

# Health Fund Pilot Report

Jan 2022 - Sep 2023



**EVERY**YOUTH

At the start of 2022, EveryYouth and The Body Shop launched the Health Fund pilot. This pioneering programme engaged five organisations from EveryYouth's UK-wide Network to provide accessible and tailored mental health support to unhoused young people between the ages of 16 and 25. One of the key driving forces was early intervention. 75% of mental health problems are established by age 24 (Kessler et al., 2005) and 26% of those experiencing homelessness in the UK cite mental health issues as the reason for becoming homeless (Parsonage, 2010).

The overarching ambition of this joint initiative was not only to fill a critical gap in mental health care for unhoused young people but also to serve as a benchmark for holistic solutions which empower young people to thrive. The flexibility of EveryYouth funding enables Delivery Partners to implement a variety of approaches to providing this support.

This report aims to outline the journey and transformative impact of the Health Fund pilot between January 2022 and September 2023, paving the way for continued innovation and support for young people.

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Kessler, R.C. et al. (2005) 'Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication' Archives of General Psychology. Available at: <https://jamanetwork.com/journals/jamapsychiatry/fullarticle/208678>

Centre for Mental Health. (2010). The Economic and Social Costs of Mental Health Problems in 2009/10. Centre for Mental Health. Available at: [ispraisrael.org.il/Items/00649/Economic\\_and\\_social\\_costs\\_2010\[1\].pdf](https://ispraisrael.org.il/Items/00649/Economic_and_social_costs_2010[1].pdf)



# the beginning...

# Impact

**Young people supported**

**473**

**Counselling Sessions delivered**

**2006**

**Goals achieved**

**91%** report improved self-esteem

**93%** report increased ability to self-manage mental health

**95%** report feeling more likely to engage with mental health services in the future

**94%** report feeling more positive about the future

**Cost per Outcome**

**£330**

It cost £330 for EveryYouth partners to ensure that 473 young people had an average of 4 counselling sessions during the pilot.

Please note that many of the 473 young people we supported will have received up to 12 counselling sessions.

All 473 young people will have received at least one session.



# Implementation

## Focus Ireland, Ireland

EveryYouth funding enabled Focus Ireland to provide a new service, delivered via self-employed counsellors. Young people received 6 initial sessions and then if needed, a further 13 sessions of psychotherapy. Young people attended sessions in person in Dublin.

## Llamau, Wales

EveryYouth funding enabled Llamau to provide a part-time in-house counsellor. They delivered counselling virtually across Wales. Young people periodically completed surveys to evaluate the service and allow for improvements to be made.

## Aberdeen Foyer, Aberdeenshire

EveryYouth funding enabled Aberdeen Foyer to increase the capacity of their in-house service. Counselling was delivered through a combination of face-to-face and virtual approaches depending on how the young person wished to engage. Young people were able to book one session at a time, a person-centered approach, putting the control in their hands.

## Roundabout, South Yorkshire

EveryYouth funding enabled Roundabout to hire an in-house counsellor to spearhead a brand-new service. Counselling was delivered through 1-1 in-person sessions, with some flexibility to hold them by phone depending on the young person's preference.

## Benjamin Foundation, Norfolk & Suffolk

EveryYouth funding enabled Benjamin Foundation to offer counselling for the first time to 19-25 year olds. Young people were able to take part in up to 12 sessions of in person and virtual counselling. Counsellors were self-employed.



# Impact across EveryYouth's Network

## Focus Ireland, Ireland

55 young people receiving counselling, 189 sessions delivered between Feb 22 - Feb 23.

55

## Llamau, Wales

125 young people receiving counselling, 504 sessions delivered between Mar 22 - Sep 23.

125

77

## Aberdeen Foyer, Aberdeenshire

77 young people receiving counselling, 536 sessions delivered between Apr 22 - Sep 23.

