Therapeutic Intervention for Peace (TIP) Report

Culturally Competent Responses to Serious Youth Violence in London

Executive Summary
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When we think of the effects of an incident of serious violence, we tend to focus on the perpetrator and the victim. But for every victim, there are relatives, friends, classmates, colleagues, and communities who are also left to come to terms with and heal from tragedy.

We know that therapeutic services that support people can play an instrumental part in limiting the emotional and mental trauma suffered. These services can also help build resilience within affected communities and prevent perpetuation of further cycles of pain and trauma.

However, since our inception, the London Violence Reduction Unit has heard one message consistently and repeatedly from families and communities affected by violence: namely that the necessary therapeutic support, vital to addressing trauma, is not available.

This is why we commissioned Power the Fight to undertake research into what needs to change. Drawing on their expertise and lived experience, Power the Fight has reached out to young people, families and professionals to hear their views and shape recommendations for an improved service going forward.

The resulting report challenges us to think differently about the levels of support provided to communities.

Casting a critical eye over existing provision, it questions whether the support is accessible enough to reach the communities where it is most needed, pointing in particular to the inadequacy of support available for young people whose friends have been tragically killed. Where support is available, the report questions if it is offered at the most appropriate time and for long enough. Further, it challenges whether the right people are delivering it in the right way.

What emerges is a clear recommendation for more community-based trauma and crisis intervention; a strong acknowledgment of the role of trusted youth workers as often the frontline support for young people; and a powerful call for culturally competent community services with local delivery. Where appropriate, it foresees a role for young people to help shape the nature of that support.

We commissioned the research early in the year, and we are grateful to Power the Fight for adapting the research to cope with the difficulties of lockdown.

Of course, the longer-term consequences of the pandemic present much more profound challenges. COVID has disproportionately affected young people’s mental health, educational outcomes and career opportunities. Coupled with the national questioning and protest against structural and systemic racism, the report’s central call for more and better community based, culturally competent and young people focused services is even more apposite and pressing.
We are delighted that the London’s Victims Commissioner Clare Waxman has endorsed the report’s findings. We look forward to working with her, alongside health professionals and the very many community groups and individuals who to make the report’s recommendations a reality.

Our immediate challenge is to advocate for change in existing policy and practice and to redirect some existing resources while lobbying for greater overall investment in community-based services.

Our longer-term hope is that with better therapeutic provision in place, we are able to more effectively address the causes and effects of serious violence, to help build sustainable resilience in communities, and to equip our young people with positive mental health.

Endorsement from Claire Waxman
LONDON’S VICTIMS’ COMMISSIONER

“This report from Power the Fight is a hugely valuable contribution to our understanding of how best to support communities experiencing trauma as a result of serious youth violence. As Victims’ Commissioner for London, I know first-hand how important therapy can be in helping to heal from trauma. But therapy is not always seen as a viable or attractive prospect. We must always be aware of any deficiencies and barriers in the system that prevent individuals or communities from getting the help they deserve.

This research makes a compelling case for services to be culturally competent in order to be truly effective. It is vital that people see themselves reflected in the services on offer and have confidence that they will be truly understood.

The report also underscores the significant value of community-based trauma informed approaches. I look forward to seeing how this excellent research goes on to inform and shape practice in London and beyond.”
It is widely acknowledged that serious youth violence devastates the lives of young people, families and communities. What is less documented is how communities best heal from such tragic circumstances, and furthermore, the existence of barriers for those impacted in terms of seeking professional support to move forward and to build resilience. For the past 20 years I have worked in a variety of roles including youth offending teams, community safety teams, the charity sector and church leadership. What has become clear is that communities impacted by youth violence do not easily access therapeutic support – specifically culturally competent therapeutic help. My experience is that while people may need and want access to therapeutic help, often they do not ‘fit’ the criteria for existing services. Even when they do, these services may not be ones that they would feel comfortable accessing. Meanwhile, more and more young people are suffering from the trauma of the amplification of youth violence in their local area through the news and social media.

While I do not subscribe to the perception that knife/gang crime across the UK is predominantly a Black issue, we have to acknowledge – especially in a London context – that knife crime disproportionately impacts Black and brown people (23% of all sharp instrument homicide victims in England and Wales in 2019 were Black, despite Black people comprising only 3.4% of the population)\(^1\). In addition, the number of Black and ethnic minority individuals in mental health professions is far from representative.

Evidence shows that race and gender are significant factors in the relationship between the prevalence of mental health conditions, access to treatment and positive health outcomes, suggesting serious gaps in the way in which diverse communities are being served\(^2\). One of the questions this report seeks to answer is whether the lack of cultural competency among therapeutic professionals contributes significantly to the low uptake of therapy by Black and brown communities.

This report by Power The Fight draws on the views and experiences of young people, families and youth work professionals to demonstrate that the provision of a culturally competent therapeutic service would increase levels of engagement by those impacted by serious youth violence. The report has been made possible through funding from the Mayor of London’s Violence Reduction Unit. Our initial proposal was to deliver a pilot therapeutic service for young people and families impacted by youth violence. Led by Power the Fight’s Clinical Lead Dr Zeyana Ramadhan, the three-month pilot – termed ‘Therapeutic Intervention for Peace’ (TIP) - was set to work with a South East London secondary school and other young people and families already engaging with Power the Fight, to create a co-designed, culturally competent therapeutic service which would build the resilience of local communities.

