



The Amy Winehouse Foundation Resilience Programme

End of Year One Interim Report: A summary of Findings.

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Contents

Executive Summary	2
The Amy Winehouse Foundation Resilience Programme	3
Diagram: Core components of Resilience Programme delivery	4
Resilience Programme Outcomes and Evaluation Aim.....	5
Diagram: Programme Outcomes	5
The Outcome Measures.....	5
Table: Demographic Composition of Pupils in Year One by Percentage	6
Design.....	6
The Interventions	7
Data Management and Data Collection.....	8
The Findings.....	9
Outcome One.....	9
Bar Chart: Pupil’s Knowledge, Awareness and Confidence Outcomes (N=3404).....	10
Bar Chart: Pupil’s Combined Knowledge, Awareness and Confidence Percentage Outcomes (N=3404)	11
Bar Chart: Pupil’s Perceptions Following Participation in the Peer Pressure, Self Esteem and Risky Behaviour Workshops (N=3404).....	12
Bar Chart: Pupil’s Knowledge Base and Intentions around Seeking Support (N=3404)	13
Bar Chart: Pupil’s Intentions to Use Alcohol and Drugs in the next 6 Months (N=3404)	15
Bar Chart: Pupil’s Intentions around Hypothetical Safer Use in the Future (N=3404)	16
Further Work	18
Acknowledgements	19

Executive Summary

The Amy Winehouse Foundation Resilience Programme was formed as a partnership between Addaction and the Amy Winehouse Foundation. The Resilience Programme receives a grant from the Big Lottery Fund and comprises:

- The delivery of universal alcohol and drugs education to secondary school pupils and parents, alongside a training package for teachers in schools and volunteers in recovery. The programme also delivers targeted interventions for pupils who may be at risk or impacted by another person's substance misuse.
- The implementation of delivery teams across ten sites in England which consist of a specialist alcohol and drugs treatment practitioner, a volunteer coordinator and volunteers. The delivery sites are usually embedded into Addaction services.
- An ambition, over a five year period, to deliver the Resilience Programme to 250,000 young people, 25,000 parents, 1,250 teachers and 250 volunteers across 250 schools. The overarching ethos of the Resilience Programme is to educate, empower and provide people with information or the opportunities to seek referral, assessment and support for potential substance misuse or for support if being impacted by somebody else's substance misuse.

An independent evaluation team who are based between Harvard University and the University of Bath have been commissioned to undertake an evaluation of the Resilience Programme outcomes. The evaluation:

- Consists of a repeated measures design for the pupils, parents, teachers and volunteer cohorts with a pragmatic cluster randomised controlled trial embedded into the universal alcohol and drugs education deliveries to pupils.
- Utilises innovative enhanced mobile app technology to support extensive evaluation data collection and real-time online access to anonymised data.
- Focuses upon key outcome domains for each cohort which includes knowledge, awareness, confidence and safer decision making around substance use; changes in self-esteem and resilience amongst at-risk pupils, communications between parents, teachers and pupils about substance use, confidence in identifying pupils who might be at risk of substance misuse or impacted by another's substance use and facilitating skill development and a readiness for further volunteering, training, education and employment experience amongst volunteers in recovery.

This interim summary report outlines the immediate post intervention findings for pupils who engaged during year one of the Resilience Programme. A final report will be published when follow up data is available. To summarise the findings to date, from 3404 pupils who provided informed consent to participate in the evaluation:

- Just over half of the pupils (53%) said that they had always used alcohol and drugs safely in the past. However, 22% of pupils said that they were not sure if they had used substances safely and 24% said they definitely have not used as safely as possible in the past.
- More than 70% of this cohort identified an increase in their knowledge, awareness and confidence to make safer decisions about alcohol or drug use in the future as a result of taking part in the Resilience Program.
- More than 70% of pupils said that they felt better equipped to manage self-esteem, cope with peer pressure and avoid risky behaviours associated with substance use having participated in the Resilience Programme workshops.

