re-offending behaviours by hiring people with convictions and pairing them with a lived-experience mentor who can provide guidance across a range of domains. By providing trainees with employment and wrap-around support, it is more likely that they will be able to break the cycle of engaging in violent and offending behaviours.

Early findings from delivering the Street and Arrow programme since 2017 have demonstrated ..... outcomes being achieved through this approach. Just thinking of Karyn McCluskey’s recent article about using people with lived experience – might be wise to include something as to how the VRU use the stories of people with lived experience to demonstrate change is possible but also explain how the VRU support those with lived experience to share their stories to prevent individuals being retraumatised.

**Primary Target Area: Persistent Violent Offenders**

<b>Workstream 2: Desistence Mentoring</b>	<b>Summary</b>	<b>Justification</b>	<b>Actions</b>	<b>Evaluation &amp; Reporting</b>	<b>Finance 2020/2021</b>
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<p>Braveheart Industries (Street and Arrow)</p>	<p>The VRU supported independent charity Braveheart Industries provides a social enterprise with its primary goals of mentoring, training and employment to those otherwise excluded from the labour market due to behavioural issues and previous criminality/violence.</p>	<p>Employment and shifting social norms is crucial in both desistence and improving the health and wellbeing of the participants in the programme.</p> <p>Creating stable lives in those from complex back grounds helps to break the cycle of violence. Critical to this is dealing with both the behavioural aspect and the psycho-social aspects through trauma workshops and other therapies</p>	<p>The VRU provides project management and back office support for the programme as well as governance in partnership with the constituted board.</p>	<p>The programme is currently under evaluation which should be available in Summer 2020.</p> <p>Annual summaries and reports to OSCR/Companies house are completed by the board.</p>	<p>No additional violence, however, funds from other project streams may be redirected to cover the costs of using the lived experience staff for example the 'you decide' funding stream paying for the use of mentoring/navigation services from BHI</p>
<p>Tattoo Programme</p>	<p>In partnership with the Royal Edinburgh Military Tattoo (REMT). The VRU will be providing support for up to 10 participants (from violent backgrounds) in REMT. The programme will provide support, mentoring, counselling and employment.</p>	<p>This short term partnership programme, acts as a gateway to other support and or employment (inc. Street &amp; Arrow) for those at the beginning/middle of their journey of change.</p> <p>This will be the final year of the programme with the sponsor from REMT retiring at the end of the 2020.</p>	<p>To recruit the trainees, and set up the support package required</p>	<p>Review of the programme and the clients destinations and outcomes</p> <p>Secondary analysis and summary of the programme from its conception to its final programme in 2020.</p>	<p>£15k – to support the costs of running the programme and reducing the operational burden on staff within the VRU ensuring greater resilience across other project areas</p>

		Since its inception the programme has worked with over 70 young men – mostly straight from prison for violence. The majority of those involved did not reoffend and either found employment or training after the programme. Without the Tattoo programme there would be no Braveheart Industries or army recruitment would still have rejected ex violent offenders without further consideration.			
Desistence Mentoring Training programme	Creation of new mentoring qualification and training programme to support the delivery desistence mentoring.	As mentoring has grown across various organisations there is a need for more in-depth training and standardisation of the approaches taken. First stage will be to ensure that all VRU and VRU associated mentors and Navigators are fully trained.	<p>To establish the programme framework</p> <p>To develop the training capacity in the VRU to deliver the training</p> <p>To establish a recognised qualification(s)</p>	<p>Formalised qualification framework recognised by a qualification agency</p> <p>Test training with post training evaluation</p> <p>Collate the numbers of services using the training and the number of trainees through the programme.</p>	<p>£10k</p> <p>For training materials etc</p>
Total cost					25k

**Trauma Informed Practices**

Evidence from studies investigating Adverse Childhood Experiences (ACEs) - such as abuse, neglect and household dysfunction - supports a link between traumatic experiences and offending behaviours (Leitch, 2017, [Scottish Government, 2018](#)). In particular, violent offenders, domestic violence offenders, and sexual offenders report significantly higher levels of childhood adversity, and these findings apply to both justice-involved youth and adults. Whilst equivalent research does not exist in Scotland, the Scottish Prison Service Prisoner Survey recently explored exposure to ACEs amongst those who are incarcerated. The report suggests that a substantial proportion of Scottish prison population have experienced ACEs (Carnie, Broderick, Cameron, Downie & Williams, 2017) and emphasises that this figure is likely to be an underrepresentation of the true prevalence. Further, research conducted in Wales has highlighted that nearly half of prisoners (46%) have experienced four or more ACEs, and that ACEs were associated with an increased likelihood of being involved in violence (Ford et al., 2019). As well as being associated with offending and violent behaviour, exposure to childhood adversity can have a long-lasting negative impact on a myriad of health and social outcomes (Public Health Wales, 2015).

These findings highlight that understanding ACEs and taking a trauma informed approach when working with justice-involved individuals is fundamental to preventing violence and criminal activity. Trauma informed services and interventions are characterised by a focus on understanding, recognising, and responding to the links between a history of trauma and current health and social problems, and often aim to increase resilience by implementing a strengths-based approach (Randall & Haskell, 2013). Developing a service that takes a trauma informed approach supports recovery and can result in better outcomes for those affected by trauma (NHS Education for Scotland, 2017). It is anticipated that positive impacts may extend to prisoner families and the local community too.

The Prison Resilience Group Work Programme aims to improve resilience – and ultimately reduce violence and re-offending - by developing assets and resources in male prisoners who have been exposed to trauma. The You Decide Programme targets young people who are using violence in their communities, and are deemed role models to younger children. It is a trauma informed, solution-focused, and strength-based programme, which aims to reduce violence in the community and encourage young people to make positive lifestyle choices. By taking an integrated and trauma-informed approach within these programmes, it is hoped that re-offending and violent behaviours will be reduced and intergenerational crime and victimisation will be prevented.

**Primary Target Area: Repeat Victims and Offenders (Violence)**

Workstream 3: Trauma Informed Practices	Summary	Justification	Actions	Evaluation & Reporting	Finance 2020/2021
Prison Based Work	To develop and self-sustaining resilience group work programme for violent prisoners. Mixing Long term prisoners with those near release date.	The high level of ACEs experienced by those incarcerated presents a challenge to try and address repeat violent behaviour. Developing a trauma groups is one way of establishing a framework for support and the development of resilience in prisoners is key to both improving behaviour and making	To recruit the development team of LTPs and STPs to co-produce the programme with the therapeutic lead.  To establish effect framework for future delivery post VRU development phase  To establish the effectiveness of	The programme will be evaluated in 2 parts  1. The process evaluation on the construction and implementation of the coproduced therapeutic framework.  2. Effectiveness in addressing behaviour	£5k