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1 Office for National Statistics (2020) Homicide in England and Wales: year ending March 2019
2 Race Disparity Audit 2017, Section 9  https://www.gov.uk/government/publications/race-disparity-audit
communities and enable therapeutic support in the direct aftermath of a critical youth violence incident. The project aimed to harness the impact of leading practitioners, local youth organisations, evidence-based models, proven mechanisms of delivery and a network of churches and charities to develop a scalable, community-based response that provided an effective therapeutic service for young people and families impacted by youth violence.

In response to COVID-19, we have had to adapt our plans significantly away from face-to-face work, but what has developed instead is a research report which provides strong foundations upon which to build such a service. The findings of this report are more relevant than ever as communities seek to rebuild and recover after the crisis of the pandemic. The report draws on qualitative and quantitative data from 102 young people, five families and 26 professionals to give a strong picture of community experiences of therapeutic services.

I would like to thank the extraordinary team: Lead Researcher and Evaluator Dr Elaine Williams, Clinical Lead Dr Zeyana Ramadhan, interviewers Ebinehita Iyere, Claude Murray and Lisa Harrison and all the participants. I am grateful to everyone at the Mayor of London’s Violence Reduction Unit for their support during the completion of this report. My hope is that the findings of this report influence practice and make a lasting difference to the support available to communities impacted by youth violence.

Ben Lindsay
Founder & CEO of Power The Fight
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BACKGROUND

The intention of this research was to evidence the experiences of young people, families and practitioners in order to improve the effectiveness of therapeutic responses to youth violence in London. In the context of increasing rates of interpersonal violence in the capital and renewed commitment to the public health approach, this research provides practical recommendations for the improvement of therapeutic services in London. The report draws on qualitative and quantitative data from 102 young people, five families and 26 professionals providing extensive analysis of community experiences of therapeutic services.
KEY FINDINGS

The following main findings of the report represent common experiences and key themes which were repeatedly evidenced across all research areas:

1. The majority of young people surveyed had a high proximity to violence (experiencing it either first-hand or through close friends), with experiences of violence most likely to lead to feelings of anger. Black and male respondents were less likely to talk about these feelings and more likely to deal with these feelings through retaliation.

2. Therapeutic services that fail to understand the broader contexts and causes of youth violence risk harming young people further by making them feel they are the problem.

3. The language and culture of formal therapy can be a barrier for engagement with practitioners urging for greater innovation and flexibility in how therapeutic interventions are defined and delivered.

4. Marginalised groups often deeply distrust organisations and institutions due to consistent experiences of structural harm through inequality in health care, education and criminal justice systems.

5. For Black people in particular, trusting relationships with professionals rely greatly on representation and cultural competency, with young people and families much more likely to speak with practitioners who share or understand their ethnic background and culture.

6. The specific needs of women and girls in the context of community violence have been side-lined by male-focused interventions, leading to an absence of long-term girls’ projects, peer-to-peer support and parent groups for engaging families affected by trauma.

7. Referral systems are currently not fit for purpose; the threshold for engagement is too high and not effectively assessed, waiting lists are too long and there is a lack of ability to engage disenfranchised and socially marginalised groups.

8. In maintaining trusted and supportive relationships with socially marginalised young people and families, frontline practitioners are often risking their own mental health and wellbeing by becoming emotionally embedded in communities and feeling accountable for their safety.

9. There is a fundamental lack of clinical supervision for these high-risk roles, with many organisations having no internal referral process for their employees despite the harm their workers are continuously exposed to. This profession has a high ‘burnout’ rate.

10. Practice based or professionals with “lived experience” are systemically undervalued and structurally excluded from decision making at a strategic level, often made to feel culturally out of place, tokenised or exploited.

11. There is currently no cohesive strategy or ‘wrap around’ package of support in place; to provide immediate and long-term support for family and friends in the aftermath of a violent incident or traumatic loss.
RECOMMENDATIONS

The report concludes that effective therapeutic interventions to end youth violence are reliant on applied cultural competency and recommends pragmatic steps for service improvement.

The report’s recommendations are aimed at institutions and Government bodies working with families and young people, including the NHS, Department for Education, Department of Health and Social Care, Ofsted, Youth Justice Board, Metropolitan Police Service, local authorities and youth charities.

These include:

- **Cultural Competency training** at all system levels and clinical supervision for all front-facing practitioners.

- **Multi-layered intervention** designs that combine formal, informal and creative therapies with long term engagement and community co-production.

- **Collaborative referral management systems** and community case mapping for holistic work with young people and families.

- **Cohesive and effective partnership work**, bringing together families, services, agencies and institutions through culturally competent conduit organisations that have the capacity to connect people and services.

CONCLUSIONS

The timing of this report is of particular pertinence. As the world responds to the economic challenges of the COVID-19 pandemic and global protests’ push for action against the harms of institutional racism, this is a moment of both uncertainty and opportunity. This report’s findings evidence both the importance of long-term investment in therapeutic responses to serious youth violence, and the current inadequacies of an approach that does not take into consideration the cultural, social and individual barriers for effective engagement. The choices made within this moment will be decisive and it is hoped that the evidence and recommendations presented here can provide practical models for much needed change.