

RAPID-CYCLE DESIGN AND TESTING

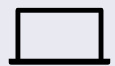
Lessons from the Design, Implementation and
Improvement of the My Future Mentoring Programme

Evaluation and Learning Partner Report



DARTINGTON SERVICE DESIGN LAB

Dartington Service Design Lab ('Dartington') is a research and design charity focused on using evidence and design in innovative ways to help those working with children and young people have a greater impact. Our team of researchers and specialists are skilled in service design and improvement methods, systems thinking approaches, and data visualisation and communications. As an organisation, we have more than 50 years of experience working across the public and voluntary sectors.



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This report summarises the 2-year Evaluation and Learning Partnership between Dartington and the Chance UK Mentoring Service. This partnership grew from a mutual interest in taking a more pragmatic, learning-focused approach to the evaluation of services for children and young people. It presented a unique opportunity to test the use of Dartington's agile, accessible and quality improvement-focused method, rapid-cycle design and testing, to answer common evaluation questions in real-time about the processes, implementation and outcomes of Chance UK's new youth mentoring programme called My Future.

The authors wish to thank all the staff of Chance UK, especially Geethika Jayatilaka, for their leadership and support in fostering and coordinating this partnership. Special thanks to Mwila Mulenshi, Bart Smith and Jo Latham, for graciously providing guidance, data and invaluable insights, and for their excellent dedication to adopting the rapid-cycle design and testing method into Chance UK's processes and practices.

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The authors accept responsibility for any errors and omissions.

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PART I

Introduction



1.1. A case for mentoring

More children and young people (CYP) in England are experiencing emotional and behavioural difficulties.^[1] These difficulties often manifest early in childhood and their frequency tends to increase with age and social disadvantage.^[2-3] If untreated, they can lead to poorer immediate and long-term life outcomes, including lower educational attainment and employment prospects, risky behaviours such as alcohol and substance misuse, higher involvement in anti-social behaviour and violence, health difficulties in adulthood, and premature death.^[2-3] These needs underscore the importance of investing in the design, implementation and evaluation of local early intervention programmes to address emotional and behavioural difficulties in CYP. These programmes should be based on the best available scientific and practice-based evidence and be built around the explicit needs and experiences of CYP and their families.

Youth mentoring – the support of a child/young person (mentee) by a non-parent adult (mentor) through a strong personal connection – is becoming commonplace in various settings in the UK as an intervention for addressing emotional and behavioural difficulties.^[4-5] This is due in part to evidence from global randomised controlled trials (RCTs) and quasi-experimental studies of youth mentoring programmes. These studies show that mentoring provides modest benefits to CYP's emotional and behavioural wellbeing and educational attainment.^[6] The support for youth mentoring programmes in the UK may have also arisen out of the growing mismatch between CYP's increasing needs and decreasing funding for local CYP's services^[7], and the view of mentoring as an outlet for adults who want to help CYP in their communities who are experiencing difficulties.^[8]

01 THE CONTEXT

1.2. Evaluating mentoring programmes

Mentoring can be described as a complex intervention. Commonly used models of youth mentoring programmes involve a range of dynamic factors at different levels. These include the type of mentor, the quality of the mentee-mentor relationship, the wider family and community context, and the mentoring programme's setting and processes including design, duration and practices.^[9] These factors interact, often unpredictably, to have a significant influence on how mentoring programmes are developed, implemented and sustained, and for which mentees and families mentoring works most or least under given circumstances.^[10] This complex interplay makes mentoring programmes difficult to evaluate.

Most of the existing evaluations of mentoring are for US-based programmes ^[6,9] while robust evaluations of mentoring programmes in the UK are limited.^[11] Moreover, such evaluations tend to use traditional experimental designs which are more useful for addressing whether programmes work effectively, but less useful for learning about the underlying processes of implementation and mechanisms of action, and how these are affected by contextual factors.^[12-13]

This learning may be more relevant to service providers who constantly need to make decisions about how to change aspects of their programme in response to real-world changing needs in order to maintain impact, and remain relevant, acceptable and valuable to participants, staff, funders and other stakeholders.^[8] Central to this is service providers and other stakeholders being able to manage their own continuous self-evaluation and learning in order to adapt and improve sensibly. Consequently, there needs to be another way of thinking about evaluations of mentoring – one that sees stakeholders and evaluators working collaboratively to co-design and execute more pragmatic, adaptive, learning-focused approaches that can be embedded within routine practice.

02 RAPID-CYCLE DESIGN & TESTING

Since launching in 2017, Dartington Service Design Lab (Dartington) has focused on bringing alternative design and evaluation methods to services that support CYP to accelerate the much-needed shift in thinking. Dartington's interest in alternative approaches was motivated by first-hand experience of using high-quality RCTs to evaluate community-based programmes including mentoring.^[14-16] These trials found that the programmes showed no effect on primary outcomes, but they also highlighted problems with implementation that could be improved. Dartington chose to focus on the learning about how to improve.^[17] It has been developing a method to support service providers to use existing learning about their programmes to make small-scale incremental changes, then test such changes and use the resulting learning to make further refinements. This method is a five-step, fast-paced, cyclic model called rapid-cycle design and testing (Fig 1). Details of this model can be read elsewhere.^[18]

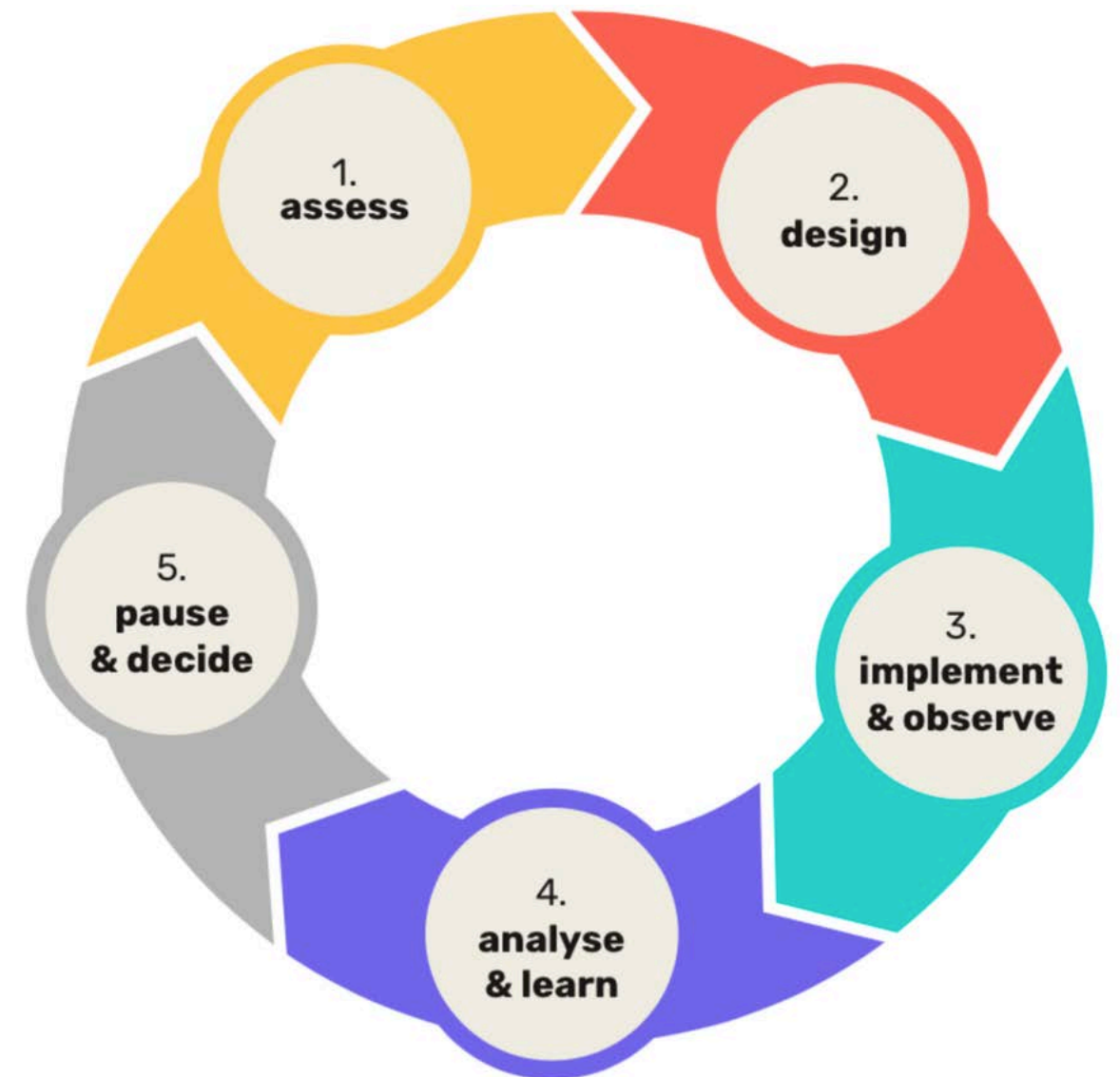


Figure 1. Rapid-cycle design and testing model

Briefly, the first step of this cyclic method, **Assess**, uses situational assessments and participatory methods to: (1) gain stakeholder consensus on the programme's purpose, characteristics, desired outcomes and changes needed; (2) understand the programme's human, physical, infrastructural and policy context and wider system and; (3) co-produce the programme's theory of change, learning agenda and evaluation questions.

Design includes collaborating with stakeholders to translate the programme theory into activities, implementation guides, materials, training plans, and monitoring, evaluation and learning tools.

Implement and Observe builds stakeholders' capability to regularly (monthly) monitor quantitative and qualitative data about delivery to track fidelity to the programme theory and respond to urgent unintended events.

Analyse and Learn involves the periodic (4-6 months) collation and analysis of these monitoring data using a combination of statistical and qualitative techniques. This step generates insights to answer the programme theory-based evaluation and learning questions.

Pause and decide is a dedicated collaborative meeting with stakeholders and evaluators that signals the end of a learning cycle. It includes reviewing insights to confirm or disprove understanding of the programme theory, and discussing plausible alternative explanations for observed results. This leads to shared learning and decision-making about whether and how to adapt and continue testing. When conducted in the final cycle of an evaluation project, this step can include the comparison of pre- and post-delivery outcomes data and consideration of which combination of processes, mechanisms and contextual factors potentially contributed to changes in participants.

Rapid-cycle design and testing draws on methods from several fields to offer services an accessible and practical alternative to traditional evaluation designs that can be embedded within their everyday performance monitoring and quality improvement procedures (Table 1). Our model is a work in progress. To develop it further, we have been partnering with several service providers across the UK who share our interest in continuous learning and improvement.^[19] One of our earliest partners is the Chance UK mentoring service.

02 RAPID-CYCLE DESIGN & TESTING

FIELD OF STUDY	APPLICATION IN RAPID-CYCLE DESIGN AND TESTING
Evaluation	Incorporates process evaluation to measure how programme processes are implemented and the influence of context.
Improvement science	Includes cyclic learning (feedback) loops of designing, testing and refining adaptations in real time.
System dynamics	Uses feedback loops to understand and respond to unpredicted results and unintended consequences of implementation.
Realist research	Begins with a programme theory of the interplay between people, context, mechanisms and outcomes, which is then tested and refined.
User-centred design and development	Recognises stakeholders as experts on their own experience and enables them to lead and manage their own designs and learning.

Table 1. The range of methods informing rapid-cycle design and testing

3.1. Background

Chance UK support CYP from London who are experiencing emotional and behavioural difficulties. Since 1995, they have been developing and delivering a 12-month one-to-one mentoring programme for 5-11-year-old children. The programme's core theory and design include the characteristics of more effective models of youth mentoring. [9, 15, 20]

Specifically, children who display emotional and behavioural problems at home and school (mentees) are paired with an adult volunteer from the community (mentor) with whom they share interests. Mentees and mentors work to build a strong positive relationship, through which they agree on goals and tasks to give mentees new learning opportunities and develop key social-emotional skills. For example, pairs strive to improve the mentee's self-esteem mostly by helping them to identify their own strengths and recognise and celebrate their own successes. They seek to improve self-regulation by helping the mentee to recognise their emotions, identify their emotional triggers, and practice coping strategies learned through modelling and roleplaying.

Pairing mentees with a positive, like-minded, non-parent adult also seeks to improve how they interact with their peers and adults, and promote their identity development by helping them to see their mentors as models of successful qualities that they can emulate now and in the future. Mentors receive training prior to pairing and receive ongoing supervision and support from experienced programme managers. By addressing these skill areas using solution-focused techniques, the programme primarily aims to improve mentees' emotional and behavioural difficulties and reduce the likelihood of involvement in future criminal and anti-social behaviours.

03 CHANCE UK MENTORING SERVICE

3.2. Learning from experience

In 2008, the 12-month mentoring programme was evaluated using a pre- and post-implementation study. This study found that mentees showed positive changes in the primary outcome by the end of mentoring, indicated by statistically significant reductions in parent- and teacher-rated Strengths and Difficulties Questionnaire (SDQ) Total Difficulties scores.^[21] Between 2014 and 2017, the programme was evaluated using a RCT to obtain more definitive estimates of its effectiveness. This trial concluded that the programme had no significantly different effects on mentees who participated when compared to the outcomes in other children who received the usual available services.^[15] While these findings were unexpected, the trial also highlighted key aspects of the programme that could be improved.

1. There was little information in the trial on what exactly mentor-mentee pairs did during mentoring sessions. While pairs seemed highly satisfied with their relationship quality, the lack of a significant effect on mentees' outcomes suggested that clarity around the "nature and form of what they do together" might be more important.^[15]

2. Furthermore, there was limited information on mentors' use of evidence-based strategies to activate or deliver specific mechanisms, and there were relatively low scores for the use of solution-focused techniques. These findings were particularly relevant given that some mentees showed an elevated level of need at the start of mentoring which might not have been addressed during mentoring.^[15]
3. While the quality of mentoring and engagement were generally adequate, adherence to the programme design was low and the dosage received by mentees was very variable.^[15]

Chance UK recognised these findings as important lessons about how they had been designing and implementing their programme for several years. They chose to respond by improving. In September 2018, they partnered with Dartington to use rapid-cycle design and testing to develop, test and refine a new programme theory and design based on the 12-month programme that addressed the weaknesses highlighted by the trial. This new programme is called My Future.

The evaluation and learning partnership between Chance UK and Dartington ran from October 2018 until November 2020. It was funded by the National Lottery Community Fund.

The specific objectives of this partnership were to:

1. Use evidence and previous learning about Chance UK's mentoring programmes to rapidly design My Future's programme theory of change, curriculum and delivery resources (including mentoring manual, activity materials, mentor training, and supervision plan).
2. Evaluate whether My Future can be implemented as theorised in the theory of change, including:
 - a. Whether one-to-one mentoring can be implemented as expected;
 - b. Whether group mentoring can be implemented as expected; and
 - c. What factors influence implementation.
3. Use the learning about implementation to continuously inform decisions and adaptations to the programme design and delivery.

4. Assess whether My Future mentees experienced changes in emotional and behavioural difficulties over the 9 months of mentoring.

These objectives were undertaken in 3 cycles of implementation, measurement, learning and refinement: Learning Cycle 1 (April–August 2019), Learning Cycle 2 (September to mid–December 2019), and Learning Cycle 3 (late December 2019 to September 2020). The rest of this report is about these objectives.

Chapter 5 presents the My Future programme and cohort, and describes the development of My Future's theory of change, curriculum and resources (Objective 1).

Chapters 6 and 7 show the findings about the implementation of one-to-one and group mentoring, respectively during the 3 learning cycles (Objective 2); and how learning was used to adapt aspects of My Future's design and delivery (Objective 3).

Chapter 8 presents the findings about changes in My Future mentees' emotional and behavioural difficulties (Objective 4). The report concludes in Chapter 9 with a summary of the findings and overall lessons about using rapid-cycle design and testing to evaluate My Future, and recommendations for how evaluators and services like Chance UK can use this method to undertake learning-focused evaluations to support continuous improvement.

PART II

Design



05 MY FUTURE

5.1. Beginnings

Chance UK's journey to develop My Future began following the learning from the results of the RCT in 2017. Early work included a series of workshops facilitated by Dartington in October 2018 to consider the results of the RCT and previous evaluation, as well as performance data routinely collected by Chance UK. To supplement this Chance UK-specific evidence, Dartington also presented learning from its review of published evidence about effective mentoring models and interviews of leading experts in mentoring research and practice. By the end of the workshops, the Chance UK team of senior managers, programme managers and mentors concluded that the new My Future programme would be aimed at supporting male and female children aged 5-11 years from Camden and Southwark who are experiencing emotional and behavioural difficulties. The primary (end-of-service) outcome would still be a reduction of these difficulties by the end of mentoring. Referral and recruitment procedures would remain similar to other Chance UK mentoring programmes, but My Future's theory and design would become aligned with the available (Chance UK-specific, research and expert) evidence.

5.2. Theory of change

During the workshops, Dartington supported Chance UK to 'think backwards' from the end-of-service outcome to identify the specific immediate outcomes they expect to help mentees develop during mentoring in order to contribute to the end-of-service outcome. They identified 5 social-emotional skills related to self-regulation and self-esteem. The team then identified 6 evidence-based mentoring techniques which they considered most appropriate for triggering the development of the immediate skills and outcomes and ultimately, the end-of-service outcome. They then assessed their existing mentoring objectives and activities against all the available learning and developed a more structured curriculum of one-to-one and group mentoring sessions.

Plans were also developed to (a) engage with parents and carers so that they can encourage their child's participation and reinforce their progress at home; (b) train mentors to use the new curriculum; and (c) support mentors with implementation and protecting their wellbeing through monthly in-person and remote supervision. There was also consideration of the various characteristics that might influence the implementation of My Future, including context. The final step was articulating these components in the My Future theory of change (Fig 2). This theory of change guided evaluation, learning and refinement during each learning cycle.

05 MY FUTURE

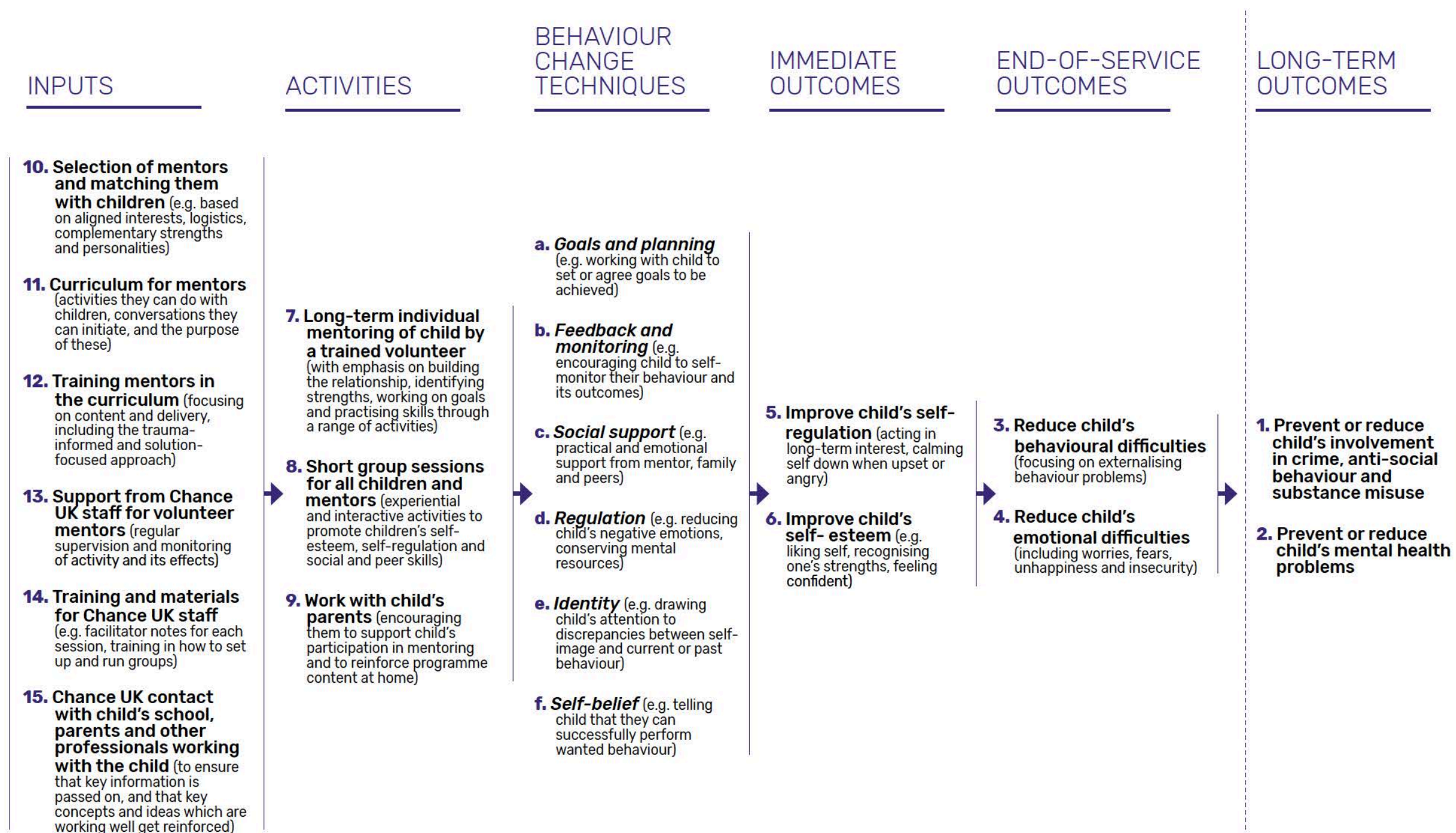


Figure 2. My Future's theory of change

05 MY FUTURE

5.3. New structured design

The newly designed My Future curriculum runs weekly for 9 months instead of 12, as Chance UK believed that, based on the available learning, successful implementation and outcomes were achievable in a shorter mentoring period. The 9 months includes 31 one-to-one mentoring sessions between a mentor and mentee, and 5 group mentoring sessions led by a trained facilitator and delivered to small groups of mentees accompanied by their mentors. My Future is the first of Chance UK's mentoring programmes to include a structured facilitator-guided group component – a decision informed by evidence suggesting that group mentoring can support short-term improvements in emotional and behavioural outcomes.^[11] The new group sessions were piloted with mentors and mentees from another of Chance UK's mentoring programmes to refine the activities, materials and delivery plans prior to being introduced to My Future mentor-mentee pairs.

