Appendix 1 – Descriptions of Projects

The Bristol Pandora Project

The Pandora Project involves agencies from both statutory and voluntary sectors. It provides services both to young men and young women involved in commercial sexual exploitation. In this sense, it might be said to be the most ‘inclusive’ of the projects funded under the CRP initiative. Agencies involved in this partnership are:

♦ Avon and Somerset Constabulary
♦ Avon Health Authority
♦ Barnardos Bristol Against Sexual Exploitation (BASE)*
♦ Bristol City Council
♦ Bristol Community Safety Partnership
♦ Bristol Drug Project (BDP)*
♦ Bristol Social Services
♦ Terrence Higgins Trust (THT)*
♦ Milne Sexual Health Centre
♦ One 25 Limited*
* Denotes voluntary sector organisation

The project hoped to establish a multi-agency team with the specific aim of providing outreach and appropriate referrals to other services to vulnerable young people in Bristol. The project aimed to provide:

♦ a specialist project worker (through Barnardos BASE)
♦ a specialist drugs worker (through BDP)
♦ a specialist health worker (through provision of medical services at Milne Sexual Health Centre)
♦ a specialist service for young men through the Terrence Higgins Trust Street Team
♦ outreach work (through One 25, BASE, BDP and THT)
The Sheffield Sexual Exploitation Project

The Sheffield project is a multi-agency group involving statutory and voluntary services to target young women who are at risk or involved in commercial sexual exploitation. Agencies involved are:

- NSPCC*
- Sheffield City Council (youth services)
- South Yorkshire Police
- Social Services
- Area Child Protection Committee
- Sheffield Prostitution Forum*
- SHED (under 19s substance misuse service)*

* Denotes voluntary sector organisation.

The service aimed to provide the following:

- Awareness raising and training for professionals across a variety of agencies
- Multi-agency planning meetings
- Youth work based intervention for young women (courses and drop-in)
- Strategy co-ordination and development

The Rotherham ‘Risky Business’ Project

The Rotherham project was developed as a result of a successful joint bid by ‘Risky Business’ and CROP for CRP funding and is managed by a management committee comprising of representatives from a number of agencies. Agencies involved in the project in Rotherham are:

- CROP*
- Domestic Violence Forum
- NSPCC*
- Risky Business Project
- Rotherham Metropolitan Borough Council Education, Culture and Leisure Services
- Rotherham Metropolitan Borough Council Youth Services
- Rush House Homelessness Project*
♦ Social Services (child protection and planning)
♦ Social Services (Family Crisis Response team)
♦ South Yorkshire Police
*Denotes voluntary sector project.

The Rotherham project aimed to:
♦ Employ a development worker who would be responsible for co-ordinating the work around targeting pimps and gathering enhanced evidence. It was intended that this work would investigate the feasibility of using the Child Abduction Act as well as civil remedies to intervene early in the ‘pimping and grooming’ process.
♦ Train and raise awareness amongst other professionals
♦ Use enhanced evidence to effect prosecutions against the men thus ensuring that the onus was not placed on the child victims. This would involve liaison with the police, CPS, parents and other agencies.
♦ Establish an ICT database to collate and cross-reference information on young women considered to be at risk and their associates.
♦ Recruit and train specialist foster carers so that young women at risk could be appropriately accommodated in a place of safety and carers could be appropriately supported in their work. As part of this work, the project planned to make available ‘keep-safe’ equipment where this might be required – e.g. personal alarms, secure locks for houses and telephones as appropriate.
Appendix 2 – Interview schedules employed in the course of the evaluation

1) Professionals/practitioner interview schedule: Generic questions

N.B. Each interview schedule will have to be ‘tweaked’ to address the specific aims of each project

Introduce yourself, explain who you are and what the aims of the research are – to look at how successful the project has been in achieving its aims; to assess/evaluate the possibility of replicating the project and to determine its cost-effectiveness. Explain that as individuals they will not be identified in anything that is written/published about the evaluation, although the projects will be identified to the Home Office. Explain that what they tell you will not be shared with anyone else that is involved in the project.

1) To your knowledge, what is the scale of the problem of child prostitution in this area? [Probe to find numbers involved, ages of those involved, ratio of boys to girls]

2) How aware were you of this problem in the area before your involvement in this project? [Probe to find how awareness of problem has changed]

3) What, in your experience, leads young people to become involved in prostitution? What sort of young people are they? [Probe to find if mostly come from residential or other types of care placement, runaways, drug users etc.]

4) To your knowledge, what previous initiatives have there been in this area to tackle the problem of child prostitution? [If appropriate] How effective have these been?

