




The Executive
Programme on
Paramilitarism &
Organised Crime

The connection between paramilitarism and mental health in Northern Ireland

**Research from the Executive Programme on
Paramilitarism and Organised Crime**

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Executive Programme on Paramilitarism & Organised Crime (EPPOC)

Summary

The Executive Programme on Paramilitarism and Organised Crime (EPPOC) is an ambitious, cross departmental, transformational change programme working to deliver the Northern Ireland Executive's priority of addressing the challenging issues associated with paramilitarism in Northern Ireland. It aims to be research and evidence based.

This paper discusses the relationship between paramilitarism and mental health in Northern Ireland. It is based on various data sources gathered by the Executive Programme on Paramilitarism and Organised Crime and covers the period March 2021 to March 2023. The Programme's Action Research project, led by Dr Colm Walsh at Queen's University, Belfast, consistently gathers data across multiple Programme projects relating to mental health, adversity, and exposure to violence.

Key points:

- Local, national and international research shows a clear link between exposure to violence and poor mental health and wellbeing outcomes. Programme-funded research is enhancing this evidence base with data from interventions in Northern Ireland that work with young people and women in areas most impacted by paramilitary activity. The link between paramilitarism and mental health is complex: sometimes poor mental health can be a protective factor^[1] from violence and exploitation; sometimes it is a risk factor^[2]; sometimes it is a symptom of exposure, and sometimes it is a combination of these factors.
- The results from Programme evaluations reinforce, and are consistent with, findings from elsewhere: exposure to violence is detrimental to the mental health and wellbeing of individuals. One aim of funding Action Research is to enhance the local population estimates around these issues. For example, it has been found that young people living in areas of elevated paramilitary activity are eight times more likely to screen positively for likely Post Traumatic Stress Disorder (PTSD) than the general population.
- It is important that this connection, with all its nuances and complexities, is more widely discussed and understood, so that those delivering interventions or developing mental health strategies are cognisant of the particular nature of violence experienced in Northern Ireland, including the high levels of exposure to trauma within communities. This could mean, for example, considering the inclusion of trauma screening measures as standard.

Introduction

1. Paramilitarism is a complex phenomenon that causes many types of harm. Some harm is obvious and visible and has been well documented through research and statistics (the top layers of the typology triangle below at Figure One). Some harms are less visible but still have a substantial impact on communities and individuals (the middle layers of the triangle). Some are much more subtle and less obvious (the bottom parts of the triangle). The Executive Programme on Paramilitarism and Organised Crime (EPPOC) aims to address all of these issues, drawing upon international evidence of what works and combining it with innovative local practice.

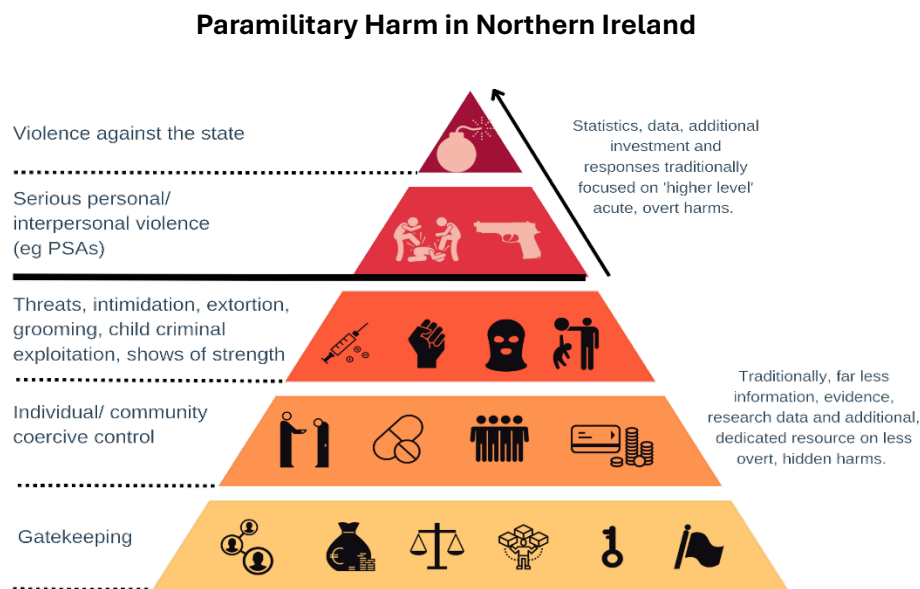


Figure One: Typology of Paramilitary Harm

2. This paper attempts to understand, in particular, the relationship between paramilitarism and mental health through the lens of the public health approach to violence prevention adopted by the Programme. The public health approach involves systematically understanding causes, finding effective interventions through research, and implementing these interventions widely to provide maximum benefit^[3]. There are three types or stages of intervention (see Figure Two below) - primary, secondary and tertiary. Each of these plays a different role at a different stage when addressing violence and harm. It amounts to a relay-team effort across sectors and professions. This evidence-based approach seeks to prevent violence by addressing underlying risk factors across entire populations.