Implementation of the curriculum is supported by a new mentoring manual which details the programme's 10 mentoring objectives, a clear timeline for the weekly delivery of the 36 sessions over the 9 months, and mentoring activities and suggestions for adapting these to suit the mentees' development stage and needs when necessary (Fig 3).

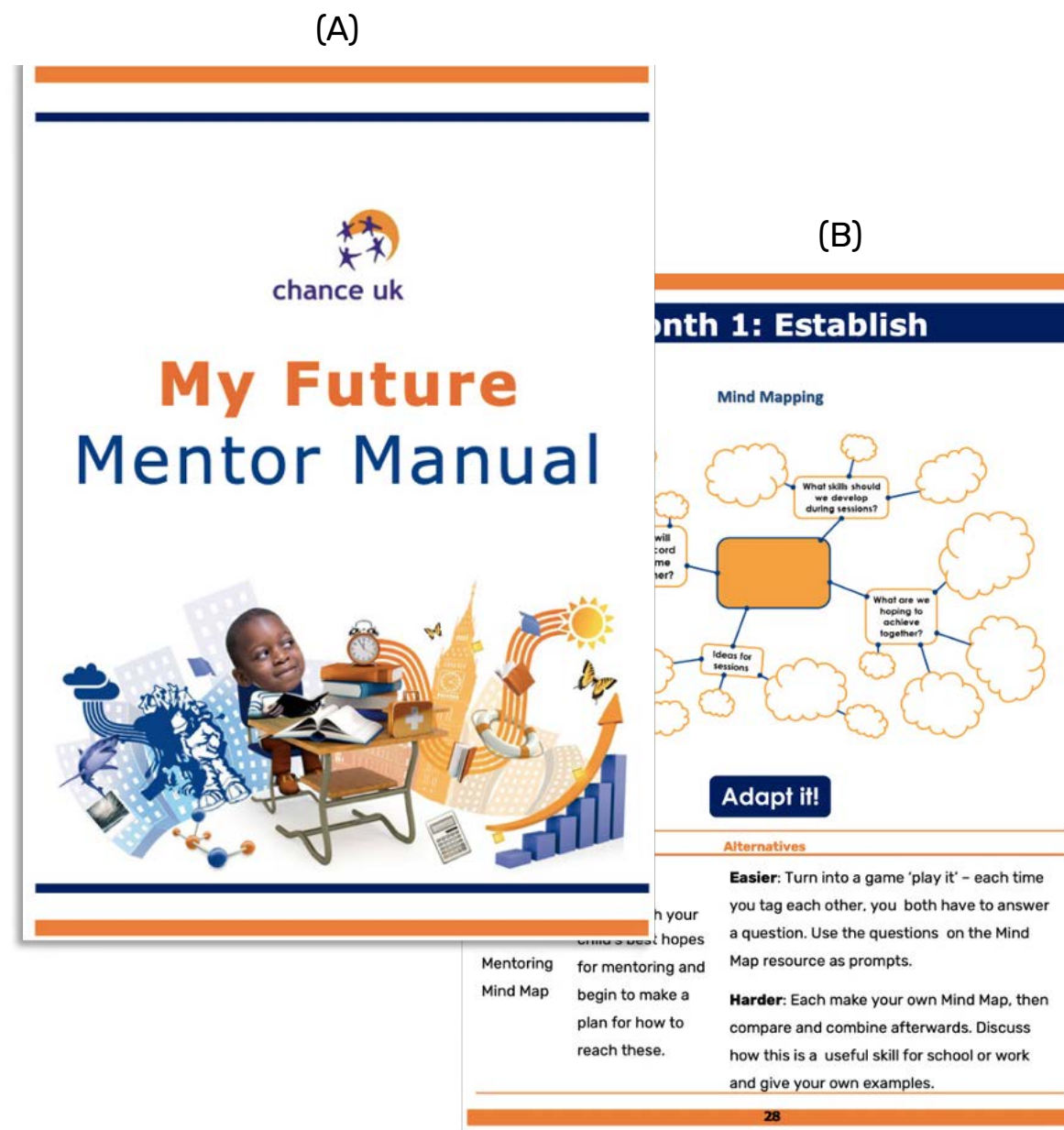


Figure 3. From the new My Future manual: (A) Manual cover; (B) Example of a mentoring activity, Mind Mapping, with notes on how to adapt it based on mentees' needs

05 MY FUTURE

5.3. New structured design

The manual guides mentoring pairs to begin one-to-one mentoring by building a strong positive relationship and setting expectations for mentoring in Months 1 to 3; this serves as a vehicle to plan and set goals and tasks to work on through a range of fun and challenging activities and new experiences

Using the 6 key mentoring techniques, pairs should then work on supporting mentees to develop the 5 social-emotional skills to foster improvement in the short- and long-term outcomes (Months 4-7).

Later mentoring sessions (Months 8-9) should focus on reflecting and celebrating successes ahead of ending mentoring (Fig 4). Implementation of the new My Future theory-based curriculum began in early April 2019, marking the beginning of Learning Cycle 1.



Figure 4. From the new My Future manual: Expected timeline and focus over the 9 months of mentoring

05 MY FUTURE

5.4. The cohort

A total of 50 mentees were expected to be included in the pioneer cohort of My Future. Mentees were referred to My Future by their school, a social care service, or their parent or main carer using the Chance UK referral form which includes parent- and teacher-rated SDQ Total Difficulties scores. Mentee referrals and screening, mentor recruitment and interviews, and matching of mentees with suitable mentors all took place on a rolling basis. Overall, 29 mentees were recruited from Camden and 21 from Southwark. Forty-six of these 50 mentees were eventually matched with a mentor from their London borough.

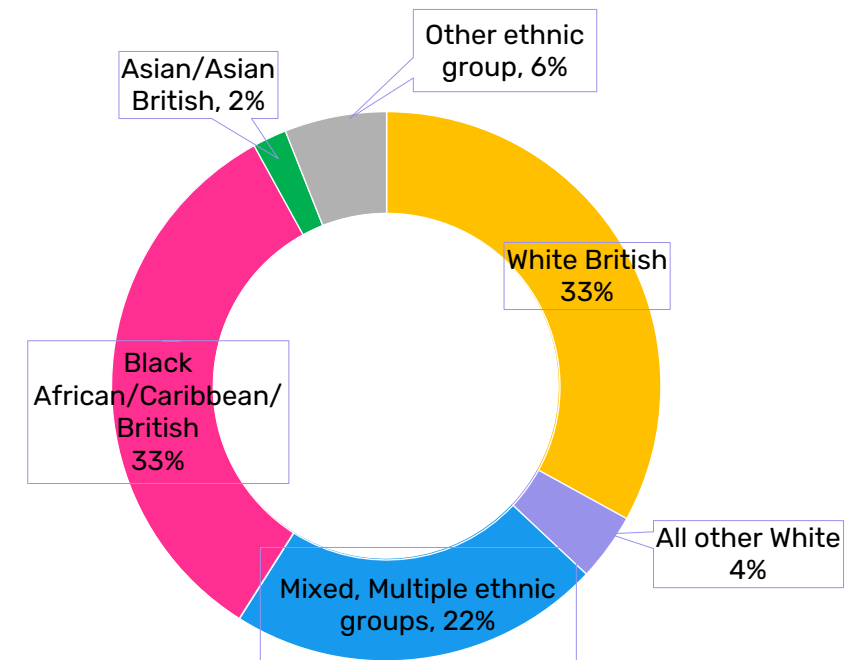
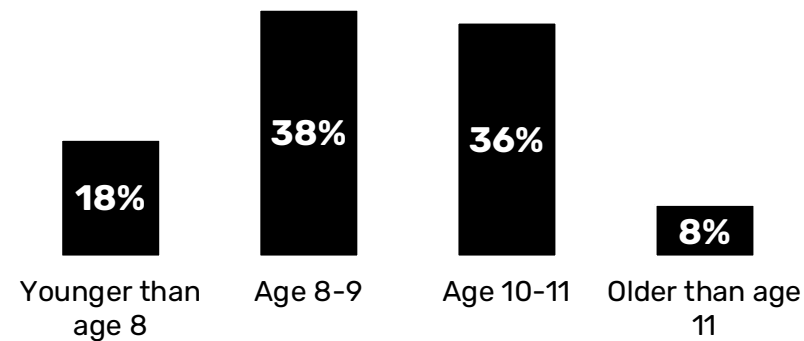
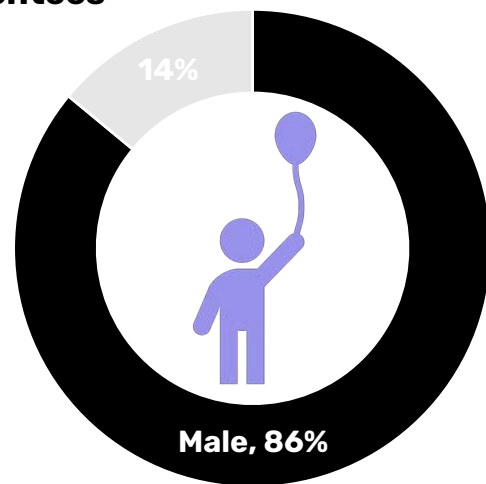
Figure 5 summaries the characteristics of the 50 mentees. It shows that nearly all mentees (43 out of 50) were male. Most were aged 8-11 years at referral. The group of mentees included a diverse distribution of racial and ethnic groups, with one-third of mentees identifying as White British, one-third identifying as either Black African, Black Caribbean or Black British, and one-fifth identifying as being of Mixed or Multiple racial or ethnic origin.

Figure 5 also shows that in contrast to mentees, most mentors (30 out of 46) were female. The group of mentors included a less diverse distribution of racial and ethnic groups, with most mentors (77%) identifying as White British or from another White racial or ethnic group.

Research evidence suggests that these demographic differences might have implications for the quality and perceived closeness of the mentoring relationship. For instance, male and female mentees tend to be referred to mentoring programmes for different reasons; female mentor-mentee pairs may be more prone to co-rumination than male mentor-mentee pairs or pairs of a male mentor and female mentee; and a male mentor and his mentee may be more likely to have similar expectations of mentoring than a female mentor and her mentee.^[6, 22] It is also possible that shared racial and ethnic identity between mentees and mentors might contribute to a general sense of similarity which in turn can influence bonding in the relationship.^[23] Chance UK are actively incorporating this learning of the demographic makeup of the My Future cohort into their overall mentor recruitment and pair-matching strategies to achieve more balance between pairs in future cohorts.

5.4. The cohort

Mentees



Mentors

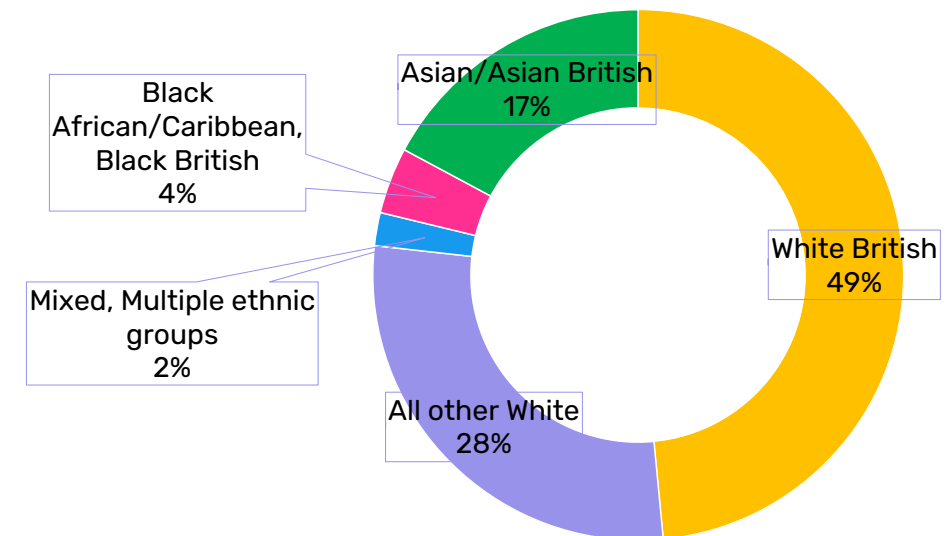
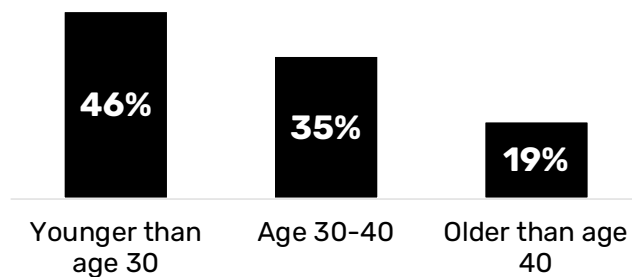
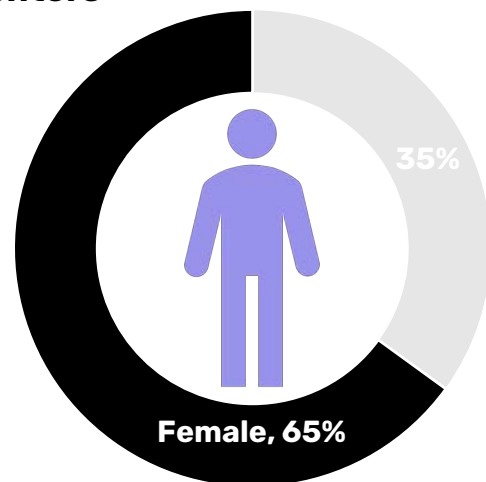


Figure 5. Summary of the characteristics of mentees and mentors

05 MY FUTURE

5.4. The cohort

Of the 50 mentees, 36 (72% of the cohort) graduated from My Future by the end of implementation in July 2020. Fourteen mentees discontinued My Future within their first 3 months, including the 4 mentees who were not matched. Discontinuations were mostly as a result of a parent or carer withdrawing their initial consent to be in My Future, or due to major life changes such as moving out of the catchment borough or the death of carer.

The My Future staff included 3 programme managers from Chance UK. In collaboration with Dartington's team of evaluators, these staff led regular data collection, process monitoring, insight generation and urgent decision making during the Implement and Observe and Analyse and Learn steps of each learning cycle.



PART III

Learning

**One-to-one
mentoring**



6.1. What did Chance UK want to learn about implementing one-to-one mentoring?

The evaluation examined how one-to-one sessions were implemented, especially whether implementation adhered to expectations and what factors contributed to any unexpected results. Expectations for implementation included the following:

Dosage

- o All pairs consistently plan and hold one-to-one sessions over the period of mentoring.
- o All pairs hold one-to-one sessions such that at least 67% of pairs achieve a minimum dosage of 24 out of 31 one-to-one sessions.

Adherence

- o Mentors adhere to the programme's structured design in the curriculum when planning and delivering mentoring.
- o Mentors use the programme curriculum to inform the focus and content of one-to-one sessions, including the objectives chosen, techniques used and skills targeted.

Parent/carer involvement

- o Mentors regularly engage with their mentee's parent/carer to encourage consistent participation and help maintain the mentee's progress between sessions.

The examination also included consideration about the potential influence of unexpected and unpredictable contextual factors. The main sources of data were one-to-one mentoring session reports completed by mentors, supervision reports completed by programme managers, and interviews and group discussions with programme managers during the Implement and Observe and Pause and Decide steps of each learning cycle.

At the end of each cycle, Chance UK and Dartington reflected on the learning about these aspects of implementation and whether assumptions about their feasibility were met. Learning informed adaptations to the programme design and delivery plans, which were then implemented and measured in the following cycle. Findings did not indicate a need to refine the programme's theory during the evaluation.

6.2. Findings about implementing one-to-one mentoring

Dosage

The total dosage for one-to-one mentoring sessions is 31 sessions over the 9 months. At the start of Learning Cycle 1, Chance UK anticipated that some mentor-mentee pairs would not hold all 31 sessions as planned. They assumed that some pairs would miss some one-to-one sessions for mostly unforeseeable or unavoidable reasons that prevent timely rescheduling such as illness, emergencies, inclement weather and other environmental or public disruptions. In anticipation, it was assumed that pairs would hold a minimum of 24 one-to-one sessions over the 9 months. This minimum dosage would be achievable for at least 2 out of every 3 pairs or 67% of the cohort.

Fewer pairs than expected achieved the minimum dosage of 24 out of 31 one-to-one sessions

Of the 46 mentor-mentee pairs who were eventually matched following referrals, 20 held at least 24 one-to-one sessions over the 9 months (Fig 6). Five of these pairs held the total 31 one-to-one sessions.

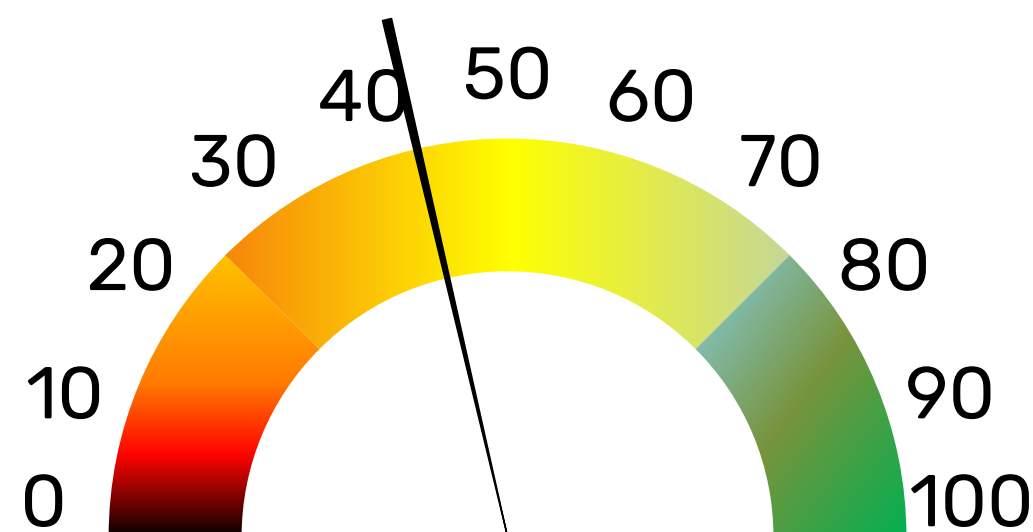


Figure 6. Of the total 46 matched pairs, 43% had at least 24 one-to-one sessions

6.2. Findings about implementing one-to-one mentoring

Dosage

Figure 7 shows that even when the group of pairs was restricted to just the 36 pairs who graduated, the proportion who held at least 24 one-to-one sessions over the 9 months was still below the 67% anticipated.

The most common number of one-to-one sessions held by pairs was 27. The estimated median duration of mentoring including one-to-one and group sessions was 6 months; 54% of matched pairs achieved or surpassed this duration.