5) What has been your role/the role of your agency in this project? [Attempt to get them to specify the precise nature of their involvement in terms of the numbers of hours they are employed by the project and involved in project work]

6) Have you experienced any problems or difficulties in working with the other agencies involved in the project partnership? [Probe to find any difficulties with multi-agency working]

7) What did your project set out to do and how did it plan to do it? [Probe to find why project thought this was the best way of approaching the problem & whether this is considered to be an appropriate response to the problem]

8) Have there been any changes to the original plan of the project? [If appropriate] What were the changes? Why did they happen?
9) In your opinion, has the project managed to achieve its aims? [Probe to find out what they think the project has achieved & if it has not achieved its aims, why not?]

10) How many young people have taken up the services provided by the project since it began? [Probe to find what proportion of all those involved this represents] As a result of their association with the project, do the young people have increased access to services? [Probe to find which ones]. Were most of the young people not accessing these services prior to becoming involved in the project?

11) Do you think the project has managed to prevent any young people from becoming involved in prostitution? Has it enabled any of those who were already involved to exit? [Probe to determine numbers for each]. To your knowledge, has there been a reduction in the numbers of young people involved in soliciting? Has there been a reduction in numbers of young people in this age group arrested for soliciting? Has there been a reduction in associated offences – theft etc. and/or a reduction in the nuisance and incivilities occasioned by prostitution? Do you think that as a result of the project, young people have decided to move to other areas to work where they will not be so easily detected?

12) To your knowledge, has there been a reduction in the drug-related activity in which they young people are involved as a result of their involvement in the project?

13) As a professional working with young people who are involved or at risk of involvement in prostitution, do you feel better equipped to deal with the problem as a result of your participation in this project? How has it changed your approach? [Probe to find how they would respond to the problem & in what ways this has changed since participation in the project]

14) To your knowledge, has there been an increase in the number of arrests or prosecutions for kerb crawling since the project began? Have other measures been developed in order to deal with the abusers?

15) What further services/improvements to existing services do you think are needed to prevent young people in this area from becoming involved in prostitution or to provide them with exit strategies once they have become involved?

16) Is there anything else you would like to say or anything about the project and your work that you would like to tell me about that I haven’t asked and that you think is important?
Thank participant for giving their time and participating in the interview. Explain that we may want to return to talk to them in a few months to see how the work has progressed and ask if they would be willing to meet again in due course.

Appendix 2 continued

2) Young People Interview Schedule

Introduction:
Explain what the research is about, what it aims to do and whom it’s for. Explain that we want to talk to them to see what they think of the project they’re in contact with. Explain that everything they say will be treated in confidence except in circumstances where they might reveal that they, or other young people with whom they are in contact, are in life-threatening situations. They will not be identified by name in anything that is written up as a result of the research. They can choose to be anonymous if they so wish. Explain that they need not answer any question if they don’t want to and if they want to stop the interview at any time, they have only to say so. Explain that we would like to talk to them again once they have been involved with the project for a while and ask whether they would be prepared to meet with us again to discuss what they think of the project and how it might have helped them.

1) Would you begin by telling me a little bit about yourself and your background – How old you are, where you come from and things like that.

2) Would you tell me a little about your family background? Establish whether they’ve been in care – if so how old were they, how long for and why they went into care. Establish what sort of family experience they’ve had – conflict, abuse, running away etc.

3) Where do you live now? Establish living arrangements – private flat, public housing, hostel, with parents etc. Do they live alone/with a partner/share with friends, live with parents/carer etc. Do they have any children? (If appropriate, do their children live with them?)

4) What about school? How do you get on there? Are you still attending school? (If yes, establish if they are attending regularly; if no, establish when they last attended school)
5) How long have you been in touch with the project? How did you get to know about it?
Establish whether contact with project has resulted from the efforts of the project to contact young people (through outreach etc.) or whether they heard about it through word of mouth. In Sheffield, they have to be referred through social services so establish why they were referred and probe to find out how they feel about being referred to it.

6) Were you in touch with other services before you became involved with this project?
Establish which ones if appropriate and how useful they found the services they received compared to the services they are receiving from this project.

7) What, in your view, has the project provided for you?
Establish whether they were accessing these things before or not. Has the project delivered services in a better way than they were being delivered before coming into contact with the project? Establish whether they use drugs and if so, are they getting help with drug use as a result of contact with the project?

8) What do you consider to be the best thing about the project?

9) Has the project made you reconsider your behaviour and lifestyle? How has it made you change?
(If the answer is no, probe to find out why not)

10) What would you be doing if you were not involved in the project?

11) Is there anything else you’d like to say about the project that I haven’t asked you about and that you think is important? Is there anything else you’d like to talk about?

When interview is finished, thank the young person for agreeing to take part and ask again whether they would be prepared to be interviewed again in another few months time. Make arrangements for getting in touch with them for the second interview or establish how contact should be made – through project worker etc.

