Back from the Brink

How Fairbridge transforms the lives of disadvantaged young people

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# BACK FROM THE BRINK

## HOW FAIRBRIDGE TRANSFORMS THE LIVES OF DISADVANTAGED YOUNG PEOPLE

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1. Purpose of this report

This report brings together findings from three evaluation studies of Fairbridge conducted over the past decade.

Fairbridge aims to give disadvantaged young people the self-confidence and skills they need to change their lives. Fairbridge programmes aim to improve young people’s personal and social skills so that they are able to make gains in employment, education, training, and other practical matters. The theory is that ‘soft’ outcomes in personal and social skills therefore drive ‘hard’ outcomes in improvements in the life of the young person.

This report takes a critical look at the data from three independent studies to test this theory. Each study has followed the progress of a cohort of disadvantaged young people taking part in Fairbridge.

Each of the studies has been reviewed with two key questions in mind:

a) What difference does Fairbridge make to the lives of disadvantaged young people?

b) What are the factors within the Fairbridge approach that make the difference?

The high prevalence of disadvantaged, disaffected, and excluded young people is a serious problem in our society. Unfortunately, there is no agreement about what interventions work best in helping young people to improve their lives and to engage in mainstream society. Fairbridge offers one approach. In this report, we explore whether the approach works and how. The results are of interest not only to Fairbridge itself but also to the broader policy and practitioner community.

2. About Fairbridge

Hard to reach young people

Fairbridge works with young people whose challenging circumstances or behaviour make it difficult for schools and other organisations to engage with them.

There are, broadly speaking, two kinds of presenting needs among young people who come to Fairbridge. The first relates to behaviour, such as involvement in crime, drug use, poor motivation and lack of direction. The second relates to circumstances, such as being homeless, a victim of physical or sexual abuse, or lack of psychological support due to family breakdown.
How Fairbridge works with young people

Fairbridge aims to make young people ‘fully accountable’ for their actions and ‘self directed’ in their behaviour.

Fairbridge programmes begin with an access course. This involves challenging activities in a residential experience in a new environment. Young people then move into a follow-on programme of different activities tailored to their needs. The Fairbridge Programme uses Kolb’s Learning Cycle in which young people learn to ‘plan’, ‘do’, ‘review’, and ‘apply’ in a continuous process of improvement.¹

The goal of the programmes is to improve young people’s personal and social skills. Fairbridge believes that there are nine ‘primary life skills’: communicating, establishing interpersonal relationships, managing feelings, understanding and identifying with others, understanding social values, negotiating, problem solving, planning, and reviewing.

From these primary life skills, Fairbridge encourages young people to develop ‘secondary life skills’ in four main categories: independent living, recreation and community, employability and learning. Fairbridge looks for positive outcomes in its work with young people, helping them to gain qualifications, take skills courses, volunteer for charities, or go back to school.

Under 16s and 16+

Fairbridge works with young people from the ages of 13 to 25.

Programmes for young people aged under 16 differ from those who are aged 16 and over. For those under 16, the young people have a ten day access course spread over a period of four to six weeks. For those aged 16 and over, the access course takes place over five consecutive days. Follow-on activities for these groups are also delivered separately.

3. Evaluation method

Evaluation in Fairbridge

Fairbridge itself uses a learning cycle to improve its performance by challenging what it does and how it works. A passion for self-improvement has helped it to become one of the leading UK youth charities. Fairbridge has done much to improve the methods it uses to gather information on the young people it works with.

The research described here synthesises results from three research studies. The first undertaken from 2000 to 2003 enabled the development of a clear theory of change for Fairbridge, the development and piloting of research instruments, and long term tracking of 318 young people through Fairbridge (Astbury and Knight, 2003; Astbury, Knight, and Nichols, 2005). This study was followed up by two further studies: tracking 59 young

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people who attended Teesside Fairbridge in 2007 and tracking 594 young people who attended Fairbridge in Dundee, Edinburgh, Glasgow, and Tyneside in 2008 and 2009. Data from this last study was supplemented by an examination of database records of all 2235 young people who joined Fairbridge between April 2006 and March 2009.

The three studies covered similar territory but are not always directly comparable with one another since they sometimes used different instruments and coding categories to collect data. Nevertheless, we have been able to compare results from the studies to answer the questions we set ourselves, and the fact that we are drawing on three studies increases our confidence in the results reported here.

An ideal methodology for a study like this would rely on comparing a young person who attended Fairbridge with one who did not. Having an experimental group and a control group design is the gold standard in longitudinal research of this kind. We had to rule this out on the grounds of expense.

