

# HEALTHY EATING LEADING LADIES PROGRAMME REPORT



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**innerstrengthconsulting**

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Inner Strength Consulting Intervention Report on the Delivery of  
ISC Healthy Eating Leading Ladies Programme;  
(which includes body image and self-exploitation)  
with the aim of improving Healthy Eating and Wellbeing.

This programme took place  
at the Smart Centre (Bungalow) Merton School  
from February – April 2015.

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Supporting Healthy Schools & Prevention Against Sexual Exploitation

**April 2015**

# 1. Basis for this Report

On 28 January 2015 The London Borough of Merton (LBM) commissioned Inner Strength Consulting to deliver a programme for girls between the ages 13 to 16 on body image, self-esteem and resilience to prevent sexual exploitation as part of a targeted Merton Healthy Schools programme.

The Council entered into a contract with ISC on 2 February 2015, for a period of 2 months (specifically, to deliver a 8-week programme to a group of girls). It is expected that the programme would be completed by 20 April 2015 and the end of the contract was 27 April 2015.

## **The programme to be delivered was The Inner Strength, Healthy Eating Leading Ladies Programme**

The programme is an empowerment programme designed

- to support girls' aspirations,
- to build confidence,
- to build resilience against domestic abuse,
- to raise awareness around health and wellbeing issues and working according to the ethos and needs of each school as well as the assessed and presenting needs of each participant.

## **Key Outputs**

1. To run an 8-week programme, consisting of two hour face-to-face contact sessions with a group of 10 girls, aged 13-16, covering a range of issues including body image, obesity, anorexia, binge drinking, domestic violence and sexual exploitation prevention.
2. ISC will work closely with Melbury College lead Steve Childs and the relevant cluster group to determine which girls would benefit from the programme from the schools which have a cohort of girls who are at risk of sexual exploitation and who have a range of emotional behavioural issues. Initial discussions took place with Melrose School and the group of girls were referred to the ISN programme or expressed an interest in participating in the programme.
3. To work this group of girls to produce an inspirational and educational booklet which reflected each girl's individual experiences and aspirations. The booklet would reflect the difficulties, challenges and hardships experienced by the girls and would include their tips on obesity and advice relating to sexual health, emotional well-being, as well as information on overcoming issues such as domestic violence in families.
4. Another key output would include providing the girls with a support group to assist them further during the programme and for those that requested it, on-going support after the programme ended.
5. To deliver a one day, celebratory, educational event for a minimum of 25 girls; where they will have the opportunity to hear from a leading lady on issues that she has overcome first hand. This event will consist of a session with inspirational speakers who will share how they have overcome hardship,

struggled with issues such as under-achieving at school, growing up with domestic abuse, obesity, struggles with body image and various other physical and emotional health issues. This event is to be delivered during the autumn term of 2015.

6. To provide one-to-one coaching for at least 6 girls who have identified by the school as requiring additional support. This coaching will continue for at least a term after the programme has ended and we will continue to tracking their progress before during and after the programme.
7. ISC worked in coordination with staff members at Melrose School and the Smart Centre to arrange appropriate times for delivery of the programme. ISC developed and maintained an excellent working relationship with school staff.
8. ISC provided relevant hand-outs and other resources as appropriate for each session of the programme.
9. ISC ensured that regular updates were provided to the Healthy Schools Coordinator (Jeremiah Project), to the Mitcham Town Trust, to Steve Childs and representatives of Merton Council.

## 2. Background and Context

### ***Delivery of ISC Young Ladies Programme as part of the healthy schools programme. (To include body image and sexual exploitation).***

As part of Local Authorities' new responsibilities for public health, the London Borough of Merton (LBM) has a responsibility to improve the health of its residents and, over the next five years seeks to stem the increase in the inequalities in health outcomes between the east and west of Merton.

Health and education are strongly connected; healthy children achieve better results at school, which in turn, are associated with improved health later in life. School can also generate risks to children's health and wellbeing, as, for example, bullying and poor educational attainment can impact negatively on children's mental health.

The national Healthy Schools Programme was stood down at the end of March 2011. Merton schools had a good history of engagement with the national programme and before the programme was stood down, every school in East Merton had achieved Healthy Schools status (at different levels).

As part of Public Health commitment to supporting Health and Well-being in schools, Public Health and partners have been working to develop a local Healthy Schools offer with additional investment to support schools to reach the different phases of the programme.

**Melrose School** is a community special school that provides for pupils with Social, Emotional and Behavioural difficulties. It is also linked to the SMART Centre which is a pupil referral Unit for secondary-aged pupils permanently excluded from school, those who are at risk of exclusion and pupils with a wide range of medical needs who are unable to attend their mainstream schools.

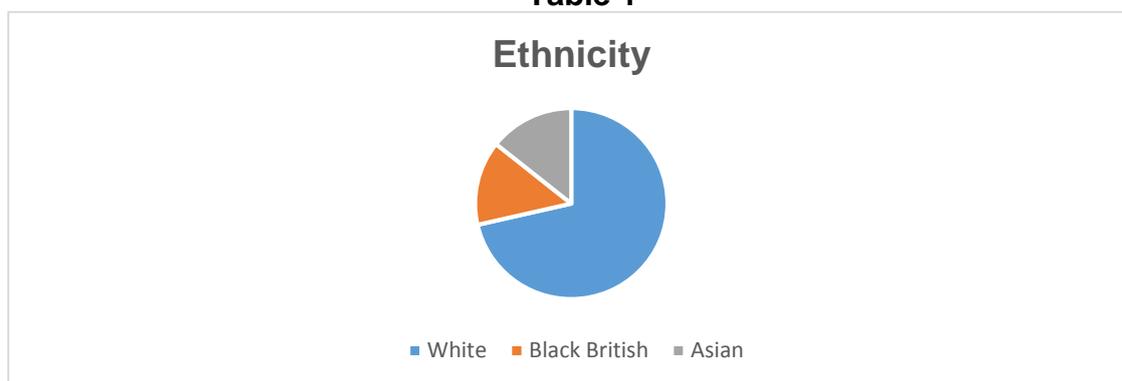
The School has identified the need for an intervention programme for girls in the secondary phase who suffer from low self-esteem and weight issues (be it above or under-average weight). The school considered that if these issues are not tackled then the girls are less likely to achieve positive educational attainment outcomes. There is evidence to suggest that the target group are more likely to participate risky or anti-social behaviours such as binge drinking, substance misuse, be placed at greater risk of sexual exploitation, witness or experience domestic abuse, experience poor general health and/or poor mental and emotional health. Higher rates of teenage pregnancy are also prevalent in this target group.