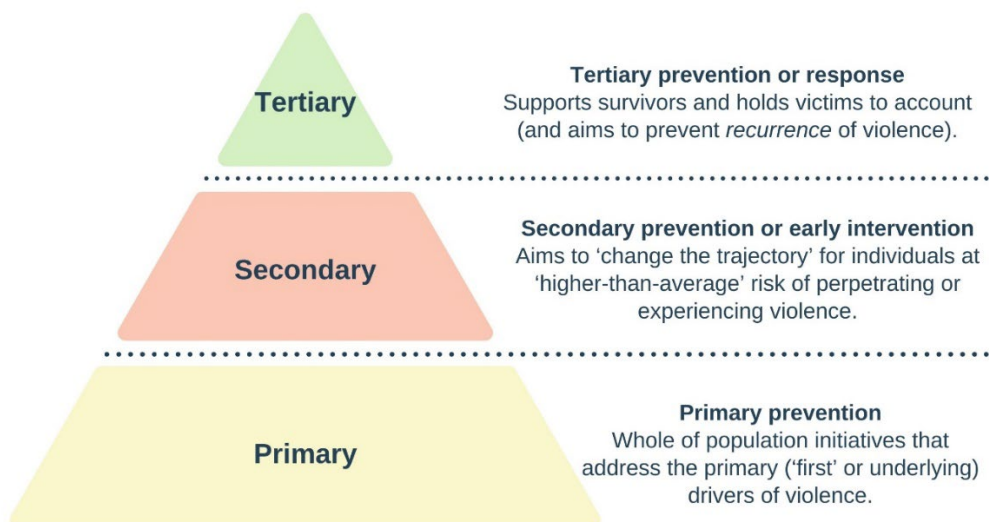


Figure Two: Public Health Approach – stages of intervention

- In addition, the public health model defines a four-stage process which represents a continuous cycle of assessing, understanding and responding to violence and harm. This is shown in Figure Three. This paper is based on this framework.



Figure Three: Four stage public health approach

Define and understand the problem

- EPPOC is committed to understanding all types of paramilitary harm in order to inform effective responses and interventions. This paper analyses and brings together Action Research primarily from Queen’s University, Belfast, which has been funded by the Executive Programme on Paramilitarism and Organised Crime. (Key reference material is listed in Annex A). Action Research is a particular type of research that aim to support real-time change and improvements in practice through robust inquiry, reflection and evaluation. The project focuses on Programme interventions with young people and women in the areas most impacted by paramilitary activity. It discusses findings relating to the mental health of project participants, particularly as this relates to exposure to paramilitary harms. The relationship between paramilitarism and mental health in Northern Ireland is established but not yet fully understood. Globally, it is known that

exposure to violence, trauma and adversity can contribute to poor mental health outcomes for individuals and communities. The Northern Ireland Youth Wellbeing Survey describes some of the ways this can manifest, from the impact of intergenerational trauma:

“The impact of the Troubles affects both past and present generations and there is evidence that mothers who report high levels of impact from the Troubles experience higher levels of psychological distress which, in turn, is related to higher levels of mental health difficulties for own their children (Merrilees et al., 2011)”

...to the effects of ongoing paramilitary activity on young people:

“Exposure to community violence in urban settings is related to increases in depressive symptoms, anxiety, post-traumatic stress and aggression for adolescents (McDonald & Richmond, 2008).”

5. We also know that trauma, adversity and mental health issues are pervasive: many people will experience these, including those who continue to perpetrate violence as members of proscribed armed groups and criminal gangs.

Identify the risk and protective factors

6. EPPOC is committed to understanding the risk and protective factors that exist in Northern Ireland in relation to paramilitary harm. The Programme is funding the first Northern Ireland-based study into the prevalence of ACEs, exposure to violence, and childhood adversity, in the adult population with the aim of enhancing our understanding of how these issues manifest. This will be complete in late 2024. In the meantime, several national and international studies have demonstrated the link between adverse childhood experiences (ACEs) and poorer long-term outcomes across a range of health and wellbeing measures^[4].
7. Considering the ‘Pair of ACEs’ model, below in Figure Four, it is clear that growing up in a deprived area, with the ‘adverse community environments’ detailed, can make circumstances more difficult for individuals and families experiencing one or more of the adversities described below.