The current studies use the next best method. This is known as the ‘one sample-replicate measures’ method, in which the young person acts as his or her own control and differences between the baseline and later periods are measured using identical criteria at each stage (Siegel and Castellan, 1988). The methodology is based on a ‘before’ and ‘after’ technique in which identical measures of personal and social skills are used during the young person’s first week at Fairbridge and at successive points while they are with the project as well as afterwards. The method then tests whether an improvement in personal and social skills increases the likelihood of obtaining a job, returning to school, becoming a volunteer or some other positive outcome.

Theory of change
Fairbridge has developed a ‘logic model’ of change that may be represented graphically as follows:

The flow in the diagram moves from left to right. The starting point on the left is the characteristics that young people have when they come into Fairbridge. In the middle, there are the activities that Fairbridge undertakes. On the right are the differences

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2 Appropriate statistical tests to measure changes include Repeated Measures Analysis of Variance in the case of parametric data and the Pairs Test in the case of non-parametric data.
made. Here, the theory is that gains in ‘primary’ personal and social skills are followed by gains in ‘secondary’ skills such as going back into education.

The key question to be answered by this report is ‘Does the theory of change work?’. This will enable us to answer our two key questions for the current study:

a) What differences does Fairbridge make to the lives of disadvantaged young people?

b) What are the factors within the Fairbridge approach that make the difference?

4. Who comes to Fairbridge

The Fairbridge database

Fairbridge records details of all young people that join. This is done systematically using common criteria so that it is easy to find out what kinds of young people attend Fairbridge.

The young people were referred from a range of different agencies, including schools, youth offending teams and social services. Young men outnumbered young women in a ratio of three to one. The age range was 13 to 25, but 90 per cent were under 20, and three-quarters aged 17 or less. The commonest age for people to join Fairbridge was 14.

Presenting needs

The database also recorded ‘presenting needs’. These were the issues, difficulties and problems in behaviour or circumstances that people had when they arrived in Fairbridge.

The distribution of presenting needs among 594 who formed part of the four-centre study (Dundee, Edinburgh, Glasgow and Tyneside) in 2008 and 2009 is shown in the table on the right. In the left hand column, we set out the characteristic and in the right hand column the prevalence of that characteristic among the young people.

It is evident from the table on the right that the commonest problem is low self-esteem, which is experienced by more than three-quarters of the young people. More than half have low key skills. A
third need help with numeracy and literacy, while more than a quarter have a history of alcoholism, drug misuse and aggressive behaviour. A quarter has ESF disability.

One-in-six display offending behaviour and a similar proportion has a ‘temporary mental health issue’. There are many other less common issues present, such as coming from a workless household, being asthmatic, being homeless, in care, being a victim of bullying and others.

The statistics presented so far are sufficient to suggest that the Fairbridge population is highly disadvantaged. But the situation is more serious than these figures suggest because presenting needs rarely came singly. Most people had multiple presenting needs. Fairbridge defines ‘multiple presenting needs’ as having three or more. On this basis, four-fifths (81 per cent of the 594 young people) would be classed as having multiple needs.

The following histogram shows the full distribution of presenting needs among Fairbridge young people.

The mean number of presenting needs was 4.8 and the standard deviation is 2.6. It follows that in a normal distribution, two-thirds of the Fairbridge population is likely to have between 2.2 and 6.0 presenting needs.

The distribution of presenting needs is close to being normal. The curve is clearly bell shaped, though there is a longer tail on the right hand side, than on the left, showing that there are a minority of young people with a large number of presenting needs.

The Fairbridge population can be divided broadly into four quartiles. The lowest quartile includes those with two or fewer presenting needs, the second quartile with three or four, the third quartile with five or six, and the highest quartile with seven to sixteen. It is evident that this last quartile has very high presenting needs indeed.

Was there a pattern among the multiple presenting needs? Based on the way that different presenting needs occurred in young people, we were able to find six clusters of commonly occurring presenting needs.
The first was a ‘skills cluster’. Young people in this cluster typically had low-key skills, needed help both with numeracy and literacy, and had low self-esteem.

The second was an ‘abuse cluster’. Young people here had been victims of sexual abuse, victims of peer abuse, were prone to self-harm and had temporary mental health issues.

The third cluster was a ‘substance abuse cluster’. Young people here tended to have alcohol addiction and be drug users; they were also likely to be homeless.

The fourth was a ‘disability cluster’. Young people here were classed with ESF disability and were prone to ADHD.

The fifth was a ‘law cluster’. Young people here tended to be classed as aggressive and as offenders.