Appendix 2 continued
3) Questionnaires used with young people

Evaluation of young people’s projects in Bristol, Rotherham and Sheffield.
We at the University of Luton are undertaking a national evaluation of young people's projects on behalf of the Home Office. To help us in this task, we would be grateful if you could complete the questions below and return this form to us in the envelope provided. What you say will not be divulged to anyone who has been working with you in the projects – it will all be treated in confidence and you will not be identified by anything that we write as a result of what you tell us here. We really appreciate your help with this. If there is not enough space at any of the questions for your answer, please continue on a separate sheet.

Qu.1. Are you male or female (please circle) MALE FEMALE
Qu.2. How old are you?
Qu.3. What project have you been involved with (please circle)
   BRISTOL ROTHERHAM SHEFFIELD
Qu.4. How long have you been involved in the project?
Qu.5. How did you come to know about the project?

Qu.6. What do you think has been the best thing about being involved in the project?

Qu.7. What do you think you might be doing now if you had not become involved in the project?

Qu.8. Has the project made you change the things you do? If so, in what way?
Qu.9. Has being involved in the project made you feel any of the following (please tick all those that you think apply to you and your life)

I feel more confident

I feel happier

I feel that there is someone to listen to me

I feel that I’ve got opportunities to do things with my life

I feel that I’ve been helped with problems in my life

I feel more grown up about things

I feel safer than I did before

I feel there are people who really care about me

Qu.10. How, in your opinion, could the project have been improved?

Thank you very much for taking part in this survey and helping us with our work.
Evaluation of young people's projects in Bristol, Rotherham and Sheffield.

We at the University of Luton are undertaking a national evaluation of young people's projects on behalf of the Home Office. To help us in this task, we would be grateful if you could complete the questions below and return this form to us in the envelope provided. What you say will not be divulged to anyone who has been working with you in the projects – it will all be treated in confidence and you will not be identified by anything that we write as a result of what you tell us here. We really appreciate your help with this. If there is not enough space at any of the questions for your answer, please continue on a separate sheet.

Qu.1. Are you male or female (please circle) MALE FEMALE

Qu.2. How old are you? 16 years old.

Qu.3. What project have you been involved with (please circle) BRISTOL ROTHERHAM SHEFFIELD

Qu.4. How long have you been involved in the project? 1 month.

Qu.5. How did you come to know about the project?

From my School

Qu.6. What do you think has been the best thing about being involved in the project?

Helping with my problems, and the fact that it gets me out more and involved with things that I should be if I was going to school.

Qu.7. What do you think you might be doing now if you had not become involved in the project?

At home or at my friends house doing nothing or fighting with my brothers at home. Because I very often go to school.

Qu.8. Has the project made you change the things you do? If so, in what way?

The project has made me see that there is a way out of my depressing life that I lead.
Qu.9. Has being involved in the project made you feel any of the following (please tick all those that you think apply to you and your life)

- I feel more confident  
- I feel happier
- I feel that there is someone to listen to me
- I feel that I've got opportunities to do things with my life
- I feel that I've been helped with problems in my life
- I feel more grown up about things
- I feel safer than I did before
- I feel there are people who really care about me

Qu.10. How, in your opinion, could the project have been improved?

There is really no way that it can because I really enjoy being here the way it is.

Thank you very much for taking part in this survey and helping us with our work.

That's ok.
Appendix 4: Typical Outreach Reports

A)
Date: 17\textsuperscript{th} December 2001 – Evening Session
Workers – 2 BASE, 1 BDP
Number of Young People Contacted: 2 (female)
Number of Young People Previously Contacted: 0

Issues of Concern
Keep seeing D..., a very suspicious man, drives a Toyota Landrover. Contacted L on S- Square. She told us she was 21, neither M nor I believed her – she looks 15, 16.
She is white, very skinny, has bleached blonde hair with very long dark roots.

Saw a girl called K for the first time. K is white with tied back ginger hair, she is approximately 5’5” with blue puffer and black trousers. She said she was 21 we do not believe she is as old as that.

Outcomes of session
Telephoned police at P about very suspicious man in Toyota Landrover. Police did turn up but too late, D was already gone.
The streets were very quiet again. Lots of police around.
Girls are still lying to us about their age.

B)
Date: 19\textsuperscript{th} September 7.30pm
Workers: 1 BASE, 2 BDP
Number of young people contacted: 5 (female)
Number of young people previously contacted: 0

Issues of Concern
Concerned about the amounts of new girls on the streets. The girls are lying to us about their ages – no doubt this is due to the fear of possible negative repercussions.

D- calls herself S- White, UK, shoulder length blonde hair, black puffer jacket, big blue eyes, clear skin. Looks very young – max. 15 years old

K- White, UK, long curly hair, skinny, nervous, new to the streets. Said she was 19 but looked much younger.