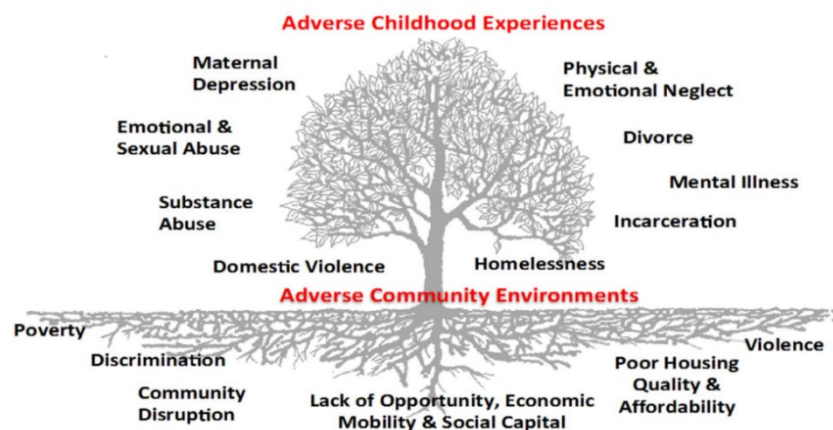


Figure Four: The Pair of ACEs model by Ellis, W., Dietz, W.H., Chen, K.D. (2022). Community Resilience: A Dynamic Model for Public Health 3.0. Journal of Public Health Management and Practice.

8. Research also indicates protective factors that can help mitigate the harmful effects of ACEs. Protective factors are characteristics that help people or communities deal more effectively with stressful or traumatic events. This could include:
 - having one or more stable and caring adult-child relationships;
 - feeling able to overcome hardship and guide your destiny;
 - being equipped to manage emotions and behaviour; and
 - being involved and connected.
9. The findings from the Youth Wellbeing NI Survey^[5] indicate that 36.8% of young people aged 11-19 years in NI have experienced trauma. Witnessing violence (17.0%) was the most common traumatic experience, followed by having a serious accident (16.8%), and experiencing the sudden death of a loved one (10.7%).
10. These risk and protective factors are relevant for those at risk of experiencing harm from paramilitary groups, and to those at risk of involvement in paramilitary groups (including victims of criminal exploitation), as well as those in communities in which paramilitaries are active. The EPPOC Programme structure takes this into account: as well as projects working to keep people safe in the here and now, other projects focus on building the protective factors and resilience of both individuals and communities. These are all benefits the Programme wants to achieve. Benefits in a Programme context are positive, measurable changes; the Programme's Benefits Realisation Framework (Annex B) helps assess what changes are working and what are not.

Develop and test responses

11. Recognising the impact that violence and ongoing paramilitary activity has on mental health and wellbeing outcomes, the Programme is committed to embedding a trauma informed approach through all projects. The Programme is the sole investor in the Safeguarding Board of Northern Ireland's Trauma Informed Practice Project. The interventions funded use a range of methodologies to support individuals and communities, including mentoring, sports, counselling, group work, outreach, participation, youth work and social work. It is worth noting that none of the projects the Programme invests in are specifically designed to address the mental health needs of participants. However, the protective factors that projects have focused on increasing include:
 - life and social skills development;
 - employment support;
 - education;
 - family support;

- support with addiction;
- self-efficacy;
- volunteering; and
- connection with community.

12. A full list of projects can be found at Annex C. The projects discussed below are most relevant when considering the links between paramilitarism and mental health in Northern Ireland:

Mid & East Antrim Youth Support Hub

13. This project involves the creation of a multi-agency youth stream of the Mid and East Antrim Support Hub to support young people (up to 25 years) who are at risk of being involved with, influenced by, or exploited by paramilitary gangs.

A 2021/22 evaluation found that:

- 80% of the young people supported had experienced adversity;
- 78% had been exposed to violence;
- 94% had documented substance use; and
- 83% were experiencing family issues.

