PREVENTING GANG INVOLVEMENT AND YOUTH VIOLENCE

ADVICE FOR THOSE COMMISSIONING MENTORING PROGRAMMES

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This guidance has been funded by and produced in collaboration with the Home Office.

Foreword

The Early Intervention Foundation (EIF) is working with the Home Office on how to prevent gang and youth violence to enable children and young people to not only stay safe, but to thrive and flourish. This first report on mentoring responds to the work of many of the priority Ending Gang and Youth Violence areas, who are interested in the potential of mentoring as a way of working with children and young people to prevent them becoming involved in gangs or helping them to find alternatives and ways out if they do become involved.

Mentoring can be a valuable part of preventative work. There is evidence to suggest that it can have positive impacts if it is delivered in the right way to the right young people. However, other evidence shows that mentoring can sometimes have non-significant impacts, and if not implemented carefully there is also the risk of causing harm. This guidance sets out the sorts of questions that commissioners, including Police and Crime Commissioners and Community Safety Managers, should be asking and the sorts of things they might need to consider to maximise the positive impact of any local mentoring provision.

This guidance is part of the EIF's "Advice" series. Our focus at the Foundation is on the flow of evidence between research, policy and practice. Our "Advice" publications are not full evidence reviews. They are designed to provide practical, timely advice to local commissioners and practitioners, drawing as robustly as possible and in a balanced way on relevant evidence, but equally on qualitative information and intelligence from local places about what they say is working for them. We hope that this guidance proves a valuable and accessible resource for those seeking to commission mentoring provision. As ever the responsibility is with commissioners and practitioners to ensure quality implementation, drawing on the best available advice and evidence but also monitoring impacts locally.

Commissioners may also wish to refer to the EIF Guidebook, which is an online resource for advice on how to commission and deliver early intervention.[1] A key feature of the Guidebook is the Programmes Library, which includes information about early intervention programmes that have been implemented in the UK. This Library will include programmes aimed at preventing gang and youth violence, including mentoring programmes.

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[1] http://guidebook.eif.org.uk/

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Introduction

Mentoring is widely used as an intervention with young people, and could be an important tool in efforts to prevent gang and youth violence. Importantly however, mentoring provision can vary significantly and the evidence on the effectiveness of mentoring is mixed. When deciding to commission and implement these programmes you should be aware of both the potential benefits and pitfalls, remembering that whilst delivered in the right way to the right young people mentoring can have positive impacts[2], it can also have non-significant[3] or harmful effects[4].

This guidance has been produced by the Early Intervention Foundation (EIF) in collaboration with the Home Office, and is intended to be a practical resource and implementation tool for local statutory commissioners. It supplements a range of broader guidance on mentoring, and has a focus on preventing gang involvement and youth violence.

The information provided draws on a combination of evidence from high-quality reviews and studies, the academic literature on youth mentoring, information from leading providers of mentoring services, and relevant reports within the field of gang and youth violence. Notably, much of the best available evidence within the field of mentoring is not specific to the United Kingdom, and comes from international evidence reviews and studies based in the United States.

What is mentoring?

Definitions of mentoring vary and programmes may take different forms (e.g. peer mentoring, adult-to-youth mentoring, group mentoring, e-mentoring) across different settings (e.g. in the community, in prisons, in schools). Often, mentoring is defined as a one-to-one, non-judgemental relationship in which an individual (the 'mentor') gives time to support and encourage another (the 'mentee'). Mentors may offer direct assistance, such as help with job searching, and/or indirect support through encouragement, acting as a positive role model, and challenging the mentee's views, for example.[5]

The potential value of mentoring to prevent gang and youth violence

Mentoring is often used to help prevent, divert, and provide ways out for young people engaged in, or thought to be at risk of involvement in gang and youth violence. As yet, evidence on how effective mentoring is in preventing or reducing gang membership is lacking. More broadly however, mentoring

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[2] For example: DuBois, D. L., Portillo, N., Rhodes, J. E., Silverthorn, N., & Valentine, J. C. (2011). How Effective Are Mentoring Programs for Youth? A Systematic Assessment of the Evidence. *Psychological Science in the Public Interest, 12*(2), 57-91; Tolan, P., Henry, D., Schoeny, M., & Bass, A. (2008). Mentoring Interventions to Affect Juvenile Delinquency and Associated Problems. *Campbell Systematic Reviews*, 2008:16.