		<p>them more susceptible to help and support. Using a mix of long term and short term prisoners is key to both realising the potential benefits on the outside of prison as well as developing a self-sustaining programme on the inside coproduced by residents</p>	<p>promoting resilience to address trauma and its impact on tackling repeat violent offending</p> <p>Establish connections to support groups for the short term prisoners on release</p>		
Highlands Project	Development of a Resilience Hub in partnership with partners in the Caithness and Sutherland area	<p>The Highlands ACEs hub and PH highland have made ACEs a key priority.</p> <p>After discussions with the VRU team it was decided to develop a Resilience Hub to address the impact of toxic stress at both an individual and a community level.</p> <p>The Hub will be run and managed locally by partner agencies and the VRU will act as the linking organisation is the establishment of the Hub.</p> <p>Due to the challenges of rural and remote communities. This is an opportunity to</p>	<p>The VRU will provide expert advice and support in the identification and the development of a programme of work using a trauma informed approach to address issues relating to violence.</p> <p>The VRU will also bring together the local partners under a cohesive voice to channel resilience activity and reduce toxic stress which will aid in reducing a number of negative consequences including but not exclusively violence.</p>	The VRU will undertake an analysis of the approach taken to both better understand the potential outcomes and the processes/steps/stages required to establish such an approach in a more rural/remote community	£2k (traveling +expenses)

		understand how programmes can be cascaded without the necessary infrastructural support			
You Decide Programme	Trauma informed weekly group work sessions with (how many) young people using lived experience mentors as motivational change agents. This programme works with local services to ensure sustainability and continuation of support.	There has been an identified need from a number of social work and local policing teams for concentrated divisionary intervention work with young people/youth gangs where existing programmes have failed to make a difference.	Use the learning from the stage 1 trial to adapt the programme from the lessons learned  Develop implementation and training plan for expansion by Dec 2020  Train new programme delivery teams to oversee the programme in new areas.	The initial evaluation from the phase 1 trial of the programme is due to be completed. SG to receive copy of this by June 2020  Implement changes and review the second phase of the programme. Provide report to SG by Oct 2020  Design and develop implementation materials by end of Jan 2021  Track programme attendees and partners to establish impact – this will examine primarily the 1 <sup>st</sup> cohort, however it may also include the 2 <sup>nd</sup> cohort depending on delivery timescales post covid-19  All evaluation and development work is being carried out internally by VRU core staff	£15k – this to support costs (10k – costs for mentoring/group work support) (3k- running the groups ) (2k miscellaneous operational costs)
Total cost					£22k

### Community development/empowerment (Asset Based Community Development)

It has been proposed that public health initiatives should incorporate community engagement approaches during the development stage of interventions and services (O'Mara et al., 2013). As result, strength-based approaches that are driven by individuals and communities – such as Asset Based Community Development (ABCD) – are increasingly being considered as a valuable strategy in reducing the impact of social determinants of health within urban neighbourhoods and rural communities. ABCD approaches to public health promotion place a focus on recognising what communities do have (i.e., their capabilities and assets), instead of what they do not have (i.e., their problems and needs) and aim to enhance mutual support and collective action. Assets identified in a community can include physical, resources or spaces, as well as personal and social capital (i.e., skills, knowledge, experience, and passion).

Collaborative community development models that prioritise recognising, identifying, and harnessing existing assets can increase feelings of empowerment, efficacy, and connectedness within individuals and communities (Foot & Hopkins, 2010). Active local citizens, networks, and organisations are made to feel more confident in their abilities to be co-producers rather than simply recipients of development. This can lead to the creation of innovative solutions, increased resilience, a reduction in demands on scarce resources, and also has the potential to improve outcomes of interest (Foot & Hopkins, 2010; Morgan, Ziglio & Davis, 2010). Children and young people who are involved in asset-based approaches experience empowerment, increased self-esteem and develop leadership, communication, negotiation, critical thinking, mobilisation and network-building skills (Adgal, Midtgard, & Meidell, 2019). Overall, empowering communities and involving individuals as an active part of the solution can provide a foundation from which to build a positive future and creates the opportunity to build stronger, more connected, and more sustainable communities that are more likely to overcome the challenges that they may face.

**Primary Target Area: Challenging communities where the national reductions in violence are less evident.**

Workstream 4: Community Approaches	Summary	Justification	Actions	Evaluation & Reporting	Finance 2020/2021
Adverse Community Experiences	<p>This project is currently under development, - planning is ongoing throughout April with early engagement work during spring/summer 2020 Covid-19 dependent</p> <p>It will essentially utilise all of the learning that the VRU and others has acquired over the last 15 years and apply it to single area to attempt to address the multiple historical challenges that have either being</p>	<p>The VRU in partnership with a number of local 'experts' have identified the North west of Glasgow as a target area for this approach.</p> <p>Areas such as Possil, Milton and Saracen have significant multi-generational issues that cut across justice, health (mental &amp; physical), education and the economy.</p>	<p>Development of the project plan – this will be developed over the engagement period (spring/summer 2020)</p> <p>On board partners and agree outcomes</p> <p>Source finance</p> <p>Examples of activity potentially include: GP navigators Bystander/ASC Asset Based, Community Empowerment</p>	<p>The initial plan is to utilise analytical and social capabilities by identifying funding to support the recruitment of a fulltime research team to support the development of the project, the reporting of outcomes, harvesting intelligence and full evaluation of all the strands.</p> <p>Report from the initial engagement will be provided</p> <p>The development of a shared plan</p> <p>Feedback on the effectiveness of any activity undertaken.</p>	<p>Funding for additional services (e.g. case workers/navigators) will be sought from a wide array of funders during 2020/21</p> <p>Initial seed fund £6500</p> <p>To be used for community development and engagement</p>

	<p>at the route cause of the issues or are exasperating the problem such as drugs deaths, mental health and organised crime</p> <p>For more details see appendix</p>				
The Crib	<p>The first Community Reach and Inclusion Bus (CRIB) was launched in Feb 2020. Our partners in delivering this service Heavy Sound have secured a second bus for deployment.</p>	<p>Service engagement levels are poor in some areas of the country. Particular in communities in the bottom 15% of the SIMD. By providing bespoke services at a community level, it will help communities, families and individuals to address many of the drivers that can cause violence.</p> <p>Bringing together criminal justice, health, employability, trauma services, diversionary activity etc. into a holistic mobile venture will see better community targeting.</p>	<p>Identification of target community for the first bus and target location for the second bus potentially will be Dundee (tbc)</p> <p>Work with Heavy Sound to secure sustainable long term funding</p> <p>Work with partners to establish key services to support local delivery</p>	<p>Evaluation strategy in place – expected feedback to be provided to SG – initial evaluation of the impact SPS involvement complete however, covid 19 has delayed to assessment of the community impact. As a result it is anticipated that the community impact evaluation will not be available until the end of the year.</p> <p>Outputs, Outcomes and stories will be collated to help both inform future developments and operational activity</p>	VRU staff time
Total Cost					£6.5k

### One Community

One Community sets out to help New Scots to settle and rebuild their lives within communities in Scotland. “Champions” have been recruited from the city’s Horn of Africa community to support this aim. The projects focus on working with New Scots is based on the concern that feelings of disconnection within the Black and Minority

Ethnic (BME) communities may lead to violence, through gang culture and organised crime. Research suggests that those experiencing social exclusion (typically defined as a lack of participation in mainstream social, cultural, economic, and political activities (Morgan, 2007)) may show disregard for societal rules and a greater willingness to break laws and perpetrate violence (Hughes, Hardcastle, & Perkins, 2015). Feeling disconnected within a community may encourage young people to seek social support from gangs in order to feel like they belong in a community. By reaching out to New Scots who may feel disconnected - with the aim of providing wide-ranging supports, establishing social bonds, and helping people overcome barriers to education and employment - it is hoped that One Community can help to develop more cohesive communities where people feel empowered to participate in society and make positive choices regarding their lifestyle.