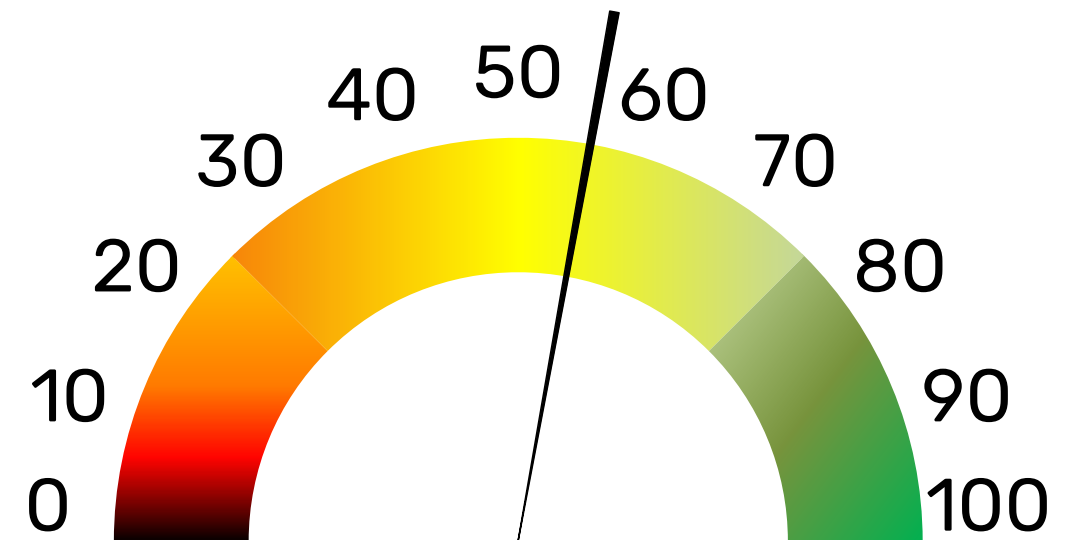


Figure 7. Of the 36 pairs who graduated, 56% had at least 24 one-to-one sessions

6.2. Findings about implementing one-to-one mentoring

Dosage

Most one-to-one sessions were held between pairs as planned over the mentoring period

Pairs plan for their weekly one-to-one sessions in advance. Mentors usually confirm the planned sessions with parents/carers and call or text them to reconfirm either in the days before or on the scheduled day prior to visiting the home to pick up their mentee. A typical one-to-one session lasts from 2 to 4 hours.

Among all matched pairs, 76% of planned one-to-one mentoring sessions were held over the period of mentoring from April 2019 to July 2020 (Fig 8). This proportion remained largely similar across the implementation period (Fig 9).

The evaluation also examined whether the change to remote delivery during Cycle 3 as a result of the COVID-19 pandemic influenced the dosage of one-to-one mentoring. These findings are presented in detail in *Insight Section 2: Adapting Mentoring During the COVID-19 Pandemic* (page 55). In summary, they show that fewer planned one-to-one sessions were missed in the period during and since stay-at-home measures were in place, suggesting that remote mentoring can potentially maintain contact within pairs and improve dosage.

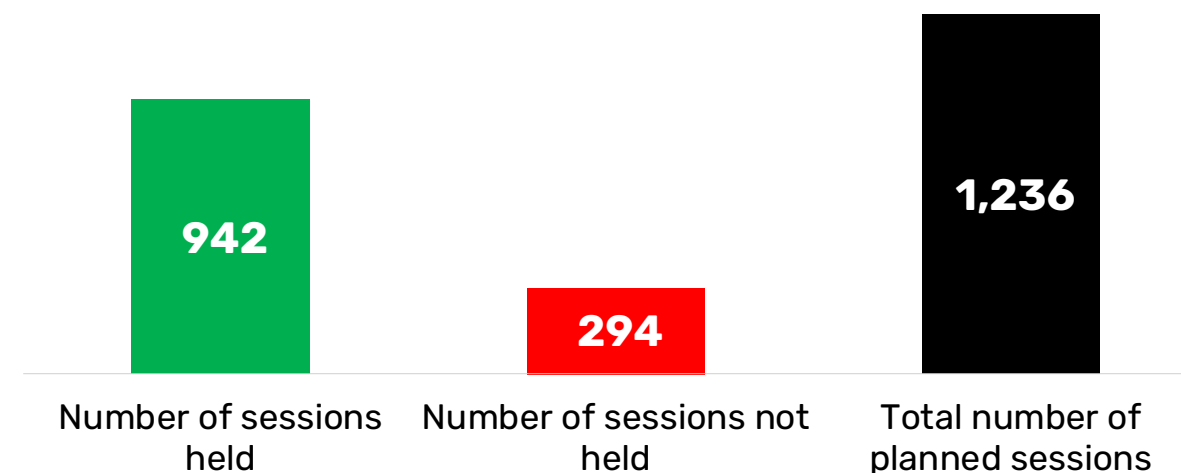


Figure 8. Number of planned one-to-one sessions that were held and missed over the mentoring period, for all matched pairs

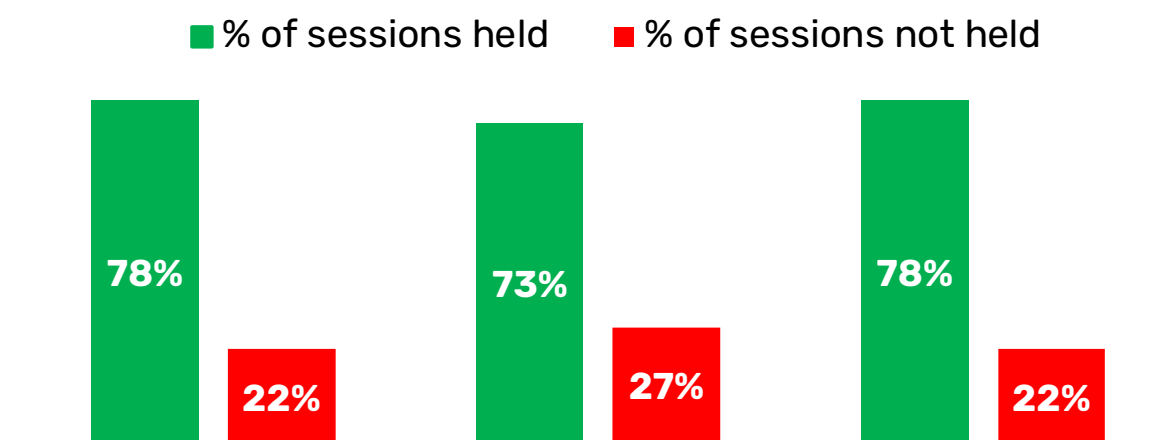


Figure 9. The proportion of one-to-one sessions held as planned remained fairly constant in each learning cycle at over 70%

6.2. Findings about implementing one-to-one mentoring

Dosage

Most of the given reasons for not holding one-to-one sessions as planned were foreseeable or preventable

Figure 10 shows that 37% of all missed one-to-one mentoring sessions were reportedly due to illness, emergency or environmental disruption, including the COVID-19 pandemic. However, 48% of all missed sessions were due to seemingly foreseeable or preventable reasons including holidays, social life events, being unavailable or unreachable, and parent/carer last-minute cancellations.

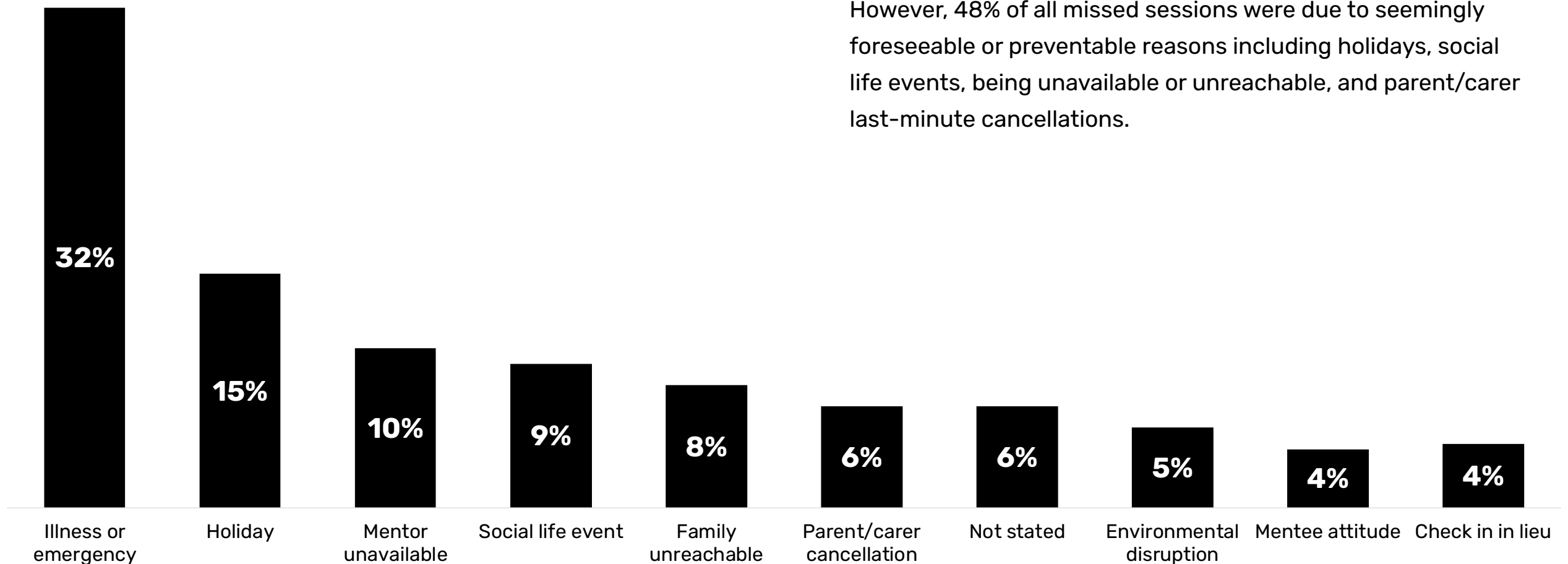


Figure 10. Reasons why one-to-one sessions were not held as planned, as reported by mentors

6.2. Findings about implementing one-to-one mentoring

Dosage

Reasons reported by mentors include:

“Parent booked a last-minute holiday.”

“Difficult arranging sessions with parents, lots of last-minute cancellations.”

“[Mother] overslept.”

“Parent forgot.”

“[Mentee] was away for half term with his dad.”

“[Mentee] had a school disco.”

“I had an education event.”

“I had to cancel as I had too much work to do.”

During the first Pause and Decide meeting at the end of Learning Cycle 1, Chance UK and Dartington reviewed these reasons and agreed that some of them, such as parent/carer last-minute cancellations, could be addressed immediately by refining existing plans and activities for involving parents/carers, and giving more practical guidance to mentors. These refinements were developed and implemented at the start of Learning Cycle 2, contributing to a lower occurrence of parent/carer last-minute cancellations in Cycles 2 and 3. Below, *Insight Section 1: Using Learning to Reduce Last-minute Parent/Carer Cancellations* (page 26) highlights how this process of using learning to adapt and monitor the results of changing unfolded.

6.2. Findings about implementing one-to-one mentoring

Dosage

Other reasons for not having planned one-to-one sessions, such as seasonal holidays, were more difficult to address during the evaluation and their episodes recurred more frequently during periods that spanned school holidays (Fig 11). As an immediate response during the evaluation, Chance UK encouraged and supported mentors to either immediately reschedule sessions disrupted by these reasons or find feasible ways to include missed content in remaining mentoring sessions.

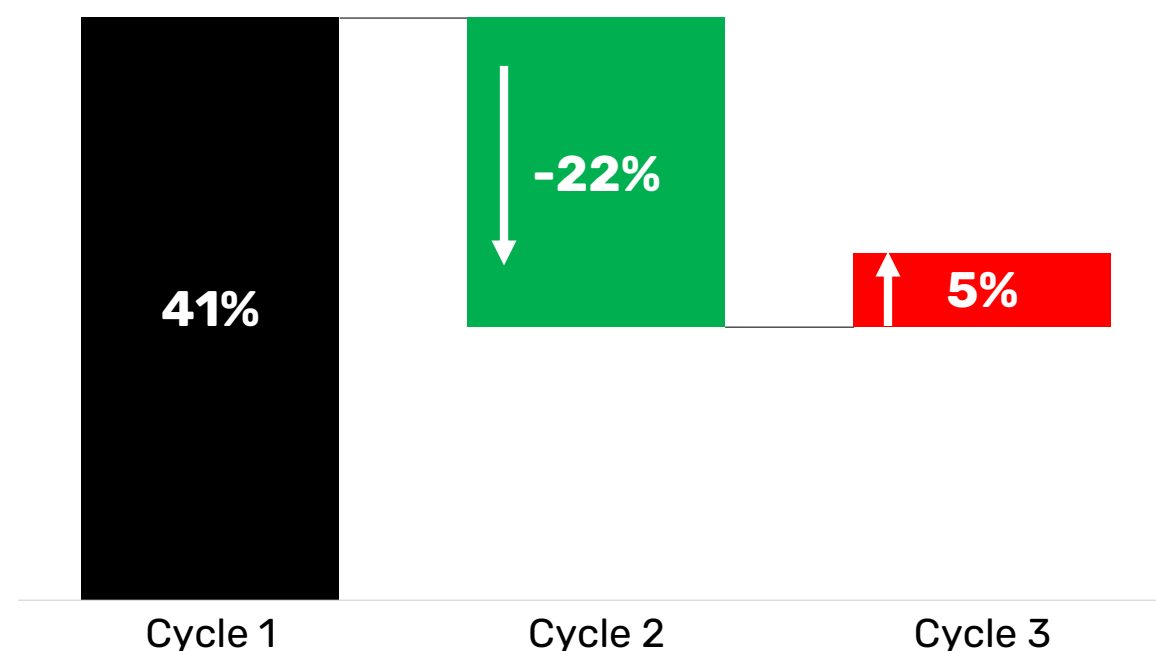


Figure 11. Change in the percentage of reports of holidays from 41% of all foreseeable/preventable reasons in April-August 2019 (Cycle 1), declining in September to mid-December 2019 (Cycle 2), and rising in late December 2019 to July 2020 when the cohort's mentoring ended (Cycle 3). Change shown as difference in percentage points.

INSIGHT SECTION 1: USING LEARNING TO REDUCE PARENT/CARER LAST-MINUTE CANCELLATIONS

An unexpected finding at the end of Learning Cycle 1 in August 2019 was that parent/carer last-minute cancellations accounted for 21% of seemingly foreseeable or preventable reasons (after excluding illness, emergencies and environmental disruptions).

Chance UK suggested several explanations based on their own experience, and from discussions with mentors in supervision meetings:

- o Some parents/carers might not have valued or prioritised mentoring sessions as much as other life events.
- o Being new to mentoring, some parents/carers might not have understood their role in encouraging and reinforcing their child's participation.
- o Some mentors might not have started or been able to engage with parents/carers.

These explanations matched the feedback given by mentors in mentoring session reports.

"I rated carer 3.5 out of 10 in her interest in [mentee's] progress. Have attempted conversation but mum doesn't show interest in what we've done." My Future mentor

"Mum is concerned about [mentee's] future, but perhaps not with her present. Doesn't ask questions, expects only negative." My Future programme manager

"I had challenges with [mother] and her understanding of the mentor role." My Future mentor

"I need a bit more guidance on parents – parents being more invested." My Future mentor

INSIGHT SECTION 1: USING LEARNING TO REDUCE PARENT/CARER LAST-MINUTE CANCELLATIONS

In response to this finding, in September 2019 Chance UK:

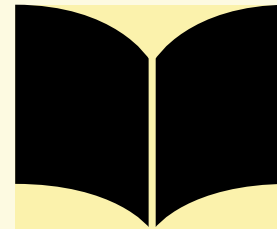
- o Reassessed initial strategies for communicating with and involving parents/carers.
- o Identified new strategies and meeting opportunities within the programme for more involvement.
- o Redesigned the parent/carer involvement component to include adaptations.

Adaptations were implemented from the end of October 2019.



Adaptations aimed at parents/carers

- o My Future Parent/Carer Pack that includes essential programme information, activity materials and a code of conduct. The code outlines the expected roles and commitment of parents and carers.
- o Supervisors use the regular Month 3 meeting with mentoring pairs and parents/carers to check in on parent/carer level of interest.



Adaptations aimed at mentors

- o Updated mentoring curriculum manual and guidance documents with ways for mentors to engage with parents/carers, including sharing about sessions at 'drop offs' and sending messages about mentee's milestones.
- o Supervisors regularly check in on their mentor's engagement efforts during supervision meetings.
- o Escalation pathway for a mentor to seek their supervisor's intervention when engagement efforts are persistently not working.
- o Change in how mentors report on parent/carer response to engagement efforts from a 10-point number scale to a simpler Likert scale.

INSIGHT SECTION 1: USING LEARNING TO REDUCE PARENT/CARER LAST-MINUTE CANCELLATIONS

Following the adaptations, the proportion of reports of parent/carer last-minute cancellations decreased by 9 percentage points in Cycle 2, falling from 21% to 12% of all foreseeable or preventable reasons. It continued to decrease in Cycle 3, falling by a further 5 percentage points to 7% of all foreseeable or preventable reasons (Fig 12).

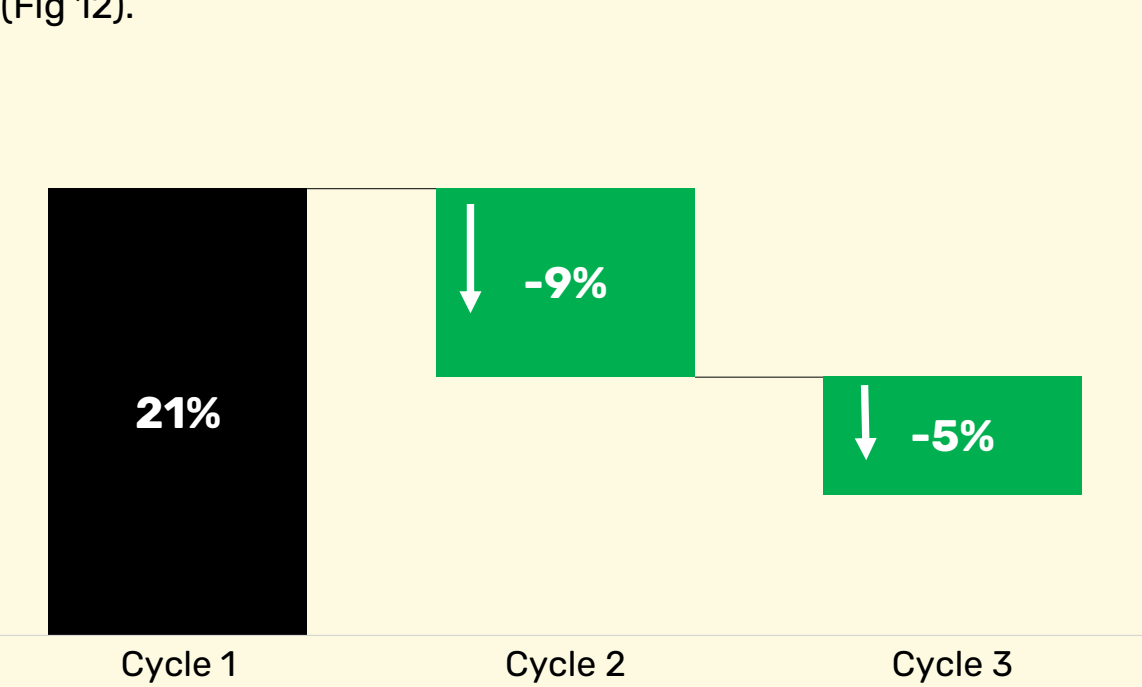


Figure 12. Change in the percentage of reports of parent/carer last-minute cancellations within learning cycles. Change shown as difference in percentage points.

At the same time, mentors' reports of attempts to engage with a parent/carer increased by over 30 percentage points in Cycle 2, from 36% to 67%. This remained similar in Cycle 3, decreasing by a mere 3 percentage points (Fig 13).