The sixth was a ‘care cluster’. Young people tended to be in care, or ex care, and come from workless families.

These categories are based on statistical clustering and are tendencies, rather than absolute types. It was possible to fit three-fifths of the Fairbridge population into one of these types. The value of this approach is that it enables us to see whether some types of young people are more likely than others to respond to the Fairbridge approach.

5. What happens as a result of Fairbridge

In this section, we look at the progress young people make as they pass through Fairbridge. We examine gains in personal and social skills and see whether advancing such skills lead to positive outcomes for young people, such as gaining a job, undertaking training, or becoming a volunteer.

The study that gives the most detailed insights into what happens to young people as they go through Fairbridge was that of 318 young people who attended Cardiff, Glasgow, Kent, and Tyneside. It examined the progress of young people from a number of different angles. It took account of the views of the young people themselves, the staff that worked with them and the interviewers who asked them questions.

Measuring personal and social skills

This study also was responsible for the development of a successful instrument to measure young people’s perception of their personal and social skills. This is called the ‘Who are you quiz?’ In the quiz each young person completed a series of statements and was asked to rate ‘how good am I at’:

1. Letting other people know what I mean
2. Understanding what people are saying to me
3. Getting on with people
4. Making and keeping friends
5. Keeping my feelings under control
6. Understanding why I like some people and not others
7. Understanding that different people have different ways of thinking
8. Sorting problems out
9. Understanding other people’s point of view
10. Give and take
11. Thinking and planning ahead
12. Learning from my successes and mistakes
13. Accepting my share of the blame when things go wrong
14. Thinking through what will happen to me and other people before I do something

In answering the quiz, the young person was asked to choose from one of the following categories:

1. Very good
2. Good
3. OK
4. Could be better
5. Need to work on this

The quiz was developed using a theoretical framework derived from neuro linguistic programming, and was designed to test the nine primary personal and social skills that Fairbridge considers vital to the development of young people. Drafts of the quiz were piloted with the staff and young people of Fairbridge to ensure that they felt that it was measuring something useful and could be administered easily without too much disruption to the group.

In the Cardiff, Glasgow, Kent, and Tyneside study, the ‘Who are you? Quiz’ was administered on entry, after one week when the young people had attended their access course and four months later.

**Short term gains**

After one week, the test results showed an across-the-board improvement of 13 per cent in personal and social skills. However, this figure masked important variations between young people in Fairbridge. Further analysis revealed that 30 per cent of young people had made ‘significant gains’ in personal and social skills, and 40 per cent had made ‘some gains’, while 30 per cent had made ‘no gains’ (and in a small number of cases gone backwards).

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4 A reliability analysis showed that the 14 items on the test were closely related, so that a high score on one answer would predict a high score on all the others (Alpha = 0.875). This justified adding the test scores of individual items together to create a combined scale of personal and social skills.
Medium term losses

However, these good results did not last. When the young people completed the ‘Who are you? Quiz’ at four months, mean personal and social skill levels had regressed to where they had been at the beginning. Some of the young people were at a lower point than they had been when they joined Fairbridge.

These results were troubling. One interpretation was that Fairbridge offered an injection of high energy that caused young people to be optimistic about their situation, but this optimism did not last when young people were confronted with the objective difficulties that they were in.

The Teesside study, which followed the progress of 59 young people in 2007, threw more light on this phenomenon.

This study involved young people completing the ‘Who are you? Quiz’ on six occasions, first at the beginning, then after one week, and thereafter at three-monthly intervals until 13 months.

The results show a gain after one week, but a dip after four months to a score lower than the baseline. However, scores gradually picked up again so that after 10 months they exceed the score at the baseline and continue to rise.

The consistency with which this trend took place across the whole cohort is quite remarkable. Almost all the young people appear to go through some variant of the pattern, with almost all of them initially experiencing increased confidence, then a dip followed by a long haul towards increased personal and social skills.

Explaining the dip

It appears that progress through Fairbridge is not linear, but curvilinear. In the early stages, it appears to be a question of ‘two steps forward and one step back’. This phenomenon is quite common in life - indeed we are all aware that progress is rarely a straightforward upward process and we backslide when we try to improve ourselves through new years’ resolutions or dieting. Such fluctuations in progress are called ‘polynomial’.  