54

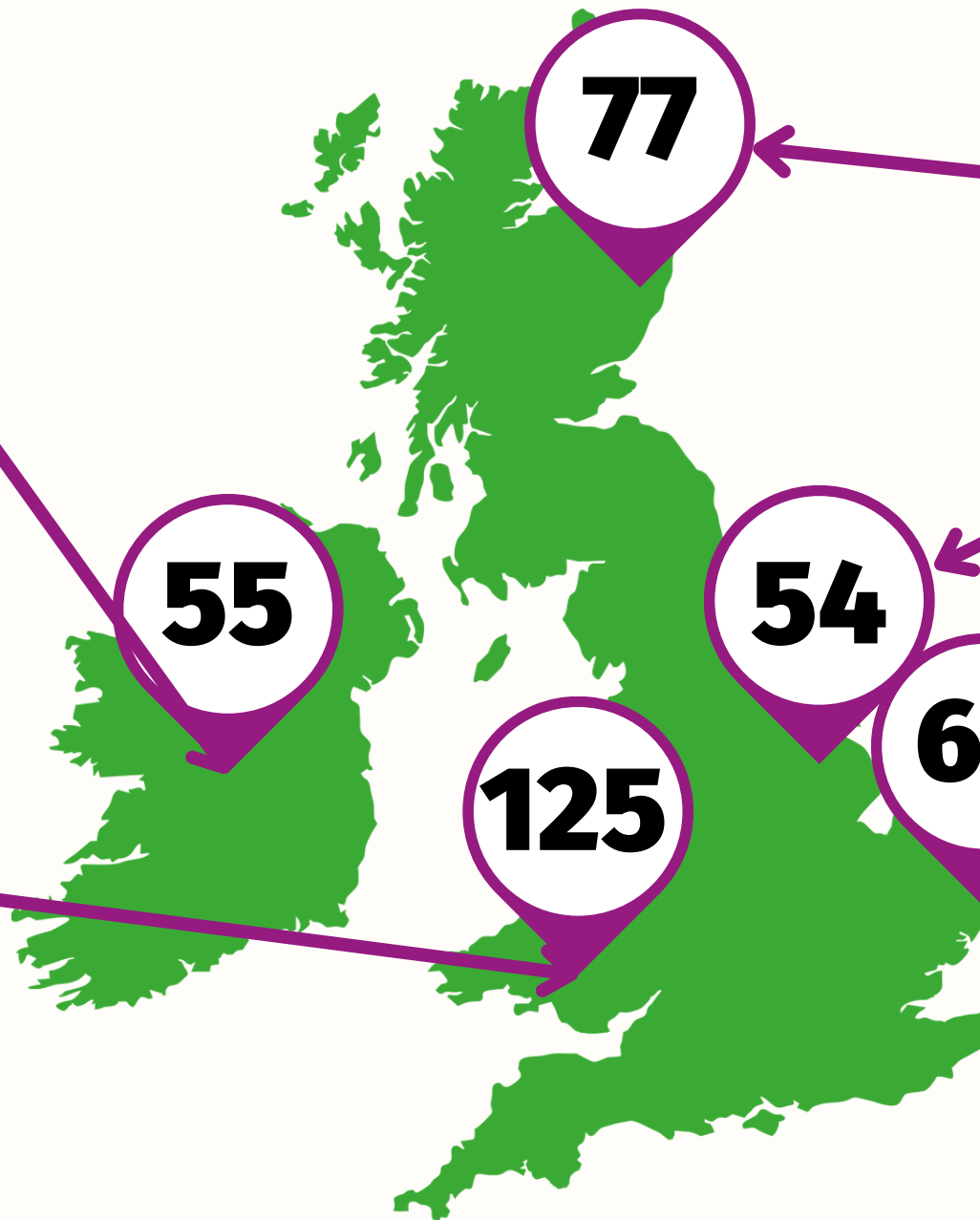
## Roundabout, South Yorkshire

54 young people receiving counselling, 302 sessions delivered between Jul 22 - Sep 23.