G- White, UK. Small, slight, shoulder length brown mousy hair, black leather jascket – too big. Approx. 15/16 years old.

M- Long, thick brown hair, white UK. Local accent. Been out on the streets sometime, 15 years old

C- White, UK. Tall, skinny curly light brown hair
Appendix 4 cont'd.

Outcomes of session
The amount of activity and contact on the streets has allowed me to start forming and developing relationships with the girls. All girls contacted have been given phone numbers and leaflets about currently available services.

M has offered to follow up leads with Detective Constable B in regards to information given to us from C – we also need to check her real age.

Source: Barnardos BASE
<table>
<thead>
<tr>
<th></th>
<th>Staff</th>
<th>Premises</th>
<th>Training</th>
<th>Other</th>
<th>Equipment</th>
<th>Research</th>
<th>Publicity</th>
<th>Levered</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Council</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Co-ordinator, support, admin</td>
<td>9950</td>
<td>1560</td>
<td>250</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>11760</td>
</tr>
<tr>
<td>Social Services</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Team manager/liaison etc</td>
<td>6140</td>
<td>250</td>
<td>100</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>6490</td>
</tr>
<tr>
<td>Police</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>120 hours</td>
<td>2154</td>
<td>500</td>
<td>700</td>
<td>100</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>3454</td>
</tr>
<tr>
<td>Sub-total Public Servants</td>
<td>18244</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Terrence Higgins Trust</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Project Man, sessional wk</td>
<td>9200</td>
<td>500</td>
<td>2600</td>
<td>200</td>
<td>0</td>
<td>120</td>
<td>4000</td>
<td>0</td>
<td>16620</td>
</tr>
<tr>
<td>Barnados</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Outreach, sessional, admin</td>
<td>29223</td>
<td>6250</td>
<td>5250</td>
<td>0</td>
<td>0</td>
<td>1360</td>
<td>0</td>
<td>0</td>
<td>42083</td>
</tr>
<tr>
<td>One25 Ltd</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Co-ordinator</td>
<td>1845</td>
<td>750</td>
<td>75</td>
<td>7300</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>9970</td>
</tr>
<tr>
<td>Milne Centre</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Doctor, nurses, expenses</td>
<td>35550</td>
<td>1500</td>
<td>450</td>
<td>250</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>37750</td>
</tr>
<tr>
<td>Bristol Drugs Project</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Specialist outreach</td>
<td>15706</td>
<td>4000</td>
<td>4000</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>23706</td>
</tr>
<tr>
<td>Total</td>
<td>109768</td>
<td>15310</td>
<td>3825</td>
<td>17450</td>
<td>0</td>
<td>120</td>
<td>5360</td>
<td>0</td>
<td>151833</td>
</tr>
<tr>
<td>Organization</td>
<td>Total Spend</td>
<td>Contacts/Worked</td>
<td>Details</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------------</td>
<td>-------------</td>
<td>-----------------</td>
<td>---------</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>THT</td>
<td>£11,232.04</td>
<td>31 worked; 49 contact; 18 contact n/w; 16 inf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Barnardos</td>
<td>£42,471.29</td>
<td>132 contacts</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>One25 Ltd.</td>
<td>£65,866</td>
<td>77 contacts; 13 worked; 64 contact n/w</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Milne</td>
<td>£22,439.73</td>
<td>100 worked</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BDP</td>
<td>£18,924</td>
<td>19 contacts; 5 worked</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>£101,653.06</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>£ STAFF</td>
<td>TRAINING PREMISES</td>
<td>OTHER</td>
<td>EQUIPMENT</td>
<td>RESEARCH</td>
<td>PUBLICITY</td>
<td>LEVERED TOTAL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>--------------------------------</td>
<td>---------</td>
<td>-------------------</td>
<td>-------</td>
<td>-----------</td>
<td>----------</td>
<td>-----------</td>
<td>---------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Social Services</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Co-ord; managt;support</td>
<td>28420</td>
<td>1500</td>
<td>3350</td>
<td>0</td>
<td>0</td>
<td>3733</td>
<td>260</td>
<td>273</td>
<td>37536</td>
</tr>
<tr>
<td><strong>Youth Service</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Co-ord; managt; support</td>
<td>18025</td>
<td>1400</td>
<td>4500</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>23925</td>
</tr>
<tr>
<td><strong>Police</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attend case confs; data input</td>
<td>18900</td>
<td>0</td>
<td>500</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>19400</td>
</tr>
<tr>
<td><strong>Reference Group</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attendance at meetings</td>
<td>1200</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1200</td>
</tr>
<tr>
<td><strong>Practitioners Group</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attendance at meetings</td>
<td>3600</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>3600</td>
</tr>
<tr>
<td><strong>Community Safety</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attendance at meetings</td>
<td>575</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>575</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>70720</td>
<td>2900</td>
<td>8350</td>
<td>0</td>
<td>0</td>
<td>3733</td>
<td>260</td>
<td>273</td>
<td>86236</td>
</tr>
</tbody>
</table>
Appendix 6 - Discursive themes arising from interviews

The themes discussed here have emerged across the different projects although some are more significant in some areas than in others. The themes identified are as follows:

♦ Support
♦ Taking control/ 'empowerment'
♦ Self-esteem
♦ Chaotic lifestyles
♦ Hard to engage
♦ Drugs
♦ Denial
♦ Holistic care

These are discussed more fully below. Workers have been identified as 'project workers' to protect their confidentiality.