### 3. Introduction and Pre-Planning

There were 9 girls who were identified and registered to take part in the programme. Two girls did not engage in the programme; which means seven of the nine girls identified participated in the programme. The reason for non-engagement was because of poor attendance as a result of school phobia. Five of the girls were from White British backgrounds, 1 girl was identified as Black British, and 1 girl was identified as Asian. See Table 1 and Appendix 1

The age range for the group was between age 13 and 16 years old. The sessions took place on Mondays from 11:10 AM to 12:45PM with a break in between session.

**Table 1**



#### Issues

##### Pre-Planning and Assessments

The ISC Trainer met with the Lead Teacher on 2<sup>nd</sup> February 2015 in order to conduct an initial assessment of each girl's knowledge and awareness of the issues to be covered by the programme. The Lead Teacher pointed out that these girls were inconsistent in their approach to school attendance and engagement in school due to their anxiety and emotional and behavioural needs; it was pointed out that this could make delivery of the programme difficult. On the same day the ISC Trainer then held one to one sessions with each of the girls to obtain a baseline assessment in form of a needs-assessment questionnaire. This process also involved conducting interviews with each girl in order to ascertain their individual needs. (see Appendix 8)

Our findings were that at the end of the programme each participant had made a significant improvement in their knowledge and awareness of the issues addressed. An example of this is reflected in the chart marked Table 2 and Appendix 2.

A key learning from the delivery of the programme is that more time needs to be allocated to prepare each girl for the programme. The programme content was of a highly sensitive and personal nature; also the girls had a range of vulnerabilities including a low self-confidence and self-esteem, this could mean that a less skilled facilitator would have struggled to engage this group of pupils. Related to this is the

fact that the short lead time between the acceptance of the bid proposal and the actual delivery of the programme, meant that there was limited time for key administrative tasks, such as, obtaining parental permissions prior to the programme being delivered. In fact, this had to be done after the programme began.

**Table 2: Participant Progression Chart**

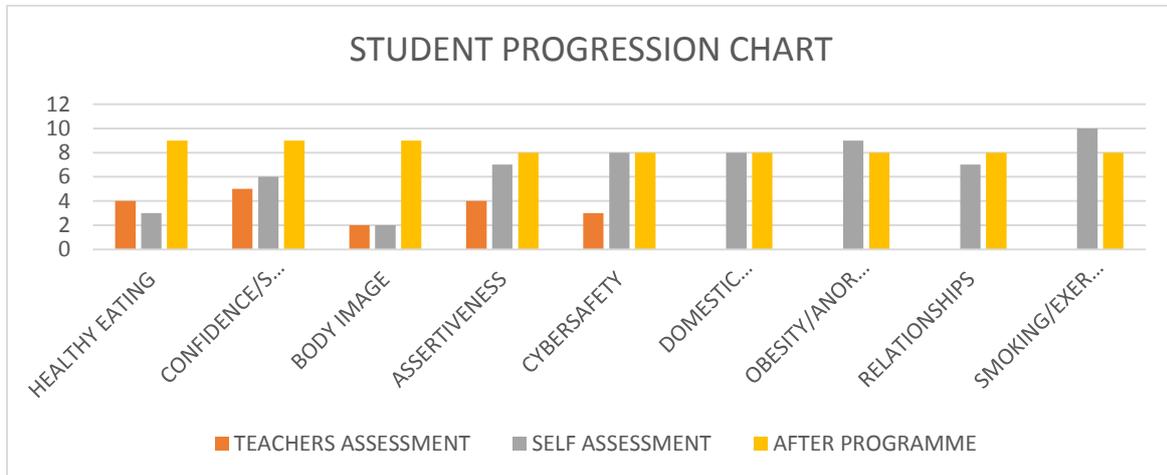


Table 2 shows that initially, at the time of the baseline self-assessment, participants took the view that they were very aware of obesity and smoking at the beginning of the programme, however, by the end, their final self-assessment reflected their actual knowledge. There was one participant who struggled to engage. This particular participant was frustrated by the continual reminder to be healthy and nearly refused to attend. However, this participant attended every session, was punctual and in fact made the most improvement.

**The sessions were organised into the following categories:**

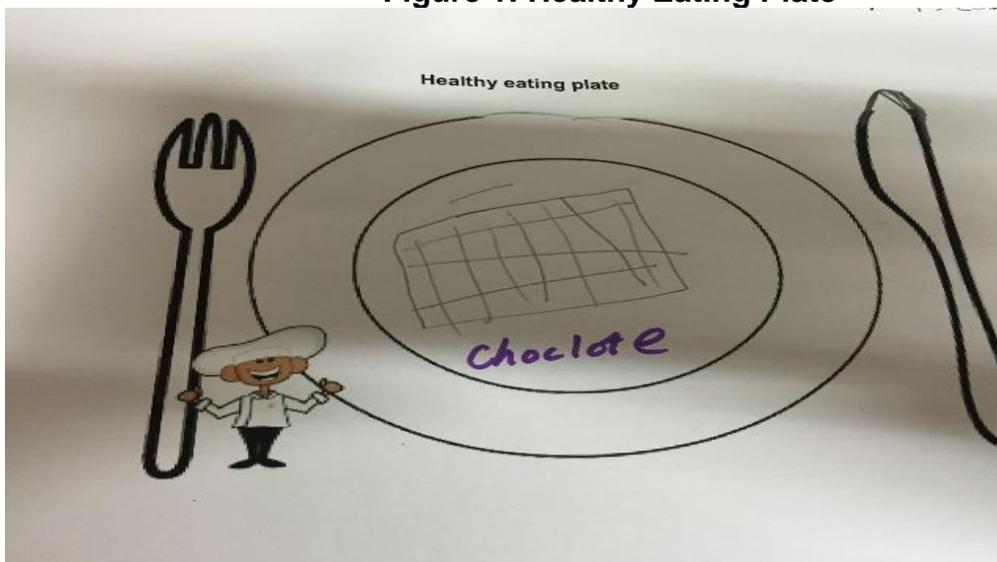
1. Healthy Eating
2. Building Confidence and Self-esteem
3. Body Image
4. Assertiveness
5. Part 1: Sexual Exploitation and Domestic Abuse
6. Part 2: Sexual Exploitation and Cyber safety
7. Balanced health (obesity/anorexia) including smoking cessation and exercise
8. Healthy relationships

**Healthy Eating**

In exploring the area of eating healthier, there was unanimous agreement that each girl considered themselves to be unhealthy. Most of the participants did not eat breakfast in the morning; the reason they gave for this was due to time. Only one participant stated that she liked physical exercise. The girls were each asked to draw

a healthy eating plate; the purpose of this was to gain an understanding of each girl's view of what constituted as good diet. This was a practical exercise that challenged each participant to think about what they ate and the impact of this on their health. For example one girl put a chocolate bar on her healthy eating plan (see Appendix 3). When challenged she changed it to a more appropriate plate. This same participant expressed her irritation of having to talk about healthy eating. It was only during the one to one coaching sessions, that she revealed that she was diagnosed with diabetes and this contributed to her low-mood and depression. This experience demonstrate that care had to be taken when addressing issues such as diet and health. Also it is helpful to use alternatives to sugary snacks such as fruit, in fact various fruits were brought into the class for participants to try.