68

## Benjamin Foundation, Norfolk & Suffolk

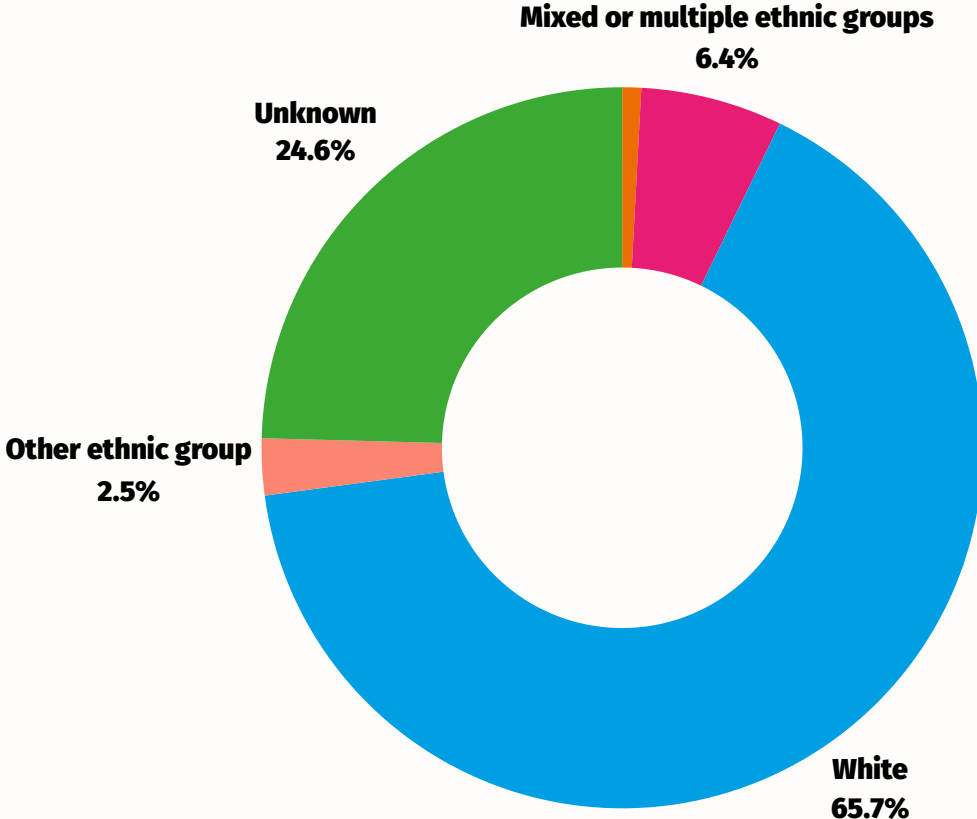
68 young people receiving counselling, 475 sessions delivered between Jan 22 - Sep 23.



# Fund Demographics

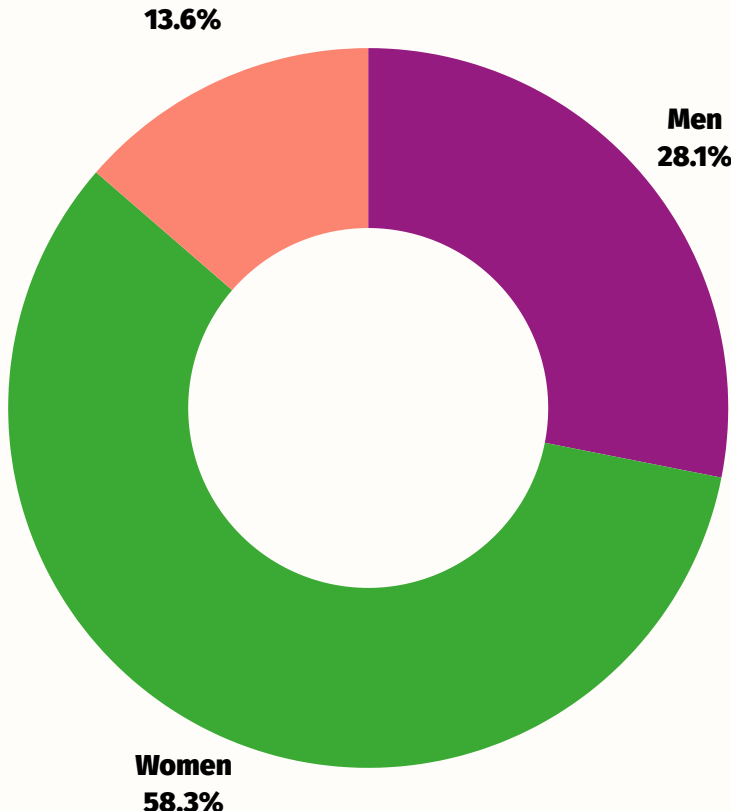
## Ethnicities of young people supported\*