[3] Tolan, P., Henry, D., Schoeny, M., & Bass, A. (2008); Wood, S. & Mayo-Wilson, E. (2012). School-Based Mentoring for Adolescents: A Systematic Review and Meta-Analysis. *Research on Social Work Practice*, 22(3), 257-269.

[4] Grossman, J. B. & Rhodes, J. E. (2002). The Test of Time: Predictors and Effects of Duration in Youth Mentoring Relationships. *American Journal of Community Psychology, 30*(2), 199-219.

[5] Jolliffe, D. & Farrington, D. P. (2007). A rapid evidence assessment of the impact of mentoring on re-offending: a summary. Home Office Online Report 11/07. Available from: http://resources.civilservice.gov.uk/wp-content/uploads/2011/09/rdsolr1107_tcm6-7376.pdf ; Rhodes, J. E. (2005). A model of youth mentoring. In D. L. DuBois & M. J. Karcher (Eds.), *Handbook of youth mentoring* (1st Ed.) (pp. 30-43). Thousand Oaks, CA: SAGE.

has been shown to have promising impacts on reoffending, juvenile delinquency (young people's anti-social or criminal behaviour) and associated problems.[6]

Mentoring Interventions to Affect Juvenile Delinquency and Associated Problems: A Systematic Review & Meta-Analysis

A systematic review by Tolan and colleagues (2008) found that overall, mentored high-risk young people (already displaying delinquent behaviour or at risk of future delinquency), displayed a lower likelihood of **delinquency**, **aggression** and **drug use**, and achieved better **academic results** than those who were not mentored.

- Within these outcomes, the effects of mentoring were strongest for delinquency and aggression.

- Effects tended to be stronger when *emotional support* was a key part of the mentoring provision, and when mentors were motivated to participate as part of their own *professional development* rather than just wanting to volunteer.

- Detailed descriptions of the content of the mentoring programmes evaluated were often lacking, and where there were descriptions the activities varied substantially between programmes; therefore the reviewers could not state with any certainty what the most promising features of mentoring interventions were.

Impact of Mentoring on Reoffending: A Rapid Evidence Assessment

A rapid evidence assessment by Jolliffe and Farrington (2007) found that overall, mentoring had a significant beneficial influence in reducing **subsequent offending** for individuals who were at risk of offending or had been apprehended by the police, compared to those who were not mentored.

- However, whilst mentoring was shown to reduce subsequent offending by 4-11%, this was primarily driven by studies of *lower methodological quality*. The best-designed studies did not suggest mentoring caused a statistically significant reduction in re-offending, meaning the results may have been due to chance, rather than as a result of the mentoring provision.

- Mentoring was most effective in reducing reoffending where the mentor and mentee *spent more time together* at each meeting and met at least once a week.

- Mentoring was only successful in reducing re-offending when it was *part of a wider suite of interventions*; suggesting mentoring on its own may not reduce re-offending.

- Only studies in which mentoring was still being given during the follow-up period (after the formal end of the intervention) led to a statistically significant reduction in re-offending, suggesting the *benefits of mentoring did not persist* after the mentoring ended.

Advice: These reviews show the potential value of mentoring to affect outcomes relevant to youth crime and violence. However, they also highlight the importance of giving careful consideration to the content of mentoring activities, the mentor's motivation for involvement, the frequency and duration of meetings, the use of other interventions alongside mentoring provision, the mentee's characteristics, and post-programme provision of services, all of which may explain variations in how effective (or ineffective) mentoring can be.

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[6] Jolliffe, D. & Farrington, D. P. (2007); Tolan, P., Henry, D., Schoeny, M., & Bass, A. (2008)

Commissioning mentoring programmes: practical guidance

The following guidance provides practical tips about the things to consider when commissioning a mentoring service.

1. Planning your mentoring provision

Understand who is at risk of gang involvement or youth violence in your local area, your intended outcomes, and how mentoring programmes may need to sit within a suite of carefully targeted interventions.