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5 A polynomial trend line is a curved line that is used when data fluctuates. It is useful, for example, in analyzing gains and losses over a large data set. The order of the polynomial can be determined by the number of fluctuations in the data or by how many bends (hills and valleys) appear in the curve. An Order 2 polynomial trend line generally has only one hill or valley. Order 3 generally has one or two hills or valleys. Order 4 generally has up to three.
The trend line measuring the progress of young people through Fairbridge is clearly polynomial. It has two hills and one valley. It appears that something happens around the four-month mark to cause a temporary reduction in young people’s perception of their social skills. The consistency of this behaviour suggests that there are four possible explanations for this.

The first is that the support service provided by Fairbridge was weaker than it should be at the four-month stage and that the young people may be describing something about the programme, rather than something in themselves. Having considered this explanation, it was ruled out. The finding was consistent across teams in different places, and there was nothing in the organisation of the work to suggest that anything was amiss at the four-month stage. Moreover, work elsewhere has shown similar results. An evaluation of a therapeutic programme in Sweden found that in spite of gains in social behaviour, people’s self-assessment of themselves did not last. The study examined the effect of different psychotherapeutic treatments involving 405 clients over a four-year programme, testing annually. The authors concluded that the treatments were effective but there was one result that caused them considerable surprise. On a standard personal and social skills measure there was a sharp increase early in treatment, followed by a drop to below that of the original score.

The social science literature suggests three possible explanations. The first relates to the development of human groups, in which there is a well-known phenomenon that shows polynomial behaviour. Tuckman (1965) reviewed a number of studies of social group development, and found that the process of association in groups typically advanced through four stages: forming, storming, norming and performing. The storming stage is characterized by conflict with rebellions against the leader, battles between subgroups, polarized opinions, resistance to control and conflicts over intimacy being visible signs of such a stage. Unless the storming phase is successfully negotiated, the group cannot move on to the next phase. Failure to resolve the storming stage may result in walkouts, spoiled performance, or outright failure of the group to find group norms and go onto the performing stage.

The second possible explanation comes from research on attitude change, and the role played by ‘cognitive dissonance’ (Cooper, 2007). As people change, two opposing ideas may come into their mind at the same time, and the resulting conflict produces discomfort. As the new belief takes over, the conflict is resolved, and people are able to move on and make progress.

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6 We can measure the extent to which the Fairbridge data conforms to a polynomial by using Pearson’s R squared statistic. In this case the value is 0.8 for a polynomial and 0.3 for a linear trend. It is clear that the goodness of fit of the polynomial model is high for the Fairbridge data.


The third possible explanation comes from four-stage learning theory, which was originally conceived by Maslow (1943). This suggests that in order to learn something new, individuals progress through four stages. The first stage is ‘unconscious incompetence’ in which the individual neither understands nor knows how to do something, nor recognizes the deficit, nor has a desire to address it. The second stage is ‘conscious incompetence’, at which stage the individual does not understand or know how to do something, he or she does recognize the deficit, without yet addressing it. The third stage is ‘conscious competence’ at which stage the individual understands or knows how to do something. However, demonstrating the skill or knowledge requires a great deal of consciousness or concentration. The final stage is ‘unconscious competence’. The individual has had so much practice with a skill that it becomes ‘second nature’ and can be performed easily (often without concentrating too deeply). On this theory, the dip would be explained by reaching the second stage when people realize that they were not as smart as they thought they were and lose confidence as a result.

It is impossible from the data so far collected to be certain about which of these theories best fits the facts. However, what all three theories have in common is that there is a critical point in development in which disruption, and hence discomfort, is a necessary feature of progress. What Fairbridge perhaps does is to shake people out of their complacency to reveal to them that there is something important to address. Only when that disruption has taken place can a new identity take hold.

**Long-term gains**

Short-term gains in personal and social skills proved to be a good predictor of behavioural improvements in the long-term, including better performance in jobs and education, sorting out housing, and having a positive attitude towards self and others.

Evidence for this conclusion comes from follow-up interviews with 30 young people between a year and eighteen months after their initial contact with Fairbridge. The interview involved a comprehensive series of questions about the progress of the young person. This included questions on careers (jobs, training, qualifications, education, and voluntary work), personal non-career (housing, relationship with the law), motivation (goals, ambitions), confidence, positive attitudes about self and other people (self esteem, care about self, attitudes towards time keeping, open mindedness, thoughtfulness, problem solving, knowing self better, understanding other people), disposition to act (calmness, self discipline, dealing with authority, violence, alcohol, drugs, stealing), and skills (basic, vocational, life, social, and knowledge).

The interviews showed that the majority of young people had made significant gains. The main effect was in confidence (where 91.7 per cent said that Fairbridge had improved their confidence) and positive attitudes towards self (88.6 per cent had improved). However, there were also significant gains in objective factors such as career (68.2 per cent). Other effects were less dramatic but substantial. Nearly half (46.4 per

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cent) reported increased ambition, one third (33.3 per cent) reported improvements in personal non-career factors, 28.6 per cent reported increased skills, and 25.9 per cent improved disposition.