(1) Supporting young people – filling in the gaps
The notion of 'support' has emerged as a central theme in the discourse of many practitioners. This has been discussed at a number of levels – the lack of support for young people, the need for support for workers involved in the projects, and the support the workers have received for their project work from various agencies. Many practitioners share the view that there is not enough support for vulnerable young people and see the work of the projects in terms of 'filling in the gaps' in existing provision in order to prevent these young people from 'falling through the net':

There needs to be more support for when young people go missing so that we can pick up what their problems are and get other services involved if necessary (Project Worker, Sheffield)

One of the things we identified was automatically to have a social worker to support the family when there are young people we have concerns about (Police Officer, Sheffield)
There's a need for parenting support so they know where to put down the boundaries (Project Worker, Sheffield)

The project aimed to support young women in looking at issues in their lives and to support them in making life changes (Project Worker, Sheffield)

The work didn't set out to combat sexual exploitation but we've gone out there to prevent, inform and support young women (Project Worker, Sheffield)

The project was designed to make the whole process more intensive and to maintain contact with the young person over a long period of time to try to make sure that they weren't just going to fall through the gaps in the system (Police Officer, Sheffield)

Our aims are to support the young women – offer them alternatives (Project Worker, Rotherham)

Many young people are in the care system and not supported. Education is not supporting them either (Project Worker, Bristol)

The project was about engaging with the young people, providing outreach for that and various services coming together to prevent these young people slipping through the net (Project Worker, Bristol)

The project was about all of us as professionals attempting to provide a safety net that would mean young people wouldn't slip through (Residential Care Representative, Bristol)

The project was to fill a gap, to provide a way for young people, young men in our case, to be able to make choices, with our help of course (Project Worker, Bristol)

Practitioners and professionals have also spoken about the support they have or have not received from other agencies:
Social services are supportive but they don’t ring up as a matter of course to find out how you are (Foster carer, Rotherham)

If it wasn’t for them [Sheffield Police] giving us the support they’ve given us, and the information they’ve shared with us, I don’t think we’d be as far down the line as we are now (Project Worker, Rotherham)

One of the foster carers in Rotherham spoke about the lack of support that she had received when her foster child was involved in making a complaint of abuse she had experienced in the past. She felt that she had no one to support her. Social Services tried but they were unaware of what they were supporting her over. Her foster child received no support from anywhere except her foster mother. The foster mother was of the opinion that ‘no one seemed to know what to do’.

The young people we have spoken to have also testified to the importance of having support from the projects. Emily¹, a 14-year-old in touch with Barnardos BASE told us she thought the project was ‘really good’ because it ‘supports people’:

You can come down and talk to someone about any problems and young people are getting the support they need when they need it

Philip, an 18-year-old young man in touch with Terrence Higgins Trust in Bristol echoed this theme. He testifies to the lack of support he had received before getting in touch with Terrence Higgins Trust. and his father was an alcoholic ‘so I moved out of my dad’s house’ The council put him in ‘a real crappy bed and breakfast. I was young and didn’t know what was what and you go for help and they stick you in a bed and breakfast’. In the bed and breakfast, he was introduced to heroin. Phillip negatively contrasted the support he had received in the past, for example, from the Salvation Army and Social Services with the positive support he had received from the Terrence Higgins Trust since becoming involved in the Pandora project. When asked about what the project had provided for him, he told us,

Lots of things really. Put me in touch with somewhere to live. It’s hard to find somewhere decent and you need that if you want to sort yourself out. Helped

¹ The names of all the young people have been changed in order to protect their confidentiality
with the methadone and detox and what’s good is... will come with you at first till you get used to things then you go on your own when you can.

When asked what he particularly liked about the workers at the project, he said:

He listens to you, even when he knows you’re saying something mad, he doesn’t come on all heavy like. What he does is help you see things all calm and clear [....] He helps you to come to decisions rather than coming to them for you. He makes you feel more sensible by treating you like you’re sensible, or you can be.

Rachel, a 14-year-old in touch with the project in Sheffield told us,

She [the project worker] was great, really great. She went with me [to the GU clinic] and supported me while I waited for the results [......] She’s like a friend, she gives support, she listens, you can talk to her about things you can’t talk to other people about.