- Asian/Asian British
- Black/black British/Caribbean/African
- Mixed or multiple ethnic groups
- White
- Other ethnic group
- Unknown



## Gender identities of young people supported\*

Self-describe/non-binary or prefer not to say



\*It should be noted that this data is not a complete representation of every young person accessing the Health Fund. It represents those choosing to complete this data on their referral form and consenting for it to be shared.



# Maddie's



# story

Maddie's counselling journey at the Aberdeen Foyer began in November, and over the course of 14 sessions, she experienced a remarkable transformation. Despite facing challenges with learning difficulties and dyslexia, Maddie's determination and the adaptable communication methods employed by the counselling service helped her overcome these hurdles. In the early sessions, anxiety and an apologetic demeanour were evident, attributed to her ADHD. However, as the weeks passed, Maddie found her voice, expressing frustrations with those around her and addressing deep-rooted trauma she had kept hidden for years.

During the counselling process, Maddie underwent a profound shift in self-perception. She was able to describe her past self with self-compassion and love. Maddie's newfound acceptance of her past experiences empowered her to cherish her unique skills, such as crafting, and value her non-judgmental nature towards others. The therapeutic environment provided a safe space for Maddie to explore her emotions and make sense of her life's journey. As a result, she emerged from the counselling sessions with growing confidence, a strong support network, and a clear vision for her future.

With the conclusion of her counselling, Maddie's positivity and aspirations for the future are evident. She has engaged with various teams at the Foyer and enjoyed fulfilling experiences like volunteering on the Tall Ships. Looking forward, Maddie plans to pursue higher education at college and gain valuable job experience through volunteering. Her determination to move into her own flat reflects her newfound self-assurance and willingness to embrace independence. Having gained so much from her counselling experience, Maddie remains open to seeking therapy again in the future if the need arises, confident in the positive impact it can have on her life.

Person-centered care is considered a critical component of high-quality healthcare in the UK (Kwan et al., 2004). EveryYouth recognises the expertise of our Delivery Partners, and our funding allows them the flexibility to provide this type of care. As a result, the pilot programme saw many Delivery Partners adopting delivery methods that prioritise person-centered care. According to statistical data and anecdotal feedback from young people's key workers, this approach has had a positive impact on young people's well-being and service delivery across the board.

Key workers delivering other interventions have noted a reduction in the time dedicated to addressing mental health problems during their sessions with young people. This anecdotal observation has allowed them to concentrate further on their primary services, encompassing employability and housing support, alongside facilitating connections within the organisation's network. Key workers also cite an improvement in their own well-being now that they can provide the support that they are equipped to provide.

Additionally, our funding has empowered Delivery Partners to trial innovative systems. For example, Aberdeen Foyer put in place a system that allowed young people to book one counselling session at a time. As well as giving young people more control over their appointments, the one at a time system reduced the number of missed sessions. Whilst initially challenging to organise due to resourcing, it ultimately improved service delivery. They also adopted the user-friendly Warwick Edinburgh Mental Wellbeing Scale, simplifying evaluation and enabling intervention comparison.

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You can find more information on the Warwick-Edinburgh Mental Wellbeing Scale through the [University of Warwick](#).



# the outcomes



# Lessons learned

EveryYouth's flexible funding allows Delivery Partners to choose delivery modes that align with their organisational priorities and the needs of the young people that they support. This has enabled us to assess these varied delivery approaches:

## Self-employed counsellors

- Cost efficient - reduced costs concerning insurance and clinical supervision (which are provided by an external company).
- Flexibility - allows for adaptability concerning demand and funding availability.
- Limitations - can't benefit from in-house training, knowledge and support.