To check these claims from young people, 24 staff who had worked with them and knew their progress were interviewed and asked to make parallel ratings independently of what the young person said. In addition, the interviewers, who were all experienced social scientists, made their own ratings about the progress of the young person.

Analysis of the relationships between the ratings of the three groups showed that there was strong agreement in ratings on progress of the young person on three items: career, non career, and positive attitude towards self. Indeed, these three items were closely related to one another so that it was possible to derive a measure of long-progress in Fairbridge based on an amalgam of the three items. ¹¹

We were then able to see whether a high score on this measure was predicted by early scores on the ‘Who are you? Quiz’. We found a high correlation (r = 0.55). This finding meant that gains in personal and social skills during the access course predicted improved life circumstances more than one year later.

We were able to validate these findings in the Teesside study. In this study, we did not have the resources to conduct follow up interviews with the young people. However, we were able to compare results on the ‘Who are you? Quiz’ with outcomes as recorded on the Fairbridge database.

The outcomes recorded on the database are shown in the following bar chart.

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¹¹ Alpha = 0.8
Our next step in the analysis was to look at the distribution of positive outcomes across the sample to see how prevalent change was. For the purposes of this analysis, we omitted the ‘retained in education’ variable. The results are shown in the following histogram.

The chart shows that 22 of 59 young people attained one or more hard outcomes.

Our next question was whether soft outcomes on personal and social skills as measured by the improved scores on the ‘Who are you? Quiz’ were correlated with the results on hard outcomes (r= 0.3). Our numbers are too small to be fully confident about the results, but they were in line with what we found in the earlier study.

Enter the outcomes star

Fairbridge decided to try out the ‘Outcomes Star’ in a study of four centres in Dundee, Edinburgh, Glasgow and Tyneside. The Outcome Star is an evaluation system that was originally designed by Triangle Consulting to capture positive outcomes for service users of a housing charity, St Mungo’s. The goal was to enable the charity to demonstrate the difference they made to the lives of highly vulnerable people.

At the heart of the Outcomes Star is the idea of a ‘ladder of change’. To climb the ladder, people need to go through five stages from the bottom where they are ‘feeling stuck’ to the top where they are ‘self reliant’. The intermediate stages are ‘accepting help’, ‘believing that we can make a difference ourselves in our life’, and ‘learning how to make what we want a reality’. Although there are five stages, there are 10 rungs on the ladder - each with its characteristic description of attitudes and behaviour.

Fairbridge adapted the Outcomes Star, and called the process a ‘journey of change’. Fairbridge continued to use 10 points to measure people’s progress, though identified three ‘turning points’. The first turning point is ‘wanting change and accepting help’. The second is ‘actively taking part’, and the third ‘more self-motivated’. Fairbridge believes that most of the big changes occur between points 3 and 8 on the scale. Point 3 is when people ‘want change and accept help’ and point 8 is where self motivation has taken root and is being applied into young people’s lives.

Fairbridge used nine domains in a young person’s life to measure progress. These were: communicating, managing feelings, establishing interpersonal relationships, understanding social values, understanding and identifying with others, negotiating, problem solving, planning, and reviewing. In the test, one domain was left blank so that the young person had the option of filling in a domain that interested them. The Outcomes Star for Fairbridge is shown below:
Proponents of the Outcomes Star suggest that there are four main advantages to the use of the technique. The first is that it turns qualitative data into quantities that can be measured. The second is that people are able to locate themselves on their personal journey. The third is that results can be discussed with their key worker to identify areas for improvement. And fourth, the technique enables an evaluator to assess whether the right sort of support is being offered by the project.

In the current study, we were able to use the Outcomes Star as a way of assessing young people’s progress through Fairbridge and hence to see whether the programme is working to enhance young people’s lives.
The following column chart shows the mean scores on the nine ratings of the Outcomes Star at the baseline and two follow ups, one at three months and the second at six months.

Here we see a familiar pattern of an early increase in scores followed by a fall so that, in most cases, the mean score after six months is lower than the baseline. The one exception to this is 'establishing interpersonal relations', which runs counter to the general trend and increases throughout the period.

We can be confident about the differences between the increase between the baseline and the results at three months because the Paired Samples T Test showed both a significant correlation between the sets of scores and a significant increase across all the items. We cannot be confident about the results at the six-month level because attrition among the group resulted in small numbers taking the test at the six-month point, which meant that the results were not statistically significant.