Cultural norms refer to rules or expectations of behaviour and thoughts based on shared beliefs within a specific cultural group. They indicate social standards and are therefore highly influential in shaping individuals behaviour. These norms can support and encourage the use of violence in the New Scots community. For example, in some cultures it is deemed acceptable for men to control or discipline women using physical force. These attitudes increase women’s risk of becoming victims of gender-based violence when they arrive in Scotland. Consequently, a key component of the support offered by One Community is the delivery of education programmes that challenge cultural norms and ensure that New Scots understand their rights, responsibilities, and entitlements within a Scottish context. In addition, the project aims to help the BME community access the support and services that they need to help them settle in Scotland, and overcome any problems associated with the reasons that they’ve had to leave their home country. Overall, it is intended that the approaches being implemented by One Community can help develop more inclusive and resilient communities and ultimately contribute to the goals of reducing violence in Scotland.

**Primary Target Area: New Scots communities – concentrating on young people and families**

<b>Workstream 5: One Community</b>	<b>Summary</b>	<b>Justification</b>	<b>Actions</b>	<b>Evaluation &amp; Reporting</b>	<b>Finance 2020/2021</b>
Young People	To develop responses and support mechanisms in support of young ethnic minority people (YEMP) in Scotland	<p>To prevent new Scots from being feeling excluded (perception v reality) from education (at all levels) and employment, leading to the possibility that they will become more involved in crime and gang culture.</p> <p>Over 2019/20 the charity has noted an increase in families fleeing areas such as London and moving to Glasgow to escape gang violence. Although anecdotal</p>	<p>Establish and run a project for young people who are at risk of joining gangs or have been in and out of prison.</p> <p>Develop co-produced (YEMP) supporting vulnerable young people.</p> <p>Raise awareness of services available to the BAME community</p> <p>Create database of services available.</p>	<p>One community employ a mix of external evaluation and VRU supported evaluation (depending on the nature of the programme of work)</p> <p>Evaluations and reports are available on request and will be fed back to the Scottish Government</p>	<p>No additional costs other than staff time for the project lead who has now been placed in the overall VRU staffing costs.</p> <p>Individual project money is raised through charitable donations and external funding streams</p>

		<p>this represents a significant risk as the violence and rivalries may follow.</p> <p>Unlike many of the other VRU intervention programmes which operate at a Tertiary Prevention level, this is operating at Primary/Secondary which is crucial to preventing the problem from escalating</p>	<p>Run summer school for up to 30/40 young people covering areas such as the law, bystander, gender norms, education, employment and training etc.</p> <p>Develop multi –lingual leaflet(s) and videos to inform young people about the laws</p> <p>Develop funding model to support charity post 2021</p>		
Community Champions – Parent Engagement	<p>The project acknowledges that the parents are key to the successful delivery of integration and intervention using the cohort of community champions connected through the One Community charity</p>	<p>Parents often struggle with day to day life in Scotland having arrived in Glasgow from war zones etc, The cultural differences have presented a number of challenges particularly around domestic violence and perceptions of what is and isn't acceptable.</p> <p>The parents (in particularly mothers) are a significant influence on the behaviour and outcomes of the children and by helping parents we are offering primary level support for the young people</p>	<p>Establish referral routes between organisations in support of BAME families and young people</p> <p>Raise awareness for parents on the services available to support their families</p> <p>Work with parents to reduce social isolation and support people under threat of violence (eg. DV, FGM)</p>		

### **MVP/ASC (Bystander Approaches)**

Bystander approaches to gender-based violence encourage individuals to not look at themselves as potential victims or perpetrators, but instead as empowered and active bystanders who have the ability to support and/or challenge peers. These interventions will explore attitudes concerning violence and aggression, provide individuals with strategies to safely challenge behaviours that are detrimental to health and wellbeing, and encourage leadership in these areas. Evidence which mainly comes from studies conducted in the US suggests that programmes targeting the behaviour of potential bystanders are associated with promising outcomes. More specifically, individuals feel a greater responsibility to intervene, have a better understanding of the strategies that they can use, and may report positive changes in their attitudes and behaviours towards sexual violence (Kettrey, Marx & Tanner-Smith, 2019; Mujal, Taylor & Fry, 2019).

Both Mentors in Violence Prevention (MVP) and Ask Support Care (ASC) incorporate elements of the bystander approach. MVP trains senior pupils to mentor young people, and lead sessions on issues such as sexting, coercive behaviour, and the use of appropriate language. Evidence from school-based evaluations in Scotland support the efficacy of impact based on staff feedback, attitude questionnaires, and focus groups (MVP Annual Report, 2016). Moreover, a qualitative review of the intervention in three Scottish High schools (Williams & Neville, 2017) found that school staff, mentors, and mentees all reported positive experiences and felt that they had benefitted in terms of changes to their own attitudes and behaviours regarding gender based violence. Whilst MVP focused on young people in schools, ASC targets individuals working in professions where they may encounter victims of domestic abuse (e.g. health professionals, hairdressers etc.). This training programme aims to provide attendees with sufficient knowledge to support these victims, and to capitalise on rare opportunities to engage with these individuals in the absence of their abusive partner. If a trusted professional raises the issue, it may encourage those experiencing abuse to take action. Both MVP and ASC aim to empower participants to be active bystanders who can reach out and offer support to those in need.

**Primary Target Area: Primary and Secondary prevention education – across large scale populations (MVP)**  
**Intervention and support for victims of domestic violence**

<b>Workstream 6: Bystander Approaches</b>	<b>Summary</b>	<b>Justification</b>	<b>Actions</b>	<b>Evaluation &amp; Reporting</b>	<b>Finance 2020/2021</b>
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MVP Schools – a gender based violence primary prevention programme	Provide support, guidance and access to materials for the Education Scotland training team in the delivery of the MVP programme across Scotland	Ongoing committed programme activity	Provide support to the Education Scotland MVP team by attending MVP Strategic Governance Board meetings.  Support includes, comms, social media, materials, marketing, and programme access	Delivery and reporting for this programme is through Education Scotland	No additional costs other than staff time
Bystander Youth Football	In partnership with Pollok United youth football, the VRU are looking to develop both the Bystander training and Trauma (ACE awareness) training for parents and coaches	Pollok FC is large youth football organisation in the south of Glasgow with access to a large number of families living in the bottom 15% SIMD area.  The club have made a direct approach to the VRU for support in developing an approach in which they could work closer with the coaches and parents to better support the young people, with a specific focus on those being affected by violence	Over 2020/21 we will work with the club to rework the bystander and trauma informed approaches to suit a wider audience.  The approach will be to embed the training and allow the caches or nominated individuals to own the approach moving forward.  We will capture all learning and use this as a template moving forward	All training sessions will be evaluated (sessions likely to be Aug 2020) and this will be followed up on a regular basis with focus groups created within the club and wider participants to understand the challenges and the effectiveness of the programme.  This will be used to develop the programme further.  The programme will monitor the number and quality of the sessions as well as the stories from the programme participants and the young people they are working with.  Findings from the programme will be discussed with the SFA for future cascading if applicable	Staff time, no additional allocated budget
Bystander Licensing	The 'who are you?' programme has been recognised as an effective way (by a number of security companies. Inc SecuriGroup) of introducing	The VRU trained over 50 licensing officers more about 3 years ago for Police Scotland. Since then many of these officers have been moved on and the skills and the impotence for using this training in the	Conduct new training sessions with both Police Scotland licensing officers and groups of night time economy employees inc but not exclusively security companies	Conduct training with officers/employees and collate feedback from the sessions  From the feedback develop a new suite of resources.  Work with the police college and the Police Scotland licensing dept to ensure that the training becomes part of the	£5k Development of new training materials and marketing