**Figure 1: Healthy Eating Plate**



## **Confidence**

All the girls found it difficult to speak about themselves and their experiences in a positive way. Working with this group of girls was particularly challenging. In our initial sessions the group demonstrate no interest in life, in terms of wider aspirations, they found it difficult to express their ambitions, identify role models or inspirational figure, and they found it incredibly difficult to express emotions such as joy or enthusiasm for any subject (see Appendix 4.1). For example, one session included an exercise where they were asked to describe themselves positively each participant really struggled with this. However, by the end of the programme some of the participants were able to provide examples of their goals and aspirations and see themselves in a positive way (see Appendix 4.2). What this demonstrates is how important it is for this cohort of pupils to receive target support in the areas of self-confidence and self-esteem if they are to build the resilience required to ensure that they are able to

engage in education and be safeguarded from sexual and other forms of exploitation. Research has shown how predators groom vulnerable young people by giving them much needed focused attention<sup>1</sup>; the kind of attention not provided by family or even school (see Berelowitz et al, p. 12, 2012; CEOP, 2012 and Turnbull, Davies and Brown 2012, p. 12, Childline 2012).

### **Body Image**

This session was very difficult as the girls were not inspired by anything and openly said so. There was a glimmer of hope when pets were mentioned especially those in magazines that were used during these sessions; this suggests that the girls in the programme find value and worth in things other than themselves; that is, they may feel that are inherently unworthy of appreciation and value. They knew about the impact media and peer pressure had on their own lives. They were particularly interested about what their friends said about them; including boyfriends. The work ISC was able to do in only one session was extremely limited. It is clear that more resource and investment is needed if this cohort of girls is to be supported. Issues of self-esteem and body image are very complex and will take time to address in a meaningful way. The girls in the programme were especially vulnerable as a result of their social and emotional needs.

### **Assertiveness**

This was one of the best sessions, in that the girls really engaged with the work. Drama was used to generate interaction among the girls. They were asked to imagine themselves in various difficult situations and to learn how to deal with various situations. An assessment was done on how assertive the girls were. Two girls came out on top on being more assertive and this may have been influenced by age as these girls were in the 15/16 age group. The others showed traits of being passive/assertive or assertive/aggressive. Self-confidence and assertiveness is a significant aspect of resilience and emotional intelligence and it is clear that the participants enjoyed and benefitted from this work.

### **Domestic Violence**

This was a difficult session because this was a live issue for some of the participants. Some members of the group needed time after the session to reflect. Others left the session and returned after calming down. Discussions were heated but productive and the girls learnt about the Power and Control Wheel and some was spent describing positive relationships. A diagram of a participants drawing can be seen at Appendix 5.

### **Cyber-safety**

We used this session to discuss ways in which the girls could keep themselves safe on line. This session included music, fruits and other healthy option snacks. We also

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<sup>1</sup> Research by the Childline found that “Young people reported that ...they had ended up being groomed because they had felt unloved, unpopular, they were bullied, or felt themselves to be ugly and unattractive.” Michelle Turnbull, Rhiannon Davies and Claire Brown, *Caught In A Trap*, p. 8, Childline 2012

used a range of case studies to facilitate discussion and help the girls to reflect. After such a heavy session that previous week we worked with the girls of developing a book of quotes; where the girls could express their thoughts and feelings. This activity was successful. One of the outcomes of the session was a booklet that the girls produced called “*Advice to My Younger Self*” (Appendix 6). As part of this exercise, participants were asked to imagine themselves in primary school for a moment and to imagine that they were giving advice to their younger self.

### **Obesity/Health/smoking cessation**

In order to give variety during this session and to encourage more engagement ISC teamed up with Paul Smithers and Stacie Blackburn; the healthy living team from Fulham football club who were our special guest during the programme (See Appendix 7). They were fully briefed on the type of girls they would be working with and permission was given from the leads at the Smart Centre. The issues addressed in the session included smoking cessation, obesity due to unhealthy lifestyles. We also spent some time reflecting on a healthier relationship to our bodies and to food. Having a male in this session helped towards promoting positive male role models. It was a positive experience for both the Centre and the Club too as links have been formed.

### **Healthy relationships**

This was the last session and it was a relaxed luncheon format, where we ate together and reflected about what makes a positive relationship. This informal setting allowed the girls to speak out more about how they were feeling.

## **4.Deliverables of the Programme**

ISC was commissioned to deliver the following work below:

Specific Deliverables:

- ISC committed to deliver an 8 week programme for 10 girls covering a range of issues, including
  - body image,
  - obesity,
  - anorexia,
  - binge drinking,
  - domestic violence and
  - the prevention of sexual exploitation

**ACHIEVED:** ISC worked closely with Jessica Husaini and Steve Childs at Melrose/Smart staff to identify participants who would benefit from the programme. The programme was delivered to 8 of the 9 girls identified in the cohort.

ISC held both face to face and written communication with Melrose School to target those girls who would benefit most from the programme. The girls

assessed as being at the highest risk regards to issues listed above, were targeted for the programme.

- To work with each girl in the programme to produce an inspirational and educational booklet about their aspirations and how they have overcome hardships. This booklet will also include educational tips on obesity and issues relating to sexual health issues; as well as information on overcoming experiences of domestic violence and providing them with the relevant support groups to assist them further during and after the programme.

**ACHIEVED:** All participants engaged in creating booklets which incorporate various tips. Leaflets were provided every week on the issues of obesity, sexual health, overcoming abuse and other matter, as requested, throughout the programme. Each girl had their own booklet file which included individual support for each child.

- To deliver a one day celebratory and educational event for at least 25 girls where they have the opportunity to hear from a leading young girl on issues she has overcome first hand. The event will also incorporate an inspirational speaker who also overcame hardship such as under achieving ,growing up with domestic abuse, obesity, struggles with body image and various other physical health issues.

**To be delivered:** The delivery of this educational event is in progress and will be delivered on 7 October, where these girls will be attending and participating. The speaker will include the award-winning finalist from the TV show Apprentice Bianca Miller. The aim is also to inspire them in a different setting to raise their aspirations and ISC has partnered with Kings College London to deliver this event.