The nine items on the Outcomes Star were closely interrelated, so that an increase in scores on one of the items predicts an increase in scores on all of the others. Indeed, the scores are so closely related that there is little merit in scrutiny of the individual items.
What is surprising about the scores are the high scores at the baseline. Fairbridge expected that the changes would occur between points 3 and 8 on the scale. In fact, the mean of the nine baseline scores is 6.57. The distribution of scores at the baseline is in the following histogram.

Inspection of the histogram shows that the commonest scores at the baseline are six and seven. Scores at six and seven typically describe stages when positive change has already begun. Stage 6 is the final stage of ‘actively taking part’ and stage 7 the first of ‘more self-motivated’. These findings are out of step with what is known about the Fairbridge population from other sources.

The next histogram shows the distribution of changes on the Outcome Star for 112 people who undertook tests at the baseline and at three months.
The mean change is a positive gain of 0.55. The changes are clustered around the centre of the distribution and two thirds of the participants have made gains or losses within 1.2 points of the mean.

Despite the ten-point scale of the Outcomes Star, it seems that only a small number of scale points are being used. This compares unfavourably with the ‘Who are you? Quiz’, which, although it offered only a five-point scale, tempted young people to use the extremes more often. We conclude that the ‘Who are you? Quiz’ is a more sensitive test.

Unlike the ‘Who are you Quiz’, the early gains on the Outcomes Star did not predict objective changes in young people’s lives, such as finding work, volunteering, or going back into education. A variety of explanations are possible here. One might be that six months was too little time for the positive gains to show through on this test when earlier results suggested that this took 13 months. Another might be that the test was not sensitive enough to pick up on the necessary changes, particularly that the test showed that people were starting at a higher level than expected. A third may be that the Outcomes Star is not a suitable test for Fairbridge. Some workers found it a burden to complete. For these reasons, we conclude that the Outcomes Star is less well suited as a measurement tool for Fairbridge than the ‘Who are you? Quiz’, which can be completed swiftly and easily.
6. What drives outcomes

It appears that personal and social skills occupy a central place in the development of a young person's life. The evidence suggests that, if such personal and social skills can be enhanced in the short term through a development programme such as Fairbridge, this will translate in the medium term into positive changes such as finding a job, locating a training opportunity, or volunteering for a charity.

We will return to this key finding in due course, but in the meantime, we wish to look at factors affecting the operation of Fairbridge in an effort to locate those issues that make it successful and what distinguishes between successful outcomes for young people from less successful ones.

Hard outcomes

In this analysis, we will look at what drives 'hard outcomes', such as getting a job, going back to school, or undertaking volunteering. To conduct this analysis, we studied 2,235 young people, being the entire intake from four teams, Dundee, Edinburgh, Glasgow, and Tyneside for the three years from April 2006 to March 2009. There is no doubt that this is a good sample because it represents the whole population from those years.

The purpose of the analysis was to find which factors were involved in creating good outcomes for young people. We looked at all of the factors recorded on the Fairbridge database, including various characteristics of the young people, such as their age, their gender, their presenting needs, and the source of referrals, as well as various characteristics of the organisation of Fairbridge, including the number of hours in various categories of support as well as which team was responsible for the work.

We used a 'regression analysis'. This involves treating 'outcomes' as a 'dependent variable' with each of the other features of Fairbridge and its users as an 'independent variable'. The object is to see which of the independent variables, both singly and in combination with others, have an effect on desired outcome. The way that regression analysis works is depicted graphically below.
The regression analysis identified four factors that were important, both singly and in combination, in creating positive outcomes for young people.\textsuperscript{13}

The first was the particular team that the young person worked with. Across the whole sample of 2235, the mean number of outcomes per young person was 1.47. However, the scores for the four teams were: 1.89, 1.33, 1.22, and 1.20, a highly significant variation caused by the high performance of one of the teams.

The second factor was the age of the young person. There were two dimensions to this. The first was that the Under 16s programme produced more outcomes than the over 16s programme (means of 1.68 and 1.19 respectively). The second was that, within the two programmes, age also had an effect with younger members of each programme having more outcomes than the older ones.

The third factor was the number of hours that young people spent with Fairbridge. Although Fairbridge classified different kinds of support it offered, for example, distinguishing between training and follow up support, the best overall predictor of outcomes was the total number of hours regardless of how they were spent.

The fourth factor was the start date. Earlier start dates produced better outcomes. This was presumably because there had been more time for positive outcomes to show themselves as they accumulated over time.