	bystander principles to staff working in the night time economy and with the increasing concerns of sexual assault and consent there is a need to revisit this programme	evening economy has been diluted. There has been a number of requests from both the security industry and policing to revisit this both as a refresher and to reinvigorate the approach.	Develop the programme and embed the training into Police Scotland training for license officers  Create new suite of materials with a step by step delivery framework	core training in the prevention aspect to their role.	
Bystander Workplace	Develop, test and train a work based bystander model to improve culture in the work place (in partnership with Scottish Government)	, The Scottish Government has recognised that there needs to be an improved culture of support for the workforce. As part of this support, the Bystander approach has been identified as a potential way of addressing some of the cultural issues and increasing peer support/pressure if required. This approach is based on the MVP schools model as well as other models used in professional supports and the military (US, AUS)	After the initial tests and pause on the programme in 2019/20. There is need to develop from the initial programme sketch and incorporate the learning and address any concerns. SG HR have agreed to proceed with this work but on a much smaller and slower test of change scale.  The plan would still to be to recruit mentors, train staff and develop materials/expertise to ensure that the programme can become self sustaining within the SG	The VRU will monitor the implementation and development with the programme.  Post-test phase in partnership with the Scottish Government the VRU will agree an evaluation framework to ensure that the effectiveness of the programme in addressing the key issues.	£10k + VRU staff time The funds will cover any external staff fees, expenses and resource development
Ask Support Care (ASC) delivered in partnership with the VRU & MAV	This bystander programme trains front line/ customer facing	The programme was initially a VRU/MAV programme. In the last few years this has	Reinvigorate the training making it more interactive and focused on the delivery of	Over 2020/21 the VRU will conduct research into the effectiveness of the training and collate the numbers of those trained.	VRU/MAV staff time

	workers from all walks of life e.g medical and dental students, to vets, hairdressers and firefighters to recognise the signs of domestic violence and help people to understand their role in supporting victims.	been mainly a MAV programme with funds from the SG to develop and roll the programme out.  This approach has seen the programme delivered to a wide variety of audiences. However there is now a need to update and increase the scope of training both in the quantity and quality	active skills as well as the knowledge required to support.  Identifying in partnership with MAV new avenues to train and new audiences. A proposed plan of training to be submitted to SG by end of May 2020.	We will also collate the stories of where the training was used in support of survivors of abuse.	
NKBL Support	To work with Youthlink, to update the targeting and the content of the programme to ensure that the message is attuned to the most effected group.	Knife crime still presents a concern for Scotland, despite the decreasing numbers of young people involved. Ensuring that the message and programme is still relevant and targeted to the right groups is critical to ensuring that the delivery is effective.  It is vital that NKBL continues with its universal approach, however, there may be some adaption required to work with those more entrenched in this negative behaviour	To work with NKBL to establish the key targets areas/groups.  Share learning from other programmes such as 'You decide' to help shape the response	Feed back on the development sessions  Further feedback on effectiveness should be through youthlink	VRU & BHI Navigators/Trainee time
<b>Total Cost</b>					<b>£15k</b>

**Regional Development**

Over the last 15 years most of the Violence Reduction Unit activity has been conducted within the west coast, with exceptions in the national education programmes (MVP) and the concentrated policing action and activity (Safer Scotland). Over the last 12 months we have endeavoured to increase the scope of the projects across the country.

The reductions in violence in Scotland have primarily effected those that are young, those that carried weapons (knives) and those that lived in the west (in or around Glasgow). Whilst Glasgow and the west still remain the largest contributor to the levels of violence in Scotland and a significant proportion of violence reduction activity must be retained in this area, there is a need to target the areas where by the reductions have not been as evident and where there is the potential for the downward trend to be reversed.

By upscaling the work that the VRU is doing in partnership with local delivery partners in areas like Edinburgh (and surrounding areas) is critical especially as Edinburgh was one of the areas in 2019 that had an increase in behavioural violence (serious assault, murder and attempted murder). Other areas such as Inverclyde and Dundee remain stubbornly challenging with complex challenges (as with all areas where violence is highly prevalent) such as addiction, high levels of deprivation and multiple health challenges.

The VRU is a small team based predominantly in Glasgow with some staff dedicated to areas such as Edinburgh and Dundee, it is therefore a necessity for the team to work with local agencies/services/partners to deliver evidenced based activity as directed by the evidence on violence - the need and opportunity. By doing so, there is a realistic pathway to increasing the levels of sustainable activity across the country.

**Primary Target Area: Targeting communities most at need**

Workstream 7: Regional Development	Summary	Justification	Actions	Evaluation & Reporting	Finance 2020/2021
Inverclyde	Over the last year the VRU has continued to grow outside of its traditional west of Scotland base especially with the inclusion of a permanent member of the VRU situated in the East and seconded police	The majority of serious violence is still situated in the west however, there are a number of challenges both in the more remote areas and in the major cities. This has been highlighted by the increases in violence in areas such as Edinburgh and Inverclyde (with	There will be an evolving array of projects developed over the next year, many of which are in planning and engagement stage at present, including (but not exclusively).  Case management and a telephone hotline for	The current evaluation strategy requires that all projects have evaluation built into the programme of work.  Depending on the evolution, size and scale of that work will dictate the type of evaluation from a full blown outcomes analysis to a process and implementation analysis that supports the learning and development of the work.	£5k
Edinburgh					£15k
Dundee					£15k
Other Areas including Dumfries & Galloway, Highlands, Lanarkshire and north west Glasgow (Canal Ward) subject to					26.5k

<p>approved funding to deliver project</p>	<p>inspector in Dundee. Over the next year the project leads will continue to incubate opportunities with local partners in their areas as well as the wider VRU team working with local partners to develop bespoke locally delivered solutions across the country</p>	<p>increases in serious non-fatal violence of greater than 10%) as well as Dundee and South Lanarkshire (between 5-10% increase) as well as the enduring inter connected challenges that exist in areas like Dundee.</p> <p>The VRU cannot deliver intensive bespoke projects in these areas without the need to work with local delivery agents and partner organisations. It is therefore key to the delivery of evidence informed prevention that best practice and specialist support/help is facilitated together and the learning is cascaded and encouraged to be used across the whole of the country. This is demonstrated through, proposed work in Dumfries, Highlands and Ayrshire (east and north) where all be it there has been little change in the levels of non fatal serious violence. The VRU has an</p>	<p>young people involved in criminality – Dundee</p> <p>Trauma Informed approaches to reduce violence in the Highlands and Dumfries Prison (community)</p> <p>Improving the coordination of post-prison support by the third sector - Dumfries</p> <p>Desistence Mentoring Support for small/med employers in Edinburgh.</p> <p>Community Empowerment – Inverclyde. Through partnership working and support for local services in the Inverclyde Area</p> <p>Lanarkshire – working with partners (inc. police, community justice and south Lanarkshire council etc) to create new pathways for young people to keep them out of the criminal justice system</p> <p>To develop national linkages and lead the development of a</p>		
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		opportunity to encourage and support work/programme development using a light touch with little resources required.	national group to help inform strategies and policy direction in partnership key partners such as Public Health Scotland, Community Justice, Police and Government		
Violence Prevention Workshops	To aid Police Scotland in the development of local approaches in the delivery of violence prevention activity across the country	<p>The VRU have had a number of requests for help and support across the country from local policing teams and their violence reduction officers to develop locally relevant solutions in how to address some of the challenges that they face.</p> <p>With the potential of increasing or at best stagnated violence levels then the ability to cascade best practice in a locally relevant way becomes paramount as it increases both the geographic scope of delivery and the number of targeted responses</p>	<p>Deliver workshops with local teams. To all policing areas using a mix of local contacts and violence reduction officers</p> <p>Co-produce action plans for delivery at a local level.</p>	<p>Collate details on activity, the target areas and activity.</p> <p>If appropriate and resource permitting work to establish frameworks for collation of information and evaluation.</p>	VRU staff time
<b>Total cost</b>					<b>£61.5K</b>