As a commissioner you should understand the characteristics and needs of your target group, and will need to be clear from the outset about the outcomes you expect your mentoring provision to achieve. Generally, commissioned programmes should be age-appropriate (e.g. in terms of activities selected, topics discussed, goals, travel arrangements, etc.). More specifically, programmes should consider both the overlapping and distinct experiences of boys and girls in relation to gang involvement and youth violence. The reasons why young people become involved, or are at risk of involvement, in gangs and youth violence are often complex. They arise at individual, peer, family, school and community levels and may change throughout childhood, adolescence and young adulthood.[7] Mentoring can seem an attractive option but may only be part of the solution; depending on both your target population and outcomes, mentoring may need to be considered as part of a suite of interventions (e.g. delivered alongside behaviour modification, supplementary education, or employment programmes) and a multi-agency approach.[8]

2. Mentoring for high-risk young people

Ensure that your mentoring provider has a good understanding of the risks associated with gang involvement, for both young men and young women, and is clear about safeguarding responsibilities and the role of statutory service providers.

All those who come into contact with children and families in their work have a duty to safeguard and promote the welfare of children. Your mentoring provider should have a clear safeguarding policy in place, setting out the arrangements for sharing information with children's social care if there are concerns about a child's welfare. [9]

Your mentoring provider may need to be aware of the particular drivers and risks associated with gang involvement and youth violence, as this knowledge can be used to tailor programme inductions, training, support provision, and referral pathways.

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[7] Bellis, M. A., Hughes, K., Perkins, C., & Bennett, A. (2012). Protecting people Promoting health: A public health approach to violence prevention for England. *Department of Health.* Available from: https://www.gov.uk/government/publications/a-public-health-approach-to-violence-prevention-in-england ; Lenzi, M., Sharkey, J., Vieno, A., Mayworm, A., Dougherty, D., & Nylund-Gibson, K. (2014). Adolescent gang involvement: The role of individual, family, peer, and school factors in a multilevel perspective. *Aggressive Behavior, 9999*, 1-12.
[8] Jolliffe, D. & Farrington, D. P. (2007).
[9] For more information see Working Together to Safeguard Children. *HM Government* (2013). Available from: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/281368/Working_together_to_safeguard_children.pdf

Relevant issues include (but are not limited to):

- The links between mental health, such as emotional trauma, and gang membership.[10] Mentors need to be able to identify the signs of mental health problems in young people, and know how to refer them to the right healthcare professionals. These problems may arise prior to gang involvement and/or as a consequence, and can often be the result of traumatic experiences in childhood (such as neglect or violence in the home).

- The risks facing gang-affiliated girls and young women. [11] The reasons behind their gang association, the roles played within gangs and potential pathways out of involvement may be very different to those for boys, therefore mentoring provision needs to be gender-informed if not gender-specific. [12] In particular, young women and girls may be vulnerable to gang-related sexual exploitation and victimisation.

- Stereotypical and harmful attitudes towards girls and young women. Providers and mentors also need to be alert to and appropriately challenge misogynistic attitudes and behaviours which foster violence against women and girls.[13]

- The wider peer and family networks within which the young person operates. Understanding how young people relate to their peers and family may be critical to a successful mentoring relationship. For example, it may be important to understand the young person's "status" within a gang and his or her relationship to other gang members.

- Perceived or actual threats associated with gang 'territory'. Young people associated with gangs or youth violence may find themselves at risk of harm or violence, or may perceive that they are at risk whilst travelling to or through areas seen as rival territory. Providers and/or mentors should be aware of this in selecting safe or 'neutral' meeting places and the possible impact on travel time and travel costs, as young people may avoid travelling through areas where they feel at risk.

3. Ensuring quality

Be satisfied that the provider can ensure effective practice from start to finish, has clear quality standards in place, and provides the right level of training, supervision and support to mentors and mentees.

Preparatory work and quality controls in the early stages of service provision may increase the likelihood of a successful mentoring programme.