All other factors appeared to be unimportant. Although there was a slight tendency for young women to produce more outcomes than young men, this was not significant. Again, the number of presenting needs did not affect the number of outcomes. Nor did

\textsuperscript{13} All relationships were statistically significant at <0.00001.
the type of young person. Although there was a slight tendency for the ‘skills cluster’ and the ‘law cluster’ to do better than average, and the ‘care cluster’ to do worse, these effects disappeared when other factors were taken into account.

Taking the four factors together, area, age, hours, and start date, the regression model explained nearly 30 per cent of the gains in hard outcomes.\textsuperscript{14}

The one important factor that we were unable to put into the current regression analysis was the gain in personal and social skills. Although this was related to hard outcomes in the earlier studies, it was not so in the current one, so we could not include this in the model. It would have been useful to know how much more of the variance we could have explained had the Outcomes Star proved to be a sensitive measure of personal and social skill development among the Fairbridge population.

As we saw earlier, Fairbridge gives primacy to personal and social skills. This approach has been justified in the present study, since two out of three studies have shown that ‘soft’ outcomes in personal and social skills predict ‘hard’ outcomes in obtaining jobs, improving education, and obtaining voluntary work. The first study undertaken found a very close relationship between young people’s self esteem and their ability to make changes in their career, housing and other aspects of their lives. This is important because low self esteem is the commonest presenting need affecting more than three-quarters of young people coming into Fairbridge.

So what is the process by which soft outcomes are obtained? This is a difficult question because personal and social skill development suggests multiple factors some of which relate to unconscious processes that are not easily available to researchers. However, the pioneering work of Michael Argyle has assisted the development of empirical methods to understand these processes.\textsuperscript{15}

Thirty interviews with young people probed five factors that could be responsible for the development of personal and social skills. The first was staff, and in particular whether the young people valued the support that they gave, saw the staff member as a role model, or valued the practical help. The second was the group experience, including the roles and tasks, the sense of responsibility, planning, rules, and working as a team. The third was the peer group, and the fact that it was a new group of people, with possibilities for acceptance and friendship. The fourth was the activities, and the ability to learn new skills and have a sense of accomplishment. The fifth was the ‘ethos’, how Fairbridge treated young people as an adult, offered new ways of working, encouraged fun, excitement, and stimulation, as well as offering challenge in a safe environment.

The transcripts from the interviews were coded to give five-point ratings on all of the measures. Two other people independently checked codings. Following this scores were correlated with outcome variables using a regression analysis.

\textsuperscript{14} r squared (adjusted) = 28.1
\textsuperscript{15} Argyle M (1969) Social Interaction, Mehuen, London
Results of the analysis show that long-term improvements which many young people experience appear to be due to three main things about Fairbridge. The most important factor appears to be the quality of relationships that young people experience in Fairbridge, most notably a mutually trusting and respectful relationship with a staff member, but also good relationships with a new peer group. The second most important factor is the 'style' or 'ethos' of Fairbridge – the way that things are done, such as the combination of fun and discipline. The third most important factor is the activities on the course.

Although young people identify these three factors as the most significant in the change process, when the various elements are compared with the outcome measures, what stands head and shoulders above the rest is the relationship with staff. Young people valued being valued as a person in their own right and treated with respect. They particularly valued having a good relationship with an adult.

7. Conclusions

In this final section, we sum up the findings, compare the studies with work done elsewhere, reflect on the findings and suggest what might be explored further in evaluating Fairbridge.

Summary

Fairbridge works with young people whose challenging circumstances or behaviour make it difficult for schools and other organisations to engage with them. Fairbridge aims to give such young people the self-confidence and skills they need to change their lives.

The young people are aged between 13 and 25, though the vast majority are aged under 20, and referred from a range of different agencies, including schools, youth offending teams and social services. Young men outnumber young women in a ratio of three to one.

All young people in the scheme experience challenges, such as alcohol abuse, aggressive behaviour, trouble with the law, literacy, or homelessness. Four-fifths of the young people have three or more such challenges.

Fairbridge is successful in increasing personal and social skills among the majority of the young people it works with. In turn, gains in personal and social skills ('soft outcomes') increase the likelihood of getting a job, becoming a volunteer, or taking up educational opportunities ('hard outcomes').

Progress within Fairbridge is not straightforward and the process appears to be 'curvilinear' rather than 'linear'. After an initial significant improvement, there is a very significant dip in progress after four to six months so that young people often feel worse than they did in the beginning. However, after that, they pick up again and finish much
higher than they had started. It seems that this dip is an essential part of the development process, and that young people need to experience something of a crisis in themselves before they can make progress. It appears to take more than a year for the full benefits of Fairbridge to show through.