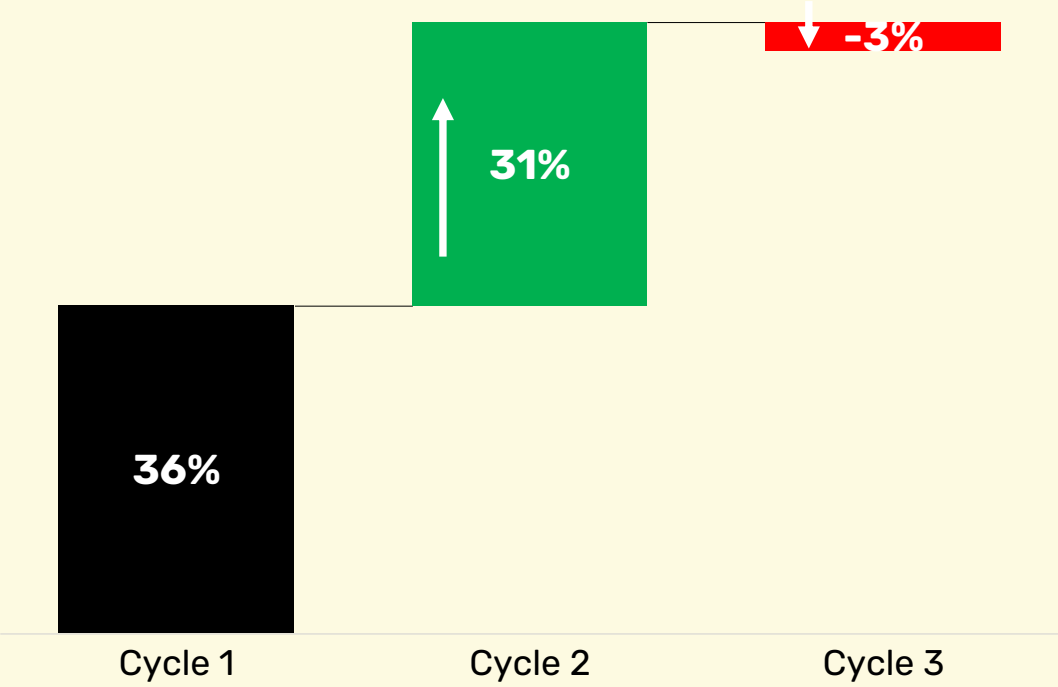


Figure 13. Change in the percentage of reported attempts to engage with a parent/carer within in cycles. Change shown as difference in percentage points.

INSIGHT SECTION 1: USING LEARNING TO REDUCE PARENT/CARER LAST-MINUTE CANCELLATIONS

Throughout implementation, mentors were expected to report on parent/carer level of interest in their engagement efforts each time they attempted to engage. This reporting helps the programme monitor efforts and identify where further intervention is needed. Across the whole cohort of matched pairs, mentors reportedly attempted to engage with parents/carers 624 times; they reported on parent/carer interest level for 87% of the time.

Of these instances, most parents/carers were very interested in what mentors shared (58%) (Fig 14).

Collectively these insights show the impact of using learning to identify and respond quickly to controllable barriers to programme delivery. They highlight the necessity of strong parent/carer commitment and interest from the outset in order for implementation to proceed as planned. By the end of Learning Cycle 3, Chance UK were considering ways to determine whether parents/carers have strong commitment and interest as early as at referral and when joining My Future. They were also considering more ways to improve involvement during mentoring to further reduce last-minute cancellations and address other foreseeable or preventable barriers like social life events.

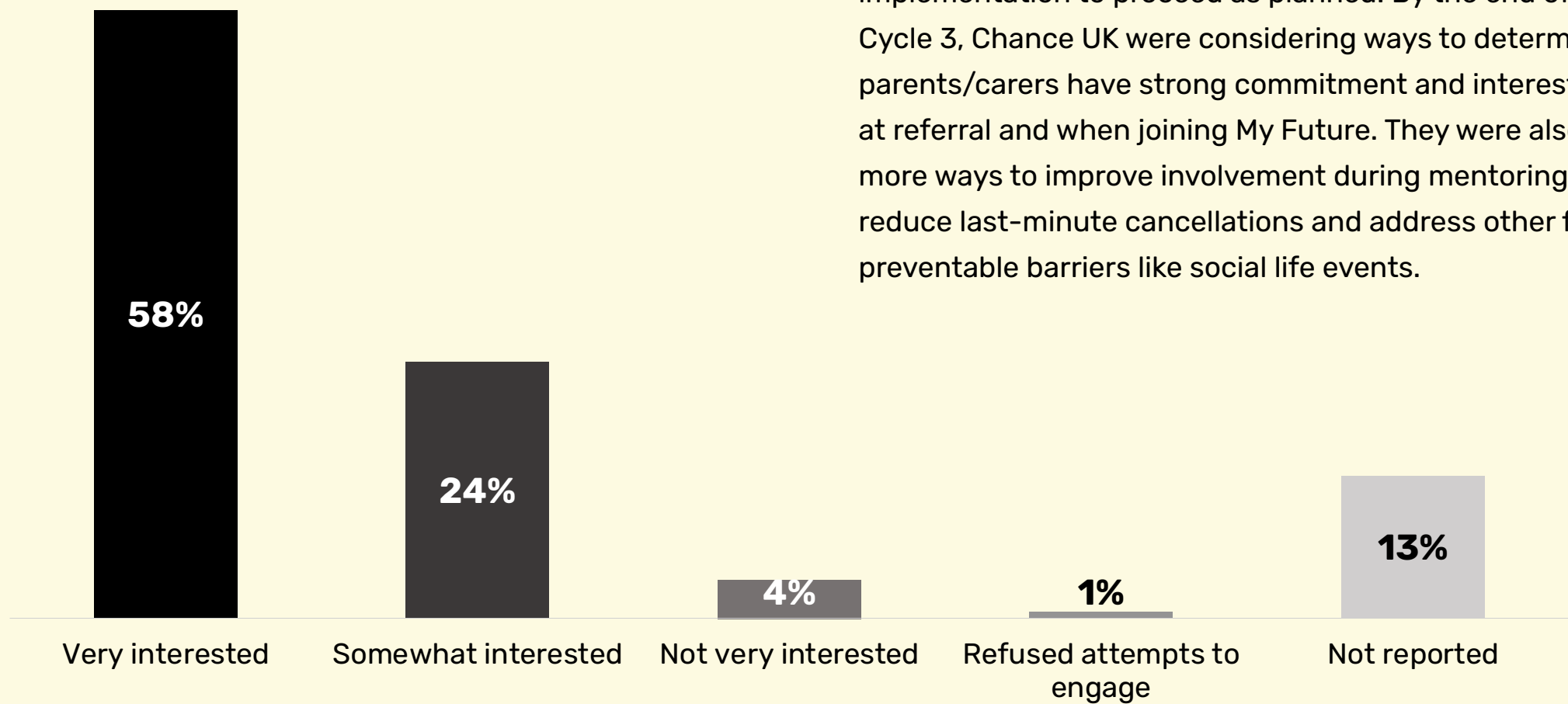


Figure 14. Proportion of parents/carers who were either very, somewhat or not very interested in, or who refused mentors’ attempts to share what their child did or learned in mentoring

6.3. Summary and recommendations

Dosage

- o Most one-to-one sessions were held as scheduled (76%).
- o Fewer pairs than expected achieved the minimum dosage of 24 out of 31 one-to-one sessions (43% instead of 67%).
- o In contrast to programme managers' assumptions, most of the reasons for not holding one-to-one sessions as planned were preventable (48%), such as last-minute cancellations by parents/carers and holidays or social events in the lives of mentees and mentors.
- o Improvements in strategies to involve parents/carers in My Future coincided with a reduction in the frequency of last-minute cancellations (from 21% to 7%) and a considerable increase in the frequency of mentors' engagement with parents/carers (from 36% to 64%).
- o Other (less direct) strategies were used to accommodate disruptions to mentoring due to seasonal holidays which recurred more frequently during mentoring periods that overlapped with school holidays.
- o Findings presented further in this report suggest that remote delivery contributed to shorter, more frequent contact between pairs and reduced the number of missed one-to-one sessions.
- o Learning over 3 cycles showed the promising influence of strong parent/carer interest and involvement on delivery. For Chance UK, it also highlighted the need for more anticipatory approaches when starting mentoring and planning one-to-one sessions. These might include:
 - Ensuring parents/carers understand and are committed to supporting mentoring when they agree to participate in My Future.
 - Helping mentors early in the programme to gain the skills and confidence to engage with parents/carers.
 - Collaborating with teachers who can use their relationship and frequent contact with parents/carers to encourage them to continue supporting mentoring.
 - Considering when in the calendar/academic year pairs join My Future so they can factor seasonal holidays into their mentoring timeline.
 - Planning alternatives to face-to-face activities (such as telephone, online and self-guided activities). These should still help to build and maintain the positive interpersonal relationship between mentoring pairs.

6.4. Findings about implementing one-to-one mentoring

Adherence

Mentors were expected to use the curriculum manual and available guidance to choose and deliver programme materials, draw on relevant activities from elsewhere, and modify activities to meet mentees' needs and development stage while maintaining the programme's core structure and functions.

The focus and content of one-to-one sessions were well aligned with the expected monthly timeline and curriculum in the mentoring manual

Figure 15 shows that overall, implementation of one-to-one sessions was well aligned with the expected timeline and focus in the curriculum (see Fig 4 above). It shows that in Month 1, as expected, pairs mostly worked on objectives related to establishing relationships and boundaries, and then declined the focus on this over time. By Month 2, pairs were planning, and setting goals and tasks to work on. These goals and tasks became the focus from Month 3. From Month 7, pairs were reflecting and celebrating more ahead of ending mentoring.

Some pairs also re-established boundaries in Month 9 to make the end of mentoring easier. Pairs continually used fun and tried new things throughout mentoring to foster relationship building and social development.

Pairs used a range of activities from the curriculum and elsewhere to achieve the objectives. Overall, less than 10% of one-to-one session reports submitted by mentors mentioned adapting a curriculum activity to suit a mentee's needs or an arising situation. These adaptations were in line with the curriculum and other guidance given.

6.4. Findings about implementing one-to-one mentoring

Adherence

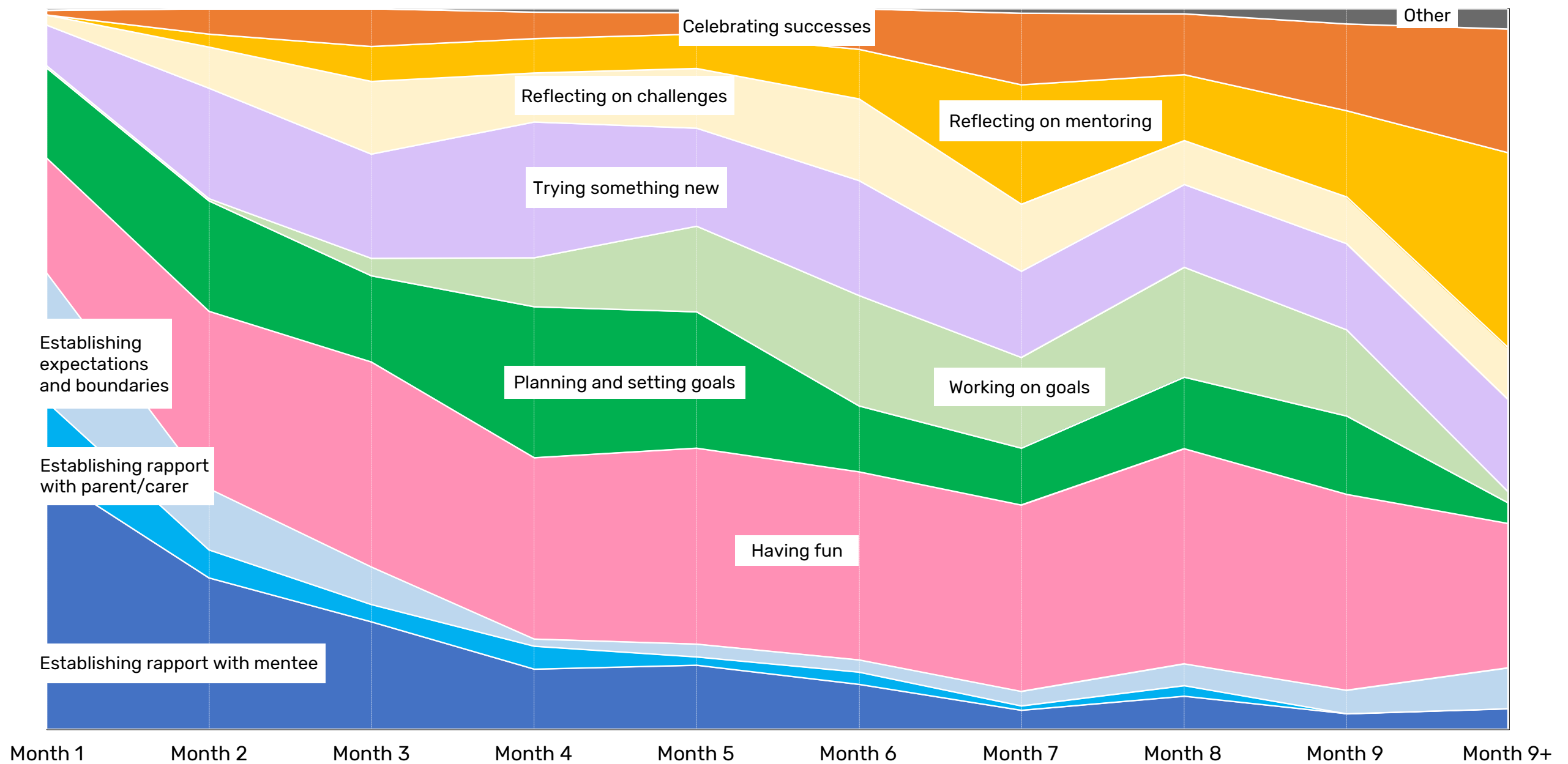


Figure 15. How frequently in each programme month mentors chose the 10 My Future curriculum objectives

06 IMPLEMENTING ONE-TO-ONE MENTORING

6.4. Findings about implementing one-to-one mentoring

Adherence

Figure 16 shows that overall, mentors used the 6 mentoring techniques to help mentees build the social-emotional skills related to the immediate outcomes, although some techniques were used considerably more than others. For instance, 54% of one-to-one mentoring time (513 times out of the total 942 one-to-one sessions held as planned) was spent on using social support techniques to help mentees develop social skills.

This included providing mentees with opportunities for fun and respite from daily stresses, and showing a genuine interest in mentees. For example, reports of using social support increased during the period after 23 March 2020 when COVID-19 restrictions were imposed. Research evidence suggests that social support creates space for relationship building and enables mentees to be more

trusting of and receptive to mentoring support.

Pairs spent the least amount of time using techniques aimed at helping mentees build identity. Identity building includes helping mentees to identify attitudes, behaviours and qualities in their

mentors and others that help them positively challenge their own identity and social roles, and which they can emulate. [20] Chance UK postulated that mentors might not have sufficient opportunities to use identity-building techniques because of too few related activities in the curriculum, as well as the differences in gender and racial and ethnic identity between mentees and mentors. As stated earlier, Chance UK are actively making changes to address these potential factors.

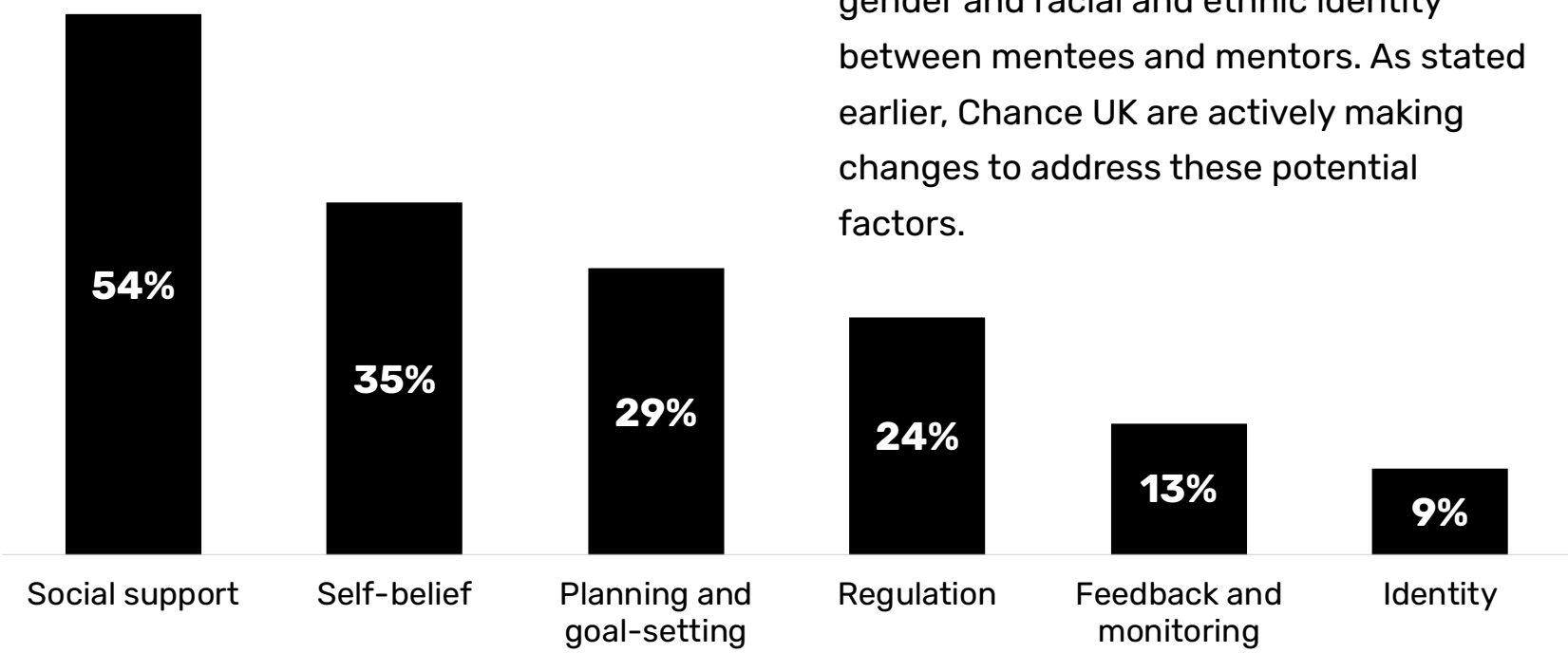


Figure 16. How frequently mentors reported using the 6 mentoring techniques, out of the total 942 one-to-one sessions held as planned. Mentors may have used more than one technique in a session

6.4. Findings about implementing one-to-one mentoring

Adherence

Figure 17 shows that overall, mentors spent most of the mentoring time supporting mentees to develop the expected 5 social-emotional skills related to self-regulation and self-esteem, and only 8% of the time targeting other non-curriculum skills such as listening and being attentive.

A similar amount of time (24%-27% of the total 942 one-to-one sessions held as planned) was spent on activities related to improving 4 out of the 5 skills; the exception was 'naming and recognising triggers' which was reported in 13% of the one-to-one sessions held.

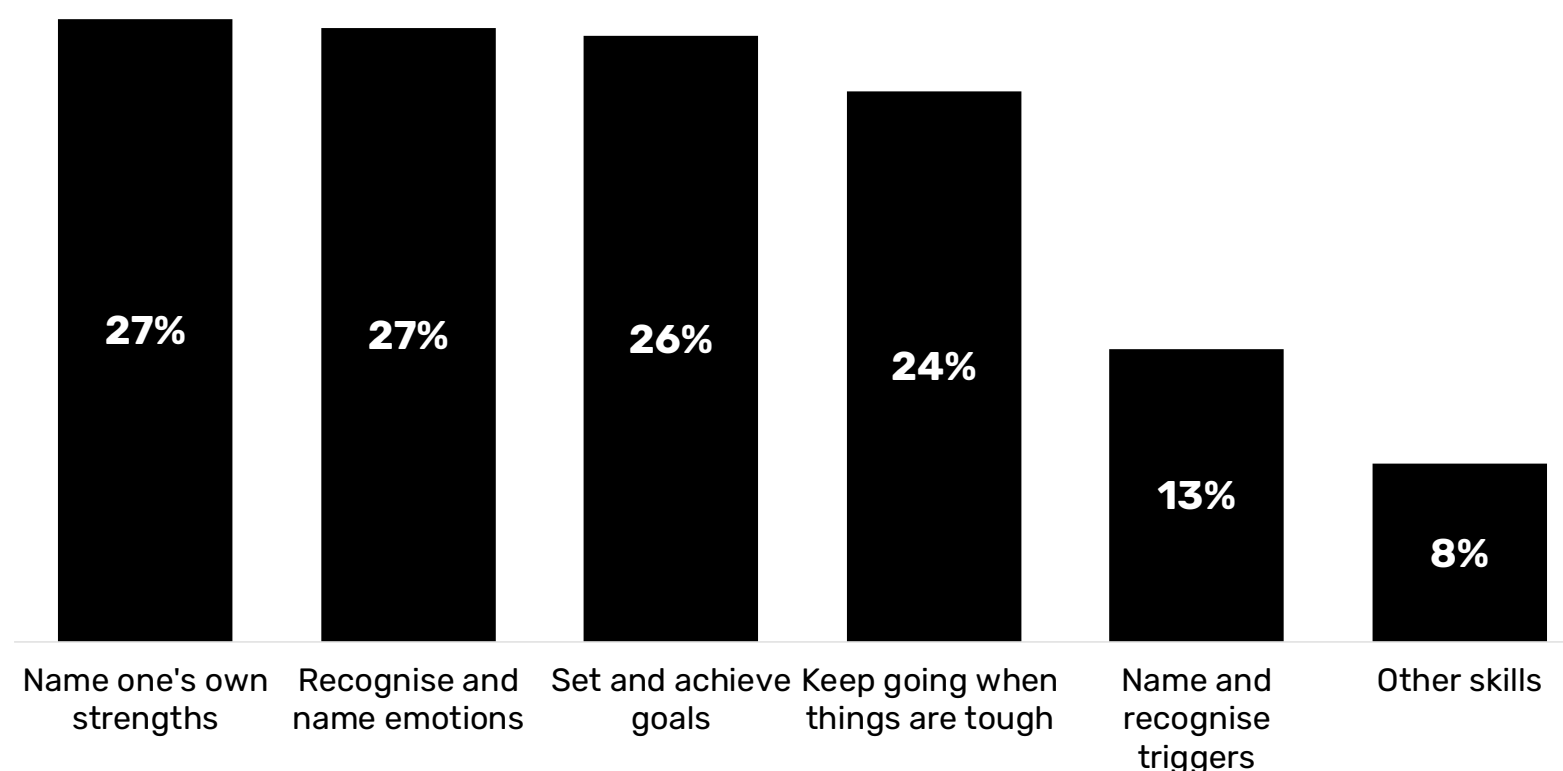


Figure 17. How frequently all mentors reported targeting the 5 social-emotional skills, out of the total 942 one-to-one sessions held as planned. Mentors may have targeted more than one skill in a session

6.4. Findings about implementing one-to-one mentoring

Adherence

There are several possible reasons for the difference in frequencies between skills (and techniques shown previously).