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[10] Public Health England (2015, forthcoming). The mental health needs of gang-affiliated young people.
[11] Bellis, M. A., Hughes, K., Perkins, C., & Bennett, A. (2012); Khan, L., Brice, H., Saunders, A., & Plumtree, A. (2013). A need to belong: What leads girls to join gangs. Centre for Mental Health. Available at: http://www.centreformentalhealth.org.uk/pdfs/A_need_to_belong.pdf
[12] Khan, L., Brice, H., Saunders, A., & Plumtree, A. (2013); Southgate, J. (2011). Seeing differently: Working with girls affected by gangs. Research Paper 2011/02. The Griffins Society. Available at: http://www.thegriffinssociety.org/Research_Paper_2011_02_(updated_May_2012).pdf
[13] HM Government. A Call to End Violence against Women and Girls: Action Plan 2014. Available at: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/287758/VAWG_Action_Plan.pdf

- There should be a clear process for recruiting mentors and mentees, and potentially eligibility requirements,[14] to ensure they have the right skills or needs, motivations[15] and time to commit to the programme. The skills a mentor should possess (prior to enrolment and/or through training) will vary depending on the purpose and content of the mentoring provision and planned activities. They may require a relevant educational or occupational background, or more simply relevant life experiences, knowledge or skills. For example, the ability to listen effectively to the mentee and provide advice, advocate for the young person across services, or help them with educational or job applications.

- An induction for all participants can help ensure they understand the goals of the programme, how it will work, the scope of the mentor's role and responsibilities, and have realistic expectations.[16]

- Mentor, and if appropriate mentee, pre-programme training may increase the likelihood of effective mentoring relationships, with general recommended training topics including: programme rules, goals and expectations, mentor obligations and roles, relationship development and maintenance, ethical issues, effective closure of mentoring relationships, and available sources of assistance.[17]

- It is common practice for mentoring services to pair or 'match' youth with mentors based on demographic similarities, such as gender or ethnicity, and/or shared interests, but the evidence on which method if any is most effective is inconclusive.[18] However, there is a general consensus that prioritising shared interests and deeper considerations of compatibility as opposed to actual demographic similarity alone, is the best route forward for current practice.[19] Taking into account the mentee's preferences and speaking to all participants about their hobbies and interests, may help inform these decisions and increase the likelihood of the mentee feeling comfortable with their mentor.

Throughout the programme practical and/or emotional support (e.g. in the form of expert advice from programme staff, print and online resources, communication with other mentors) may be needed to help mentors, and to ensure mentees are directed to relevant services and sources of information.[20] Supervision and monitoring of mentors and mentor-mentee relationships can help ensure the programme is being implemented as intended (minimising the likelihood of errors and/or deviations), and the effective co-ordination of the wider package of preventative services if provided.

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[14] MENTOR: The National Mentoring Partnership (MENTOR), (2009). Elements of Effective Practice for Mentoring (3rd Ed.). Available at: http://www.mentoring.org/program_resources/elements_and_toolkits
[15] Tolan, P., Henry, D., Schoeny, M., & Bass, A. (2008).
[16] MENTOR, (2009), p.5.
[17] MENTOR, (2009), p.9.
[18] For example: Blake-Beard, S., Bayne, M. L., Crosby, F. J., & Muller, C. B. (2011). Matching by Race and Gender in Mentoring Relationships: Keeping our Eyes on the Prize. *Journal of Social Issues, 67*, 622-643; de Janasz, S. C., Ensher, E. A., & Heun, C. (2008). Virtual relationships and real benefits: using e-mentoring to connect business students with practicing managers. *Mentoring & Tutoring: Partnership in Learning, 16*, 394-411; Rhodes, J. E., Reddy, R., Grossman, J. B., & Lee, J. M. (2002). Volunteer mentoring relationships with minority youth: An analysis of same- versus cross-race matches. *Journal of Applied Social Psychology, 32*, 2114-2133.
[19] DuBois, D. L., Portillo, N., Rhodes, J. E., Silverthorn, N., & Valentine, J. C. (2011); MENTOR (2009), p.12-13.
[20] MENTOR, (2009), p.14.

All of these elements combined may contribute towards mentoring relationships being adequately sustained for the duration of the programme. This is important as there is evidence to suggest that programmes may be more effective when mentors and mentees meet more frequently and for longer sessions.[21] Conversely, short-lived mentoring relationships may have detrimental effects for some young people, with one highly-cited evaluation[22] of a randomised controlled trial finding significant declines in the self-worth and perceived academic competence of mentees in relationships that terminated prematurely within three months. The mentoring relationships that were most likely to break up involved mentees who had previously sustained emotional, sexual, or physical abuse, and/or were aged 13-16 years old. Whatever the reason for the conclusion of a mentoring relationship, service providers should be able to facilitate this in a way that enables mentors and mentees to reflect upon their experiences and end on a positive note, to avoid feelings of disappointment or rejection.[23]

4. Peer mentoring, ex-offenders as mentors, and peer-group interventions

Be confident that the provider takes due care with recruitment of peer mentors to ensure that they are suitable for the role, the right monitoring, risk assessment and support systems are in place, and that they do not model or encourage inappropriate or delinquent behaviour.