A number of factors appear to contribute to the success of Fairbridge. These include the working ethos, new relationships formed, and the activities, but what stands out as particularly critical is the formation of a trusting relationship with an adult worker. This is sometimes the first time that a young person has experienced a relationship based on mutual respect. Organisational factors seem also to play a part, with some teams producing more positive outcomes than others. The amount of time spent with a young person also improves success, and the younger the young people are, the more they benefit. Other factors, such as gender or number of presenting issues, appear to have little importance.

How the research compares with work elsewhere

The research described here can be compared with a comprehensive study on the impact of youth work in England by Bryan Merton and colleagues in 2006.16 The study included a documentary review of 50 local services, analysis of available numerical data about youth services, reviews of 15 local services, 30 case studies of particular practice, and a self-administered survey of 630 young people.

Merton’s study stressed the key role played by personal and social skills in young people’s development and the importance of the respectful relationship between youth worker and young person in fostering personal and social skills. Indeed, the study cites one of the studies reported here (Astbury and Knight, 2003) as ‘reinforcing’ their findings. The study suggests that, because of its longitudinal nature, the work by Astbury and Knight is a ‘rare piece of evidence showing how young people have achieved greater confidence and interpersonal skills through youth work’.

Reflections on the research

To date in this report, we have reported the data as faithfully as possible and kept our views about the findings to a minimum. In this section, we remove this restriction and reflect on the findings.

The research emphasises the importance of personal and social skills. Such skills are generally used to improve the ability to get the most out of life. They are therefore central to human wellbeing and happiness. A study by the Institute for Public Policy Research conducted with people born in 1958 and 1970, showed that poor children with high personal and social skills - such as communication, self esteem, planning and self control - are 14 per cent more likely to be well-off by age 30, than the average poor child.17 An American review of three controlled studies found that ‘social and emotional


learning’ improved students’ academic performance by 11 to 17 percentile points. The evidence therefore suggests that personal and social skills are of great importance in the development of children and young people.

Studies also show that the best way for children to learn the skills that they need is through structured activities where they mix with children of other ages and backgrounds but are mentored by adults. This is the way that Fairbridge works. Fairbridge sees the importance of taking people as ‘people’ and not as ‘cases’ or ‘clients’. The fact that particular needs do not tend to predict outcomes is highly positive in this respect, Fairbridge focuses on individuals and personalities rather than clinical factors. The approach is pragmatic and driven by what works for the young person, rather than by a theoretical model of change.

What appears to be particularly significant in the change process is the presence of an adult with whom the young person can form a relationship based on mutual trust and respect. The importance of such a relationship has been found in other settings where people are trying to make changes for themselves.

These findings are important for how we improve the lives of young people whose challenging circumstances or behaviour make it difficult for schools and other organisations to engage with them.

**Taking this research forward to the next stage**

Fairbridge is committed to evaluating the effect of its programmes. Fairbridge sees this as part of a cycle of continuous self-improvement.

As a result of the research described here, Fairbridge has undergone a gradual shift towards working more intensively with smaller numbers of young people. Working with young people over a sustained period is a more valuable approach than short periods of intervention over, for example, school holidays.

Fairbridge has now integrated evaluation into its administrative systems and measures outcomes as a matter of routine, believing that the measurement should drive the approach taken. Key performance indicators are set in relation to the interventions that offer the best outcomes for young people. As a result of this specific study, Fairbridge has investigated in more detail why some teams seem to achieve a higher proportion of positive outcomes than others, with a view to ensuring that successful approaches in high achieving teams can be replicated elsewhere.

The current research has led to improvements in the methodology used to measure soft skills. Assessments are based on actual engagement as opposed to calendar dates.

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19 Margo and Dixon (op. cit.)

20 Such an approach has been given weight by the work of Carl Rogers. See Rogers, C (1961) On Becoming a Person: A Therapist’s View of Psychotherapy, London: Constable.

21 Miller, A (1979) The Drama of the Gifted Child, New York, Basic Books
and staff take a stronger more facilitative role, often in a one-to-one setting. These changes will be more valuable to young people from a personal development perspective, by supporting them to become more aware of their strengths and weaknesses at an earlier stage in the Fairbridge process.

This will embed evaluation as part of the Fairbridge routine, rather than relying on occasional studies led by external evaluators such as those reported here. Results from this new style of evaluation will become available from 2011 onwards.
8. References


Miller, A (1979) *The Drama of the Gifted Child*, New York, Basic Books