- o The data on techniques and skills are based on the number of times mentors mentioned these in mentoring session reports. Some mentors might not have used the data system's built-in option to indicate more than one skill for a single session. Instead some might have reported the skill that they considered the primary focus of the session or the one that occupied the most time.
- o Some mentors might not have understood or been able to identify how things they did in mentoring fit with expected skills or techniques.
- o Lower frequencies might have resulted from intentionally focusing on one technique in a session or spending more time on building a specific skill over several sessions. This approach might have been driven by the needs of the mentee or the mentor's own competence and confidence – mentors more comfortable or experienced with mentoring might have covered more in one session.

Whether the data were representative of mentors' work with mentees during mentoring was likely influenced by these factors. Moreover, the mere mention of a skill or technique does not fully indicate the time and intensity of the work done in a session.

Pairs generally maintained adherence to the curriculum structure and function even when delivery of one-to-one sessions was adapted to remote delivery in response to COVID-19-related safety measures (see in *Insight Section 2: Adapting Mentoring During the COVID-19 Pandemic*, page 55).

No expectations or assumptions about the frequency of using techniques or targeting skills were established prior to implementation. Chance UK can use the current learning to set such expectations for future cohorts and provide additional capacity-building support to mentors.

6.4. Findings about implementing one-to-one mentoring

Adherence

How pairs think and feel about their mentoring experience might have also influenced their decisions and practice

How much My Future is acceptable to and accepted by mentors and mentees can influence programme uptake and implementation.^[24] At the end of mentoring, Chance UK administered an open-ended Debrief Survey to all mentors. A total of 17 mentors commented on what aspects of My Future they found either **more favourable** or **less favourable**.

I. The opportunity to give back and help children

All respondents to the Debrief Survey mentioned that volunteering with My Future fulfilled their need to help others. Similar sentiments were expressed by most of the 46 mentors in response to interview questions about their motivations for volunteering. Several mentors specifically mentioned wanting to help children and valuing the potential of mentoring as an intervention to support change. Some mentors highlighted that observing positive changes in their mentees during mentoring was the most positive part of their mentoring experience. It may be that

witnessing a mentee's progress helped to confirm their baseline feelings that mentoring can work and gave them a sense of accomplishment. Such motivations might have contributed to some mentors' overall uptake of My Future and their appreciation for and adherence to the programme's structure and function.

"I have always enjoyed volunteering and I've done some mentoring and tutoring with young people before and know that it can have such a positive impact on their lives." My Future mentor

"The biggest success I experienced was the amazing change that my [mentee] had during the programme. Seeing the huge improvement in his self-confidence, self-esteem, self-regulation and social skills, allowing his relationship with family, friends and outsiders to grow, and becoming the fearless but nice and gentle kind person he always was but needed to show – it was amazing. I have never been so proud of anyone in my life (not even myself)." My Future mentor

6.4. Findings about implementing one-to-one mentoring

Adherence

II. Compatibility in the mentoring relationship

All 17 mentors felt that they and their mentee were a good match. Mentors had different views about what led to a compatible mentoring relationship, including having similar personality traits and interests, liking the same activities as their mentee, and existing mentoring skills and experience. While some mentors felt a high level of compatibility from the start of mentoring, others admitted feeling uncertain at the outset and instead built compatibility while establishing the mentoring relationship in the first 3 months.

At 3 and 7 months into mentoring, mentees also rated how caring and acceptable they found their relationship with their mentor using the Mentor-Youth Alliance Scale (MYAS). The MYAS includes 10 questions and ratings for each question range from 1 (least favourable) to 4 (most favourable), for a maximum positive score of 40. Table 2 shows that after 3 months, most mentees had very positive feelings about their relationship with 67% of mentees rating it 31 or higher. The ratings at 7 months show that mentees' feelings became more positive, with 89% rating their relationship

31 or higher, and 48% rating it 40 out of 40. Chance UK can enhance matching by continuing with current strategies and recruiting mentors from more culturally diverse backgrounds as the latter might strengthen the perceived level of compatibility in some relationships.

MYAS TOTAL SCORE RANGE	NUMBER OF MENTEES WITHIN THIS RANGE AT 3 MONTHS	NUMBER OF MENTEES WITHIN THIS RANGE AT 7 MONTHS
10-19	1	1
20-29	8	2
30 or over	18	24
Total	27	27

Table 2. Summary of the number of mentees and their MAYS ratings at 3 months and 7 months of mentoring (n=27)

6.4. Findings about implementing one-to-one mentoring

Adherence

III. The clear curriculum structure and manual

Most mentors described the curriculum structure as clear and the manual as being a helpful guide to how to implement mentoring sessions. Some felt that the curriculum provided a consistent way for pairs to plan and work together each week and named the curriculum as the programme's overall main strength. This might have contributed to adherence for some mentors. This is also encouraging feedback for Chance UK as achieving a more structured design to a mentoring programme was one of the main reasons for developing My Future.

"I think that the main strength is the really well-designed plan of this programme, from start to end. All the steps and activities are perfectly designed." My Future mentor

"Mentoring programme structure allowed clear guidance of what steppingstones to take and enabled a good rapport to be developed with mentor and child." My Future mentor

6.4. Findings about implementing one-to-one mentoring

Adherence

IV. Receiving support with mentoring

Most respondents to the Debrief Survey felt that the training provided by Chance UK prior to mentoring adequately prepared them for delivery. Some felt unprepared to manage more unpredictable mentoring situations, such as challenging behaviours in mentees, lack of cooperation from parents/carers, and having to mentor remotely during the context of COVID-19. The influence of the pandemic on one-to-one and group mentoring, and Chance UK's response, are detailed in *Insight Section 2: Adapting Mentoring During the COVID-19 Pandemic* (page 55).

Most mentors credited supervision support for helping them to manage challenges, although some would have liked more structure or plans for their supervision meetings and more support between the expected monthly contacts with supervisors. All mentors had a supervision contact in their first and second months of mentoring, but supervision contact became less frequent and consistent after Month 2. No mentor received the expected monthly frequency of supervision contact during the 9 months.

Chance UK explained that over time they started tailoring the frequency, regularity and nature of supervision contact (such as an email instead of a phone call) based on how they thought mentors were progressing. At the end of Learning Cycle 3, they reflected that this decision to tailor might not be suitable for some mentors who need more regular and consistent supervision contact.

"I found supervisions were a great time for me to contemplate how mentoring was going and how my mentee was developing. [However], it might be useful to have several questions, or a short task directed at the mentor before the supervision. It might also be good to know before the supervision what the main focus will be." My Future mentor

"A couple of mentors said they weren't sure they were doing OK (even though they were doing brilliantly!) because they hadn't heard from me for a few weeks. A quick call can get a mentor back on track very quickly." My Future programme manager

6.4. Findings about implementing one-to-one mentoring

Adherence

V. Mentoring on a weekly basis

Some mentors felt burdened by having to plan and deliver mentoring sessions every week. Some also found it challenging to constantly schedule days and times to meet that were convenient for themselves *and* the mentee and their parent/carer. Parent/carer last-minute cancellations and nonresponse added to this challenge. Figure 18 shows that reports of mentor unavailability increased in Learning Cycle 2 – a period which coincided with when most pairs were moving past the first 3 months of mentoring and were learning to integrate mentoring into their day-to-day life.

Chance UK responded immediately by encouraging and supporting mentors to communicate more with parents/carer, reschedule sessions as soon as possible, and include missed content in remaining sessions. Chance UK are also considering more long-term solutions to alleviate mentor burden and perceived opportunity costs of volunteering in their service, such as providing mentors with financial incentives.

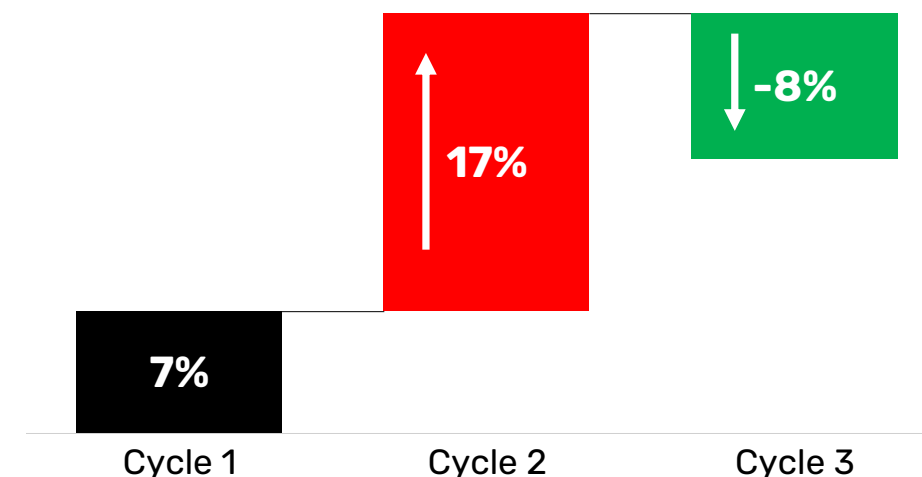


Figure 18. Change in the percentage of reports of mentor unavailability within learning cycles. Change shown as difference in percentage points.

6.4. Findings about implementing one-to-one mentoring

Adherence

Further in this report, Insight Section 2 presents findings showing that a shift to shorter (30-minute) remote one-to-one mentoring twice per week coincided with considerably fewer planned sessions being missed between the period 23 March 2020 (the day national stay-at-home restrictions were imposed in England) and 31 July 2020 (the end of implementation and mentoring for all pairs in My Future's pioneer cohort). The section reflects on the potential negative implications of such an adaptation on building and maintaining a positive mentoring relationship and adhering to the curriculum functional structure and content as expected. However, the potential for shorter remote sessions to increase contact within mentoring pairs and minimise scheduling difficulties is encouraging and worth further exploration when considering ways to improve dosage and reduce burden.

"Perhaps consider changing to once a fortnight as weekly was at times too onerous - perhaps more so for the mentor." My Future mentor

"Finding a regular time to meet each week was sometimes a struggle, given that [mentee's] mum works shifts and sometimes cancelled at short notice after having to take on over-time." My Future mentor

6.4. Findings about implementing one-to-one mentoring

Adherence

VI. Data collection challenges

Some mentors were challenged by having to use the data system to complete weekly reports of mentoring sessions. Some of this challenge resulted from several faults in the system's functions. Some mentors also did not fully understand how to complete the reporting form and found the wording and purpose of some questions unclear. These challenges quickly became clear to Chance UK and Dartington who, through data monitoring in the Implement and Observe step of Learning Cycle 1, discovered that some reports had incomplete or incorrectly entered data. Chance UK responded by working with the system developers to identify and fix the malfunctions, replacing some reporting questions and revising the wording of others, and creating a short guidance document for mentors on how to complete the reporting form. These adaptations reduced the occurrence of incomplete and inaccurate session reports and led to fewer reports of challenges from mentors.

"I needed more explanation of the session report form – some questions were confusing at first." My Future mentor"

"By far the most challenging thing [about rapid-cycle design and testing] for a small team like ours was the data collection and accuracy. Having guidance from Dartington was very useful but there were still lots of data cleaning involved and back and forth on the data. Not having the systems or internal capacity to set up the data collection system to match with what the evaluation team needed and the regularity of data exporting for each of cycle point decision meeting were also challenging." Chance UK senior programme manager

06 IMPLEMENTING ONE-TO-ONE MENTORING

6.4. Findings about implementing one-to-one mentoring

Adherence

Generally, the My Future staff, mentees and mentors, and parents/ carers and teachers were challenged by the number of assessments and collection timepoints in the programme. There were five assessment tools: the SDQ, used to measure the end-of-service outcome at referral and the end of mentoring, and 4 other assessments that were administered during mentoring. Table 3 describes these 4 assessments and their use in My Future.

Some mentors found the frequency and nature of some of these assessments burdensome and disruptive to their mentoring plans and relationship. Teachers expressed similar concerns about burden to Chance UK.

“This makes sense on paper, but in my instance, I found it deeply inauthentic and [it] impacted all the effort and time I spent building up [mentee’s] trust. He so deeply didn’t trust people and organisations because he had been let down so many times before – so suddenly a session that was going well and we were having fun and making progress, would be derailed by either pulling out the Mountain or asking these scaling questions.” My Future mentor

ASSESSMENT	INTENDED USE IN MY FUTURE
Emotional Literacy Assessment (ELA)	Assess mentees’ social-emotional skills at baseline prior to mentoring and at least one other point in time (Month 8). It measures 5 dimensions of emotional literacy related to self-regulation and self-esteem (My Future immediate outcomes): motivation, empathy, self-awareness, self-regulation and social skills. There are 3 versions (called checklists): pupil (mentees), teacher and, parent, all validated using populations of primary school children, teachers and parents in England.
Rosenberg Self-Esteem Scale (‘Rosenberg’)	A 6-question version of this standardised measure was used to assess mentees’ sense of their self-worth. It was meant to be administered at the same timepoints as the ELA.
Mountain Scale	Mountain Scale (Fig 19), newly created by Chance UK in the initial Design step. It was meant to help mentees self-monitor their progress in the 5 social-emotional skills using a 10-point numeric scale. It was to be completed in the introduction meeting (baseline), then again at Months 3-4, 5-6 and 8-9. Mentees and parents/carers were also encouraged to keep a laminated copy of the Mountain Scale at home to continue to self-monitor.
MYAS	See earlier details about the MYAS

Table 3. My Future monitoring assessments

6.4. Findings about implementing one-to-one mentoring

Adherence

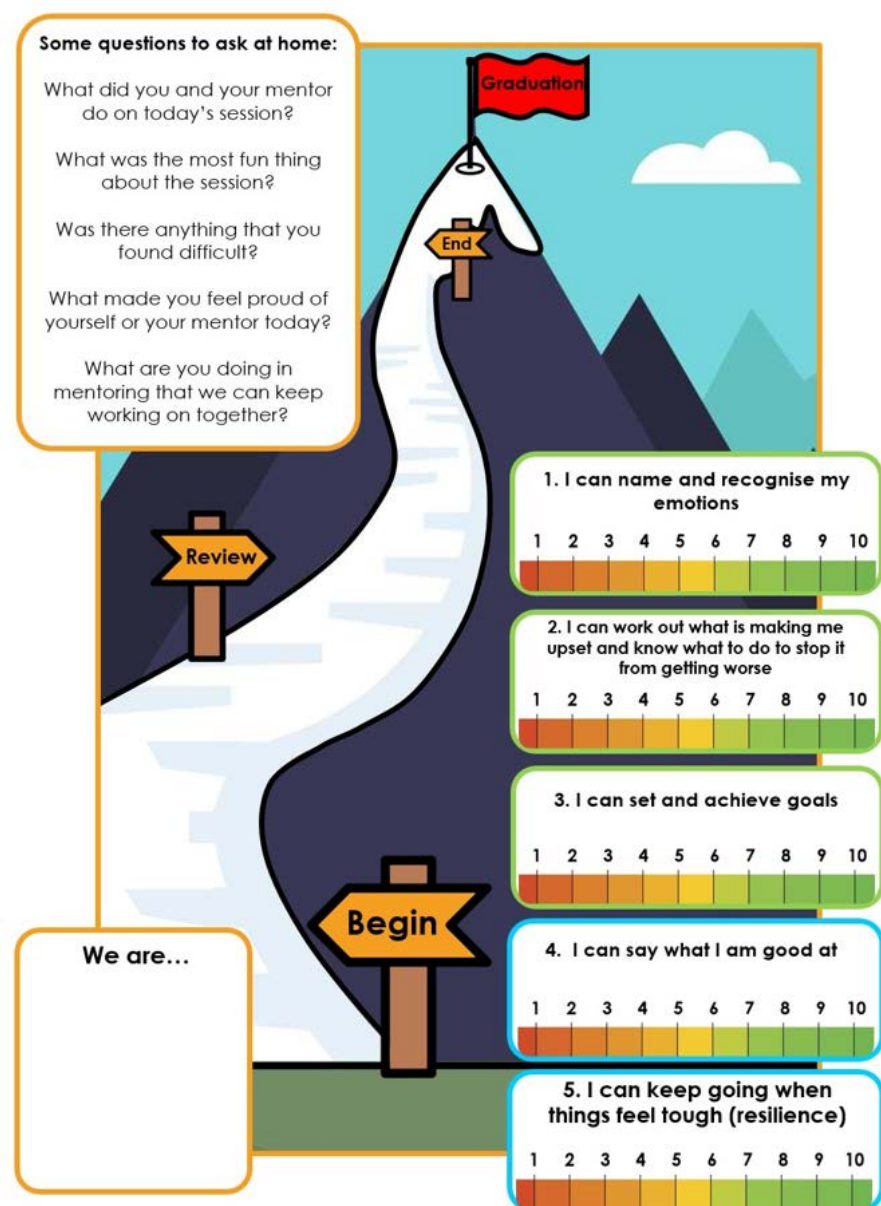


Figure 19. The Mountain Scale

The youngest mentees (5–7-year olds) seemed to struggle the most to complete self-assessments, especially the ELA and Mountain Scale which had multiple questions and a number scale. Ultimately, not all mentees used the Mountain Scale, with progressively fewer mentees completing a self-assessment at each point: from 39 at baseline to just 9 by the 8–9-month follow up.

My Future staff struggled to administer the teacher and parent/carer ELA checklists at the start of mentoring (baseline). As such, most of these checklists were completed at 3–4 months into mentoring and the data collected could not be considered representative of mentees' status pre-intervention.

Some mentees completely disengaged during the administration of the Rosenberg. In Cycle 2, Chance UK concluded that the questions in the Rosenberg were negative and not in keeping with the programme's solution-focused approach (*for example, 'Do you ever feel "I am no good at all"? If yes, do you feel like this a little or a lot?').*

6.4. Findings about implementing one-to-one mentoring

Adherence

In response to these findings, Chance UK decided the following:

- o **Mountain Scale:** At the end of Cycle 1, they agreed that mentors could modify how the Mountain Scale was introduced and used to suit mentees' needs, including replacing the image of the Mountain Scale with any image that is meaningful to the mentee, and where necessary, allowing mentees to complete as many/few of the scaling questions as they can manage at once. Even if adapted, the Mountain Scale's symbolic meaning – perceiving challenges and progressing in overcoming them – must be maintained and all scaling questions must be completed by the expected timepoints. My Future programme managers also intervened and supported some mentees directly with their self-assessment.
- o **ELA:** During Cycle 1, they agreed to accommodate the needs of mentees younger than 7 by having them respond to only the questions measuring the self-regulation dimension.
- o **Rosenberg:** At the end of Cycle 2, they decided to discontinue the use of the Rosenberg in My Future.