Indications of positive progress in 2022/23 were:

- 48% of young people expressing having more hope for the future, as well as increases in family unit functioning; and
- 40% reported reduction in substance use;

INSYNC: Support for Victims of Paramilitary Violence

14. This project aims to identify victims of paramilitary violence, activity and harm through multiple outreach channels. The majority of the project involves providing support to individuals on a range of issues, most pressingly trauma or counselling support, but also with drug misuse, debt, self-esteem, training and employment, access to benefits, housing, and family relations. This can require mentoring and/or signposting to other services. The project also aims to build capacity among service providers to work with victims.

15. INSYNC is currently being evaluated, but early findings indicate that the mentor/support worker model used in this particular project is enabling service users to access counselling consistently for, in many cases, the first time. Housing is a key issue for numerous service users, and many report they face ongoing abuse, threats and

intimidation.

Developing Women in the Community Project

16. The Developing Women in the Community project^[6] is providing women with the skills, knowledge and confidence they need to take on roles such as leadership and decision making in their communities. Women of all ages take part, and is delivered within the community in areas where paramilitary influence is prevalent. The project provides the opportunity for participants to volunteer within their community and to develop and deliver a programme locally. Provision of family support is a key element of the project. The focus is on empowering women to enable them to have the confidence to become involved in transformational community development and to help support communities to move away from paramilitary activities.

Two evaluations of the Developing Women in the Community Project found:

- 62.3% of participants reported that paramilitaries continued to be active in their communities; 18.9% reported being threatened by paramilitaries; and 38.3% reported witnessing paramilitary violence.
- Exposure to violence was associated with increased mental health issues. Nearly 90% of participants reported having a known mental health issue. 48.7% screened positively for probable depression and 53.5% screened positively for probable anxiety.
- There was a positive correlation found between the number of adverse life events experienced (including paramilitary and community violence) and scores on measures of depression and anxiety. Those exposed to interpersonal violence were much more likely to have a mental health issue.
- Between baseline and endpoint, there were statistically significant improvements on mental health and wellbeing measures, with 39.3% of those screening positive for depression at baseline no longer above threshold at endpoint. This suggests the Programme activities contributed to improved mental health.

Youth Work

17. A number of projects provide a range of youth work support in partnership with the community and voluntary sector. They cover a wide range of activity working directly with young people within communities who have been harmed by paramilitary gangs and/or those who are most at risk of becoming involved in paramilitary activity.

Evaluations^[7] of youth work focused projects in 2021 and 2022 found that:

- 87% had experienced at least one difficult life event;
- 58% self-reported having a previous mental health issue, compared to around 16% in the general youth population;
- rates of probable depression (48%) and anxiety (13%) were also higher than population estimates - 16-40% screened positively for probable PTSD and most had witnessed violence;
- exposure to violence, particularly in the home and community (including from paramilitaries), was strongly associated with mental health issues - young men exposed to violence tended to have greater effects on their mental health compared to young women;
- those who experienced violence in the home were over 5 times more likely to report a mental health issue compared to others; and
- one study showed that even in these contexts of pervasive threat, young people can be protected by having positive social supports.

Aspire

18. Aspire is an award-winning project working with boys and men on the edges of the justice system and most at risk of becoming involved in paramilitary or criminal activity. It supports them to develop alternative coping mechanisms and aims to increase resilience.
19. Aspire provides a dedicated probation team for boys and men under probation supervision who meet agreed criteria; a mentoring programme for those leaving prison and for those in the first 16 weeks of community sentence; and, for those who are not in the criminal justice system, a range of community-based interventions, including restorative justice approaches.
20. A 2023 evaluation of Aspire^[8] found a strong relationship between exposure to paramilitary violence/threats and mental health issues. Among the boys and men in the sample:
 - 94% reported paramilitary threat/intimidation and violence, beginning at age 13 on average;
 - the young men described traumatic experiences like physical assaults, shootings, property damage, and exploitation by paramilitaries;
 - nearly all participants (94%) showed evidence of mental health issues, with 50% having an actual mental health diagnosis; and
 - only 11% had received any kind of trauma assessment or supports.

21. Participants described trauma symptoms consistent with diagnosable disorders like PTSD, including intrusive memories, anxiety/depression, hyperarousal, and avoidance. Without treatment, many turned to maladaptive coping mechanisms to deal with their trauma symptoms and stress. Without support, trauma symptoms appeared to contribute to further justice system involvement and poor psychosocial outcomes.

Communities in Transition (CIT)

22. This project sustains the efforts to build capacity and support in communities which have traditionally been most impacted by paramilitary activity and coercive control. Work has focused on key themes, including health and wellbeing. While mental health has not been a specific focus for this project (it contributes mainly to community resilience within the Programme), it has been raised as a concern in many of the areas^[9].

