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Trauma-Informed Justice: Evaluating the System Impact of Reach Out

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Executive summary

Trauma plays a profound and pervasive role in shaping women’s offending and their subsequent pathways through the criminal justice system. The majority of women involved in the criminal justice system are survivors of gendered violence, including domestic abuse and sexual violence, with many subjected to abuse from childhood. These abuses create complex emotional, psychological, and social challenges associated with trauma, which can contribute to cycles of reoffending.

New Dawn New Day (NDND) developed Reach Out in response to high numbers of women not completing mandated community-based criminal justice requirements. Initially funded by Ministry of Justice for two years from April 2023, NDND designed the Reach Out programme to explore whether addressing the gender-based trauma underlying offending behaviours would increase the number of women able to complete community sentences and out of court resolutions. To achieve this, Reach Out provided longer-term, more intensive, trauma-informed support for women identified as unable or unlikely to engage in the completion of community sentencing. It was an approach described as “invaluable” by a referring probation officer.

Evaluation aims and approach

Heard Consulting was commissioned to evaluate the impact of Reach Out. The evaluation sought to provide insights and lessons to inform the development and delivery of future services for women in contact with the criminal justice system, and inform a wider understanding of what works and value for money. Evaluation was conducted in 2024-25.

Findings

Client profile and need

Amongst the cohort of women disengaging from the criminal justice system, Reach Out identified three ‘roots’ common to many cases, which shaped the histories of offending and disengagement:

1. **Trauma and lack of safety** – often beginning in childhood and compounded by material insecurity, deep-rooted trauma in women’s lives was found to drive harmful behaviours and risk of offending.
2. **Crisis tipping points** – exposure to trauma made women more vulnerable to crisis tipping points that triggered offending risks and later potential disengagement from community orders and out of court resolutions.
3. **Unsuitable services** – having offended, referrals to Reach Out were often made because women’s needs exceeded the capacity of mainstream and existing interventions.

The service model

Reach Out functions as a trauma-informed model, which accords with the five principles of trauma informed practice: safety, trustworthiness, choice, collaboration, and empowerment. Together these practices built women’s capacity to engage and to reduce their risk of further offending.

Engagement rates

Four in five (80%) of the Reach Out cohort successfully engaged and sustained engagement to achieve their required criminal justice outcomes. This was a cohort that had otherwise all been expected to disengage (triggering the Reach Out referral).

Outcomes

Successful completion of community orders and out of court resolutions and reduced reoffending were the core programme goal. To achieve this Reach Out’s trauma-informed approach aimed to unlock changes and support clients with other elements of their lives considered essential to reduce the risk of disengagement and reoffending. Reach Out enabled a substantial drop in reoffending to 18%. This compares to a drop to 26% in the recent comparable evaluation of the Together Women service and to 35% in the comparison cohort in the Women Together evaluation (Ministry of Justice 2024)¹. Further outcomes included change to mental health, substance abuse, relationship abuse and exploitation, accommodation and parent and children’s safeguarding.



System impact

After accounting for programme costs, each case generates an estimated net public sector saving of £24,000 within one year, amounting to an estimated £2.4 million across the entire cohort. This consists of:



¹ [It should be noted that post-exit data is not for a full year after exit of Reach Out, when reoffending rates may have risen

Recommendations

Reach Out

1. **Continue delivery:** continue to deliver the Reach Out service, working with funders to secure sustainable ongoing funding
2. **Share:** share and promote the programme with the wider community of trauma-informed practitioners across public services
3. **Broaden step-down support:** seek funding for step-down support to women, to reduce the risk of recidivism on service exit
4. **Continued evaluation:** seek to build on the insights and practice outlined in this early-stage evaluation, ensuring service users have a means of influencing delivery and insights
5. **Post-exit sustainment data:** work with probation and police data to track recidivism 12 and 24 months post exit; liaise with Justice Data Lab to benchmark this data with other services.

Ministry of Justice

1. **Continuation funding:** continue funding of Reach Out using funding agreements of minimum of five years whose terms safeguard flexibility and innovation at the discretion of the provider
2. **Replication and scale:** Replicate the Reach Out model across two or more women's centres, with a view to scaling if outcomes and system impacts and cost benefit are replicated
 - a. Robustly evaluate this replication, including the impact on probation officers, police, and social workers
 - b. Ensure oversight nationally of the pilot – if suitable via the Women's Justice Board
3. **Share:** publish and share the results of this evaluation.

Independent trusts and foundations, including the Corston Coalition

1. **Bridging funding/solutions:** while Ministry of Justice funding remains damaging to women's equity and outcomes, provide offers of bridging funding or other guarantees sufficient to sustain practice and teams, including sustainment of Reach Out
2. **Strengthen trauma-informed focus** use the results of this evaluation to stimulate strengthening of gender-based, trauma informed practice, and wider policy discourse on gender-based abuse as a root cause of public service demand.

Introduction

Trauma plays a profound and pervasive role in shaping women’s offending and their subsequent pathways through the criminal justice system. The majority of women involved in the system are survivors of gendered violence, including domestic abuse and sexual violence, with many subjected to abuse from childhood.

These gender-based abuses create complex emotional, psychological, and social challenges linked to trauma, which can fuel cycles of reoffending. Women offenders – who make up only 4% of the prison population and 15% of those under probation supervision (Women in Prison, 2022) – are placed in a system not designed for them. As Prison Reform Trust (2018) observes, “women have been described as ‘correctional afterthoughts’ in policy, planning, and services,” with the criminal justice system largely built around male patterns of behaviour and risk.