The learning shows that Chance UK were able to modify the use of assessments based on mentees' development stage and needs. Such responsiveness is considered good practice, especially for personalised relational programmes like mentoring. However, this was also a personalised rather than standardised approach to administering assessments where mentors used different ways to introduce and present the assessments, mentees provided responses in parts over several weeks and to some questions only, and programme managers instead of mentors directly aided with some assessments. This personalised approach increased the likelihood of measurement and reporting errors and led to missing and incomplete assessments. Therefore, the data collected using the Mountain Scale and ELA in particular were too limited to inform reliable conclusions about mentees' progress.

This is an important lesson about the appropriateness of using assessments with multiple questions and number scales with children, particularly in a support programme. Tools like the Mountain Scale may be more suitable for encouraging child-led conversations about progress, focusing on the image and metaphor only. Chance UK are considering alternative assessments that are less disruptive, and more child-centred.

6.5. Summary and recommendations

Adherence

- o Overall, mentors adhered to the programme design, choosing objectives in each month in close alignment with the expected curriculum timeline.
- o Mentors used the 6 mentoring techniques in sessions and spent most of the mentoring time targeting the 5 social-emotional skills. They maintained this focus even when sessions were adapted to remote delivery due to COVID-19.
- o Mentors mentioned some techniques and skills more than others in their session reports. The differences in mentions might indicate some mentors' misunderstanding of how to complete the report form, or uncertainty about using some skills and techniques, or differences in practices and competencies. Chance UK can use this learning to set more expectations for what 'good adherence' looks like, and develop additional support to improve mentors' understanding.
- o How pairs think and feel about My Future might have contributed to delivery, including whether mentoring decisions and practices aligned to the curriculum. Possible positive contributors include mentors' high motivation for volunteering and their belief that mentoring benefits children. Feeling compatible with their mentee might have aided mentors in building a relationship to then deliver mentoring. The clear and detailed curriculum was among the main strengths of the new programme. Training and supervision were also helpful for most mentors. Potential negative contributors include the frequency of mentoring – weekly was too burdensome for some mentors; data collection challenges, including data system malfunctions and frequent and multiple assessments; and feeling unprepared for challenging child behaviours, lack of co-operation from parents/carers, and mentoring remotely during COVID-19.
- o The findings about close adherence are encouraging, especially the potential role of the new more structured curriculum. Chance UK can further improve and tailor training and supervision to enhance mentors' skills to adapt to challenging and changing situations, including flexing their communication and behaviour to suit remote relationship-building and delivery.
- o Data collection challenges are likely to lessen with each cohort of My Future as Chance UK continue to use learning to refine the data collection system, enhance training and support for mentors, and find more acceptable ('child-friendly' and less frequent and disruptive) ways to monitor mentees' progress.

PART III

Learning



Group mentoring

07 IMPLEMENTING GROUP SESSIONS

7.1. What did Chance UK want to learn about implementing group sessions?

As mentioned above, My Future is Chance UK's first mentoring programme to include structured facilitator-led group sessions. Therefore, Chance UK wanted to understand the general achievability and acceptability (among pairs) of introducing a small number of group sessions into the one-to-one mentoring curriculum. Several factors specific to group mentoring can potentially influence achievability and acceptability.^[25]

- o Group sessions are more logistically challenging to organise, requiring Chance UK to schedule sufficient dates for each of the 5 group sessions to provide ample opportunities for pairs to attend.
- o Unlike one-to-one sessions which take place within close proximity to the mentoring pair's local neighbourhood, group sessions require a 'central' location that is accessible to most pairs; in the case of this pioneer cohort, the Chance UK office.
- o Group session content and focus are fixed and cater to the needs of most participants, although the timing of each group session fits within the overall timeline and focus of the mentoring curriculum. Group facilitators need to be sufficiently skilled to deliver sessions as designed but also recognise when some pairs have different or additional needs and tailor delivery (while maintaining the designed function).

- o The success of group mentoring relies on the engagement of pairs in activities and the interactions between pairs. Factors such as differences in mentee age, development stage, attitudes, and support needs might influence whether they identify with each other and their group, which in turn can influence interest levels, participation, and practise of what they learn.^[25] It can be logistically challenging to schedule group sessions so that pairs with similar characteristics attend the same group session, and the same pairs continue to attend subsequent sessions as a 'sub-group'.

As with one-to-one sessions, an expectation was established for pairs to attend group sessions: all pairs should attend group sessions such that at least 67% of pairs achieve a minimum dosage of 4 out of the 5 group sessions. The main sources of data were group session reports completed by facilitators and the final Debrief Survey completed by 17 mentors.

07 IMPLEMENTING GROUP SESSIONS

7.2. Findings about implementing group sessions

Most of the group sessions organised by Chance UK were held as planned

A total of 41 group sessions were scheduled during the period of implementation from April 2019 to July 2020. Figure 20 summarises whether and how these planned sessions were held. It shows that most group sessions were held with the majority (71%) being held as intended in person at the Chance UK office.

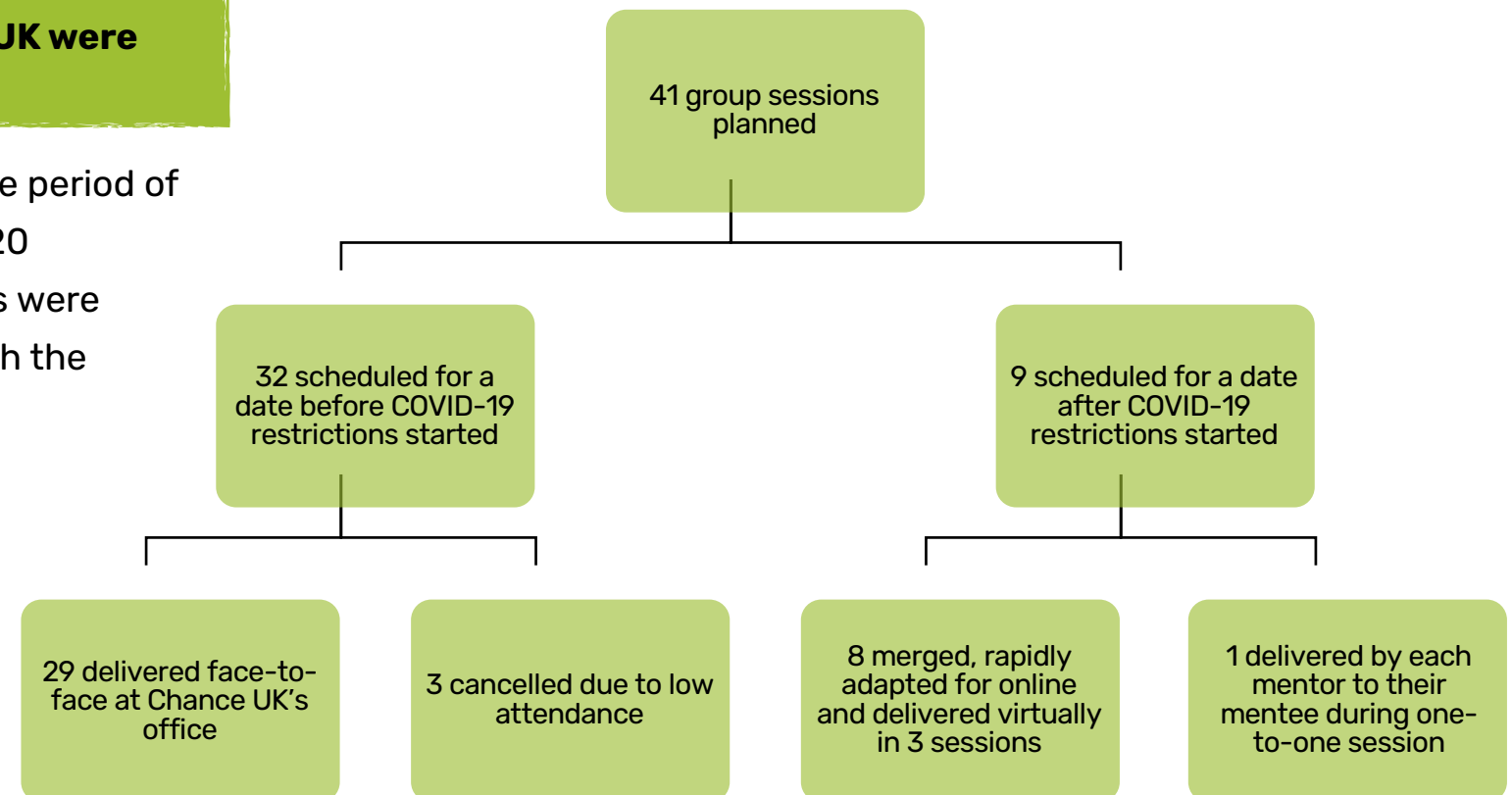


Figure 20. Summary of group sessions held and not held over the mentoring period

07 IMPLEMENTING GROUP SESSIONS

7.2. Findings about implementing group sessions

The total dosage for group mentoring sessions is 5 sessions over the 9 months. Chance UK expected that some mentor-mentee pairs would not attend all 5 sessions as planned due to mostly unforeseeable or unavoidable reasons. In anticipation, it was theorised that pairs would attend a minimum of 4 group sessions, and this would be achievable for at least 2 out of every 3 pairs or 67% of the cohort.

Fewer pairs than expected achieved the minimum dosage of 4 out of 5 group sessions

Of the 46 mentor-mentee pairs who were eventually matched following referrals, 23 attended at least 4 group mentoring sessions over the 9 months (Fig 21). Five of these pairs attended the total 5 group sessions. Figure 22 shows that when the cohort of pairs was restricted to just the 36 who graduated, the proportion who attended at least 4 group sessions over the 9 months fell just short of the hypothesised 67% of pairs. The most common number of group sessions attended by pairs was 4 sessions; 17% of the 46 matched pairs attended either 2 or 3 group sessions; 37% of these pairs attended 1 group session or none.

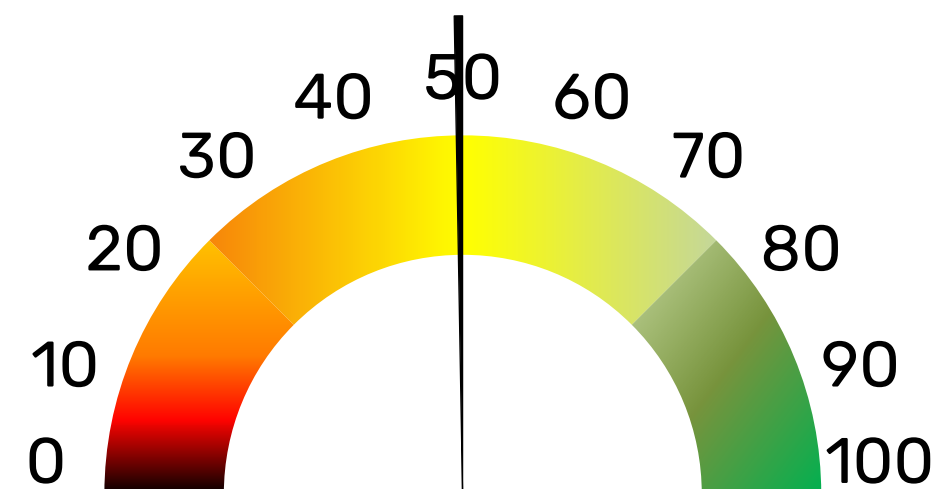


Figure 21. Of the total 46 matched pairs, 50% attended at least 4 group sessions

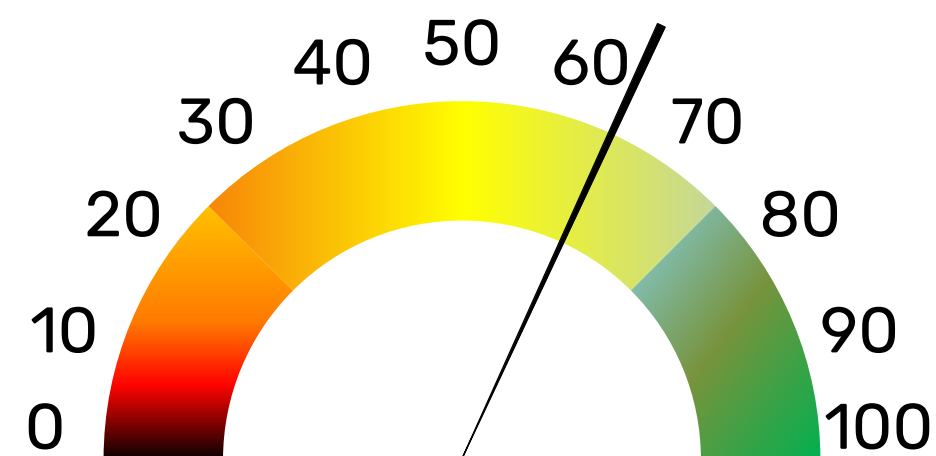


Figure 22. Of the 36 pairs who graduated, 64% attended at least 4 group sessions

07 IMPLEMENTING GROUP SESSIONS

7.2. Findings about implementing group sessions

Lower attendance was most likely influenced by group structure and location

Some pairs reported finding it difficult to travel from their local area to the Chance UK office to attend face-to-face group sessions. Some mentors said the long distance also affected their mentee's engagement in groups. Mentors also hinted at the less flexible structure of group sessions (compared to one-to-one sessions) by likening them to a classroom setting; some mentees were uncomfortable with this perceived rigidity. Some pairs also felt that the sessions were repetitive and suggested that the programme provides more range of group activities.

Chance UK had to modify the delivery of all group sessions scheduled for after 23 March 2020 when COVID-19 restrictions were first implemented (see Insight Section 2 below). Transitioning to online delivery alleviated the travel burden for some pairs. Chance UK also capitalised on the interactive functions of the chosen virtual platform to offer a wider range of facilitator-guided and small-group peer activities.

"Location of the group activities – the distance to travel to most of the group sessions impacted engagement from my mentee."

My Future mentor

"It would have been useful to have had more options for group sessions in the child's local area to avoid so much travelling on group session days!" My Future mentor

"I think the sessions may have also been more effective with less children as at some points it gave a very 'classroom feel' to the situation which my child was not so comfortable with." My Future mentor

"I felt the sessions were repetitive in content, and my mentee picked up on this too." My Future mentor

07 IMPLEMENTING GROUP SESSIONS

7.2. Findings about implementing group sessions

Differences in mentees' age and development stage influenced engagement in groups

Early into the implementation of group sessions, facilitators recognised that the age difference between mentees in some groups was a barrier to their engagement. Some mentors also observed the influence of age and development stage on their mentee's ability to engage. The age range of My Future mentees (from 5 to 11 years) was highlighted by some mentors in their final feedback on the general limitations of My Future and their mentoring experience. As an adaptation in Learning Cycle 1, facilitators asked older mentees to help with supporting younger mentees with activities. Mentors also provided extra encouragement and support to mentees affected by a lower sense of group identity and cohesion.

"I noticed that [my mentee] maybe felt a little old for some of the group session activities, and he didn't like going to those sessions. So maybe just a different role for slightly older kids at those sessions." My Future mentor of 11-year-old mentee

"I think that the group sessions should be more accessible for the younger children - a lot of the resources used were quite complicated, had a lot of wording/instructions, and were not majorly engaging for a younger child." My Future mentor of 6-year-old mentee

"[11-year-old mentee] felt a bit older than the rest so went through extremes of 'I'm bored' to really explore nicely. Some of the activities were not really challenging enough for his level so I asked him to help me teach in future which he liked." My Future facilitator

07 IMPLEMENTING GROUP SESSIONS

7.2. Findings about implementing group sessions

Response to the purpose and function of group mentoring was generally positive

Facilitators described the participation of mentees in most group sessions as “well engaged” or “really engaged”. In most sessions, mentees appeared to work really well together, with few instances where mentees were disruptive or completely disengaged. Chance UK expected some disengagement and disruptive behaviour given the emotional and behavioural needs of mentees they support. In response, facilitators and mentors offered additional support to encourage positive participation.

Mentors also stated that group sessions provided a good opportunity to work on skills, gain support and spend time with other mentors and pairs. At the end of each group session, mentees had the option of rating how much they think they achieved that session’s objectives using a 4-point system: 1 (I need help, please!), 2 (I’m thinking), 3 (I’m getting there) or 4 (I’ve got this!). Most mentees who offered a response rated their achievement as 3, suggesting they gained some understanding of the information and skills covered immediately following sessions.

“[Mentee 1] was extremely engaged, and [mentee 2] and [mentee 3] got on really well, as they attend the same school and so had met before.” My Future facilitator

“Children liked the bucket activity and loved the bubbles including [mentee ‘A’] who was a star and answered every question. ‘A’ was much older than the other mentees, but responded well to being given responsibilities.” My Future facilitator

“One child struggled to concentrate on all the activities and went under the table a number of times. This was managed well by his mentor and the child still participated in all the activities.” My Future facilitator

“The group sessions were great to work on skills with other mentors/mentees and feel part of a bigger organisation.” My Future mentor

“Lots of positive support in the group sessions and it was lovely to see other mentors and mentees.” My Future mentor

7.3. Summary and recommendations

Group sessions

- o Most of the group sessions organised by the My Future programme staff (71%) were held as planned.
- o However, fewer pairs than expected attended the minimum number of 4 out of 5 group sessions (50% instead of the expected minimum of 67%).
- o The barriers to attending group sessions included the burden of travelling to meeting locations far from mentees' local neighbour, the less personalised nature of groups which didn't suit some mentees' needs and preferences, and the wide differences in mentee age and development stage which affected bonding in some groups.
- o Facilitators and mentors used their training to recognise and adapt to these needs and differences which helped to encourage participation and minimise disengagement.
- o Chance UK also found that delivering group sessions online eliminated the burden of travelling for pairs, simplified the process of scheduling sessions and reduced the number of session options needed, and allowed for a wider range of guided and 'break out' activities.
- o The findings give Chance UK considerable understanding about including a facilitator-guided structured group component in a one-to-one curriculum, and what immediate actions can enhance the design and improve implementation to the expected level.

INSIGHT SECTION 2: ADAPTING MENTORING DURING THE COVID-19 PANDEMIC

Like most face-to-face services supporting CYP, My Future was disrupted by the COVID-19 pandemic. To maintain support to mentoring pairs, Chance UK made several changes to both one-to-one and group mentoring following the introduction of national stay-at-home restrictions in England on 23 March 2020.

One-to-one mentoring changed to remote delivery

All one-to-one sessions were delivered remotely with contact between mentees and mentors by phone or video meeting. Chance UK found that mentees had a lower concentration and became distracted easier during remote mentoring. As such, remote one-to-one sessions were shorter and more frequent than the usual mentoring, often occurring twice per week instead of once and lasting 30 minutes instead of 2-4 hours.

The evaluation examined whether the change to remote delivery had an observable influence on the dosage of one-to-one mentoring. Table 4 shows the number of planned and missed one-to-one sessions during Learning Cycle 3, which included the period of remote mentoring. It shows that more missed one-to-one sessions occurred in the period before COVID-19 restrictions than after (that is 101/380 or 27% versus 50/305 or 16%). This suggests that mentoring pairs were less likely to miss planned one-to-one sessions if they were held remotely, possibly because

these sessions were easier to schedule for times when mentors, and mentees and their parents/carers were most available. The shorter duration, although held twice weekly, might have also reduced mental burden and opportunity costs for some pairs, especially mentors, who reported that the weekly face-to-face 2-4-hour sessions were burdensome.

ONE-TO-ONE SESSIONS	HELD AS PLANNED	NOT HELD AS PLANNED	TOTAL PLANNED
Before COVID-19 restrictions	279	101	380
During and since COVID-19 restrictions	255	50	305
Total	534	151	685

Table 4. Planned one-to-one sessions that were held and missed during Learning Cycle 3 (from Dec 2019 to July 2020)

INSIGHT SECTION 2: ADAPTING MENTORING DURING THE COVID-19 PANDEMIC

While promising as a strategy to complement face-to-face mentoring, maintain contact and increase dosage, remote mentoring has several limitations. Some mentors highlighted that being physically apart negatively influenced interactions with their mentee, especially those mentees who disliked telephone and video meetings. Others mentioned the negative impact of remote mentoring on their own feelings and wellbeing. Some also mentioned not feeling able to adapt the curriculum content and their mentoring skills and behaviours to remote delivery. Since Chance UK did not anticipate the need for remote delivery, the original mentoring training provided knowledge and skills to support face-to-face delivery only. Lack of access to technological devices and the internet, and technological problems hindered access to the curriculum and materials and unexpectedly limited some planned sessions to brief phone calls.

In response, Chance UK offered mentors suggestions for adapting their skills and managing challenges, and they created a new weekly bulletin for mentors, *Mentoring From Home*, that includes modifications and new activities to try remotely and tips for maintaining wellbeing. Most sessions still adhered to the curriculum, but more sessions also included social support to help mentees build resilience, remain positive and continue practising social-emotional skills.