A preliminary report in 2022 showed:

- 4,916 mentoring one to one support sessions were provided through CIT;
- 20 Chatty Benches were installed, with 18 organisations receiving mental health & suicide prevention training;
- 10 community development and health cafes were established across the 8 CIT areas, Dealing with mental health and other health & wellbeing issues;
- 93% of participants advised that the CIT project they were involved in had enabled them to get the help and support they needed; and
- several CIT delivery partners received level 1 training in trauma informed practice.

23. CIT areas have been affected by multiple social issues as well as pervasive paramilitary presence and control, including cycles of deprivation; high levels of drug and alcohol abuse; mental health needs and a lack of support services. CIT's response has included counselling, mentoring, complementary therapies, mindfulness, and physical fitness.

Fresh Start in the Community

24. The Fresh Start through Sport project is part of the Fresh Start in the Community initiative. It aims to engage young people aged 16-24 from areas experiencing multiple deprivation, who may be at risk of becoming involved in paramilitarism and/or organised crime. The underlying concept is that engagement through sports can serve as a catalyst to motivate young people to develop agency, self-confidence, and self-efficacy through opportunities for physical activity, sports-based learning, and person-centred support.

A 2023 evaluation^[10] of the Fresh Start in the Community project found that:

- 14% of participants reported having had a mental health issue at baseline - rates were higher among victims of violence and paramilitary threats;
- 14% screened positively for probable depression and 22% for probable anxiety at baseline - rates were higher among older participants and females for anxiety;
- exposure to violence, whether as a witness or victim, was associated with poorer mental health outcomes;
- sessions on mental health topics like depression and ADHD were enthusiastically received by participants;
- the sports activities and resilience training were seen as beneficial for participants' mental health and resilience; and
- facilitators acknowledged mental health is a common issue and it would be valuable to incorporate more content on it delivered by mental health professionals.

Conclusions

25. The link between exposure to violence and poor mental health and wellbeing outcomes is well established. Programme-funded research is enhancing this evidence base with data from interventions in Northern Ireland working mainly with young people and women in areas most affected by paramilitary activity. The link between paramilitarism and mental health is complex: sometimes poor mental health can be a protective factor from violence and exploitation; sometimes it is a risk factor; sometimes it is a symptom of exposure and sometimes it is a combination of these factors.
26. It is important that this connection, with all its nuances and complexities, is more widely discussed and understood, so that those delivering interventions or developing mental health strategies are cognisant of the particular nature of violence experienced in Northern Ireland, including the high levels of exposure to trauma within communities. This could mean, for example, considering the inclusion of trauma screening measures as standard.
27. The Programme will continue to advocate for a trauma-informed response with all projects and is also currently supporting the Safeguarding Board NI in scoping the potential for Northern Ireland to become a Trauma Informed Nation: something which would embed trauma sensitive approaches across all services. A summary of the data relevant to mental health issues is included at Annex D.

Annex A: References

1. Local Government Association, (2018), *Public health approaches to reducing violence*, https://www.local.gov.uk/sites/default/files/documents/15.32%20-%20Reducing%20family%20violence_03.pdf
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3. Bellis, Mark & Hardcastle, Katie & Hughes, Karen & Wood, Sara & Nurse, Joanna. (2017). *Preventing Violence, Promoting Peace - A Policy Toolkit for Preventing Interpersonal, Collective and Extremist Violence*
4. What are ACEs? (safeguardingni.org)
5. Bunting, L., McCartan, C., Davidson, G., Grant, A., McBride, O., Mulholland, C., Murphy, J., Schubotz, D., Cameron, J., & Shevlin, M. (2020). The Mental Health of Children and Parents in Northern Ireland: Results of the Youth Wellbeing Prevalence Survey. Health and Social Care Board. <https://pure.qub.ac.uk/en/publications/the-mental-health-of-children-and-parents-in-northern-ireland-res>
6. Walsh, C. (2023). *Developing women in the community. Programme evaluation.*
7. Walsh, C. (2022). *Accelerators: Targeted Youth Services' Contribution Towards the Attainment of Multiple Sustainable Development Goals (SDGs)*. Queen's University Belfast and Education Authority and Walsh, C. (2023). *Disrupting the cycle of youth violence: the role of social support for youth in a Northern Irish youth work programme*. Journal of Child & Adolescent Trauma. <https://doi.org/10.1007/s40653-023-00529-x>
8. Walsh, C., & Cunningham, T. (2023). *The pains of paramilitarism: The latent criminogenic effects of exposure to paramilitary violence among young men in a post-conflict society*. Journal of Child & Adolescent Trauma. <https://link.springer.com/article/10.1007/s40653-023-00516-2>.
9. Sturgeon, B., & Bryan, D. (2021). *Communities in Transition: Mid-term Review: November 2020* and <https://cooperationireland.org/projects/communities-in-transition-area-reports/>
10. Coyle, B., Murray, C., & Walsh, C. (2023). "A Whole New Experience": *An Evaluation of Fresh Start Through Sport 2022-23*.