Workstream 8: Other	Summary	Justification	Actions	Evaluation & Reporting	Finance 2020/2021
Advocacy	<p>The VRU continues to be an important voice for change and engages with thousands of partners and members of the public a year. Ranging from small scale community meetings to large conferences and workshops.</p> <p>The VRU also has a significant media presence and will continue to challenge preconceptions and represent the positive work that Scotland has undertaken and continues to do so.</p>	<p>The VRU has always been much more than a think tank but there is a limit to the reach and deliver sustained change directly with large numbers of people (exceptions include the navigator programme(s) and education – in all its guises).</p> <p>The element of the VRU being a “think and do tank” is critical in convincing services, communities and people to adopt different ways of thinking – with demonstration being seen as the highest form of proof. Challenging the narratives in the media is a vital part of change whether this be young people in criminality, employing ex-offenders, the role of the bystander, the</p>	<p>Attend meetings Press briefings Social media Community engagement Deliver workshops.</p>	<p>We will continue to capture information on the number of people we speak to and the topics discussed as well as provide a media summary connected directly and in directly to the VRU and will share this with SG.</p>	VRU staff time

		effects of alcohol and the impact of trauma. The VRU will continue to draw attention to the drivers that underpin the challenges that we all face and ensure that solutions are front and centre in the discussions and VRU evidence informed activity.			
CPD(s)	To cascade learning to partner services on the practical application of interventions/prevention activity.	<p>There is a significant turnover in staff across most organisations whereby they are focused in prevention. For example the police campus officers, or mentoring services.</p> <p>There has also been a number of new developments in both the practice and thinking in the areas of support and trauma.</p> <p>To ensure that the 'workforce' continues to be up to date on recent developments and good practice it is important to share and learn from each other.</p>	<p>The development and delivery of at least 2 CPDs</p> <p>Campus Officers – this is an ongoing commitment to support the delivery of campus officers in Scotland by given them access to training in areas such as addiction, bystander, trauma informed practices etc.</p> <p>Mentoring.- There has been a growth in mentoring across the country and there is a need to share good practice and support this vital service in the prevention of violence. This will also be an opportunity to discuss/promote the new desistence mentoring training</p>	Details of numbers, organisations and feedback from the events will be collated and shared with SG.	£10k

			programme being developed by the VRU		
Communications & Marketing, Materials	<p>Communication in all its forms is a key deliverable of the VRU.</p> <p>The VRU are committed to delivering evidence informed/good practice to prevent violence across Scotland</p> <p>The VRU will work to be highly visible across Scotland to communicate and engage with national and local partners, services and members of the public across Scotland.</p>	<p>Scotland vision and desire to be the safest small country and the best country in the world to bring up kids is a fantastic vision. However, to continue to strive towards this requires a constant narrative and promotion through various forms of media to reach the services, communities, families and individuals we hope to be part of that change.</p>	<p>Maintain IT and social media presence</p> <p>Ensure that the VRU and Scotland is reflected in a positive and honest way in the media</p> <p>Work with the media to develop the narrative around key messages which will be aligned to Scottish Government/VRU strategies.</p> <p>To develop new campaign materials to support the community, desistance, trauma and bystander work</p>	<p>Media Monitoring</p> <p>Campaign evaluations</p>	<p>Core costs approx. £10k</p> <p>Development of new materials in support of VRU campaigns/activity £40k</p> <p>Breakdown 40k: £10k-15k print and design new strategy doc</p> <p>£10k – print and design of new anti-violence posters</p> <p>15-20k – marketing costs for targeted posters – bus stops, pubs, bus, etc.</p> <p>(any underspend from the core costs will be used to supplement the targeted marketing costs</p>
Research	<p>Research and Evaluation is a key component as the VRU continues to deliver projects and test and learn ‘pilots’.</p> <p>To develop the understanding of the drivers, and the future trends in violence for Scotland.</p>	<p>There is a growing need to catalogue and report on effectiveness, good practice and learning.</p> <p>Moving the VRU from solely a ‘just do it’ organisation to an organisation that not only utilises evidence but creates evidence in support of wider changes and implementation</p>	<p>The evaluation programme will support all existing and new projects with frameworks for both analysis and data collection built into the programmes of work from the outset.</p> <p>The VRU will work in partnership with Universities across Scotland to encourage the development of externally funded research that will</p>		<p>Cost detailed on MAV submission</p> <p>The researcher will be employed by the University and not the VRU on a year to year contract for a maximum of 3 years. The partnership will be arranged by MAV and support the evaluation and research commitments of both organisations</p> <p>The match funding also allows professional support from the university from across the academic</p>



		<p>As the violence profile in Scotland is changing with the changing age/gender profile. As well as the changing UK trends in for example the drugs market, the structure of organised crime and new criminal markets and how that impacts upon wider society and violence.</p>	<p>impact on the activity of the VRU and other partners. The strong reputation that the VRU has resulted in a growing requests for VRU support for independently funded research – The VRU will only support research that is either going to push the knowledge forward or help understand the interventions better</p> <p>The proposal is that through a Knowledge Transfer partnership with a University and MAV we will be able to increase the research and surveillance function of the VRU, yet maintain the ability to evaluate the prevention activity.</p> <p>The KTP partnership with a University is a match funded activity and also secures specialist time from across the University to work on specific developments</p>		<p>disciplines for example, IT and Media, Economics, Psychology</p>
10 year strategy	To refresh the VRU strategy	There is a need to reflect the changing picture of violence and service delivery in a new strategy for Scotland. This	New 10 year plan	This was due for delivery in 2019/20 however, with staff changes and other priorities it has been pushed into 20/21	Staff time. Publishing and subsequent materials to come from the comms budget

		strategy will build on the existing strategic frame works of the multiple agencies and services with a stake in either directly in violence prevention or the underlying causes of violence. Inc but not exclusively, Public Health Scotland, Education Scotland, Community Justice and Police Scotland etc.			
Total cost					£60k

#### Financial Summary

The total cost of salaries for 2020/2021 is projected at approximately £756,469. This is an increase of £24,520 which is primarily due to a higher than expected grade evaluation from Police Scotland job harmonisation team and the 3% nationally negotiated salary increase.

Total budget requested is £1,010,500.00

Staff Role	Total On Cost (projected on salary review and final job harmonisation by Police Scotland)
Director	£101,912
Deputy Director	£82,896
Chief Inspector	£78,000
Communications manager	£74,763
Inspector	£72,000
Inspector	£72,000
Sergeant	£56,000
Project Manager	£52,120
Office Manager	£50,537

Online Development Officer	£38,747
Trainer	£38,747
Researcher	£38,747
<b>Total</b>	<b>£756,469</b>

Spend Area	Amount
Salary	£756,469
Operations	£60,531
Projects	
Dessistence Mentoring	£25,000
Trauma Informed	£22,000
Community Approaches	£10,000
One Community	£0
Bystander	£15,000
Regional Delivery	£61,500
Other (inc comms, research etc)	£60,000
<b>Total</b>	<b>£1,010,500</b>

#### **Appendix: FOR INFORMATION ONLY Adverse Community Experiences- Canal Ward**

The following paper is a copy of the place based project briefing doc for funders with indicative finance. Whilst it is still the intention of trying to secure monies elsewhere, to develop the programme into a full functioning programme of work, the VRU will dedicate some internal resource to kick off the programme of work whilst trying to secure funds.