In contrast to the support they received from the projects, Phillip had this to say about the support he had received previously:

I had social workers as well as housing but I hate them, really, really hate them. They think they know everything and they don’t listen at all. I’ve met loads of them [social workers] and they’re all the same. In the end I thought they were that bad I’d rather just sort things out myself[......] They’re so crap you know [The Salvation Army], it’s all about rules and regulations before you get considered. They’re just like social services, it’s like they want you not to get right, keep ‘em in a job [......] I think people should come asking questions about the Salvation Army and social workers, you’ve no idea about how useless they are. They should be sacked, the lot of ‘em.

(2) Taking control/empowerment

Many practitioners say they are concerned to help young people ‘regain their life and take control’ (Project Worker, Bristol and Project Worker, Sheffield). This is difficult for young people who may feel that they never had a life in the first place. It is also difficult in the socio-economic context from which many of them come – they have no qualifications, no employment prospects, no money, often no family support, often no home and so forth. However, many workers say that this is the aim of the work they
do with the young people in the projects. In Sheffield, for example, project workers have said their work is about,

'Getting them [the young women] to admit [what they are involved in] to discover more about themselves and working with them around issues of taking control. I think what we need is a project for young women around issues of taking control – a project that's wider than just focused on sexual exploitation (Project Worker, Sheffield)

While in Rotherham they have said this:

The young women are now going to the GU clinic on their own after initially having to be taken there. That's about empowering, isn't it? (Project Worker, Rotherham)

And in Bristol they have said this:

The project is about empowering the young people to regain their life and take control (Project Worker, Bristol)

The extent to which anyone can be said to be 'in control' of their life is of course relative and the barriers to being in control derive from such structural factors as sex, age, ethnic group and of course, economics. The young people, however, as a result of the work undertaken with them in the projects have come to feel more ‘in control’ of their lives. Phillip, for example, told us,

What it's done [the project] is make me realise, believe, that I could get where I wanted. When you get one little step it makes you feel better, then you can do a bigger one next time and that goes on and on.

Similarly, Rachel told us that the Sheffield project had,

Made me realise what I want, and I have to put effort in to get it, organise things, organise me a bit. Not to get drunk, not to get out of it and forget, to be more careful, look after myself. [Meeting with the project worker] helps you realise that it's up to you to be in charge I suppose

Janine, a 13 year old in touch with the Sheffield project, had this to say when she was asked about what she thought she might be doing if she were not in touch with the project,

I'd still be depressed. Still doing other things, miserable. I'm a happy child now.
(3) Self-esteem

Across the project areas, practitioners describe the young people they are working with as lacking in self-esteem. For example,

_They [the young women] have no self-esteem whatsoever – no interests, they don’t care about anything and they think very little of themselves. They have no ambition whatsoever (Project Worker, Sheffield)_

_We try to focus for the young women on self-esteem, personal safety and sexual health (Project Worker, Rotherham)_

_Many of the girls come from environments where self-esteem is not fostered (Project Worker, Bristol)_

_If you end up in care there’s going to be neglect or abuse issues and there’ll be self-esteem issues (Project Worker, Bristol)_

It is known from previous research, that young people who become involved in prostitution are usually ‘damaged’ in some way by their previous experiences. They may be emotionally vulnerable and/or traumatised by previous abuse or neglect. As a result of their previous experiences, and of not being valued by their parents or carers (the significant others in their lives) many have grown up with a sense of their worthlessness (Melrose et. al. 1999). In order to build their self-esteem and repair the damage that has been done to their own sense of identity these young people need to feel valued and worthwhile. Some evidence suggests that vulnerable young people may derive a sense of self worth through engaging in voluntary activities and/or peer mentoring and education schemes (Pitts 2001). Such schemes can enable them to feel needed and valued by other people. None of the projects appear to be providing young people with opportunities such as these and indeed, they do not seem to be offering many practical ways through which young people may come to value themselves.

Data generated through our interviews with the young people, however, suggests that young people can come to value and feel good about themselves by being ‘taken seriously’ by the adults around them. Rachel told us,
She [the project worker] takes you serious, even though she’s not, not like a
teacher with that attitude, she’s serious when she needs, but she can be fun too.
She’s helping me find out about getting into a dance group as well. I’ve always
been interested in that [...] so she takes you serious about bad stuff and about
good
When Janine was asked what she thought was the best thing about the project, she told
us,
Your own choice, being able to choose what you do, it makes you feel, um,
sensible
Phillip also echoed this theme when he spoke about the Pandora project and the
support he had received from the project worker at THT,
What he [the project worker] does is help you see things more calm and clear,
but without being clever, he helps you come to decisions rather than coming to
them for you. He makes you feel more sensible by treating you like you’re
sensible, or you can be