The Amy Winehouse Foundation Resilience Programme¹

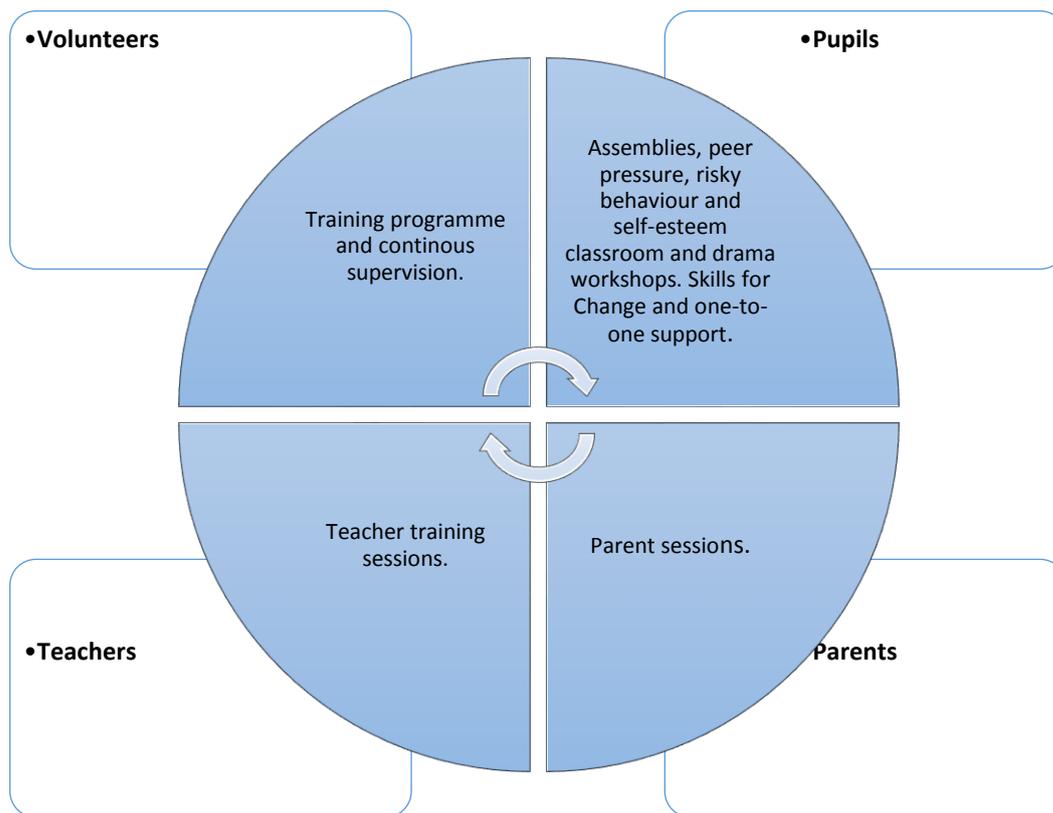
The Amy Winehouse Foundation Resilience Programme provides universal and targeted alcohol and drugs education to pupils in secondary schools in England. The universal education takes place through i) assembly deliveries which comprise 'life shares' and interactive discussions and ii) smaller classroom workshops that focus on peer pressure, risky behaviour and self-esteem in the context of alcohol and drug use. Over the last year drama workshops are also being designed to support young people to develop their understanding of peer pressure, risky behaviour and self-esteem by participating in interactive discussion and role-play. Where pupils identify themselves or are identified formally through referral processes in schools as potentially being at risk of being impacted by substance misuse, they may choose, following assessment, to participate with targeted support. This is offered to eligible pupils in schools through the six session Skills for Change Programme and/or via one-to-one support through a substance misuse treatment organisation in the local area.

The Resilience Programme also delivers parent sessions and training workshops to teachers to promote knowledge, awareness and the confidence to communicate with pupils about alcohol and drugs, especially if there is concern that a young person might be at risk of being impacted by substance misuse.

The Resilience Programme delivery team comprises a specialist alcohol and drugs practitioner, a volunteer coordinator and programme volunteers who are in recovery and represent 'credible peers'. Within the Resilience Programme structure, volunteers are recruited and graduate to become a member of the delivery team through an accredited training programme. In addition to being central members of the teams, volunteers are also invited to participate in the evaluation of the Resilience Programme. It is anticipated that the skills and experience developed through participation in the Resilience Programme will contribute to increased readiness for further volunteering, training, education and employment opportunities. To promote consistency and programme fidelity across sites, the delivery is guided by a practice manual. The diagram on the following page summarises the components of the Resilience Programme delivery for each cohort.

¹ The Amy Winehouse Foundation Resilience Programme will be referred to throughout the report as the "Resilience Programme".

Diagram: Core components of Resilience Programme delivery.



The Resilience Programme is being funded as a five year programme by the Big Lottery Fund. The Amy Winehouse Foundation and Addaction, a provider of alcohol and drug treatment services in England and Scotland developed the programme in partnership. The Amy Winehouse Foundation Resilience Programme Director is Dominic Ruffy. Scott Haines is the Operations Manager and acting Head of the Programme.

The Resilience Programme was originally embedded into ten Addaction treatment sites across England. These are: Barnsley and South Yorkshire, Bournemouth, Brent, Derbyshire, Halton, Havering, Central Lancashire, North Lancashire, Lincolnshire and Liverpool. Each year, the partnership aspires to deliver the Resilience Programme to 45,000 pupils across 50 schools situated in the ten locations listed above. It is also hoped that each year 250 teachers and 5,000 parents will engage in teacher training and parent sessions. The Resilience Programme is being evaluated independently by a team which is led by Professor Helen Haste who is currently based between Harvard University, USA and the University of Bath in the UK.

Resilience Programme Outcomes and Evaluation Aim: The Resilience Programme is committed to achieving four core intended outcomes. These are:

Diagram: Programme Outcomes

Outcome 1

- Young people will improve their knowledge of the effects of alcohol and drugs, increase their awareness of risky behaviour and feel empowered to make more informed life style choices in the context of substance use.

Outcome 2

- Volunteers in recovery will gain confidence and new skills, improve their self esteem, wellbeing, presentation and interpersonal skills and increase their ability to take up training, education and employment opportunities.

Outcome 3

- Young people already affected by alcohol and drug misuse (eg parental substance misuse) will improve their wellbeing, school attendance and behaviour at school.

Outcome 4

- Parents and teachers will increase their knowledge of the effects of alcohol and different drugs and will be better able to identify and support young people, taking hidden harm and safeguarding into account.

The aim of the evaluation is to identify whether the programme outcomes and associated activities and targets are achieved in relation to the pupil, parent, teacher and volunteer cohorts. Typically, significantly sized projects such as this require a year to eighteen months to establish and settle down to achieve consistent programme delivery. Following on from this settling down period, as each year proceeds, the ambition of the evaluation is to inform practice and involve the delivery teams in building and disseminating the evidence base.

The Outcome Measures: The outcome measures were selected to ensure that the intended outcomes could be assessed in the context of the interventions delivered within the Resilience Programme. Where possible, reliable, valid and externally peer review published measures have been employed and are utilised alongside bespoke questionnaires that have been designed to capture perspectives from each of the cohorts immediately post intervention delivery.