The indicative costs highlighted in the cost is a full cost model for independent funders but can be reassessed if alternative sources or a patch work funding agreement can be established.

The funds of £6.5k outlined within the substantiate business case will not enable the full delivery of his programme of activity however, it is an enabler that will support the early stage development of this programme of activity and development of the evidence base that will support future work and funding bids

# Detraumatizing Communities

**A pilot project to address and prevent trauma in Glasgow's Canal Ward.**



31 January 2020

## Addressing trauma holistically, through a unique programme based on credible research

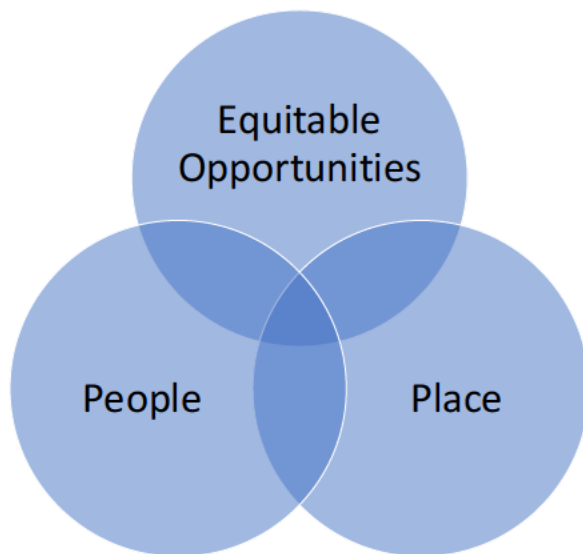
Based on a framework created by the world-renowned team responsible for the Adverse Childhood Experiences research, we are seeking investment to deliver a pilot project which will holistically address the trauma in Canal Ward in Glasgow.

While violence across Scotland has decreased over the last decade, those in the poorest communities continue to experience the same level of violence. 65% of violent incidents occur to less than 1% of the population, with the majority of these victims living in the lowest 15% SIMD zones.

Addressing violence, inequality and issues at an individual level does not deliver the kind of efficient and effective interventions that Scotland – as a progress, trauma informed country – needs in order to address the systematic violence and poverty in these communities. Seeking to address violence, drug use, mental health, physical health or unemployment at an individual level is, frankly, a poor use of money because the individual is directly affected and influenced by the lack of opportunities, poverty, violence and deprivation of the area they live in.

That's why we need interventions that support the individual at the same time as lifting the entire community.

### We will support all three areas that address and prevent community trauma



### Delivering a test and learn project and creating a template for Scotland

We will work with the community directly and other service providers to coordinate what is there already and filling the gap of what's missing.

Using a combination of **social research, individual mentoring and case work, community empowerment, and tailored interventions**, we will test multiple approaches to learn what works – adapting the leading American framework to align with what Scotland needs.

## **Addressing community trauma: 65% of violence is attributed to <1% of population**

Scotland has had a remarkable transformation over the last decade with decreasing levels of crime and violence, decreasing alcohol consumption and decreasing drug use amongst young people. However, this is population level change and not all people, families and communities have benefited from this. In some cases life has got appreciably more difficult and complex, with violence and crime being more concentrated in those living in the bottom 15% SIMD, drug deaths on the increase, increases in suicide, increasing levels of inequalities and communities feeling left behind.

Recent research from the Scottish Government has highlighted the growing geographic. It is now clear that 65% of all victims of violence can be attributed to a small population of victims living in some of the most deprived communities (less than 1% of the population).

The communities where many of the 1% reside have so many challenges, including overdoses in the streets, commonplace serious violence, homicide, and very visible poverty and desperation – having a traumatic impact on the whole community’s wellbeing. Any one of these factors can impact not just upon the levels of health and wellbeing, but also significantly impact upon the social, cultural and economic development of an area. However, each factor is rarely in isolation – the drivers that cause the problem are shared, resulting in many of the challenges existing alongside each other where their impact is multiplied.

Because these factors exist in many communities, dealing with single issues in such a complex environment can be unproductive. To address these multiple issues, we need to support the community as a whole – addressing the deep rooted issues at a community level and creating a momentum for change by supporting and delivering on the needs. In any community there are numerous services and organisations delivering specialist services, but the connections to each other and the communities can be weak.

The theory to addressing community trauma is simple. Communities are constructed of people, place and ‘culture’ and this approach will work with the community directly and other service providers to address the challenges by coordinating that is there already and filling the gap of what’s missing. Essentially there needs to be a “glue” that brings everything together to developing a sense of shared community ownership where a person centred and trauma informed practices are a standard.

## Detraumatizing Communities works at the Community and Individual level.

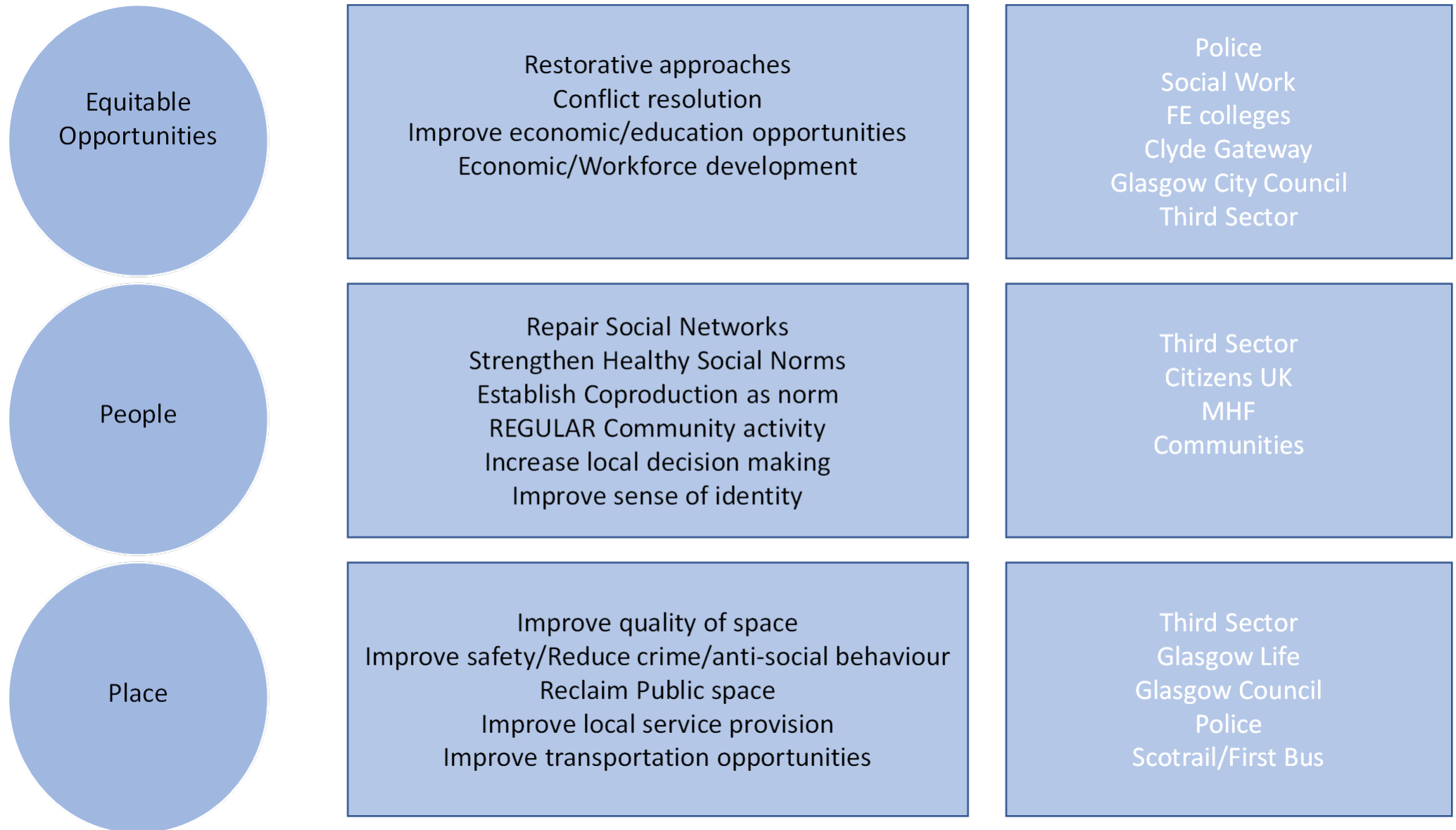
The majority of programming and intervention work in Scotland (and beyond) is concentrated at the individual and we try to 'fix people' but people are part of their community, and the relationship with their community can significantly affect the success of any intervention. The challenge is twofold: firstly it is no organisation's responsibility to deliver against the Individual, Relationship, Community and Society. Secondly most evidence based work is conducted at an individual level and very little in support of the community structures and relationships that support the change.