- To provide one to one post-programme coaching for at least 6 girls identified by the school who require extra support during the process, tracking their progress before during and after the programme **ACHIEVED.** After each session certain girls were identified as needing additional support. We have offered 6 girls the opportunity to receive continued coaching in relation to their own development with the aim supporting sustained improvement. Currently, 3 girls have taken up this offer and are engaged in on-going coaching; 1 other girl has been identified.

- To coordinate with the managers and relevant staff members at Melrose School and the Smart Centre to arrange an appropriate time/day for delivery of programme.

**ACHIEVED:** The agreed time of delivery of programme time was each Monday from 11:05AM -12:45PM

- Develop and maintain excellent working relationships with school staff.

**ACHIEVED:** There has been an excellent working relationship with all staff during the delivery of the programme and members of staff; the Lead Member of staff for the Bungalow, in particular, has been meticulous in her discussions with me. (We discussed additional members too who needed support and worked on how to manage the process). At the end of the programme there

was discussion on how to include the programme in the yearly calendar for the school.

- To provide hand-outs and resources as appropriate for programme.  
**ACHIEVED:** Hand-outs were provided for each session
- Updates will be provided to the Healthy School Coordinator (Jeremiah Project), Mitcham Town Trust, Steve Childs and Merton representatives.  
**ACHIEVED:** by the submission of this report and by telephone communication, emails and texts throughout the programme.

## 5. Case studies:

(Girls' names and details have been changed to ensure confidentiality)

I have included three case studies to illustrate the complexity of the issues faced by the young women on the programme as well as to demonstrate the positive steps they have taken whilst on the programme.

### **Case Study 1, Opal; Request for Further Coaching (Sexual Abuse and DV)**

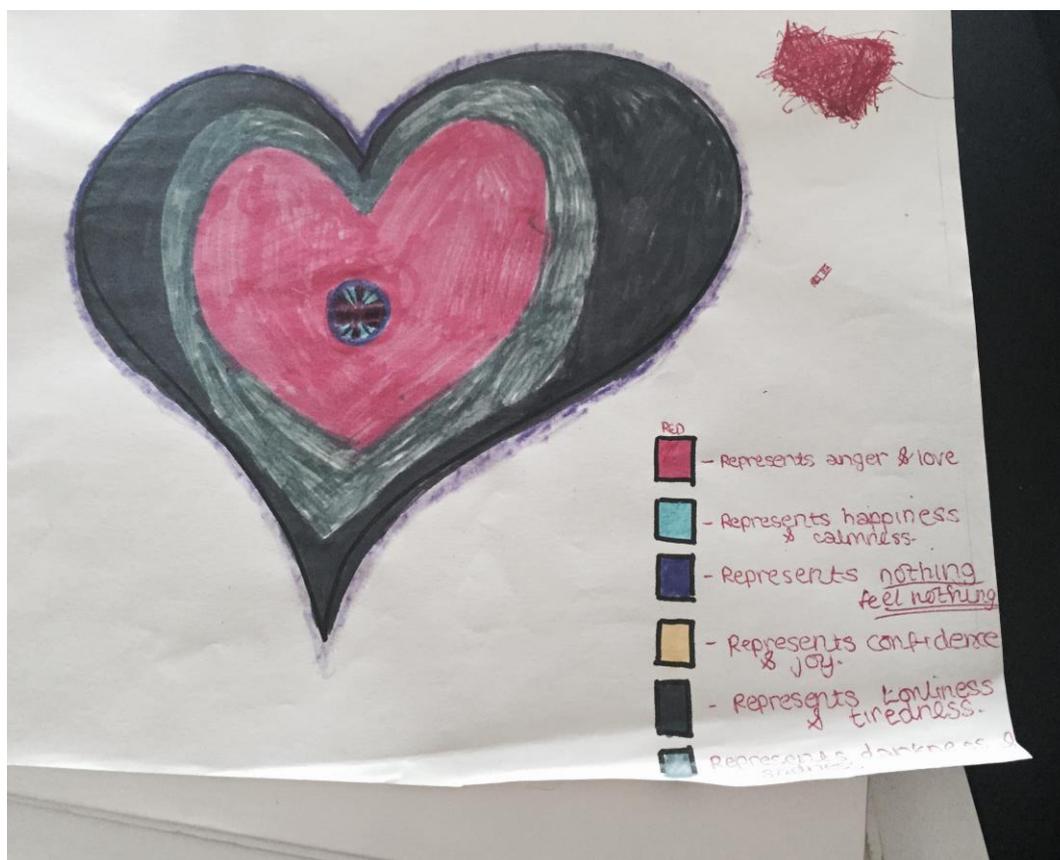
Opal struggled to attend school regularly. However, Opal attended each session of the programme and engaged well. During the one to one coaching sessions she revealed that she was sexually abused and had reported it through the appropriate channels. Opal needed space to express all the emotions she had been experiencing and she wants to get back to the place she was at emotionally before her trauma. She tried a ranged of interventions including CBT but felt that it did not agree with her. She then requested for coaching from ISC to help her move forward with her life. She said she liked the action element to the coaching. E.g. During a coaching session she expressed anxiety about her exams as she did not know when it was going to take place or what the timetable was. She had not heard from the school which caused further anxiety. The coach set her homework which empowered her to find this information out by a deadline. Opal did all the homework and came back relaxed and happier about what she had found out. She said she saw how taking action helped her to manage her anxiety. This same person revealed that she had started to think differently about healthier food and gave an example of having more fruits in her diet. Opal felt that the session on Domestic Violence was particularly hard hitting and Opal said;

“This session was hard, because I have been through a lot of domestic violence in my family and it reminded me a lot of things that had happened”.

Opal wants to be heard and this was made clear by her contribution to the book of quotes.

## Case study 2, Chantel (Isolation)

Chantel hardly spoke during the sessions but was engaged in that she would not leave sessions and she would participate in activity. During the healthy eating session she ate food provided but still said the minimum. She was very clear when she spoke especially when asked a question and she did not want to answer would state "I prefer not to answer". Observing Chantel she preferred not to answer in the presence of the whole group. During the one to one session to assess her needs, Chantel revealed that she wanted to take better care of herself. She reveals that her family's opinions matters a lot to her. She also disclosed that she struggles to sleep. Chantel struggled with participating in the group work but she continues to struggle with anxiety. Chantel communicated powerfully her real feelings, when asked to draw a heart which expressed how she felt using colour. She used yellow to show her confidence and joy, but there was no sign of yellow on the heart. This work is on-going and will continue to explore this with her in future sessions as well as sign-posting Chantel to services that will able to provide further support.



### Case Study 3, Sarah (Angry/Hurting /Diabetic/Frustrated with Health)

Sarah is angry that everyone keeps telling her she needs to lose weight and be healthier. She gets pressure from her family about her health, in particular, she feels that her sister is always speaking to her about her weight and diet. Sarah states that she is sick and tired of the constant issues relating to her weight. When asked about how she is feeling, she writes that she is “Annoyed, angry, angry, and angry”.