Annex B: Benefits Realisation Framework

Benefits are the positive and measurable changes our outcomes that the Programme wants to achieve. The diagram below (Figure Five) shows the Programme's strategic objective and the changes that need to be brought about if this objective is to be realised.

The Programme's projects have all been selected because they contribute to at least one of the 18 intermediary benefits listed here.

The collective impact of the projects, if they are delivered well, focused on the right issues and based on robust data, should help realise the intermediary benefits. This work is co-ordinated by three Benefits Realisation Groups (BRGs) and the BRG Leads Co-Ordination Group.

Realising individual intermediary benefits amounts to progress in itself and the more intermediary benefits realised, the better able the Programme is to influence change at population level - these are the 5 measurable End Benefits identified in the diagram.

Changes in trends at population level are not wholly within the gift or control of the Programme. Project outcomes have a role to play but population level trends also need to address wider strategic risks, dependencies and opportunities that extend beyond the Programme.

Throughout Phase 2 of the Programme (2021-24), data at project, programme and population level has been gathered and analysed to understand impact.

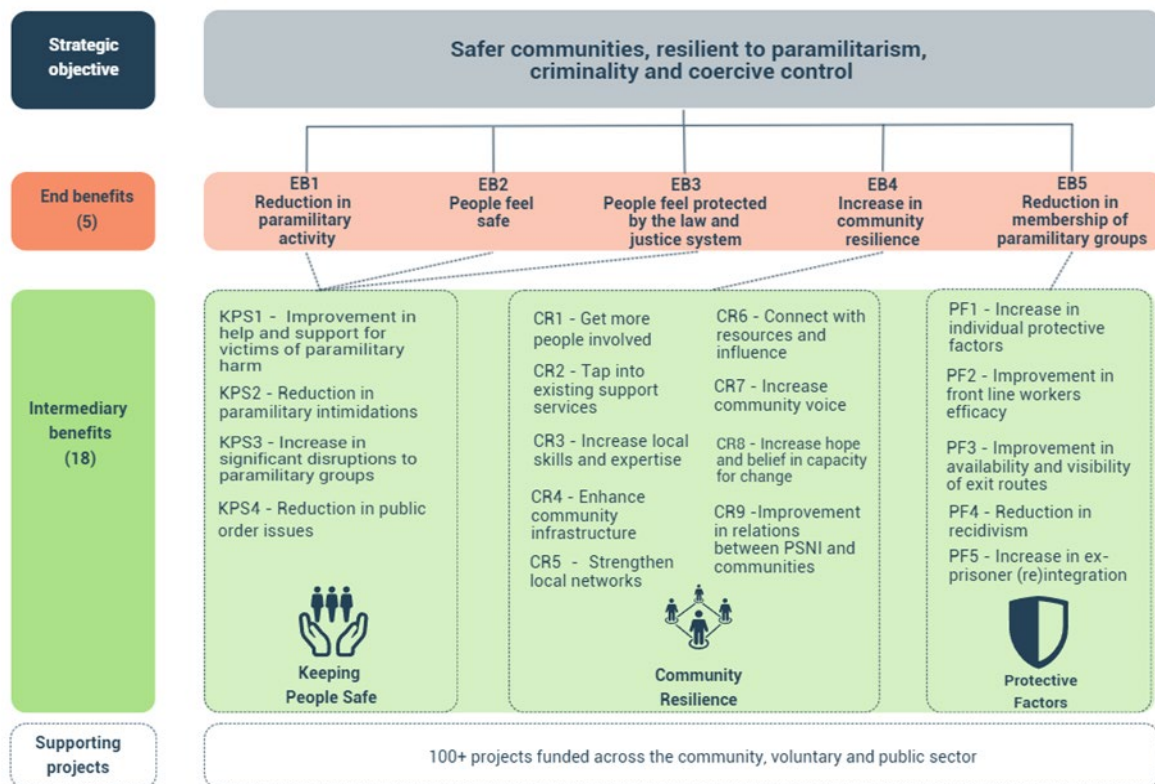


Figure Five: EPPPOC's Benefits Realisation Framework

Annex C: Project Descriptions

Support for Victims of Paramilitary Violence

This project aims to identify victims through multiple outreach channels. It provides support to individuals on a range of issues, most pressingly trauma or counselling support, but also with issues such as drug misuse, debt, self-esteem, training and employment, access to benefits, housing and family relations. This involves mentoring and/ or signposting to other services. The project also aims to build capacity among service providers to work with victims.