There is some evidence to suggest that peer mentoring in general can have beneficial effects for mentees and mentors,[24] and that older peer-to-youth mentoring relationships may have comparable effects to adult-to-youth mentoring relationships[25]. However research is not conclusive, and there are a number of potential challenges involved in using peer mentors, ex-offender mentors, and group interventions with high-risk youth, which need to be considered.

Providers should pay special attention to the recruitment and training of peer mentors to ensure they have the maturity and capabilities to mentor same age or younger peers, and not become overwhelmed when working with 'difficult' mentees (e.g. who may have behavioural or mental health problems).[26] Some reports suggest that there is a danger of programme effects shrinking or becoming negative if insufficient support is provided, and therefore supervision and monitoring systems may be needed to ensure peer mentors do not model deviant behaviour,[27] e.g. by telling inappropriate jokes, or normalising/glamorising past gang involvement, violence or delinquency.

Providers will need to develop acceptance criteria and risk assessment procedures for ex-offenders who apply to be mentors; these will vary between organisations according to factors such as who the service is aimed at, where it is being delivered, and the requirements of partner organisations. All employees and volunteers working with children or vulnerable adults will need to undergo vetting and security

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[21] Jolliffe, D. & Farrington, D. P. (2007).
[22] Grossman, J. B. & Rhodes, J. E. (2002).
[23] MENTOR, (2009), p.16-17; Philip, K., Shucksmith, J., & King, C. (2004). Sharing a laugh? A qualitative study of mentoring interventions with young people. The Joseph Rowntree foundation. Available at: http://www.jrf.org.uk/publications/mentoring-vulnerable-young-people
[24] Karcher, M. J. (2007). Cross-Age Peer Mentoring. Youth Mentoring: Research in Action, Issue 7. MENTOR/National Mentoring Partnership. Available at: http://www.mentoring.org/downloads/mentoring_388.pdf
[25] DuBois, D. L., Portillo, N., Rhodes, J. E., Silverthorn, N., & Valentine, J. C. (2011).
[26] Karcher, M. J. (2007).
[27] Karcher, M. J. (2007).

checks. The latest information can be found on the Disclosure and Barring Service website[28]. Clinks, a national organisation that supports work delivered by the voluntary and community sector within the criminal justice system, is a valuable source of further advice and guidance on peer support[29].

More broadly, whilst not specific to mentoring there is evidence to suggest that some peer-*group* interventions with high-risk youth may contribute to increases in, for example, problem behaviour, delinquency and substance use, through 'peer contagion'.[30] Therefore if opting for a peer-group intervention where an individual or individuals mentor a group of high-risk youth together, additional checks may need to be in place to ensure the mentees do not encourage deviant behaviour amongst themselves.

5. Monitoring impact and delivery

Ensure that there is regular and effective collation of data and monitoring of processes and impacts, to enable both internal and external evaluation.

If you have commissioned a mentoring service then you will be keen to demonstrate its value or keen to know if it is not succeeding. Knowing whether the mentoring provision you have commissioned has had a positive impact is obviously crucial, but is not always easy to ascertain. The EIF Standards of Evidence can help you think about the different types of evidence your commissioned service might able to provide, as well as ways in which you can support your provider to demonstrate impact more effectively.[31]

The EIF evidence standards range from 0 (no logic model or evidence of outcomes or impact) through to 4 (multiple high-quality evaluations – Randomised Control Trials (RCTs) or Quasi-Experimental Designs (QEDs), showing consistently positive impacts across populations or environments).

Realistically, your mentoring provision is unlikely to have reached the stage of multiple RCTs, or even of one RCT. However, as a minimum, you should expect that:

- The specifics of how the intervention will be delivered and to whom are well-defined;

- The intended short term and longer-term outcomes are clear;

- Outcomes are monitored using objective, transparent and reliable measures; and

- Outcomes are monitored once the programme has come to an end (and, where possible, beyond the end of the programme).