By working at both the Individual and Community level we work to support change in those that are traumatised themselves, by their community, and are contributing to the trauma of their communities. For example, those with significant addiction issues (alcohol and/or drugs), those who commit violence, crime and or antisocial behaviour, those with mental health issues or homeless etc. Changing one person's life can have a ripple throughout the community and becomes an embodiment of change. At the same time, supporting and creating opportunities for the whole Community to stand up and take action and not be the passive receiver of services that are not full aligned to their needs.



## Examples of practice and partnership



## Canal Ward: Area profile

Canal Ward in Glasgow includes the significantly deprived areas of Springburn, Milton, Lambhill and Possilpark.

The Canal Ward, with a population of over 25,000, contains some of the most challenging areas of Glasgow, with:

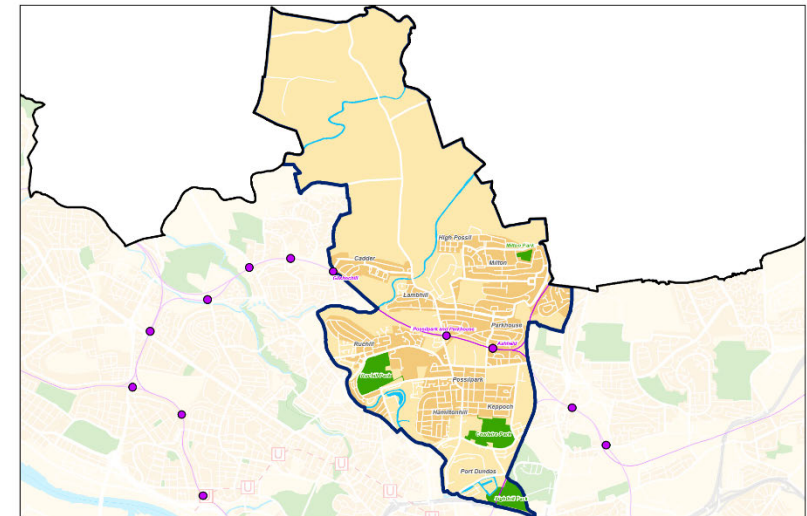
- high levels of unemployment
- income deprivation
- lower life expectancy
- lower healthy life expectancy, and
- high levels of all types of addiction

Young people are more likely to:

- live in households with low incomes
- perform appreciably worse in school with lower levels of attainment, and
- not be in employment, education or training

Glasgow City Council  
City Ward Factsheets 2017  
Ward 16 - Canal

This factsheet provides information on a variety of subjects.  
It has been prepared by Development & Regeneration Services,  
231 George Street, Glasgow G1 1RX



Not to Scale  
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Comparing against close neighbours indicates the many of the challenges including crime and health are particularly acute.

	Canal Ward	Bearsden South	Bishopbriggs Nth
Serious Violence	78	5	16
Sexual Violence	95	2	24
Theft and Housebreaking	644	208	273
Anti-social behaviour	434	71	82
Drugs Crimes	370	14	115
Weapons	95	5	28
Common Assault	420	42	94
Data	2018/2019	2017/18	2017/18

	Glasgow North West	Dumbartonshire East	Measure
Alcohol Mortality	43	26	per 100000
Cancer	783	697	per 100000
COPD	536	263	per 100000
Suicide	22.5	21	per 100000
Drug Related Hospital	320	146	per 100000
Income Deprived	17.5	8.7	%
teenage pregnancy	33	26	per 1000
Infant Developmental Concerns	25	21	%

## Key Indicators for Canal Ward vs Glasgow City

Group	ID	Indicator	Count	%	Difference from Glasgow		Time Period
Population	P1	People aged 0 - 15	2,026	18.9%		+17%	2012
	P2	People aged 16 - 64	7,148	66.6%		-5%	
	P3	People aged 65 - 74	849	7.9%		+9%	
	P4	People aged 75 and over	714	6.6%		-1%	
Cultural	C1	People from an ethnic minority	1,093	10.0%		-14%	2011
	C2	People who are married, in a civil partnership, or co-habiting	2,920	33.9%		-19%	
	C3	Single parent households	765	52.9%		+31%	
	C4	Householders living alone	2,550	23.9%		+12%	
	C5	People with religious affiliation	7,075	64.6%		+4%	
Environment/ Transport	E1	People who travel to place of work or study by walking, bike or public transport	2,950	51.0%		+1%	2011
	E2	People living within 500m of vacant or derelict land	10,631	100.0%		+66%	
	E3	Households with one or more cars	1,887	34.5%		-30%	
	E4	Overcrowded households	1,077	19.7%		+13%	
Socio-economic	S1	Owner occupied households	1,222	22.3%		-51%	2011
	S2	People with grade D or E social classification	2,321	52.7%		+55%	
	S3	People in employment	3,876	47.3%		-17%	
	S4	People claiming Employment and Support Allowance	595	5.5%		+61%	2012
	S5	People claiming out of work benefits	2,475	36.0%		+68%	
Education	ED1	Adults with qualifications at Higher level and above	2,571	29.0%		-40%	2011
	ED2	Young people not in education, employment or training	144	24.5%		+108%	
Poverty	PO1	People in income deprivation	3,760	35.0%		+64%	2012
	PO2	People of working age in employment deprivation	2,260	32.6%		+71%	
	PO3	Children in poverty	1,130	46.9%		+46%	2011
Health	H1	People in "good" or "very good" health	7,520	68.7%		-11%	2011
	H2	People limited "a lot" or "a little" by disability	3,302	30.2%		+33%	
	H3	Male life expectancy	66.2 years			-8%	2008 - 2012
	H4	Female life expectancy	73.1 years			-6%	

# The programme: Addressing and preventing trauma through a multi-strand approach

Our programme works in three key areas, working together to achieve real change in communities and lift people out of poverty.