Table: Demographic Composition of Pupils in Year One by Percentage

Variable	Percentage
Sex	
Female	43.6
Male	54.7
Year Group	
Year 5	0.1
Year 7	5.8
Year 8	5.7
Year 9	20.6
Year 10	29.3
Year 11	19
Year 12	11.9
Year 13	7.6
Ethnicity	
Asian / Asian British Pupils	2.4
Black / Black British Pupils	0.8
Dual Ethnicity Pupils	1.9
White British Pupils	93.3
“Other” Ethnicity Pupils	1.6

Design: Several designs are incorporated into the evaluation to effectively manage the available resources. The core evaluation design comprises a pragmatic cluster randomised controlled trial with follow-ups at two, six and twelve months for the pupil cohort who engage with universal alcohol and drug education. Due to scheduling limitations however, the majority of pupils will engage in a basic post intervention evaluation design with the administration of a single outcome measure immediately following the intervention. For the pupil cohort who engage with the targeted Skills for Change programme, a repeated measures before and after design is being utilised.

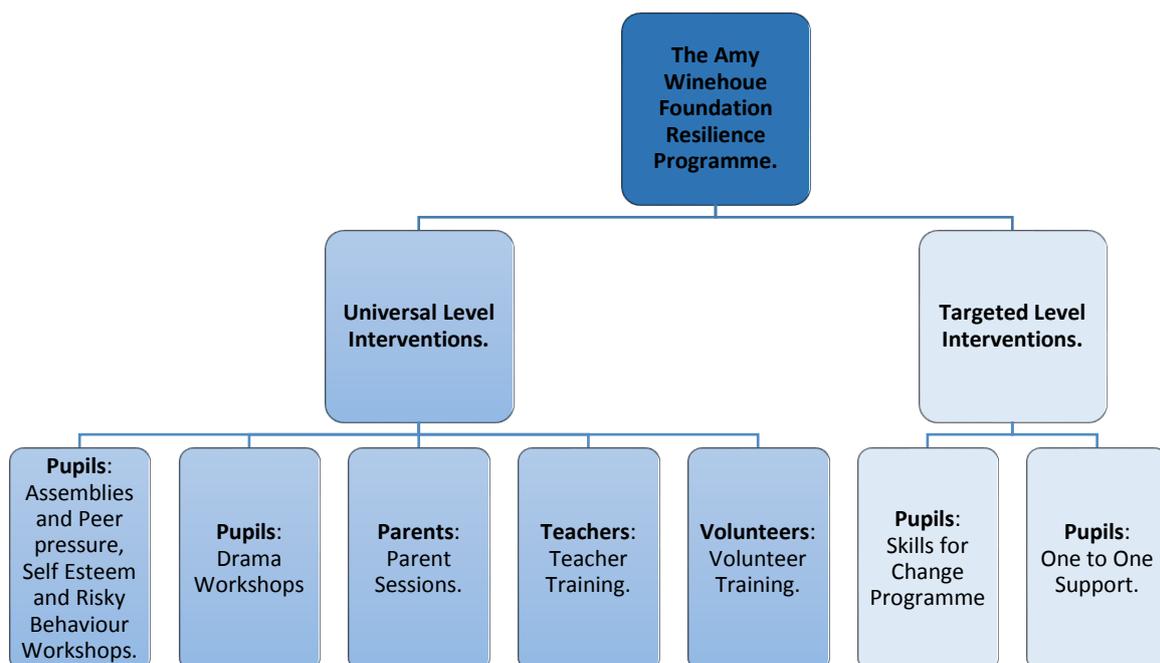
For the teacher, volunteer and parent cohorts who participate in training sessions and parent sessions, a repeated measures before and after design with follow-ups at two, six and twelve months is employed. Each design approach is framed using mixed qualitative and quantitative methods of data collection.

This includes the selection of reliable and valid outcome measures and the design of bespoke post intervention questionnaires. The semi-structured interview and focus group schedules will facilitate the collection of rich qualitative data. Anecdotal testimonials from credible sources, including pupils, parents, volunteers, school staff and wider stakeholder groups are routinely passed to the evaluation team, following consent and permission from the participant, as coordinated by the delivery team. Identifying details are not used.