## In-house counsellors

- Organisational benefits - receive training in line with organisational values, can easily access knowledge and support of others within the organisation.
- Limitations - not easily adaptable if funding becomes unavailable for longer periods. Recruitment can be difficult as some organisations are unable to offer salaries comparable to the private sector.

## Volunteers with supervision

- Cost-effective resource and allows for collaborative research with the university that provides the student volunteers, which can in turn lead to improved delivery.
- Limitations - They have higher supervision and training needs, and there needs to be robust quality assurance mechanisms in place.



## DNAs (Did Not Attend)

Patients not showing up to appointments without cancelling in advance (DNAs) is an issue across healthcare services globally. Whilst data for the specific demographic we support is scarce, the rate ranges from 11% to 50% internationally (Mitchell et al., 2018). EveryYouth counselling services reported an average of 25% across the pilot.

Whilst it is recognised within the sector that the unpredictability unhoused young people face can impact their ability to attend scheduled appointments, reducing DNAs can have huge benefits for service providers. These include releasing capacity which reduces waiting times; patients receiving the care they need, how and when they need it and improving efficiency of resource allocation.

The EveryYouth Network recognised this and trialled various initiatives to improve their DNA rates. Llamau introduced patient education before counselling to reduce anxiety which meant that they reduced DNA rates from 30% at the start of the pilot to 23% at the end of the pilot. At the start of the pilot, the Benjamin Foundation reported a DNA rate of 26%. In response, the organisation started encouraging young people to meet with their counsellor at the point of referral, before attending a session. By the final quarter of delivery, the DNA rate at the Benjamin Foundation was 7%. At Roundabout, they found that offering increased sessions (from 6 to 12) led to a reduction in DNA rates from 42% at the start of the pilot to 33% in the final quarter of the pilot. The reason for this reduction does need further exploration but this method is beneficial.

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Mitchell, A. and Selmes, T. (2018). 'Why don't patients attend their appointments? Maintaining engagement with psychiatric services.' The Cambridge University Press. Available [here](#)



# Lessons learned



- **Evaluation:** To comprehensively assess various delivery methods, and approaches in reducing DNAs, perform a cost-benefit analysis for scaling the programme and review the long-term impact on young people's well-being, an independent evaluation is recommended. Comparison, however, may be difficult considering the different outcome measures used by each Delivery Partner.
- **Young person and key worker involvement:** While some of our Delivery Partners do undertake surveys with young people and Key Workers to evaluate the impact of their service, they aren't in place everywhere. Going forward, we recommend a standardised survey be introduced by EveryYouth to ensure that insights are captured and can be utilised by the whole Network to improve delivery for young people. These insights would also prove useful in demonstrating the impact of the Health Fund to future Backers.

# Recommendations

In terms of the long-term viability of the Health Fund, the pilot has demonstrated the positive impact of sector-linked counselling on unhoused young people which enhances prospects for future funding applications by EveryYouth and the Network. Furthermore, the diversity in delivery modes enables Delivery Partners to ascertain the best methods for them, especially considering how vital it is to be adaptable in the current funding climate and also responsive to the complex needs of unhoused young people.

EveryYouth has worked to ensure that all of our Funds are primed for further scalability. Adaptable modes of delivery empower Delivery Partners across the UK to implement customised approaches aligned with local needs. Learnings from this pilot can be easily implemented at other Delivery Partners. Through quarterly forums hosted by EveryYouth, they can also benefit from the guidance of the EveryYouth Delivery Partners pilot participants.

Finally, we wanted to extend a huge thank you to The Body Shop for your generous support which made this pilot possible. The outcomes and compelling Shining Stories have demonstrated the success and necessity of the Health Fund. We hope that these achievements pave the way for securing future funding, ensuring the continuous delivery and positive impact of this programme.



**the future...**