Locations: NI wide.

Delivery: Community and voluntary sector.

Wrap Project

This is a wrap-around, flexible education service, delivered in in four geographical areas, to children and young people facing significant challenges. It focusses on educational under attainment, which is key to tackling paramilitarism, criminality and organised crime and, in particular, the impact which socio-economic disadvantage has on children and young people's outcomes.

Influencing community attitudes to education and raising aspirations is key to both reducing educational underachievement and tackling paramilitary activity and organised crime.

Locations: East Belfast, South Belfast, Rathcoole & Monkstown, Derry/ Londonderry.

Delivery: Community and voluntary sector lead.

Mid and East Antrim (MEA) Youth Support Hub

This project involves the creation of a multi-agency youth stream of the existing MEA Support Hub to support young people (up to 25 years) who are at risk of being involved with, influenced by, or exploited by paramilitary gangs. The project has a role in achieving a range of benefits, including, potentially, a reduction in threat to life warnings; improvement in relations between PSNI and communities; victims receiving effective help and an improvement in individual protective factors.

Location: Mid & East Antrim.

Delivery: Multi-agency/statutory.

Centre of Restorative Excellence

Supporting the appointment of an interim Restorative Practice Champion for Northern Ireland to take forward the work of establishing CORE. Links to wider Programme initiatives, benefits and enablers including community resilience and trauma informed practice.

Delivery: statutory (DOJ).

Youth Work

Targeted, bespoke youth work support in specific geographical areas/ settings.

ENGAGE - Intensive, specialist outreach and mentoring working with young people within communities at risk of being harmed by paramilitaries.

RAPID - Agile responses during times of community tensions and social unrest.

Supporting Youth through Engagement (SYTES) - A partnership with PSNI in schools and communities to engage vulnerable young people from key areas.

Youth Voluntary Academy (YVA) - Lawfulness programme cofacilitated with PSNI and Youth Service with peer groups.

CONNECT - Programme to place youth workers in Emergency Hospital Departments to support vulnerable young people and reduce the physical and social effects of violence.

Youth Implementation Action Group (YIAG) - This is a mechanism for PSNI to consult and engage with young people on current policies that have an impact on their experience with policing.

Y-Box - A co-produced, evidence-informed model for the prevention of youth violence among young people.

Capacity building - Puts training programmes in place to build the capacity of Youth Workers and teachers in developing initiatives to deal with the effects of paramilitary activity.

Locations: Across NI in line with Regional Assessment of Need.

Delivery: Statutory /community and voluntary sector partnerships.

Young Men in the Criminal Justice System

The Aspire project targets marginalised young men who are most susceptible to paramilitary/ criminal influence and, therefore, most at risk of becoming involved in paramilitary or criminal activity. It aims to help them develop alternative coping mechanisms and increase their resilience.

Locations: NI wide.

Delivery: statutory / community and voluntary sector partnerships.

Developing Women in the Community

This project provides women with the skills, knowledge and confidence they need to become influencers and to take on roles such as leadership and decision making in their communities. It targets women of all ages and is delivered within the community, in areas which have been identified as areas where paramilitary influence is prevalent.

Locations: Ards, Coleraine, Macedon, Court & Oldpark, Black Mountain, Waterside, Ballyarnett, Titanic.

Delivery: Statutory (DfC), community and voluntary sector.

Young Women in the Criminal Justice System

'Engage' is the provision of a dedicated resource to support women who have offended and help them to make the transition back into local communities. It works with women both in custody and in the community to build resilience and equip them with the skills and learning to withstand paramilitary influence when they exit the criminal justice system.

Delivery: Statutory / community and voluntary sector partnerships.

Communities in Transition

This project sustains the efforts to build capacity and support in communities which are most impacted by paramilitary activity and coercive control.