“My main challenge with my mentee was lack of interaction at the very beginning of every session. They closed up a lot and didn't always want to be in the session. My mentee also really hated phone calls and video calls so during lockdown this was very challenging.” My Future mentor

“Video call mentoring was REALLY challenging, especially when the development points for my mentee were about meeting new people and being exposed to new situations. I also felt more isolated as I did not have the contact with other mentors like I had in the group sessions.” My Future mentor

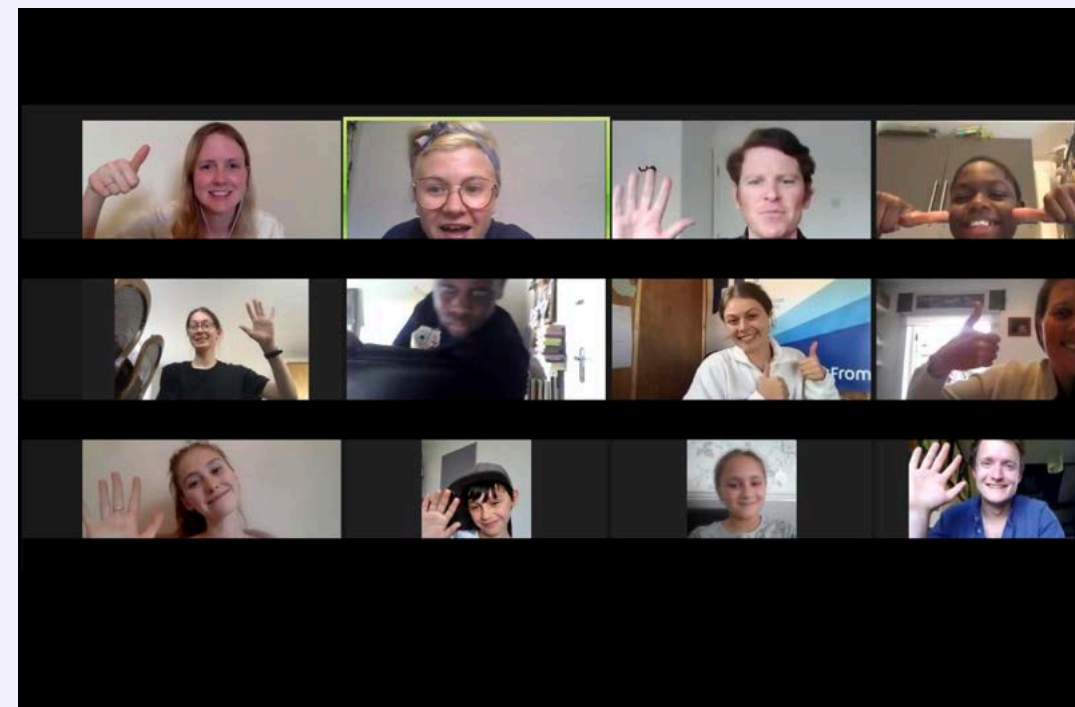
INSIGHT SECTION 2: ADAPTING MENTORING DURING THE COVID-19 PANDEMIC

Group session content was delivered virtually in groups and one-to-one sessions

Group mentoring was also adapted for online delivery, with Chance UK taking advantage of the features of the chosen virtual platform to maintain core elements of the group mentoring design such as personalised support to pairs, peer interactions between mentees, and novel activities to keep mentees engaged. In the period during and since COVID-19 safety measures were in place, 9 planned face-to-face group sessions were adapted to remote delivery, with 8 merged into 3 online group sessions and the content of 1 – which was scheduled for the week when stay-at-home restrictions began – delivered by mentors to their mentee in a one-to-one session.

As mentioned previously, delivering groups online helped to reduce the main barriers to the uptake of face-to-face groups: it reduced scheduling challenges, eliminated the need for pairs to travel to a central location, and made it easier to plan sessions and break out groups of mentees with similar characteristics and needs. At the end of Learning Cycle 3, Chance UK shared that they had to adapt My Future rapidly to the COVID-19 context and focused more on modifying one-to-one mentoring than group mentoring given that the former makes up more of My Future. An

important implication of this, and indeed any rapid adaptation of a face-to-face support intervention to online, is whether the core mechanisms of action were successfully maintained – in this case the chance for mentees to learn and engage in conforming social-emotional behaviours with each other, practise new skills, gain positive reinforcement from peers, and develop social cohesion. This could not be examined during the evaluation due to disruptions to group data collection during the period of remote delivery. Chance UK can use self-evaluation to answer this question themselves once they have spent more time refining remote delivery.



INSIGHT SECTION 2: ADAPTING MENTORING DURING THE COVID-19 PANDEMIC

Graduation ceremonies were also held online

Of the 36 pairs who graduated from My Future, 3 graduated before COVID-19 restrictions were in place. All other pairs graduated via video conferencing, with the mentee, their family, the mentor and the supervisor in attendance, instead of the usual group ceremony where several pairs who completed mentoring at the same time celebrated in person.

Some pairs had mixed feelings about ending virtually. Chance UK acknowledged that there were some losses from online graduations, but they also highlighted that they allowed a more personalised experience for some pairs and more involvement from parents/carers. Pairs were also encouraged to be inventive, such as making virtual scrapbooks and videos of their mentoring journey, or making mortarboards, medals or crowns to wear during the video ceremony. Chance UK also elicited the help of local mayors, celebrity supporters and Chance UK senior staff to create videos personally congratulating mentees.

"I found this [graduating online] all very hard to be honest, I didn't see how this benefited [mentee]. I felt like this might not have been the best thing for [him]. But [supervisor] worked with me closely on how to position this and how to explain to [mentee]. It's a hard thing to explain why he can never see me again." My Future mentor

"I think COVID-19 had a massive impact on the ending particularly when the graduation had to be moved online. On reflection, I think Chance UK should have waited until we were able to graduate in real life, although I appreciate that it was done virtually." My Future mentor

"[Supervisor] gave me lots of resources to help plan for my final session and it was really helpful to discuss with my mentee how we wanted to mark our mentoring journey from the start." My Future mentor

INSIGHT SECTION 2: ADAPTING MENTORING DURING THE COVID-19 PANDEMIC

Reinforcement and new strategies helped to maintain engagement and retain most pairs until completion

As mentioned previously, 72% of mentees (36/50) completed My Future. The 14 mentees who discontinued mentoring before graduating did so within their first 3 months: 12 discontinued before 23 March 2020 for various personal reasons and 2 ended early in May 2020 as a result of difficulties maintaining mentoring during restrictions. Chance UK used several strategies to retain pairs and keep them engaged in mentoring.

- o Creation and dissemination of a new weekly *Mentoring From Home* bulletin for mentors offering practical support to adapt mentoring remotely and advise for protecting their emotional and wellbeing.
- o Increased efforts to engage with parents/carers and additional emotional support to families via regular phone calls.
- o Practical support to families in the form of vouchers for food banks and technological devices to access remote mentoring sessions.
- o Collaboration with school staff and social workers to use their relationship and contact with parents/carers to encourage families to continue with mentoring.

- o Encouragement for mentors to worry less that remote sessions might not be “exciting” and focus more on how they can maintain contact and provide their mentee with positive social support.

Chance UK are considering retaining many of the adaptations they made to mentoring even as they look forward to returning to face-to-face delivery. These include remote one-to-one and online group sessions especially to overcome scheduling and logistical issues, mentor and pair-led personalisation to supervisions, and the dissemination of the weekly *Mentoring From Home* bulletin.

PART III

Learning



**Changes in mentees'
emotions and behaviour**

8.1. What did Chance UK want to learn about changes in mentees' emotions and behaviour?

Chance UK wanted to learn whether mentees showed improvement in the end-of-service outcome, emotional and behavioural difficulties, by the time they completed My Future. Monitoring whether mentees experienced positive rather than negative changes over the 9 months of mentoring was seen as an important part of the fundamental purpose of the evaluation and learning – to design, develop and improve My Future.

For each mentee, change in emotional and behavioural difficulties was examined by subtracting their baseline (referral) parent and teacher SDQ Total Difficulties scores from their end-of-mentoring parent and teacher SDQ Total Difficulties scores. Positive change, or improvement in difficulties, was indicated by a negative difference between baseline and end scores. This examination included only mentees who graduated and who had both baseline and end-of-mentoring parent and teacher scores; these were 36 mentees and 31 mentees, respectively.

As mentioned earlier in this report, learning from Cycles 1 and 2 revealed challenges with the use of assessments during delivery of My Future, including the Mountain Scale and the ELA. These self-assessments were intended to track mentees' progress in achieving the immediate social-emotional skills and outcomes.

Presence or absence of progress in these throughout mentoring might have helped to predict achievement of the end-of-service outcome and inform a course of action for mentoring. Unfortunately, the data collected about these skills and outcomes were incomplete and not reliable enough to be used in the examination of the end outcome and generate meaningful insights.

Finally, given the newness of My Future and the emphasis on learning and improvement, the examination question was simply whether mentees showed a positive change in emotional and behavioural difficulties by the end of mentoring. The focus was not on whether My Future is more effective than other support services or no intervention, or proving that My Future caused the end-of-mentoring changes (causal attribution). Therefore, the outcome examination was a before-after comparison using the My Future graduates only and did not include a control group or use statistical techniques to simulate counterfactuals.

8.2. Findings about changes in mentees' emotions and behaviour

Most mentees had very high emotional and behavioural difficulties at the start of mentoring

Table 5 shows the mean parent SDQ Total Difficulties score and mean teacher SDQ Total Difficulties score across all 50 mentees at the start of mentoring. It shows that, at baseline, the mean parent SDQ Total Difficulties score was as high as the mean teacher SDQ Total Difficulties score at 22. The spread (standard deviation) of the individual scores for each mentee from the mean score was also the same for parent and teacher scores (5), and the lowest and highest individual parent and teacher scores were close. These findings indicate how similar parents'/carers' and teachers' judgement of mentees' high needs were at the start of mentoring. These mean scores were also significantly higher than the *national mean parent and teacher SDQ Total Difficulties scores of 8.4 (SD: 5.8) and 6.6 (SD: 6.0), respectively.^[26]

TOTAL DIFFICULTIES SCORE	PARENT/CARER (N=50)	TEACHER (N=50)
Mean score	22.2	22.6
Standard deviation (SD)	5.4	5.1
Lowest score	11	15
Highest score	31	32

Table 5. Summary of parent and teacher Total Difficulties scores at the start of mentoring in My Future

**National norms are derived from nationally representative samples of parents of 10,298 pupils and teachers of 8,208 pupils aged 5-15.^[28]*

8.2. Findings about changes in mentees' emotions and behaviour

Figures 23 and 24 also show that 60% of parent and 66% of teacher baseline Total Difficulties scores could be classified as 'very high' (above 18 SDQ units).

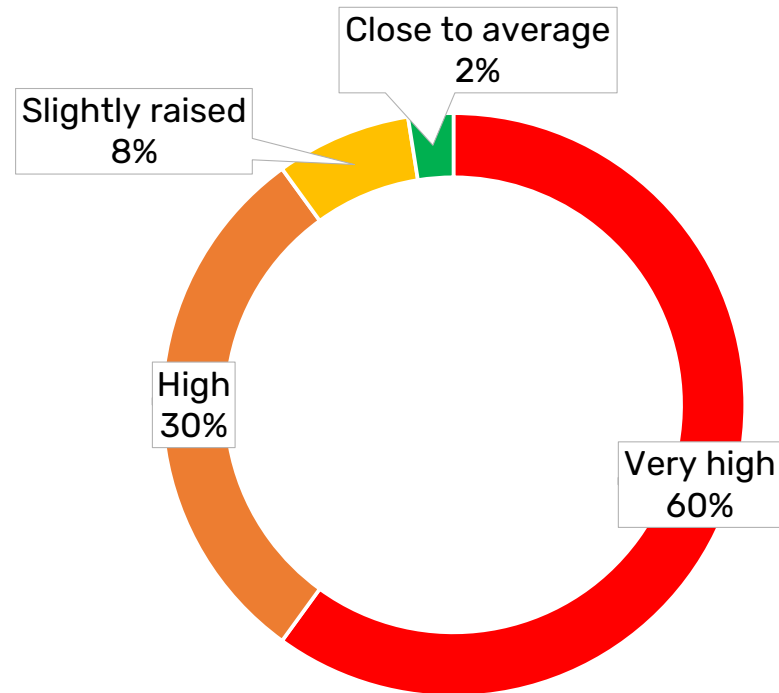


Figure 23. Proportion of baseline parent SDQ Total Difficulties scores that could be classified as close to average (0-13), slightly raised (14-16), high (17-19) and very high (>19) (n=50)

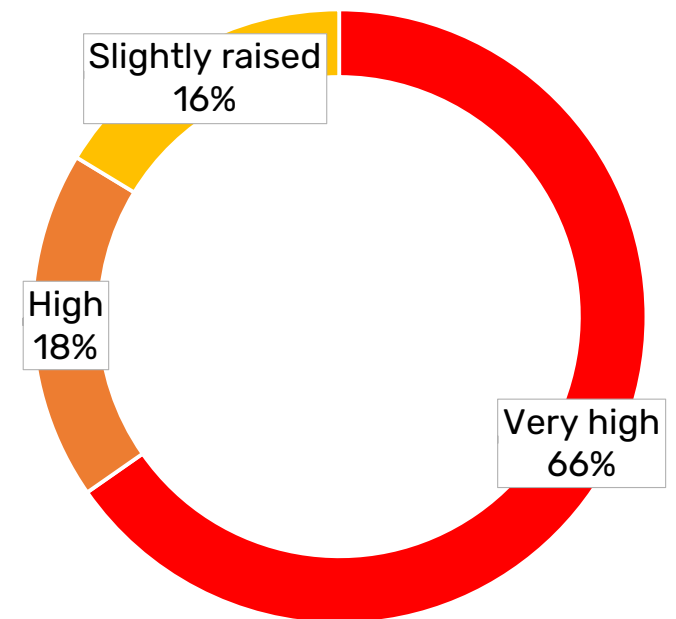


Figure 24. Proportion of baseline teacher SDQ Total Difficulties scores that could be classified as close to average (0-11), slightly raised (12-15), high (16-18) and very high (>18) (n=50)

08 CHANGES IN MENTEES' EMOTIONS AND BEHAVIOUR

8.2. Findings about changes in mentees' emotions and behaviour

Most mentees showed an improvement in emotional and behavioural difficulties by the end of mentoring

Table 6 shows significant improvements in the mean parent and teacher SDQ Total Difficulties scores at the end of mentoring. These improvements are highly *statistically significant. Figures 25 and 26 also show that the proportion of parent and teacher SDQ Total Difficulties scores that could be classified as 'very high' fell from 60% to 33% and 66% to 19%, respectively.

TOTAL DIFFICULTIES SCORE	PARENT/CARER (N=36)	TEACHER (N=31)
Mean score	14.8	13.6
Standard deviation (SD)	7.0	5.9
Lowest score	4	3
Highest score	29	25
Difference between baseline and end means (SD)	-7.5 (SD: 7.0)	-9.0 (SD: 7.9)

Table 6. Summary of parent and teacher Total Difficulties scores at the end of mentoring and mean difference between baseline and end

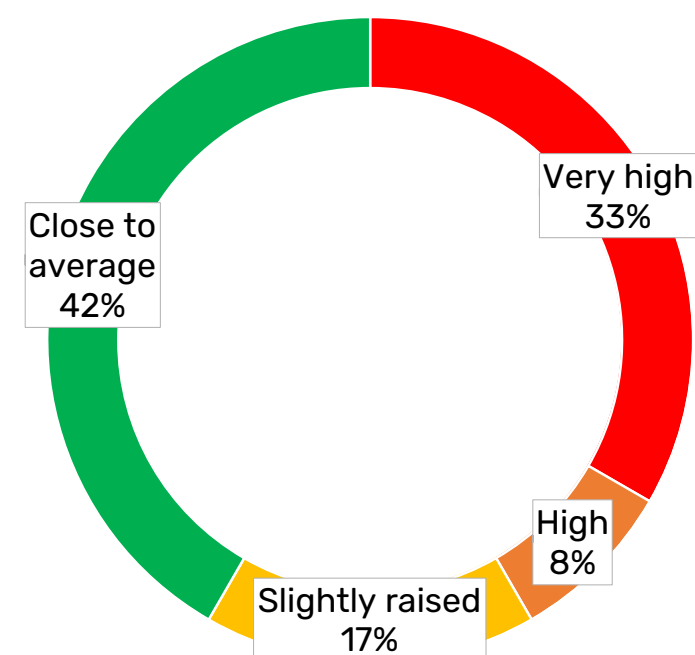


Figure 25. Proportion of end-of-mentoring parent SDQ Total Difficulties scores that could be classified as close to average (0-13), slightly raised (14-16), high (17-19) and very high (>19) (n=36)

**Statistical significance – the probability that the baseline and end means are truly different – was estimated using a Paired t-test. The differences between means were highly statistically significant with $p < 0.0001$.*

8.2. Findings about changes in mentees' emotions and behaviour

Most mentees showed an improvement in emotional and behavioural difficulties by the end of mentoring

For improvements based on parent Total Difficulties scores:

- o 19 out of 36 mentees showed a difference in their individual baseline and end Total Difficulties scores that was greater than the overall mean difference from baseline to end of -7.5.
- o 22 out of 36 mentees improved to the extent that their end Total Difficulties score would have been classified in a lower category.
- o 15 out of 36 mentees improved to the extent that their end Total Difficulties score was below 14, the threshold for being eligible for referral by a parent/carer into My Future.
- o 5 out of 36 mentees showed an increase (plus 1-5 SDQ units) in score from baseline to end; 2 showed no difference in score.

For improvements based on teacher Total Difficulties scores:

- o 15 out of 31 mentees showed a difference in their individual Total Difficulties scores that was greater than the overall mean difference of -9.0.

- o 23 out of 31 mentees improved to the extent that their end Total Difficulties score would have been classified in a lower category.
- o 17 out of 31 mentees improved to the extent that their end Total Difficulties score was below 16, the threshold for being eligible for referral by a teacher into My Future.
- o 4 out of 31 mentees showed an increase (plus 2-4 SDQ units) in score from baseline to end; 1 showed no difference in score.

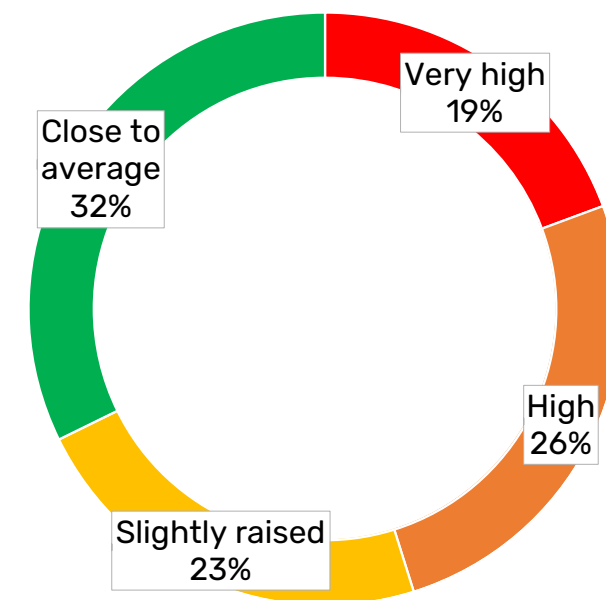


Figure 26. Proportion of end-of-mentoring teacher SDQ Total Difficulties scores that could be classified as close to average (0-11), slightly raised (12-15), high (16-18) and very high (>18) (n=31)

8.2. Findings about changes in mentees' emotions and behaviour

Qualitative findings also suggest that mentees experienced positive changes

Feedback on mentees progress during and at the end of mentoring was obtained from mostly mentors' accounts in the mentoring session reports and Debrief Survey, and a few mentees, parents/carers and teachers who responded to a Stories of Change Survey administered by Dartington. A commonly cited positive change in mentees was improvement in self-regulation skills, especially the abilities to recognise and name their emotions and identify their triggers and calm themselves down (2 of the 5 social-emotional skills targeted by the My Future curriculum).

Change Story 1: Kayaan (page 70) illustrates this change for one mentee and his family. Several mentors also mentioned these changes.

"At the start of the programme [mentee] showed challenging behaviours when it came to change which would lead to outbursts of aggression. I explored different strategies which helped him plan and manage his anxieties, including using a communication board which allowed [him] to be a part of the planning of each session, and used a sand timer which he had the responsibility to use within each session to help the transitions between activities. These strategies were shared with his mum to offer support and suggestions that could be used in the home and school environment outside of the volunteering sessions. [Mentee's] mum talked about how his teachers had given positive feedback about his engagement at school and how he was less physically aggressive and able to control his emotions better in relation to change." My

Future mentor

8.2. Findings about changes in mentees' emotions and behaviour

Other mentees, parents/carers and referrers also named these changes in their feedback about the most important improvements.