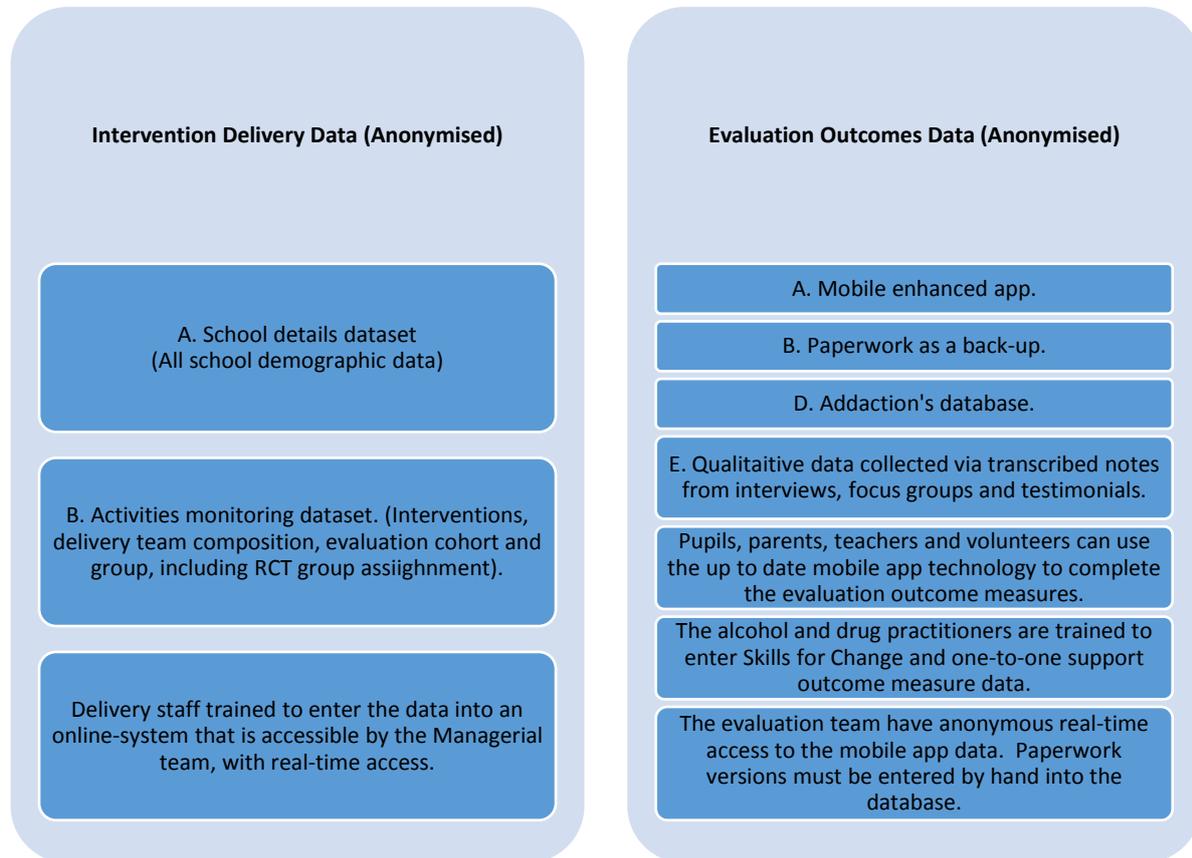
The Interventions: A manual to guide practice and promote programme fidelity was developed and more recently updated to incorporate the Skills for Change Programme at the end of quarter 3 (December, 2014). The manual is appropriately described as ‘beta ready’ and will require further adaptation in line with the evaluation findings, with a specific aim of fine-tuning and improving aspects of programme delivery that promote the intended outcomes of the Resilience Programme.

The levels of the universal and targeted interventions are listed below and are described in detail in the manual (held by Scott Haines, the Operations Manager). The entire delivery team in each of the ten locations is responsible for implementing the universal level interventions. The delivery of the targeted level interventions is predominately led by the (drug and alcohol specialist) practitioners in the Resilience Programme partnership.

Diagram: Universal and Targeted Level Programme Interventions



Data Management and Data Collection: The evaluation data management occurs through two processes, 1. Data that is collected about the Resilience Programme intervention deliveries; and, 2. Outcome data that is collected from the four cohorts who provide informed consent to participate in the evaluation. The diagram below outlines these processes and the data fields collected.



The data collection schedule was been designed to establish whether there are changes over time in the outcome domains. Follow-up time points have been implemented to observe whether changes are sustained over time and to inform intervention design accordingly. The evaluation team have considered that there may be a case to advocate for regular top-up sessions in schools. This would provide an opportunity for knowledge updates on the substance use landscape and to potentially sustain intended outcomes over time. Studies that explore hypothetical links between the length of impact of alcohol and drug education on outcomes are wanting.

The Findings

This section of the report outlines the key findings from the evaluation of the Resilience Programme. There is a specific focus upon the universal level intervention delivery (assemblies and workshops). The randomised controlled trial cohort and the parents, teachers and volunteer cohorts' findings are not reported here because the twelve month follow-up point for data collection has not been reached. In view of this, the evaluation team have suggested that this report should be seen as summary of some of the interim findings for outcome one. The data that include all cohorts with the twelve month follow up data included will be analysed in December 2015. Outcomes two to four will be explored in the later report.

Outcome One

Young people will improve their knowledge of the effects of alcohol and drugs, increase their awareness of risky behaviour and feel empowered to make more informed life style choices in the context of substance use.

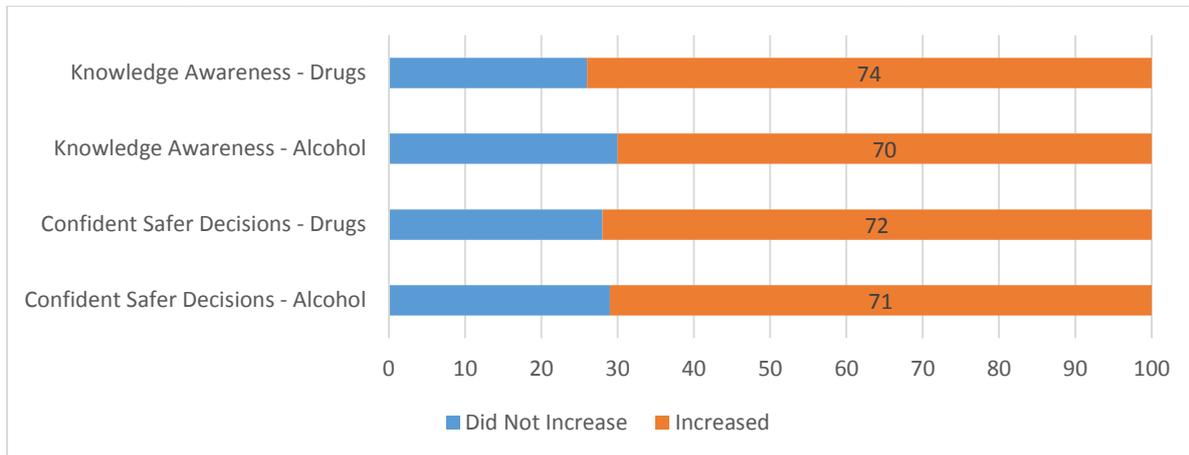
During the final quarter of the first year², 3404 young people participated in the evaluation following their engagement in the universal alcohol and drug education assembly and self-esteem, risky behaviour and peer pressure workshops.