Figure x Sarah’s feelings heart



Confidence issues; she does not see herself as a confident person but does not make friends easily. She does not have a positive image of herself. In my view, she suffers from low self-esteem and is need of support in order to make genuine friendships. Sarah expresses her anxiety as anger and aggression; however, she has demonstrated that she is capable of being assertive. As the sessions progressed she participated by requesting to help with photocopying, to write on the flipchart. She wrote about six pages of the book of quotes and was the only one who used the computer to seek further inspiration. During the last session for the first time she asked to speak with the coach requesting support on making friendships and requesting support on how to move forward even further. This was a positive sign of someone willing to move forward in their health and wellbeing.

## 6. Contributions from the Girls

### A Book of Quotes

These girls expressed themselves in the form of quotes. I did not prompt them on what to write. They expressed themselves in the following ways;

Depression is like a war you either survive or die trying

Depression isn't a sign of weakness. It's a sign that shows we've been strong for too long.

Be more positive about life

A negative mind will never give you a positive life

### Think Before you speak...

**T** Is it **TRUE**

**H** Is it **HELPFUL**

**I** Is it **INSPIRING**

**N** Is it **NECESSARY**

**K** Is it **KIND?**

ISC published the book of quotes and provided copies to the school. The quotes were also blown up to A3 posters for the school to place on the walls. Doing this work showed that the girls can achieve and when prompted can do well and inspire others.

### Comments from participants about the programme: participants liked

- Discussions
- "Expressing ourselves and that we can talk about everything and that we take the lessons slowly"
- "The sessions have been very helpful"

### How did you find the facilitator?

- "Amazing (outstanding)"
- "Very good"
- "Good"
- "Comfortable- she is very open and honest so it made it easier to talk to her"

### Goals Participants Wanted to Achieve?

- Making new friends
- Learning how to forgiving people
- Learning how to say sorry

- Getting through the GCSE exams
- Getting back to where I was emotionally
- To get out of participant

## **7. Other Issues**

### **Attendance**

There were inconsistencies in some of the of girls' attendance due to anxiety. There were two girls were unable to attend the programme. Some of the girls' attendance fluctuated depending on their level of anxiety. One girl attended one session but dropped out of the programme as they were doing their GCSEs and wanted to concentrate on her exams. It must be noted that this girl was introduced to the programme during the third session. The learning here is that because of the nature of the programme the group should be closed after the second session. After attending the domestic violence session one girl found the experience too overwhelming and needed to be alone. This particular girl suffered high issues of anxiety and would have benefitted more with the one to one coaching. This one to one support was provided. See Chantel Case study.

### **Space and Resources**

It was unfortunate that we had use of a communal room to teach these sessions due to bungalow space. This meant that there were different people at different times walking in during the sessions. At times these interruptions came at crucial moments in the session. Also one member of staff would be in the room, working on the computer and again this changed the dynamics during session. Also this created a distraction for both participants and facilitator; the presence of a support teacher during the sessions did not allow the girls to reveal too much. A programme of this kind would be best served in a confidential space area where there would be no disruptions or distractions. ISC recognise that this set up was unavoidable during this time. Unfortunately, the projector in the room was not working and this meant the girls had to be huddled around a laptop on more than one occasion. I had to change from slide PowerPoint presentations to adapt to this problem.

### **Safeguarding**

A participant revealed in the one to one coaching session that she had started to self-harm again due to an incident which had occurred with her parents. She asked for special support via CAMHS but had been waiting for this to be finalised and few months back. The proper safeguarding procedures were followed; i.e. informing lead teacher, in her absence speaking to the second person in charge, writing a follow-up email to all the main leads regarding this disclosure ensuring they were aware. It transpired that the teachers were aware.

### **Positive interaction with school**

I would like to thank Steve Child's, Jessica Husaini and the rest of the staff for all their support during the time at the school and perhaps look forward to working with you again.

## **8. Conclusion and Recommendations**

The delivery of an 8-week programme should be considered as a great starting place, however, there is still work to be done. The delivery of the programme found that this group of girls are clearly talented and creative; however, their emotional and social needs are such that additional time and support is needed if they are to fulfil their potential. It is also clear that the life circumstances, that is, their family situation, relationships, experiences of trauma etc., impacted significantly on this group of girls' ability to engage effectively in education: even within the context of specialist provision like Melrose School and the Smart Centre. The challenge of the lived experience of this cohort is counter-balanced against the rigours and demand of a school system creates tensions for both pupils and the institution. It is clear that additional support is needed to address on-going issues such as domestic violence, inconsistent parenting, poor diet and nutrition, the very present threat of sexual exploitation, poor confidence, low self-esteem, anxiety, low mood, depression, self-harm etc., in order for this group of pupils to access the curriculum and fulfil their potential. Programmes such as the *Leading Ladies Programme* are a form of scaffolding that provides much needed support. However, the temporary and short-term nature of these kinds of programmes means that support is not sustained whereas the factors that place these pupils at risk remain constant.

A recent University Report explained that there has been an increase in girls who need support emotionally. With the growing pressures of teachers and Head it is essential that borough councils work with specialists in their field and to work in partnership as they will provide the growing gap to support these girls. The sexual exploitation team and the safeguarding team in Merton welcome further engagement in the voluntary sector to support these girls.

## **9. Recommendations**

### **Recommendation 1**

#### **If funding permits, to commit to a longer period to deliver training for these vulnerable girls**

It was very clear from this programme, that 8 weeks or two months (that is, half a term) is not enough. The programme provided temporary, short-term support. This support was clearly necessary and valuable; however, what is needed is longer term support if this cohort is to enjoy a positive and sustainable future. The girls identified for the programme had a range of vulnerabilities including physical and emotional health issues that were longstanding (some of these issues were identified in primary school). Short-term programmes can be beneficial however; they are not enough to truly impact the real needs of vulnerable girls from troubled backgrounds. Consistency is very important and it was evident that at the end of programme the girls wanted some sort of follow up. Some expressed a desire for ongoing support in the form of one to one

coaching. The reasons were linked to incidents that had happened at home which they were working through.

The evidence from research and specialist practitioners, working with vulnerable and at risk young women and girls, highlights the fact that there are no quick fixes of fast solutions when addressing the risk factors associated with sexual exploitation. The life experiences and circumstances of the girls identified as being most at risk means that they have experienced high levels of trauma with low levels of care. What is needed is sustained and consistent support in order to help them to make the journey from a troubled childhood into a more secure young adulthood. The experience of these girls is of truncated or disrupted relationships and inconsistencies in care. Disruptions in education (e.g. school transfers and exclusions) are part of an on-going pattern in the experience of this group of pupils. In addition to this, they have also experienced inconsistencies in terms of the support they receive in that workers come and go, often with limited explanation and insufficient attention paid to 'good endings.'