(4) Chaotic lifestyles
Many practitioners describe the young people they are working with as having
‘chaotic’ lifestyles. For example,
The young people’s lives are so chaotic (Project Worker, Sheffield)
Their lives are chaotic and they need informal work for a long time (Project
Worker, Sheffield)
Working in the project has made me realise how chaotic the lives of the girls
are (Project Worker, Bristol)

Previous research has indeed demonstrated that young people who become involved in
prostitution do lead rather ‘chaotic’ lives they may be insecurely housed, they may
have no support from family and friends, they may be experiencing mental health
problems (Melrose et. al. 1999). This chaos is often compounded by, or results from,
drug addiction (Melrose et. al. 1999). Chaotic lives, however, should be seen as a
symptom of deeper problems and it is these that need to be addressed through the
work undertaken with the young people if practitioners are successfully to effect change in this area.

(5) Hard to engage

Many of the practitioners have talked about the difficulties of engaging the young people with whom they are trying to work. In the words of one practitioner, ‘They see us as interfering adults and they’re not out there waiting to be saved’ (Youth Worker, Sheffield). Previous research has shown that because of the problems these young people may have experienced in the past, they are often suspicious of statutory agencies and may resist the help that is offered to them by concerned professionals. It can of course take a long time to establish relations of trust with such vulnerable young people – especially when they feel (as they often do) that they have frequently been let down by agencies and services in the past (see for example, the testimony of Phillip, above). It is hardly surprising, therefore, that many practitioners regard the fact that the young people have engaged with the projects as a major achievement in itself:

*Getting the young women to engage one of the greatest achievements (Project Worker, Sheffield)*

*The fact that the young women keep coming back is very positive (Project Worker, Bristol)*

*It can be counted as a success that the young women are attending the clinic at all (Manager, Sexual Health Centre, Bristol)*

*The project is working in that the young women are engaging with us (Project Worker, Sheffield)*

*The direct work has certainly reached its aims in terms of engaging the young women (Youth Worker, Sheffield)*

It will of course be essential to explore the effects that such engagement has in the lives of young people and the extent to which it positively influences changes in the young people’s behaviour over time. This will be more fully discussed in the next
report that explores outcomes from the project work. At the time of writing, we feel that projects have not had long enough to effect any real or lasting change and acknowledge that doing so is very much a long term process.

(6) Drugs

Some practitioners in all areas noted the link between drug use and prostitution. This insight has already been noted above when practitioners were talking about the factors that lead young people to become involved in prostitution. When young people have drug misuse problems, this can be one factor that makes them ‘hard to engage’. What we have noted, however, are contradictions in the accounts of practitioners about the role of the drugs in the lives of the young women with whom they are working. This contradiction was most evident in Sheffield. A police officer and a social worker in this area told us that most of the women (aged over 16) working on the streets have problems with drugs. They are mainly addicted to heroin and/or crack and are very often working in prostitution to support their drug use. This finding is borne out by previous research (O’Neill et al. 1995, Melrose et al. 1999, May et al. 2000). Some practitioners in this area also noted that drugs can be a reason for young people becoming involved in prostitution. On the other hand, however, some practitioners appeared to think that drugs were not an important factor in terms of the young women that are involved in the project.

*I wouldn’t say the problem [of drug use] is as prevalent with the young people. I know there have been occasions when older men have given them drugs. It is a concern but it isn’t at present a big problem with the younger ones we’ve been working with [....] The drugs issue seems to have reduced in the severity of the drugs being mentioned. We’ve gone from heroin and crack that quite a few of them were using, to alcohol, cannabis, perhaps a little bit of crack but not on the same scale as before (Police Officer, Sheffield)*

*We’re not noticing drug use – the ones we are working with are too young. Drug use is not coming to light, generally, drugs are not an issue. They’re not doing it for money for drugs and they’re not involved as a result of drugs (Project Worker, Sheffield)*

On the other hand, other practitioners expressed these views,
The drugs, well, just about all the women we encounter working in prostitution on the street are involved with drugs – adults and young people (Police Officer, Sheffield)

The numbers involved seem to me to be increasing recently. I think more may have drug issues (Project Worker, Sheffield)