Overall, seventy six percent (N=2580) of pupils said that they found the Amy Winehouse Foundation Resilience Programme useful to them. Only 9% (N=282) said that the Resilience Programme was not useful. Sixteen percent (N=540) of pupils said that they were not really sure about the utility of the programme, which suggests that some adaptation and clarification of the programme structure might facilitate young people's identification with the ethos of the Resilience Programme.

² The mobile app that was used to collect data was completed in the late autumn 2014.

With the majority of pupils identifying some utility of the Resilience Programme, the evaluation proceeded to ask whether knowledge, awareness and confidence about safer decisions around alcohol and drug use changed as a result of taking part in the interventions. The bar chart below highlights the pupils' responses.

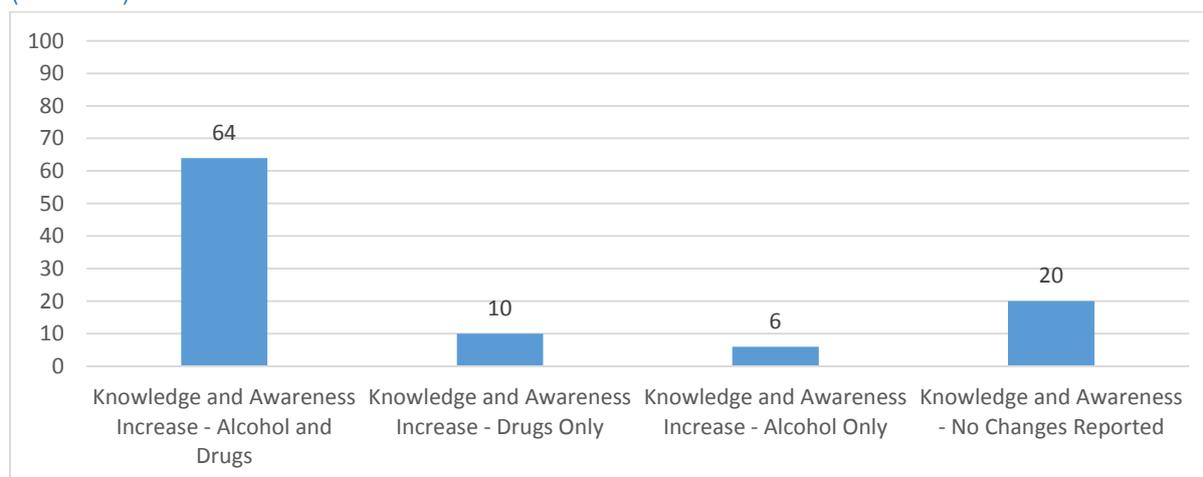
Bar Chart: Pupil's Knowledge, Awareness and Confidence Outcomes (N=3404)



The chart above demonstrates that as a result of taking part in the Resilience Programme, the majority of pupils identified an increase in their knowledge and awareness in addition to increased confidence about making safer decisions around alcohol and drug use (>70%; > N=2382 pupils). Gender and age were explored and the patterns around knowledge, awareness and confidence remained consistent.

When the data were explored to assess for combined responses, the majority of pupils reported that alcohol 'and' drug knowledge and awareness had increased (64%; N=2182). A smaller percentage of pupils said that their knowledge and awareness had increased only in relation to drugs (10%; N=326). Similarly, 6% (N=194) said that their knowledge and awareness had increased only in relation to alcohol. Twenty percent (N=698) said that there was no change to their knowledge and awareness in relation to alcohol 'or' drugs. These findings are summarised in the chart on the following page.

Bar Chart: Pupil's Combined Knowledge, Awareness and Confidence Percentage Outcomes (N=3404)



Overall, these findings tentatively suggest that the majority of secondary school pupils who engaged in the universal alcohol and drug education sessions delivered through combined assemblies and workshops identified an increase in knowledge and awareness around alcohol and drugs. Likewise the majority of pupils reported an increase in their confidence to make safer decisions about alcohol and drug use. Tentatively, in relation to the target for outcome one, the 70% level of change criteria for pupils to disclose an increase in knowledge, awareness and confidence or empowerment to make more informed and safer decisions is being met with the existing evaluation sample. Naturally, further exploration of the data collected over the lifespan of Programme delivery is needed.

The evaluation team were interested to identify whether pupils reported safer alcohol and drugs use in the past, before they took part in the Resilience Programme. It may be the case that some pupils did not experience changes in their knowledge and awareness because they perceived that they were fully informed already with no past experience of use or unsafe use with alcohol or drugs. However, when the data was explored, only half of the pupil cohort disclosed that they had used alcohol and drugs as safely as possible in the past (53%; N=1804). Twenty four percent of pupils (N=800) said they definitely had not used as safely in the past. Twenty two percent of the pupils (N=760) were unsure and said that “maybe” they had used alcohol and drugs as safely as possible in the past³.

The salience of the Resilience Programme is underscored by the finding that showed that the majority of the pupils who said that they haven't used safely in the past felt that their