## 1. Universal linkup: Case work and mentoring to improve access to services

We will work with individuals on a 121, non-judgemental and voluntary basis to identify individual needs and then support them to address those. We will use the strength of the one-to-one caring relationship to facilitate, encourage, support and empower individuals to take control of their lives and make informed decisions that are in their best interest.



Our role is to be a universal link up between individuals and all services operating in the community. We will help individuals navigate the services available to them, and provide practical help in accessing them. This will improve the effectiveness of existing services, and has been proven to address individual needs faster.

## 2. Test and learn implementation of interventions

Supported by a social researcher, we will identify the missing interventions in the community and either bring those interventions in, or facilitate better access to them.

This is a test and learn project. We plan to try as many interventions as possible, based on feedback from the community. This may include:

- Safer Drug Consumption Facility
- Case work support /Navigation/mentoring
- Bystander Training
- Schools support (primary and secondary)
- Creating Safe Spaces and Asset Based Community Development
- Naloxone training
- Mental health support workers
- GP and Community Navigators

## 3. Improving community empowerment

The success of this programme is in the ownership and empowerment of the community. The programme is designed to lift up the whole community, by working holistically to improve the lives of individuals and the community they live in at the same time.

That's why we'll provide the resources, skillset and support to community organisations to help them improve their area. We aim to augment what's already happening in the community through tailored approach to join up services.

## Based on strong research, delivered by a compelling partnership

Detraumatizing Communities is based on research from the team behind Adverse Childhood Experiences. It will be delivered in partnership by two organisations with proven track record in supporting individuals and communities.

The detraumatizing communities framework comes from the American team behind the initial Adverse Childhood Experiences research. They created a new approach – **Adverse Communities Experiences** – by collating effective practice in the areas of People, Place and Equitable opportunities (culture) and analysed the potential effect in applying multiple intervention strands at the Individual and Community level to achieve a larger collective gain. The theory behind this approach is strong and is based on existing projects but we will be one of the first to put this programme of work in its entirety to the test.

We know individual interventions work, for example mentoring, street based interruption models, and asset based community development. This programme will test what is required to combine the individual and community interventions effectively to deliver a collective gain across a whole community, ensuring that it is being led and designed by those that live and work in the area including some of the most vulnerable people/families.

This a model which could be a template for future work across Scotland as a major strand will focus on the integration of best practice and lesson learned into existing services and future plans such as the forthcoming Vision for Glasgow.

Scotland's narrative on becoming a trauma informed country is very positive, however, most of the action has be directed towards protecting and creating resilient young people. The impact of trauma is far reaching and can have a lifetime effect. The approach will be mainly focused at driving change at a community level, however this needs to be supported by work at an individual and a relationship level tackling the reachable moments of crisis.

Supporting this will require cultural change at a societal level to be more accepting, trauma informed and see the assets in people not the deficits. As well as working with policy and law makers to address any structural challenges that underpin the issue, such as, community narratives, safe consumption rooms, benefits and employment policies

## Scottish VRU and the Wise Group Partnership: Expertise, credibility and scale

Both the Scottish Violence Reduction Unit and the Wise Group are experts in mentoring to promote social inclusion, improve access to services and reduce involvement in crime. We are advocates for an approach that embodies both and person centred/trauma informed approach and are long standing advocates for a more preventative approach in Scotland, moving beyond ACEs and recognising that we are all Assets.

The **Scottish Violence Reduction Unit** has gained international recognition for its pioneering approach to reducing violence and their ethos and approach has now been replicated throughout the UK and beyond. SVRU delivers a Navigator programme in 7 hospitals, supporting around 2,000 people a year as well as a proven track record in Asset Based Community Development (ABCD) and gang intervention (CIRV), which was adapted from the Chicago Ceasefire programme. Committed to communities and the voices of the vulnerable the VRU has been a.

The **Wise Group's** purpose is to lift people out of poverty. We work with 50,000 individuals a year and support them in a person-centred mentoring approach. With nearly 15 years experienced supporting people affected by offending, we are experts in mentoring individuals to improve lives. We deliver the largest justice mentoring programme in Scotland (New Routes Mentoring), supporting over 800 prison leavers a year.

## Building on proven mentoring models and our core competencies

### Person-centred support on release kept Michael on the “straight and narrow”

Michael, 26, had served a string of short sentences before he started working with a Mark, a mentor on the New Routes programme. With the support of Mark, Michael has secured a two year contract to work on a construction project and is looking forward to a new life with his partner.

Michael had been in and out of prison several times, but he never left prison with the external support of a mentor. Without someone to guide, advocate, and help him make different choices, he found himself in a cycle of reoffending. Working with a mentor was a key turning point for him, saying:

“Mark used to call me to ask how I’m doing. He helped keep me on the straight and narrow.”

It’s no surprise that over 50% of New Routes customers say their mentor was the single biggest factor in the improvements in their circumstances.

### Using teachable moments as a catalyst for intervention

The Navigator programme in Glasgow Royal Infirmary deals with a variety cases ranging from gang and domestic violence, mental health, addictions and homelessness. In one case ‘Steven’ 25 presented with multiple injuries from a retribution attack. Through the programme Steven was not only able to address his addiction issues, he was able to move away from violence, gain employment and become the father that his children could be proud of.

### CIRV – Breaking the Gangs in East End of Glasgow

The VRU’s pioneering gangs intervention work used a case working partnership approach to support those wishing to leave the gangs lifestyle behind them.

Using a simple message of the Violence Must Stop, the VRU used a mix of enforcement, where necessary, and specialist support from partners across a variety of specialist services. The results were stunning with reductions in gang violence that are still evident 7 years after the programme officially ended and reductions in the numbers of young people joining gangs.

This work also saw significant shifts in community happiness with 5-10% increases in customer satisfaction in household surveys by the Glasgow Housing Association.

### Growing and Empowering Communities

In the Hawkhill area of Clackmannan, in partnership with the local community, the VRU helped empower the local community to establish a more powerful voice and broke down many of the barriers that existed between neighbours including intergenerational barriers.

This saw reductions in crime and anti-social behaviour, improvements in health and wellbeing and improvements to the physical environment through community action.

## Investment of £423k: Testing a unique proposition to detraumatise communities

The aim of this project is to test a unique proposition in Scotland, based on a new evidenced based framework from America. Over a period of 12 months, we will finesse the model of community embedded support, through project delivery, community engagement, trust building and research.

<b>Staff</b>	<b>Number</b>	<b>Total (£)</b>
Project Lead	1	43,000
Partnership Development Officer (Police)	1	60,000
Mentors	4	124,000
Social researcher		15,000
Interventions fund		70,000
Project delivery costs		40,000
Project management		26,520
Contribution to central costs		45,422
		423,942

We will work towards the following outcomes:

- Reducing Violence, Crime and Antisocial behaviour
- Improving the communities perception about themselves and the communities
- Improving the health outcomes – concentrating on addictions and mental health
- Improving the economic and socio-economic conditions that exist
- Improving the communities ability to support each other
- Empower communities and develop support mechanisms that will address the multiple challenges
- Improve the partnership working between organisation and ensure that the community is at the centre
- Develop a live learning environment where lessons learned can be case cascaded to other developments