Here we have directly opposed perceptions, accounts and understandings of the role drugs may be playing in these young women’s lives. In research in which this author was previously involved around vulnerable young people and drug use, we found that the average age of beginning to use drugs was approximately 13 years (Melrose 2000b). This study found that the patterns, types and levels of drug use amongst the young women in the study were of much greater concern than those of their male peers (Melrose 2000b). In terms of lifetime prevalence, 53% (8) of the young women had ever used cannabis, other drugs and volatile substances compared to approximately a quarter (8) of the young men. In terms of the drugs used in the past month, a fifth (3) of the young women had used cannabis, other drugs and volatile substances whereas none of the young men had used this combination (Melrose and Brodie 2000). The young women were more likely to have used heroin/crack and to have used drugs intravenously (Melrose 2000). This finding is borne out by recent work in Australia which has also found that amongst young women in custody, there were ‘higher levels of heroin use and HIV risk taking behaviour’ than there were amongst young men (McCallum 1998:pp. 14-15). This evidence would lead us to be cautious about the observations of some workers that drugs do not appear to be a problem with young women involved in sexual exploitation in Sheffield. Our experience is that, regardless of the age of the young person, drug use is very much part of the territory (Melrose et al. 1999, Melrose 2000b). Both the young women we spoke to in Sheffield denied that they were involved in illicit drug use.

Some similar, although not as stark, contradictions have also emerged in the accounts provided by practitioners in Bristol. A majority of practitioners we have spoken to in Bristol agree that drugs such as heroin and crack are a major complicating factor in the lives of the young people with whom Pandora is working. They have also told us that drugs are ‘very cheap’ in Bristol at the moment and there is a great deal of heroin and
crack around. One practitioner, however, has told us that she has not come across many young people using crack (Nurse, Bristol). This is contradicted by other accounts, however, that suggest that a major drug problem has developed in Bristol in the last couple of years. Much of the problem is attributed to Jamaican nationals (many of whom are in the country illegally) and the police have mounted a major operation (Operation Atrium) in order to tackle these men. At the time of writing, 50 men have been arrested and 12 deported for drug offences (Community Safety Manager, Bristol). There are also reports from the police that as well as these men, 'a lot of outsiders are involved and they have been robbing and gang-raping young girls and trying to get them into prostitution' (Vice Liaison Officer, Bristol Police). Many of these reports are unconfirmed, however, because the young women do not, or dare not, report such incidents. Both the young people we spoke to in Bristol, Emily (14 years old) and Phillip (18 years old) admitted that they were addicted to heroin.

(7) In denial

Another common theme that has emerged from across the projects is that the young people with whom projects are working are 'in denial' about what it is they are involved in or where their risky behaviour may lead them to. It is frequently their denial that makes the young people difficult to engage. One youth worker in Sheffield found this denial 'an eye opener' and said 'the extent of denial has been a learning curve'. In Bristol, one of the nurses told us that, 'The young women would not necessarily relate to selling sex if it was to help their partners. They sometimes see it as 'doing a favour' and they do it for gifts and so on'. Denial appears to result from the stigma that is attached to sex work and the fear on the part of the young person that they may be regarded negatively by adults whose opinions they may have come to value. It is also because of the stigma attached to sex work that the young women may euphemistically refer to what they do as being 'on the game', or 'doing business' or 'working'. For the same reason, they may insist that they are 'working girls' rather than 'prostitutes' (Melrose et. al. 1999) but in any event, they do not seem to perceive themselves as abused children or as children at risk. According to project workers, the young people often resent the presence of social workers, youth workers or other professionals in their lives.

(8) Holistic Care
Many practitioners claim that they approach the young person ‘holistically’ and provide a holistic range of services to meet their needs, for example,

"Social workers are undertaking core assessments of the young people concerned and looking at them holistically (Project Worker, Sheffield)"

"The project set out to provide a holistic response to the problem (Project Worker, Sheffield)"

"The work of that agency (The Children’s Society) is very much poverty based whereas our approach is more holistic (Project Worker, Rotherham)"

"The nursing provision has expanded to encompass more holistic care (Project Worker, Bristol)"

"In dealing with the girls, we try to take a holistic view of them (Project Worker, Bristol)"

Our estimation of the services being provided in the different areas is that they could be more holistic in the sense that in most cases a wider range of services could be provided. Many projects tend to focus on sexual health needs. While these are important for young people who may be at risk or involved in prostitution, there is, as was suggested in the previous report, also a need to provide opportunities that allow these young people to explore their own victimisation, opportunities for counselling, and the need to offer them long term support. ‘Educational facilities, careers guidance, help with housing and welfare benefits, help with drugs and childcare, detoxification schemes and needle exchange programmes’ were also recommended (Melrose et. al. 1999). As the previous report concluded, this ‘ideal type’ service, would require a greater level of resources and personnel, and for a longer period of time, than is currently available.

The consistent themes demonstrated above show that in all the project areas, practitioners are grappling with many of the same issues and working towards many common goals.
References


Bristol Vice Liaison Officer (2002) 'Prostitution Statistics', Bristol Police


margaret melrose


Melrose, M. (2001c) *Fixing It? Young People, Drugs and Disadvantage*, Lyme Regis, Russell House Publishing


margaret melrose

Margaret Melrose
Senior Research Fellow
Department of Applied Social Studies
University of Luton
June 2002