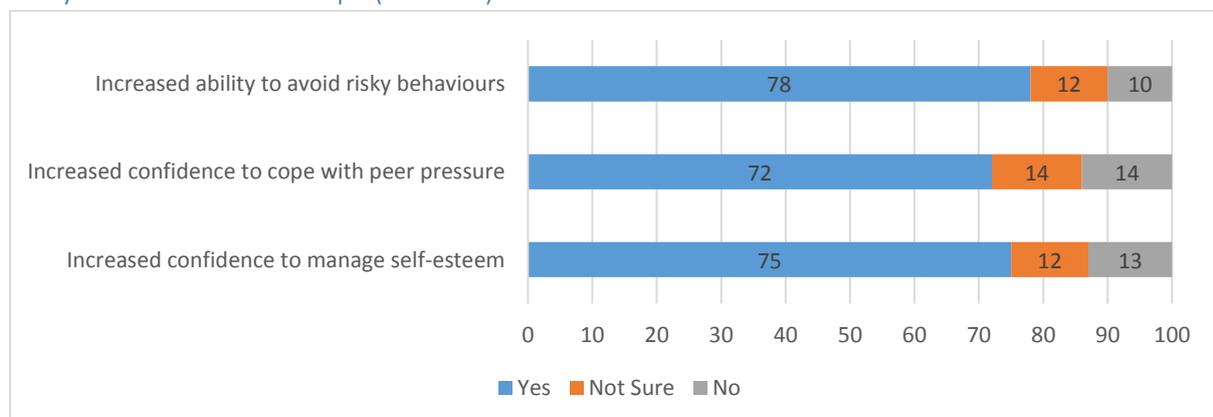
³ Data were missing for 1% (N=40) of the evaluation participants.

knowledge and awareness about alcohol and drugs had increased as a result of the interventions (67%; N=536 of original 800 pupils). A further 5% of these pupils (N=36/800) said that their knowledge around alcohol only increased. Likewise, a further 8% of these pupils (N=64/800) said that their knowledge around drugs only increased. Twenty one percent of these pupils (N=164/800) said that there was no change to their knowledge and awareness levels.

A similar pattern was noted amongst pupils who had disclosed either no use or using as safely as possible in the past. Again, the majority of these pupils reported an increase in alcohol and drug knowledge and awareness as a result of the Resilience Programme even though they did not disclose an issue in the first instance. For example, 62% or N=1120 reported an increase in alcohol and drug awareness and knowledge; 6% or N=104 reported an increase only in relation to alcohol knowledge; 10% or N=188 reported an increase only in relation to drugs knowledge and 22% or N=392 reported no change in knowledge or awareness about alcohol or drugs.

Being more knowledgeable and aware of the effects and issues surrounding alcohol and drugs represents one aspiration of the Resilience Programme. The Programme also advocates that skills to manage self-esteem, risky behaviours and peer pressure play an important role in young people’s decisions to use alcohol or drugs. The three workshops that tackle these topics are delivered to young people, following the assembly deliveries (of life shares and interactive discussions). The bar chart below shows the impact that the three workshops had upon the pupils’ perceptions who participated in the evaluation.

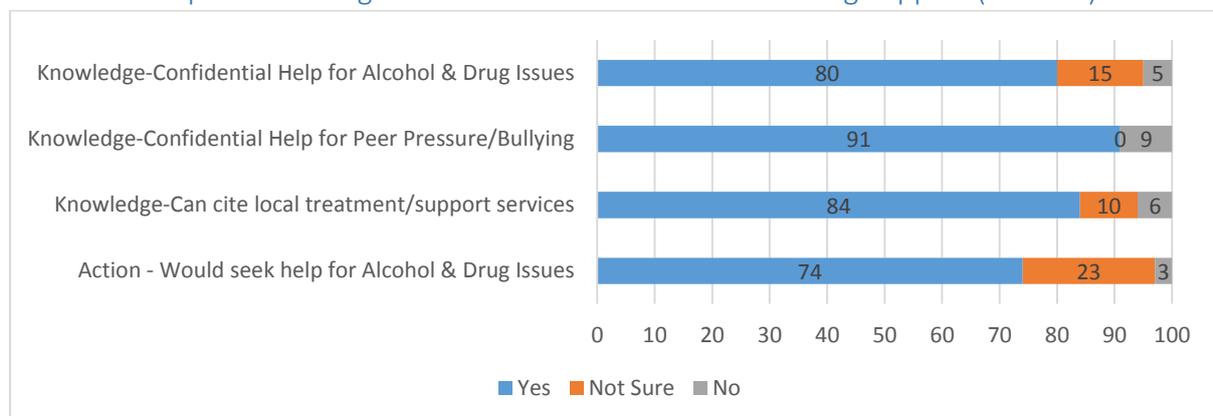
Bar Chart: Pupil’s Perceptions Following Participation in the Peer Pressure, Self Esteem and Risky Behaviour Workshops (N=3404)



More than 70% of pupils (>N=2382) identified increased confidence to manage self-esteem and to cope with peer pressure in the context of substance use following their participation in the three workshops. Almost 80% of pupils said that they would be more likely to avoid risky behaviours relating to substance misuse as a result of participating in the workshops. This finding, alongside the reported changes in knowledge and awareness is very encouraging. However, albeit a minority, there is a consistent pattern of young people who disclosed that the workshops had either not impacted or that they weren't sure whether there was an impact upon their confidence or skills to manage self-esteem, peer pressure or risky behaviours. The evaluation team will be able to disseminate these findings to the Programme staff and host a focus group with young people to explore whether the workshop delivery can be developed to reach out to pupils who do not find the current structure useful.

One of the intentions of the Resilience Programme is to inform young people about organisations that can provide support for alcohol and drug use. This may be useful for young people themselves and for young people who are concerned about close friends, school peers and family members. Following their participation in the Resilience Programme, young people were asked if they were already aware that confidential support was available, whether they now know where to get support and whether they would seek out support if alcohol or drug use became a problem for them. The outcomes from young people who attended the assemblies and workshops are summarised in the bar chart that follows.