Mentoring services and other interventions may be quite short in duration, yet the outcomes that you are interested in improving might be much longer-term. It is therefore beneficial if long-term outcomes for the young people who participated can be tracked.

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[28] https://www.gov.uk/government/organisations/disclosure-and-barring-service
[29] http://www.clinks.org/sites/default/files/Volunteer_Peer_Support.pdf
[30] Dishion, T. J., McCord, J., & Poulin, F. (1999). When Interventions Harm: Peer Groups and Problem Behavior. *American Psychologist, 54,* 755-764.
[31] http://guidebook.eif.org.uk/the-eif-standards-of-evidence

- Longer-term follow-ups may require analytical expertise as well as data tracking and collection, so an academic partner or engagement with the Ministry of Justice data lab or other agencies may be needed to help plan and complete the work.

- There are a range of organisations that provide advice and support for monitoring and evaluation besides the Early Intervention Foundation, such as New Philanthropy Capital, the National Centre for Social Research, Research in Practice, the Social Research Unit, Project Oracle and the National Children's Bureau.

- Longer-term follow-up would help you and your provider understand whether any beneficial effects of mentoring were limited to the mentoring period[32], and whether impacts were sustained, improved, or worsened.[33] This can help inform decisions about whether other services or support may be needed after the formal mentoring period has ended.

The other important consideration is the quality of implementation: the degree to which the intervention was implemented to the quality and as specified by the programme developer. [34]

- Without an understanding of deviations from the way in which the intervention was intended to be delivered, it is impossible to understand whether: (a) any lack of impact was due to poor implementation or to inadequacies in the programme itself, and (b) whether any beneficial impacts might have been improved had the programme been implemented fully.[35] Related to this are the risks of rejecting a potentially effective intervention as ineffective, or wasting resources in replicating or scaling-up a programme in a different way to which it was previously delivered.

- Additionally, if your mentoring service was delivered as part of a wider suite of interventions, analysing how these interventions are delivered can also help understand which specific components or package of components contributed to the observed outcomes.[36] Ideally, records should be kept of any programme deviations (planned or unplanned) or barriers to implementation. This is sometimes called a process evaluation. At the very least, any significant deviations (for example, fewer sessions than planned or replacement of face-to-face meetings with phone contact) should be recorded.

Together with programme costs, careful monitoring and evaluation can help inform decisions about whether to re-commission, scale-up, or decommission.

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[32] Jolliffe, D. & Farrington, D. P. (2007)
[33] McCord, J. (1978). A thirty-year follow-up of treatment effects. *American Psychologist, 33*(3), 284-289.
[34] Carroll, C., Patterson, M., Wood, S., Booth, A., Rick, J. & Balain, S. (2007). A conceptual framework for implementation fidelity. *Implementation Science, 2*
[35] Carroll, C., Patterson, M., Wood, S., Booth, A., Rick, J., & Balain, S. (2007).
[36] Jolliffe, D. & Farrington, D. P. (2007)

CHECKLIST: Choosing, commissioning and evaluating a high-quality mentoring service

1.   Choosing a programme: population, intervention, outcomes, evidence

Be confident if....

- The target population for the mentoring programme is clear: whether it is designed for young people generally or for specific at-risk or high-risk sub-groups; whether it is appropriate for all age groups, boys and girls.

- It is clear how the intervention should be delivered, including:

    a) content, what are the planned mentoring activities or topics for discussion, which areas (if any) can be tailored to the individual;

    b) the type of mentor that is eligible (e.g. adult, peer, ex-offender) and if training is required;

    c) the planned frequency of mentor-mentee meetings, duration of each meeting, and length of relationship;

    d) whether it should be implemented alone, or in conjunction with a wider package of services.

- There is a clear link between what will be done and the expected outcomes, and whether the outcomes relate to immediate, short-term, or long-term improvements. The outcomes should also be relevant to your target group.

- The programme has been evaluated robustly and shown to have a positive impact on the relevant outcomes. See the EIF Standards of Evidence for further guidance on how to identify the quality and strength of a programme's evidence base. It is important decisions are based on the best available evidence.