Work to date has focused on seven key emerging themes: Community Safety and Policing; Addressing the needs of young people; Health and Wellbeing; Environment and Culture; Community Development Issues; Restorative Justice and Restorative Practice; and Personal Transition.

Locations: Derry/Londonderry; Carrickfergus/Lame; North Down, Lurgan/Craigavon; North Belfast; East Belfast; Shankill; and West Belfast.

Delivery: Statutory (The Executive Office) and community and voluntary sector partnerships.

PSNI Community Safety

This project aims to ensure that the Police Service can fully contribute and play its part in addressing the complex ecosystem of issues that affect community relationships and trust in policing, the criminal justice system and other statutory functions.

It aims to develop activity and PSNI capacity (including problem solving) in support of violence and harm reduction, through long term prevention work. It adopts a public health approach using

targeted interventions to test and refine approaches and deliver benefits in affected groups and areas.

Locations: Carrickfergus; Larne, East Belfast, Ards & North Down, Mid & East Antrim, Belfast, Lisburn & Castlereagh, Antrim & Newtownabbey, Newtownabbey, Derry/Londonderry Armagh, Banbridge & Craigavon, Mid Ulster.

Delivery: Multi-agency/ statutory.

Paramilitary Crime Task Force

The PCTF is a Law Enforcement Task Force consisting of the Police (PSNI), the National Crime Agency (NCA) and His Majesty's Revenue and Customs (HMRC). This collaboration allows each Agency to share resources, capacity and capability with the singular aim of frustrating, disrupting and dismantling paramilitary organised crime gangs through a robust law enforcement response, thereby contributing to making people and communities safer from the harm caused by paramilitarism.

Locations: Belfast, Mid & East Antrim, Ards & North Down, Causeway, Coasts & Glens, Derry City & Strabane.

Delivery: Statutory.

Trauma Informed Approaches

This project continues to embed an ACE aware and trauma responsive system in Northern Ireland and improve outcomes for children and adults.

Delivery: Statutory.

Child Criminal Exploitation Infrastructure Support

The purpose of this proposal is to secure additional resource to assist with delivery of the CCE implementation plan through the appointment of a temporary professional officer in the SBNI.

Delivery: Statutory.

Fresh Start in the Community

These projects aim to promote lawfulness and active citizenship to individuals, and build capacity and relations within communities.

The Conflict Resolution projects work with hard to reach/ at risk young people, their parents/carers and those in the community to address issues such as anti-social behaviour, and to develop community ownership and capacity building.

Fresh Start Through Sport uses engagement through sport for those on the edges of the youth justice system who are vulnerable to paramilitary harm and influence.

Locations: Belfast, Derry/Londonderry, Lurgan, Carrickfergus.

Delivery: Statutory / community and voluntary sector partnerships.

Drug Related Intimidation Response Scoping

This proposal is to scope a service response to the issue of drug related intimidation using learning from the Drug Related Intimidation and Violence Engagement project (DRIVE) and the Drug Related Intimidation Reporting Project (DRIRP) in Ireland and from learning generated through the Programme.

Delivery: Statutory.

Community Intervention to Reduce Violence (CIRV)

This initiative is scoping a focused deterrence response to reduce violent behaviour among suspected or known gang members and those at risk of gang involvement or criminal exploitation. This uses learning from various Community Initiative to Reduce Violence (CIRV) and from learning generated through the Programme.

Delivery: Statutory.

Annex D: Summary of data relevant to mental health issues

Project	Paper	Anxiety	Depression	Mental health	PTSD
Developing women in the Community	Developing women in the Community: Programme Evaluation (Walsh, C. 2022)	55.10%	51.50%		
Developing women in the Community	Developing women in the Community: Programme Evaluation (Walsh, C. 2023)	53.50%	48.70%	87.70%	
Youth work	Accelerators: targeted youth services' contribution towards the attainment of multiple sustainable goals (Walsh, C. 2022)	12.70%	48.30%	58.30%	16.40%
ASPIRE	The Pains of paramilitarism: the latent criminogenic effects of exposure to paramilitary violence among young men in a post conflict society (Walsh, C. & Cunningham, T. 2023)			94.40%	
Youth Work	Disrupting the Cycle of Youth Violence: the role of social support for youth in a Northern Irish youth work programme (Journal of Child and Adolescent Trauma)				40.10%
Fresh Start through Sport - Fresh Start in the Community	A Whole New Experience: An Evaluation of Fresh Start Through Sport 2022 – 23 (Coyle, B., Murray, C., & Walsh, C. 2023)	22%	14%	14%	