Bar Chart: Pupil's Knowledge Base and Intentions around Seeking Support (N=3404)

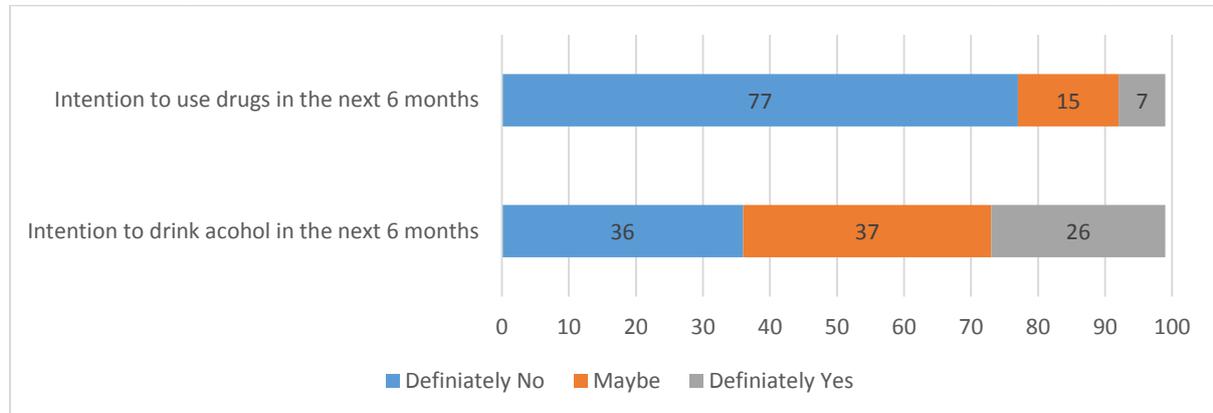


Before engaging in the Resilience Programme, the majority of young people knew that they could seek confidential support for concerns about alcohol and drug issues but disclosed that they did not necessarily know where to go (80%; N=2714). Following participation, the majority of young people could cite local treatment services that could provide support (84%; N=2864). The evaluation findings suggest that the messages about campaigns in schools to tackle bullying are filtering through to pupils. Ninety one percent of young people (N=3082) knew that they could seek confidential support for concerns about peer pressure or bullying. This finding is an important and positive indication suggesting that young people know that support is available if they perceive pressure to engage in alcohol or drug use. The question remains as to whether a young person who is concerned about alcohol or drug use would actually seek help. Again, the majority of pupils (74%; N=2512) stated that they would seek help. Some pupils were not sure at this stage if they would seek help (23%; N=776). Three per cent of pupils said that they would not seek help.

In years two and three, the Resilience Programme and evaluation team can work together with a young person focus group and any emerging research literature to explore which mechanisms are most effective in supporting the journey from knowing where to gain support to increasing motivation to actually access support. It will then be possible to return to adapt the Resilience Programme delivery and to the evaluation data to explore whether the percentage of young people who are not sure about seeking help (in this period that is, 23%; N=776) has reduced.

The final set of outcomes that were assessed immediately after young people’s engagement in the universal alcohol and drug education interventions focused upon future intentions to use alcohol and drugs. These findings can be seen in the bar chart below.

Bar Chart: Pupil’s Intentions to Use Alcohol and Drugs in the next 6 Months (N=3404)

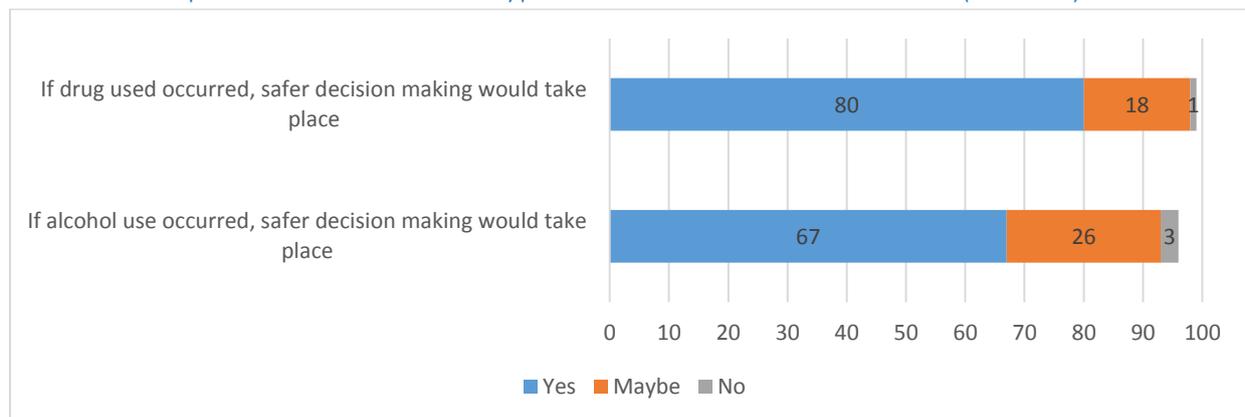


When the randomised control trial data becomes available at the 12 month follow up point, it will be possible for the evaluation team to assess whether young people reported actual substance use to compare and contrast with disclosed intentions to use.

In the current sample, following the pupils’ engagement in the Resilience Programme, more young people said they intended to use alcohol than drugs, a finding that resonates with national data about young people and substance use. A small amount of questionnaire responses were missing (N=42 to 46/3404 participants). Aside from this, 26% of pupils said that they would use alcohol in the next six months (N=898). Thirty six percent of pupils said that they might use alcohol (N=1244). Interestingly, the intention to use alcohol was focused predominately amongst the old year group of pupils. Younger year groups were not focused upon an intention to use alcohol. Thirty six percent of pupils said that they definitely would not use alcohol in the future (N=1244). It is encouraging to note that overall, pupils said that if they were going to use alcohol 67% said they would use as safely as possible (N=2336). Three percent of pupils said that they would not use alcohol safely (N=110). A level of ambivalence existed where 26% of pupils said that they might use alcohol safely (N=898).