Be wary if…

- The programme's target population is not specified, is unclear, or is different to the group you plan to work with. *Some programmes are designed to only be delivered with certain types of participants, and some may work differently for various sub-groups. Contact the programme developer or provider if possible to get more information, and check programme evaluations for evidence of transferability.*

- It is not clear how a part or all of the intervention should be implemented, in relation to content, mentor eligibility, training, frequency of meetings and duration of relationship, and other services. *Contact the programme developer or provider for more information, and be careful if providers are adding components, even if based on professional judgement, as the effects of these additions may not have been evaluated*

- There is no explicit, reliable link between what will be done and the expected outcomes, the programme's outcomes are unclear, or are not relevant to the needs of your target population.

- The programme has not been evaluated robustly, or has evidence of harmful effects. *Some programmes may only have lower level evaluations available, and should not all be avoided for this reason alone; however, it is important to be aware of the risks involved in implementing a programme without a robust evidence-base, and to have a strategy in place for carefully monitoring outcomes if implemented, to avoid causing harm or wasting resources on an ineffective intervention.*

2.   Commissioning a service: funding, risk management, service delivery

Be confident if....

- You know who is funding the service, and there is an appropriate level of resources available (including staff) to deliver and sustain the programme.

- The service provider has a clear risk assessment system in place to: identify staff and prospective mentors who may have failed disclosure and barring checks; recruit and monitor mentors who may have a criminal record but are still eligible (e.g. in the case of ex-offender peer mentors); ensure there are clear safeguarding policies for staff and mentees.

- There is provision for statutory services to be involved in the care of high-risk mentees, and that staff and mentors know which services to refer young people to. There are clear referral pathways to other relevant services (e.g. mental health), and appropriate management and monitoring systems in place if the programme is offered as part of a wider intervention package.

Be wary if…

- There is no reliable or sustainable funding in place. *You need to be aware of the projected costs and benefits from the outset, to avoid wasting time and resources, and the incompletion of a programme.*

- The service provider has no or an inappropriate risk assessment system in place, or without a process to review assessments regularly. *This could put staff, mentors, and mentees at risk.*

- The need for provision of statutory services is ignored, particularly in the care of high-risk mentees. Mentors are left to deal with all mentee problems that arise or have no planned referral pathways to other services. *You need to be clear what is within and outside of the scope of the mentor's role; the problems faced by young people are likely complex and multi-layered, therefore services need to be planned accordingly.*

- There is a clear recruitment process for mentors and mentees that is safe and effective, and meets the programme's eligibility requirements. Processes are in place to ensure mentors have the right skills, experience and motivations, and the time to commit for the duration of the programme.

- There is an appropriate system of matching mentors and mentees, preferably with consideration of shared interests, based on the programme specification & evaluation.

- Mentors and mentees receive an appropriate induction about programme goals and how it will work, with training provided if necessary (covering e.g., programme rules, mentor obligations & roles, ethical issues, relationship closure, available resources).

- The service is implemented as close to the programme description as possible, with mechanisms in place for monitoring fidelity that can identify deviations from the programme & if necessary include processes for getting mentor/mentees back on track.

- There is appropriate supervision and a wider support network in place for mentors to ask for and/or share advice.

- There is a clear strategy for dealing with 'failed' mentor-mentee relationships and/or relationships that end prematurely (e.g. because participants did not get along, or did not have the time to commit), and a clear strategy for the closure of mentor-mentee relationships generally.

- There is an unclear, inappropriate, or unspecified recruitment process for mentors and mentees. *Programmes need to be delivered in the right way by the right people to maximise the likelihood of achieving the outcomes specified, and to avoid potentially causing harm through e.g., mentors letting mentees down (or vice versa) by not finishing the programme, or mentors not having the rights skills to offer advice.*

- Mentors and mentees are inappropriately matched. *Inappropriate matches may cause relationships to break down early, or fail to achieve maximum impact.*

- There is a failure to manage expectations about programme goals and processes, or to provide appropriate training.

- The service is implemented differently to the programme description. *Deviations may result in the programme not achieving maximum impact, or may have unintentional or even harmful effects*

- There is no strategy for dealing with the end of mentoring relationships, including those that end prematurely. *You want to ensure mentees and mentors can reflect upon what has been achieved, and avoid leaving either party without appropriate support or contacts, particularly if the mentee needs to continue receiving other services.*

3. Evaluating a commissioned service: monitoring processes and measuring impacts

Be confident if....