"I learnt how to get less angry." My Future mentee

"I am now much better at being able to name what I am feeling. This has really helped me in school and at home with my little brother. I can calm down a lot better now when I'm angry." My Future mentee

"[Mentee] is now a generally calmer person (though we have good and less good days) and the mentoring has helped him in all sorts of ways at home and at school. He's learning to control his emotions better." Parent/carer of My Future mentee

"[Mentee] has become better at vocalising what upsets him in the playground and will often talk to me about how he is feeling." Teacher of a My Future mentee

"I have seen the impact of mentoring on the child over the past year. His behaviours such as fighting at school have disappeared." Social worker supporting a My Future mentee

Another reported positive change in mentees was improved self-confidence, especially the willingness and ability to name what they are good at, communicate with others, speak positively about themselves and try new things. Self-esteem is the other immediate outcome targeted by the My Future curriculum.

"I learnt that people care about me and that I can enjoy things that I did not think I would. My Future mentee

"My mentor has showed me I am good at things like writing and football. He has shown me that I can get better at things too." My Future mentee

"I was so impressed that he was able to perform his trumpet and answer questions in front of a group of strangers. [Mentee] has also been more confident at school and can now talk about the things he is good at." My Future programme manager

"[Mentee] was also increasingly able to state what he was good at – by the end of mentoring we were able to name 10 positive characteristics that he had when at the beginning he couldn't name any." My Future mentor

8.2. Findings about changes in mentees' emotions and behaviour

The findings are encouraging as they show similar accounts of changes after participating in My Future. They also suggest that participants in a programme that is using continuous learning to adapt and improve can experience positive rather than negative changes.

The improvements can be attributed to several factors including aspects of My Future as well as factors related to the pairs themselves, and factors in the mentors' home, family life and school. While attribution was outside the scope of this evaluation, the overall learning from the evaluation highlighted the considerable influence of parent/carer 'buy-in' and support on mentees' participation in mentoring.

In their final feedback to Chance UK on their mentoring experience, some mentors highlighted parent/carer disinterest, miscommunications, and misunderstandings about their role and mentoring as their main challenges. Findings about implementing one-to-one sessions showed that when parents/carers completely disregarded mentoring or were not communicating with mentors as expected, mentoring sessions did not take place. In contrast, frequent attempts by mentors to engage, positive

rapport with parents/carers and high interest among them were identified by some mentors as being important to their positive mentoring experience. Increased engagement with parents/carers was also helpful to maintain participation of mentees during the COVID-19 stay-at-home period. **Change Story 2: Clay and Maria** (page 72) illustrates how such positive relationships might support better implementation and positive changes.

8.3. Summary and recommendations

Changes in mentees' emotions and behaviour

- o Most mentees had very high parent- and teacher-rated SDQ Total Difficulties scores at the start of mentoring.
- o By the end of mentoring, most mentees showed a significant improvement in their Total Difficulties scores: mean difference in parent and teacher SDQ Total Difficulties scores equalled -7.5 (standard deviation: 7) and -9.0 (standard deviation: 7.9), respectively.
- o Many mentees (42% and 54%) improved to the extent that their end-of-mentoring parent and teacher Total Difficulties scores fell below the threshold for being eligible for mentoring support in My Future.
- o Feedback from mentees themselves, their parents/carers, teachers, mentors, programme managers and others provided further evidence of the improvement in outcomes experienced by mentees by the end of mentoring.
- o The results provide encouraging learning that it was possible for participants to still experience desirable changes during a mentoring programme that used a continuous learning and refinement approach for evaluation and improvement.
- o In time once confidence about the implementation of My Future has been achieved, Chance UK can use other appropriate research methods to understand which combination of factors contribute most to the improvement in outcomes by the end of mentoring.

CHANGE STORY 1: KAYAAN

Kayaan's story illustrates how mentoring can help children to recognise and manage their emotions to be able to respond appropriately to different situations

Kayaan was one of the youngest mentees in the My Future cohort, having started his mentoring journey at 7 years old. He lives with his mother and younger sister in Southwark, and was referred to My Future by his school. Initial assessment of his emotional and behavioural skills showed that he had a high level of need for support; his parent and teacher SDQ Total Difficulties scores were 18 and 17, respectively. By the end of mentoring, he had a modest improvement in the carer Total Difficulties score (a change of -4 points); he had no end teacher SDQ assessment.

When programme manager Jo first met with Kayaan, she quickly noticed that he had difficulties controlling and expressing his feelings.

Jo said, *"When I visited Kayaan at home with his mentor for their Introductory Session in August 2019, I attempted to complete the first Mountain assessment, which involves scaling five skills. Upon answering the question about identifying and managing triggers, he started crying and left the room. This corresponded with details in his initial referral, which listed 'refusal to follow instructions' and 'tantrums' as some of Kayaan's behaviours."*



His mother Amal made a similar observation. She said, *"During My Future assessments, he gets upset when questions about his feelings or anger come up. At Introduction he left the room crying."*

Kayaan was also prone to self-harming as a way of coping with difficult situations. Jo said, *"This kind of behaviour reportedly happened regularly at home before mentoring began and Kayaan told his mum 'when I get angry, I hurt myself'. This led to a previous referral to Social Care by CAMHS in 2017 and one by Chance UK in 2019."*

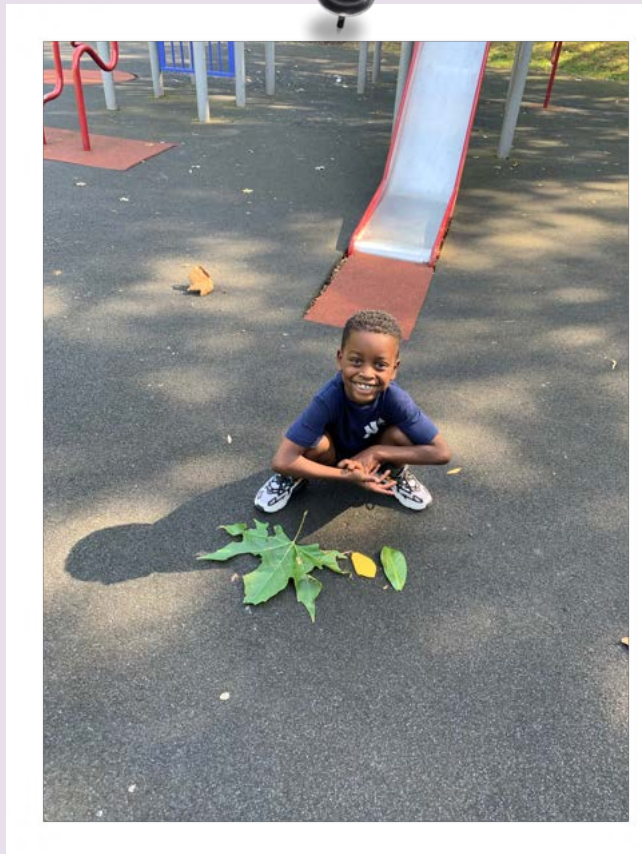
After 9 months of participation in My Future, Amal has seen considerable changes in Kayaan which she thinks are as a result of mentoring. *"Kayaan still has challenges, but he copes differently when he gets upset. He knows what makes him upset and how to calm himself and others. The one-to-one support has made this difference as he has practised communicating his feelings and what he wants."* Her 4-points lower final Carer Total Difficulties score also reflects her belief that he is improving.

CHANGE STORY 1: KAYAAN

Kayaan's story illustrates how mentoring can help children to recognise and manage their emotions to be able to respond appropriately to different situations

During mentoring, Kayaan's mentor and programme manager also supported him and Amal to create a plan to help them manage the risks contributing to his tendency to self-harm. His mentor also actively engaged with Amal throughout mentoring, sharing with her on Kayaan's progress after 8 out of every 10 (86%) mentoring sessions, and rated her as 'very interested' 100% of the time.

Jo identified some My Future activities related to self-regulation which she believes might have contributed to Kayaan's progress. *"His mentor introduced calming activities, such as blowing bubbles, which encourages slow breathing. Kayaan also learned the 5 Finger Breathing technique in a My Future group session. After one of the assessments, Kayaan became distracted and distressed, so I offered to pause the questions and try the 5 Finger Breathing technique together. He agreed and slowed his breathing through this technique. We were then able to continue with the assessment. When I visited again in December, he was able to focus throughout the session and completed three whole assessments."*



Amal has also noticed the positive impact of Kayaan's progress on her family. She shared, *"When his sister was sad yesterday, he hugged her, he's never done that before. He used to punch her when she tried to hug or touch him. He is able to share with his sister, tolerate her and he initiates play, which he didn't used to do."* Amal stated in April 2020 that his self-harming behaviour had stopped, and he was able to play alone in his room without her feeling worried that he will hurt himself.

CHANGE STORY 2: CLAY* & MARIA

Clay and Maria's story illustrates how a positive mentoring relationship and strong parent/carer engagement can contribute to positive changes and delivery as expected

Clay is a 12-year-old boy from Southwark who was referred to My Future by his school. His older brother Jack*, who is his main carer, shared that they decided to join My Future because Clay's school suggested that he could use additional support to improve his social skills as he appeared withdrawn and solitary. At the beginning of mentoring, his parent and teacher SDQ Total Difficulties scores also indicated that he was experiencing a very high level of difficulty that might be addressed using mentoring.

Clay was matched with Maria who is 48 and also from Southwark. Maria had no prior experience of being a mentor but was motivated to participate in My Future. She said, *"I suppose that since a really early age, I always wanted to support and inspire others and be a role model for my 5 older siblings."* Clay and Maria began their mentoring journey in June 2019 and ended in April 2020. Together, they completed all 31 individual mentoring sessions and 4 out of 5 group-based sessions; they are one of the five My Future pairs to achieve this.

On paper, Clay and Maria appeared to have nothing in common. Maria recalls, *"At the beginning I was not sure I would be the right mentor for him, because he was an older kid and also, he was into lots of computer games, social media and YouTube."*



However, Maria successfully attempted to establish their relationship by showing an interest in Clay and being honest about her own feelings. *"We clicked from the first day. I started talking to him about computer games in my time and also said I was really scared because it was my first time at mentoring. I think he appreciated that and start talking to me after few minutes together."*

Clay and Maria continued to build their relationship in the first 3 months by sharing about themselves and engaging in things they both enjoyed. Maria described an extraordinary day of mentoring during Month 3. *"We went to the V&A Museum of Childhood. Clay chose this challenging activity himself. He was chatty, nice and calm throughout the whole journey and was also really kind to me and patient when I had a problem ... that took 20 minutes to arrange. He was just happy to be looking around. We later headed to the Borough Market and the Park Plaza London Riverbank and had something to eat. We played on the beach and he talked about his father for the first time. On the way home, we talked about his challenges, and reflected on his good behaviour and a wonderful day (7 hours together!)."*

Programme manager Jo also reflected on their growing relationship at 3 months in her supervision notes. Jo wrote, *"Clay is more confident in challenging himself and trusting Maria more. He talked about his father for the first time, last week. Clay is enjoying the bond with her."*

CHANGE STORY 2: CLAY* & MARIA

Clay and Maria's story illustrates how a positive mentoring relationship and strong parent/carer engagement can contribute to positive changes and delivery as expected

In the first 3 months, Clay and Maria had 11 out of a possible 12 individual mentoring sessions. Ten of these sessions mentioned the My Future programme objective 'establishing rapport with the mentee'. The design of My Future emphasises establishing relationships in the first 3 months.

During this time, Maria also made a considerable effort to involve Clay's brother and mother. She shared with them about his progress after all 11 mentoring sessions they had together. She rated parent/carer level of interest as 'very interested' every time and reported during supervision that she regularly shared with Clay's brother and mother. She said of their interest level, *"Jack asks lots of questions. Lots of positive feedback from Jack and mum to Clay as well."*

Maria also made a positive impression on Clay's family. She said, *"They are quite surprised and happy to see the bond that Clay has created with me, as he does not very often bond with someone new in his life. They also think that the little changes they see every day in Clay might not have happened for a good few years if the programme was not there to help. They are really proud of him and what he has achieved so far and look forward to the following months."*

Maria identified several aspects of the My Future programme that she believes helped her to deliver the programme as expected.



However, overall, Maria believes that it was her relationship with Clay and his family that contributed most to their successful delivery. She said, *"Mainly, I have had the best time in my life because of the amazing child I worked with. I have learned so much from him and it was all possible because of the support of a great family/carer that the child has around him, [and] who I know will be able to continue supporting him on his future journey."*

By the end of mentoring, Clay showed considerable improvement in his emotions and behaviour. Jack said, *"The programme allowed him to become more in touch with his emotions. His attitude with his sister, who has autism, has changed. Before the programme, they would clash a lot. Since the programme, he's been able to identify a lot more about her and in common with her. Before he would try to engage when she didn't want to, but now he knows when to give her space. He is more caring, and they get into less arguments. Generally, we've seen more emotion from Clay."*

Clay's final parent and teacher SDQ Total Difficulties scores at the end of mentoring also indicate that he made considerable improvement. Both scores declined from very high at baseline (20 and 22, respectively) to just at Chance UK's threshold for needing mentoring support (15 and 16, respectively).

**Names changed to protect identity*

PART IV

Conclusion



9.1. Achieving a more structured mentoring programme

Chance UK were successful in designing a more structured programme with My Future. This includes creating a more evidence-aligned curriculum, and producing a manual with a detailed timeline and guidance for mentors to use the core strategies, techniques and skills to address outcomes and sensibly tailor activities to their mentee's needs when necessary. Feedback from My Future mentors shows that most of them found the new curriculum clear and the new manual helpful for planning and delivering mentoring sessions consistently. These features may have contributed in part to the close alignment between the curriculum and the objectives, skills and techniques generally used by mentors over the 9 months of mentoring. Mentors also maintained good adherence while mentoring remotely during COVID-19 restrictions, and any modifications to delivery were in line with curriculum guidance.

For Chance UK, this learning is encouraging proof of their ability to use evidence and experience to develop and continue refining their programmes' designs. The learning can also inform improvements to training and supervision to support mentors better as they translate their understanding from training and the curriculum manual into practice during mentoring. The learning about mentors' use of techniques and skills can help to set expectations for use and monitor future implementation more precisely.

For Dartington, this is compelling evidence of the potential of rapid-cycle design and testing to quickly support services through the often complicated but necessary early stages of distilling the evidence base, complementing science with local experience, conceptualising evidence as practical programme components in a theory of change, and translating theories into clear and deliverable intervention designs.

9.2. Responding to disruptions in one-to-one mentoring

Overall, fewer pairs than predicted held the minimum recommended 24 out of 31 one-to-one mentoring sessions. Most sessions were missed for seemingly foreseeable reasons like parent/carer last-minute cancellations and life events. Other potential barriers to one-to-one delivery include the weekly frequency of sessions and the lack of co-operation from parents/carers. The process of routinely reviewing learning in cycles helped Chance UK to immediately identify and respond to the more controllable disruptions, ultimately reducing their recurrence during the evaluation. Other foreseeable factors like seasonal holidays were less controllable and continued to reoccur alongside a high prevalence of unavoidable illnesses and emergencies.

Chance UK gained ample learning that can inform more anticipatory responses to these disruptions including ensuring strong parent/carer commitment at the outset, maintaining high parent/carer engagement throughout mentoring, factoring seasonal holidays in mentoring schedules, and using alternatives like online delivery which the evaluation shows can reduce logistical challenges and increase the frequency of pair interactions.

This aspect of the evaluation clearly demonstrates the immense potential of rapid-cycle design and testing to continuously generate feedback and facilitate timely decision making and change to avert problems. Other services and evaluators might find similar benefits especially when undertaking improvement-focused process or formative evaluations.

9.3. Building a foundation for group mentoring

As with one-to-one sessions, fewer pairs than expected attended the recommended minimum of 4 out of 5 group mentoring sessions. At the same time, My Future programme managers and facilitators delivered most of the 41 group sessions they originally planned, and by delivering in the context of COVID-19, demonstrated their ability to rapidly adapt online while maintaining some core design features such as personalised facilitator support and small-group peer activities.

Chance UK now have first-hand understanding of the general promoters of and barriers to offering a structured facilitator-led group component. The evaluation findings provide a foundation on which to develop other evidence-aligned strategies to overcome the main barriers to attendance highlighted by pairs, such as inconvenient meeting times and locations, and differences in mentees' development stage, support needs and level of engagement. Chance UK are already considering a blended approach as a long-term response, given the promise shown (by the few virtual sessions they implemented) for reducing scheduling challenges, eliminating travel burdens, and simplifying the 'grouping' of mentees with similar characteristics.

9.4. Maintaining positive support to mentees

The evaluation shows that, amid changing strategies, most mentees experienced significant improvement in their emotions and behaviour by the end of mentoring. Most mentors also felt positively about their mentoring experience and compatible with their mentee, while most mentees rated their relationship with their mentor favourably. These findings suggest that methods such as rapid-cycle design and testing can 'positively disrupt' routine practices, facilitating improvement in processes while not impacting negatively on the experience of participants and staff. In fact, the method helped to produce evidence that the use of some outcomes assessments were potentially burdensome to younger mentees and some parents/carers and teachers. Pause and Decide meetings created the medium urgently needed by Chance UK to reflect on such evidence and decide to adapt some assessments and discontinue another.

9.5. Balancing research ambition with realism

Recognising that the use of some assessments might be more harmful than helpful is one way in which Dartington and Chance UK learned to temper the need for research rigour with the practicality of a real-world programme delivered to young children. Responses from mentors and teachers to the number of data collection forms and timepoints also suggest that, at times, the evaluation might have been doing too much. The My Future programme managers reflected that they sometimes felt challenged by the novelty of continuously collecting, inspecting, collating and sharing data. Dartington's efforts to limit data collation and sharing to new data from subsequent cycles helped to alleviate some burden. They also increased the practical support to programme managers by providing guidance and a checklist for data management.

Going forward, some of these challenges will lessen for Chance UK as they deliver and refine more cohorts. They have also committed to working collaboratively with mentees and mentors to find valid assessments and create customised tools that are more contextually appropriate for My Future.

Dartington is also reflecting on how they can support services with identifying or developing such tools by drawing on their experience in user-centred design and their work on other projects focused on youth involvement and empowerment. Addressing the sheer volume of data will be more challenging as rapid-cycle design and testing already aims to facilitate data collection that is proportionate to the nature and needs of the programme being tested. A possible workaround is to include more detailed considerations about data collection in the early Assess step where Dartington can present a range of options from minimum to aspirational to aid stakeholders in arriving at an achievable medium.

9.6. Leaving a legacy of tools and best practices

While there were some unexpected findings, overall, the evaluation approach has contributed to new understanding, skills and products that Chance UK can continue to use and build on with My Future and their other programmes. Meanwhile, similar services, and evaluators interested in learning and improvement, might be inspired by the fruits of Chance UK's labour, some of which are summarised in Table 7 below.

UNDERSTANDING	PLANS FOR EMBEDDING INTO ROUTINE PRACTICE
Promoting an organisational culture of learning and self-evaluation Using evidence and experience to inform theory-based designs and refinements Tailoring activities, tools, training and supervision to the different stages and needs of participants	"Rapid-cycle design and testing offers a structured framework to test, learn and adapt quickly and flexibly. It is empowering to have been able to see innovations brought to life and to change a longstanding codified programme and see improvements within the next cycle where we wanted to make a change." Chance UK CEO
SKILLS	
Rapid designing, adapting and quality improvement Data collection and quality management Basic data analysis, insight generation and interpretation Involving cross-functional teams in regular (cyclic) data-driven decision making Supporting uptake, integration and diffusion of innovations	"I think having the theory of change will enable us to further develop the programme curriculum, content and structure beyond this project and will provide a framework to work within when making further developments" Chance UK senior programme manager "Building in more points (cycle points) in the year to stop, reflect and review delivery and implementation and to adjust where necessary and appropriate; convening SMT and project delivery staff to reflect on progress and achievements together; and bringing the staff team together before a new project in the way we did for the theory of change workshops." Chance UK senior programme manager
PRODUCTS	
Theory of change Mentor manual and structured 9-month curriculum Face-to-face and virtual models of one-to-one and group mentoring Parent/carer engagement pack and code of conduct Data quality checklists Decisions and adaptations record	"Using the data checklists to ensure we are collecting the right data and at the right point for each of our projects, and using more of the functions of our [online data collection system] to improve data management and keep up with evaluation deadlines and monitoring outcomes." My Future programme manager

Table 7. Summary of new understanding, skills and products

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