Pupils disclosed stronger intentions to avoid drug use in the future. Only 7% of pupils said that they would definitely use drugs in the next six months (N=244). Seventy seven percent of young people said they would definitely not use drugs in next six months (N=2614). Fifteen percent of young people said that they might use drugs in the next six months (N=500). The percentage of pupils who said that if they did use drugs, they would use them as safely as possible was high. Eighty percent of pupils said that following engagement in the Resilience Programme they would make safer decisions if they were going to use drugs (N=2714). Eighteen percent of pupils were ambivalent about this outcome and said that they might make safer decisions if they were going to use drugs (N=598). One percent of pupils said that they would not use drugs safely (N=40). These findings can be seen in the bar chart below.

Bar Chart: Pupil’s Intentions around Hypothetical Safer Use in the Future (N=3404)



Whilst definite intentions to use alcohol and drugs exist for less than a third of the evaluation cohort, the majority of pupils said that if they were going to use, they would make safer decisions in the future following their participation in the Resilience Programme. There are still goals to achieve in supporting young people to reduce intentions to use substances, especially around alcohol use.

Overall, these findings are particularly encouraging because they suggest that young people who engage in the Programme have had the opportunity to disclose previously risky substance use in the past and to demonstrate changes in their knowledge, awareness, confidence and intentions about substance use in the future. Therefore, the results from the evaluation demonstrate that the ambition to fulfil ‘Outcome One’ of the Resilience Programme is well within the grasp of the delivery teams. That is: *an improvement of young people in their knowledge about the effects of alcohol and drugs, an increase their*

awareness of risky behaviour and feeling confident or empowered to make more informed life style choices in the context of substance use.

Further analyses will be conducted when the follow up time point data becomes available at the end of this calendar year.

Further Work

Progress to date in relation to the implementation of the Resilience Programme is positive.

The Resilience Programme team has:

- Successfully recruited ten teams comprising Addaction practitioners, Amy Winehouse Foundation volunteer coordinators and volunteers who are in recovery to deliver the programme interventions.
- Engaged 49 schools and education providers to support the implementation of the Resilience Programme so that pupils, parents and teachers can participate in the alcohol and drug education interventions.
- Fully integrated the evaluation team into Resilience Programme delivery, including staff and volunteer training, the development of the enhanced mobile app and datasets to capture information and the scheduling of the evaluation protocol into each of the interventions.
- Developed Addaction's monitoring and evaluation database so that the Skills for Change Programme outcomes can be measured.
- Been willing to work within an honest partnership that has promoted authenticity and transparent processes to enable the scrutiny of activities to promote a fully independent evaluation study.

Further work is necessary to ensure that the ambitions of the Resilience Programme are realised. This includes:

- Setting a firm deadline for the final end of year one evaluation findings report.
- Implementing the evaluation framework to measure the outcomes from the drama workshops that are being managed by Jamie Campbell MacFie.
- Assessing the impact that the presentation workshops being designed by Paul Danan have upon the volunteers who undergo training to become a member of the Resilience Programme delivery team.
- Hosting a series of focus groups to discuss the evaluation findings and to identify areas of development and further interest, both for the evaluation and for the delivery teams to improve practice, especially around scheduling delivery and increasing the integrated data collection for the evaluation.

Acknowledgements

We would like to acknowledge the support of all those who have participated and contributed to the evaluation project, commencing with the Big Lottery Fund and specifically to Peter Dobson and Julie Galano who have guided the Programme through the application and implementation process. Without the pupils, parents, teachers and volunteers, it would not be possible to understand the impact of the Amy Winehouse Foundation Resilience Programme. We appreciate that it takes time and effort to complete questionnaires and take part in interviews and focus groups. All of these contributions are valued and are also essential to the evaluation of the Programme.

As an evaluation team, we relied significantly upon the ten delivery teams, especially all of the practitioners, coordinators and again the volunteers who have facilitated conversations with schools and with the pupils, parents and teachers to provide them with the information that impacts on people's knowledge and choice to participate in the evaluation. We appreciate the support that the delivery teams have offered in this respect and in helping the evaluation to get off the ground in the first year.

Special thanks goes to the following people who have specifically stepped in on an individual basis and outside of their remit to support the evaluation team on matters relating to design, implementation and the interpretation of the data: Simon Antrobus, Jane Winehouse, Mitch Winehouse, Dominic Ruffy, Scott Haines, Liz Tootell, Jamie Campbell MacFie and Tim Vanstone, Susan Jess, Andy Olive, Natalie Moore, Karen Colgan, Rachel Nichols, Brian Burns, Jayne Harrison, Dr Gutteridge, Shona Sutherland, Ian Merrill, Anna Whitton, Jaqueline Buchannan, Charlotte Simpson and Jo Bevan. For advice on alignment of this evaluation to the Prevalence study, we acknowledge the valued input from Owen Bowden-Jones and Grace Ofori-Attah. The evaluation team have appreciated the expertise and support that Annie Macfarlane in particular and Graeme Hird have provided in the development of the Skills for Change framework.

Thanks are also extended to the Psychology Department at the University of Bath, particularly to Bas Verplanken for supporting the establishment of the Child and Adolescent Risk and Resilience Research Group (chaired by Richard Joiner). Similarly, Bob Selman at Harvard University is thanked for providing a vignette scoring framework to enable the drama workshops to be evaluated.

Finally, for supporting various evaluation activities on a voluntary basis, the team thanks Megan Evison, a fledging junior research assistant who shows great promise and Dr Dent who has helpfully advised on matters relating to the intellectual property rights of the evaluation work (that predominately sit with the Big Lottery Fund).

As evaluators, we have appreciated the team ethos that has been positively and authentically guided under Dominic Ruffy's directorship. We are enthusiastic about the forthcoming follow-up data collection which will fully enable the four outcomes of the first year of the Resilience Programme to be evaluated at the end of the calendar year.

With sincere thanks.

Helen Haste, Claire Russell, Richard Joiner and Sean Radford. May 2015.