- The main components of implementation and delivery are monitored and recorded through transparent, reliable, and objective means, from recruiting participants through to the end of the programme.

- There is a transparent record of any deviations made (planned or unplanned), to better inform evaluations of what's worked and what hasn't, and to develop strategies for overcoming or preparing for barriers to implementation.

- All programme impacts are recorded, including non-significant and harmful effects.

- Post-programme follow-up is incorporated where possible to monitor whether outcomes are sustained, improve, or worsen following the end of the intervention(s).

Be wary if...

- No records or poor records are kept. *This creates poor feedback and evidence pools for decisions regarding programme impacts and whether to scale-up, re-commission or decommission.*

- No records are kept of deviations. *This may provide inaccurate information on programme impacts for those intending to implement the programme as originally specified and may hinder developing strategies to overcome implementation barriers.*

- Non-significant or harmful effects are not recorded. *The risks and problems facing young people are often multi-faceted-programmes need to be evaluated within the full context of harms, costs, and benefits.*

- There is a failure to measure all relevant outcomes, or impacts are only assessed immediately following the end of the programme where longer follow-ups were possible.

Glossary

Meta-Analysis: A meta-analysis is the statistical combination of results from two or more separate studies, and often forms part of a systematic review. By pooling results from different studies of a similar intervention, meta-analysis aims to produce an overall estimate of the effectiveness of that intervention, reflecting the research as a whole.

Quasi-Experimental Design (QED): Quasi-experimental designs can look similar to randomised controlled trials, in that they often have an intervention and a comparison group. Importantly, the key feature distinguishing a QED from a RCT is that they do not *randomly* allocate participants to each group. Instead, they use statistical methods to ensure that the comparison group looks as similar as possible to the intervention group, or that any differences in outcomes which might be caused by differences between the attributes of the two groups are stripped out. Unlike RCTs, which are considered the 'gold standard' approach for understanding intervention effectiveness and 'what works', QED studies are generally not as reliable at indicating whether an intervention *caused* any changes in the observed outcomes. Whether the results of a QED study are reliable in terms of assessing intervention effectiveness can only be judged on the basis of the methods and circumstances in that particular study.

Randomised Controlled Trial (RCT): An experimental study in which participants are *randomly* assigned to a programme/intervention or a comparison/control group (which may receive a different programme/intervention, nothing at all, or be placed on a waiting list). Apart from systematic reviews and meta-analyses, RCTs are considered the best study design for understanding 'what works' and assessing effectiveness. This is because random assignment gives researchers confidence that the participants will generally be very similar across the two groups in terms of their attributes and pre-intervention outcomes. Hence the outcomes shown by the comparison/control group participants should offer a reliable indicator of the outcomes that the programme/intervention group participants would have shown without the intervention.

Rapid Evidence Assessment: A quick overview of existing research and synthesis of the available evidence to answer a research question. They aim to be rigorous and explicit in the methods used, but are often produced within a restricted time frame and therefore may not be as comprehensive as a full systematic review.

Statistical Significance: The likelihood that a result or relationship seen in a set of data is caused by something other than random chance. Typically, researchers would look at the 'p-value' of a result to determine its statistical significance. A 'p-value' is the probability that the pattern in the data would have occurred if there was actually no relationship at all. It is therefore the probability that random chance could explain the result. In general a p-value lower than 0.05 (5%) is used as the threshold for statistical significance, meaning that there is only a 1 in 20 chance that the result seen in the data could have happened by chance.

> *Example*: 100 young people are randomly allocated to receive mentoring or nothing for six months. After six-months, the difference between the levels of aggression displayed by mentored youth and non-mentored youth was 'statistically significant': its p-value was below 0.05. This gives a researcher confidence that the effect seen represents a genuine difference in outcomes, rather than a random event; hence repeating the study with a different sample of participants should not give a substantially different result.

Systematic Review: A systematic review attempts to identify, appraise and synthesis all of the empirical evidence that meets pre-specified eligibility criteria to answer a research question. Considered the most robust method for reviewing evidence, they reduce bias in the way studies are found, included and synthesised. They can help identify trends across and between studies, as well as gaps in the evidence base.