These girls are clearly wanting additional support and on-going support. For example, two girls from the group proactively sought out additional support and attended a support group for girls experiencing depression. This involved researching groups, referring themselves to a group and travelling to central London in order to access support. When they attended the group it was adult-focused and they found the experience overwhelming and not appropriate for their needs. When asked about this experience, they realised that those suffering from depression (young or older) would not help them but aspirational programmes would help. What this account says is that this group of girls are desperate to have their emotional and other needs met and without appropriate support they could end up in situations that place them at a higher level of risk.

**Recommendation 2: To provide some sort of follow up one to one support for these girls every other week.**

Three girls from the programme are receiving on-going support in the form of one to one coaching. This coaching is focused on helping the girls work through their current issues. They are still vulnerable and still require help; these girls need to talk and process their vulnerability. Some of the issues relate to the friendships they have formed outside of school and how to manage this. In the absence of appropriate and available support these girls find other ways, more risky ways to address their needs. If we want to reduce this vulnerability and risk, then the type of intervention provided by ISC and others is needed for a longer period.

**Recommendation 3: When dealing with the issues of health it might be useful to have a parent and child session to ensure that they are both on the same page in terms of diet, preparation of food etc.**

The girls have certainly been provided with the information they need but how this transfers in the home may be difficult without parental support. Perhaps a one off event or joint session with parents would be helpful in reinforcing what the girls have learnt.

**Recommendation 4: More time needs to be given to preparing the girls for the programme.**

The school did their best to accommodate the group and worked well with me. However, some girls had to be changed around midway due to suitability, attendance and anxiety issues. In future an assessment questionnaire should be used to explore the ability of participants to cope with group work or if one to one support would be more appropriate for their needs. For those girls who would struggle with working in a group, one to one coaching could also be as part of a parallel process of support. Allowing time for girls to develop and engage at their own pace in a ways that are suited to their needs is essential if interventions are to be meaningful and effective.

**Recommendation 5: In order to provide on-going, sustainable support, consideration should be given to decide on the two proposed options**

**Option A: To train staff on the Leading Ladies Programme to be implemented in schools.**

The programme can be refined to incorporate the learning from delivery and a facilitators' pack and participants' workbooks could be developed so that the programme could be delivered with school settings to pupils who meet the criteria with regards to vulnerability. To support this a two day training session could be delivered to train staff and then there would be no need for a consultant. In the long term this would cost-effective and would ensure consistency and continuity of care. ISN would deliver this training.

**Option B: To extend the contract for at least one academic year in order to have a part time worker consultant on site for two days a week to deliver support in the areas needed by each school**

This option would enable on-going support to be offered to this group of girls (as well as others who meet the criteria for support). This will help the school tremendously, in that it would allow ISC to work alongside the school and ensure that issues were address as they arise. It would also provide the opportunity to work closely with the girls' families and other members of the team around the child. Members of the school staff have already expressed an interest stating that this sort of support would allow for planning for the year and this would make support more effective. This would be an invest-to-save model.

**Recommendation 6: To raise awareness in primary schools.**

Research by Ofsted, Barnardos, the NSPCC and the DFE all demonstrate the fact that early intervention is essential in order to build resilience and reduce vulnerability to sexual exploitation, poor physical and emotional health and other risk factors. Preventative work should begin with pupils in year 6 in primary schools.<sup>2</sup> I recommend the Inner Strength YASS (You are Safe, You are Special) programme which is similar

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<sup>2</sup> See *What can schools do to protect children and young people from sexual exploitation?:* An NSPCC factsheet, NSPCC April 2013, also *Mental health and behaviour in schools, Departmental advice for school staff*, March 2015, DFE, and *Puppet on a string: The urgent need to cut children free from, sexual exploitation*, Barnados 2011

to the leading ladies programme but flexible for both boys and girls and age-appropriate for primary age pupils.

**Maureen Bailey LLB ( Hons)**

**Founder and CEO of Leading Ladies Programme**

**Founder and CEO of Inner Strength Network CIC**

**Vestry Hall**

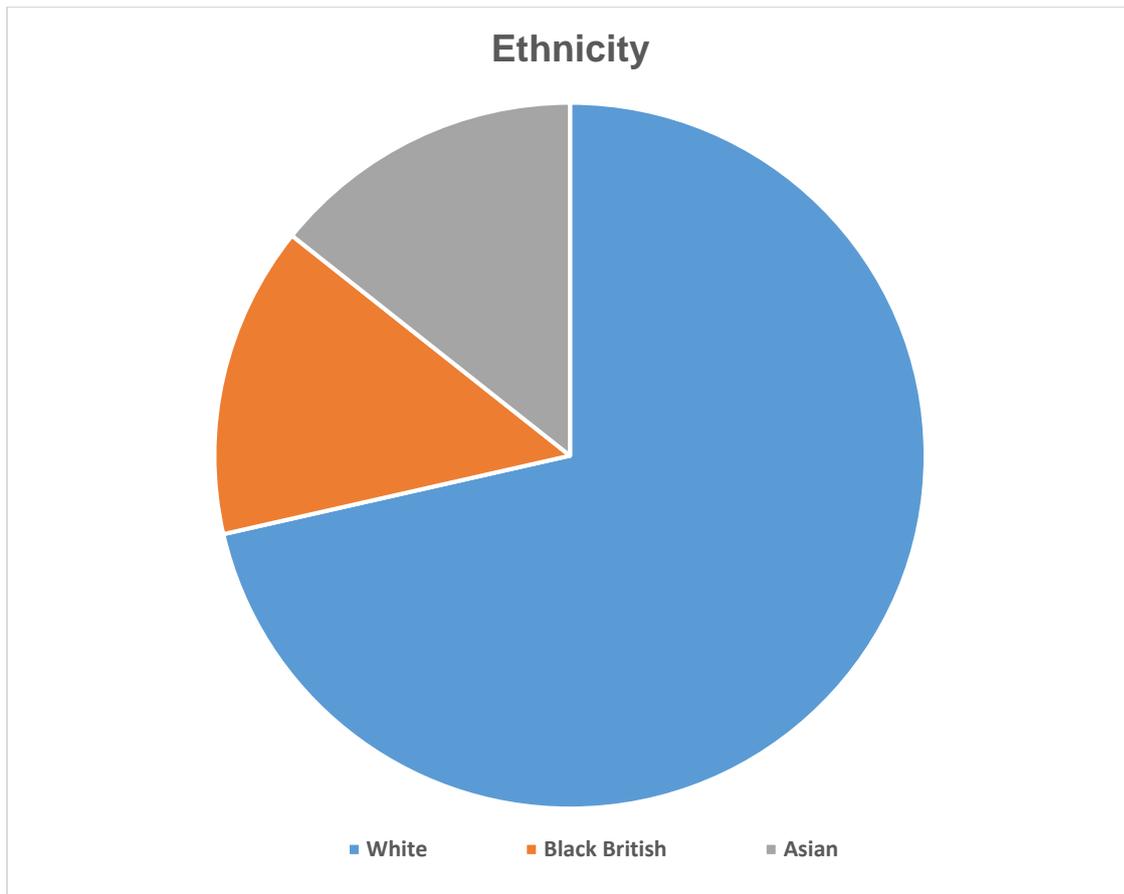
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**388 London Road**

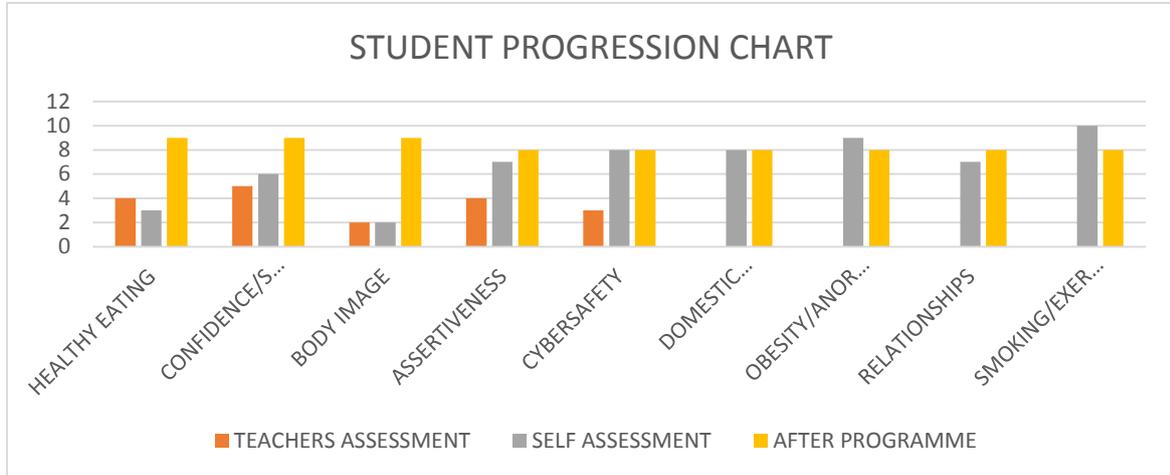
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# Appendixes

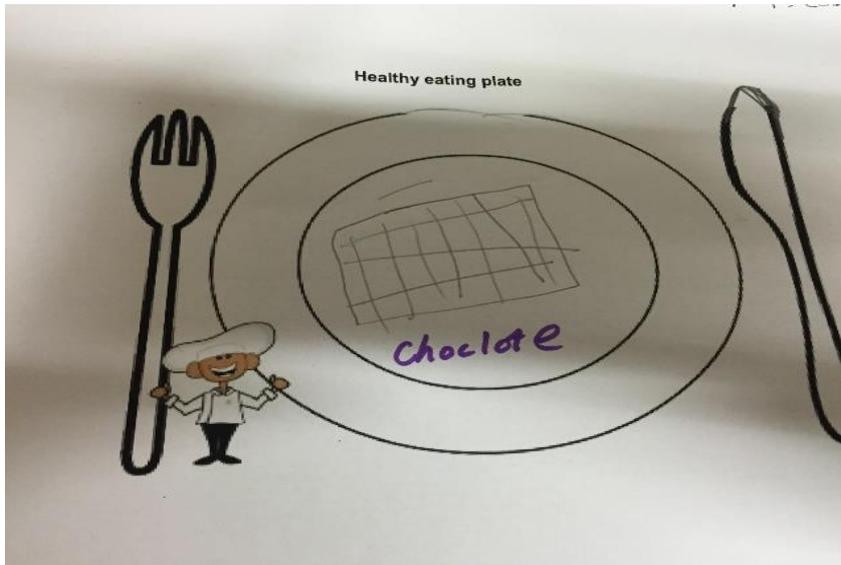
## Appendix 1: Ethnicity Chart



## Appendix 2: Student Progression Chart



### Appendix 3: The Eat Well Plate



## Appendix 4 .1 Self Esteem Worksheet

**About self-esteem**  
(Self-esteem is how a person feels about yourself)

Do you have a positive image of yourself; yes or no?  
no

Do you think you're a confident person?  
no

Can you make friends easily?  
NO

Do you like meeting new people?  
NO

Can you solve problems on your own?  
NO

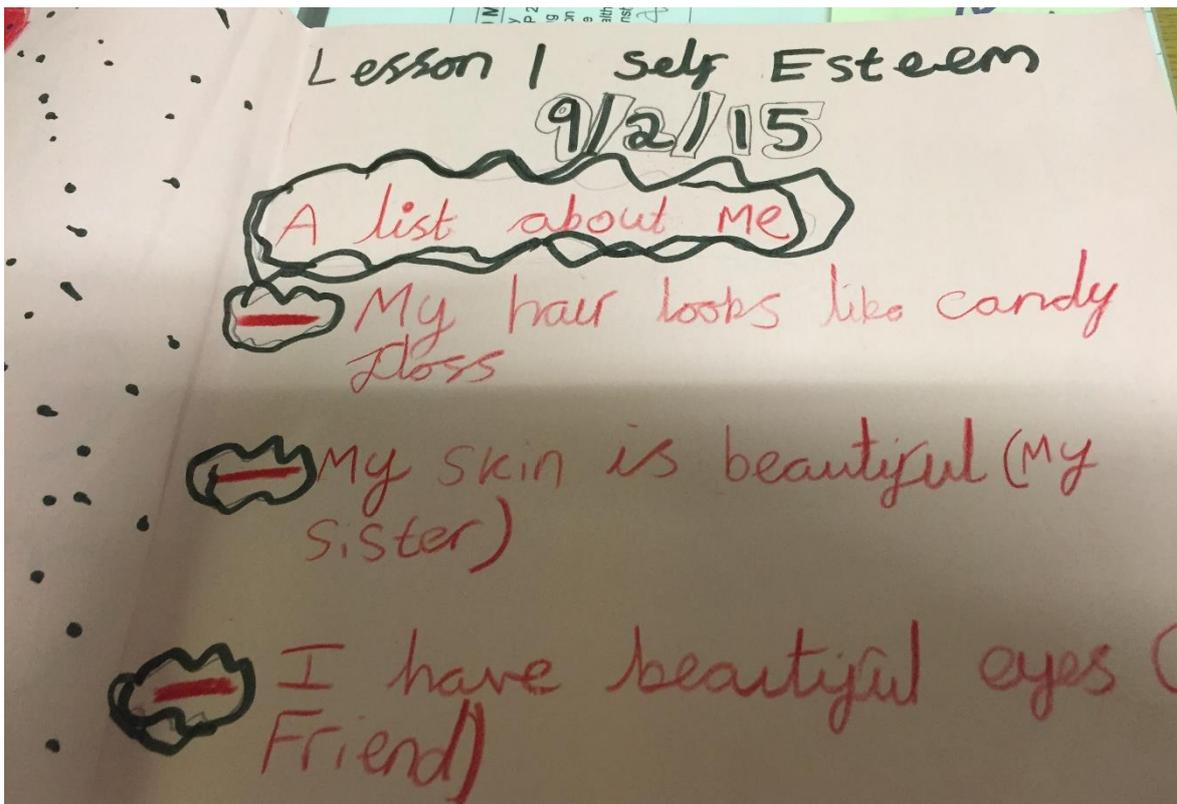
Are you ok asking for help if you need it?  
not really

Are you proud of your achievements in your life so far?  
no

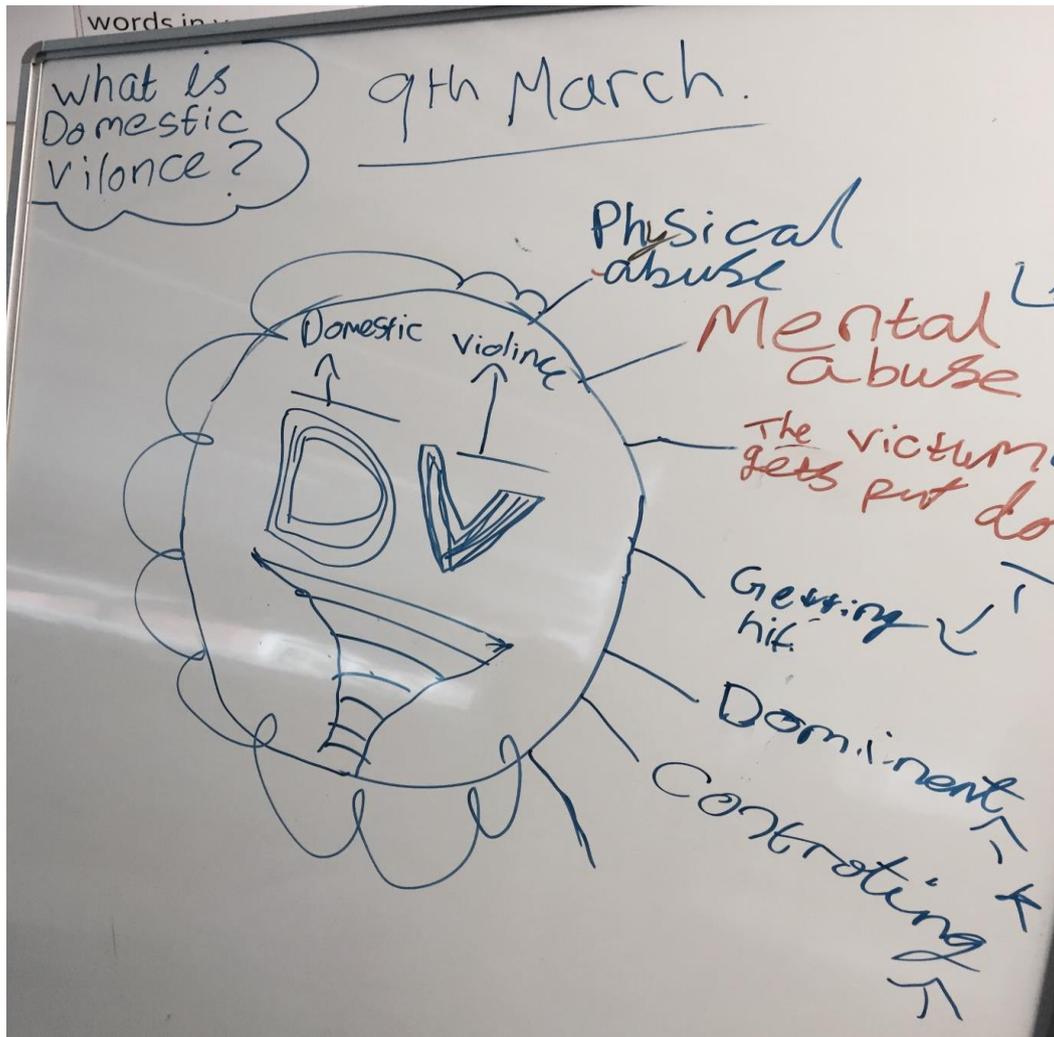
Can you admit mistakes and learn from them? no

Are you able to try new things? maybe

## Appendix 4.2 Self Esteem Work



Appendix 5: What is Domestic Violence?



Appendix 6: Work for the Booklet

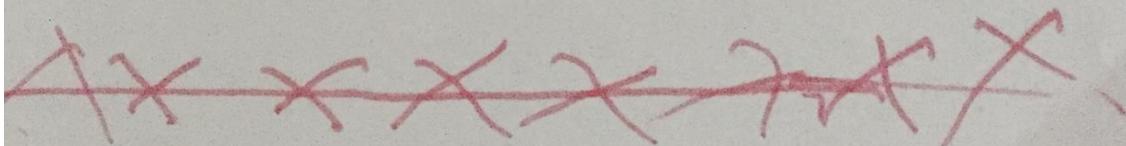
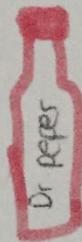
Keep calm and Love  
life ♥

Keep calm and stay strong  
♥

live life to the fullest!

Dont listen to the haters!

Keep calm  
and  
drink Dr. pepper! 😊



**Appendix 7: Fulham Football Club  
Maureen Bailey (ISC) Stacie Blackburn Paul Smithers (Fulham FC)**



### Appendix 8: Assessment and Evaluation

	23 FEB	2 Mar	23 Mar	30 Mar
<b>NAME OF PARTICIPANT</b>	Body image	Self - image Assertiveness	Healthy Body image PT 1 Anorexia Obesity A balanced health	Healthy Body image P 2 Smoking cessation Exercise Healthy relationships
Teachers assessment	3	5	0	0
Asked girls to choose where they are between 1-10 in terms of knowledge 10 = very high knowledge 1= no knowledge/ experience	3	7	7	10
What would you like to see be included in the topics to be discussed in the next 8 weeks	<b>What is the normal standard for a healthy body image ( my last school told me I had to skinny so I switch off)</b>	<b>Learning how to put my points across</b>	<b>What would be the right way</b>	<b>Positive relationship of what should happen</b>