Nearly two decades after the Corston Report (2007) called for a radical, woman-centred reform of the criminal justice system, evidence continues to show the need for gender-specific, trauma-informed approaches. The government’s Female Offender Strategy recognises that generic interventions fail, and that tailored support is more effective (Ministry of Justice 2018). Black, minoritised, and migrant women face added disadvantage through the “double deviance” of gendered and racialised discrimination (Women in Prison 2022). With trauma at the heart of women’s offending, failure to address its roots and impacts risks reoffending and re-traumatisation.

New Dawn New Day and the origins of Reach Out

Founded over 30 years ago, New Dawn New Day (NDND) provides holistic, wraparound support to women and girls affected by poverty, trauma, abuse and the criminal justice system in Leicestershire. Working alongside statutory services, including co-location with probation, NDND offers a safe, gender-responsive, trauma-informed environment where women can begin to transform their lives.

NDND developed Reach Out in response to the persistent challenge of a significant proportion of women with complex trauma and related high needs struggling to engage and achieve positive outcomes. From 2021–2022, nearly 25% of women referred to NDND disengaged and were subsequently returned to the Police or Probation, often escalating to court proceedings or custody. Reach Out received two years of funding from the Ministry of Justice Interventions Fund in April 2023 to take on probation referrals for women identified as at risk of non-completion of community orders and out of court resolutions or reoffending.

Evaluation aims

Heard Consulting was commissioned to evaluate the impact of the Reach Out. The evaluation sought to provide insights and lessons to inform the development and delivery of future services for women in contact with the criminal justice system, and inform a wider understanding of what works, value for money and good practice for other local, regional and national stakeholders.

Methodology

Evaluation of Reach Out took place in three stages in April and August 2024, and April-June 2025. An evaluation framework was designed against the project’s theory of change (see [Appendix B](#)). Data and insights were gathered through:

Data review

NDND provided data on all completed cases (n=98) where women had given permission for anonymised data sharing (n=75). Data was collected in accordance with the theory of change and included:

- Demographics
- Service usage and referrals
- Assessment and self-assessment data on referral and exit including:
 - The 14 item Short Warwick-Edinburgh Mental Well-being Scale (SWEMWS)
 - A strengths and needs self-assessment based on the Probation Offender Assessment System (OASys)
 - Changes to housing, employment, safety, drug and alcohol use, and children’s safeguarding status.
 - Community order status
 - Reoffending rates.

Client interviews

Two rounds of interviews were conducted in August 2024 and May 2024 with the same group of 7 service users (5 of whom were available for the second interview). All interviews were in person at NDND, except 1 online.

Staff workshops

In April 2024 an in-person theory of change workshop was held with the Reach Out team, probation, and two service users.

In August 2024 all three members of the Reach Out team and the NDND COO attended a three hour in-person workshop to discuss findings from the data review and client interviews, as well as outstanding data gaps.

Staff interviews

Interviews with the Reach Out manager in person and online in April and August 2024, and March, April and May 2025.

Stakeholder interviews

Seven structured 1-1 interviews were held with professionals from Leicestershire County Council children’s social care, police, and probation in August 2024 and April-June 2025.

Limitations

The primary limitations of this evaluation are:

- Staff turnover: this meant a final workshop to review emerging evaluation findings was not possible.
- Courtesy bias: wanting to portray the Reach Out team positively potentially limited the level of critical feedback from service users.
- Timeframe: two-year funding limits understanding of longer-term outcomes and their sustainability.
- Limited comparison data: delays at Justice Data Lab prevented access to comparable datasets.
- Cost-impact data: there is limited cost data available on the wider positive impact of reducing offending on women and their children across the life course.

Structure of this report

The **Profile** section describes the characteristics of the cohort of women referred to Reach Out. It identifies the drivers, or ‘roots’ of these women’s needs and challenges, which the programme aims to directly acknowledge and respond to.

The **Service model** section explains how Reach Out applies a trauma informed approach, and evidences its adherence to the five elements of trauma informed practice. It also identifies four elements of staff culture and structure which staff consider essential to effective programme delivery.

The **Engagement** section covers clients' adherence to the service, and the factors influencing this.

The **Outcomes** section details the results of participation in the programme. It covers criminal justice outcomes and completion of community sentences, alongside outcomes for other areas of women's lives. This is because the programme recognises the connection between these aspects of women's lives, and their interaction with the criminal justice system. These areas are mental health and wellbeing; drug and alcohol use; abuse and exploitation; accommodation; employment, training and education, and financial security; parenting and children's safeguarding.

The **System impact** section assesses the wider social value generated by the programme in terms of cost savings and system efficiency impacts on public services.

The **Conclusions and Recommendations** section assesses the programme's achievements against its aims and objectives. It also provides recommendations to NDND and wider stakeholders to support continuation and take-up of good practice identified in this model, and considers what needs to be in place for this to be replicated in other contexts.

The **Appendix** contains the programme theory of change, and topic guides used in interviews.

Profile

At the time of evaluation (June 2025) Reach Out had supported 98 women. The cohort had diverse offending histories, from one-off offences to routine offending. Women’s histories were commonly weighted with abuse, trauma and disadvantage. A probation officer described this group as “*probably the hardest cohort to engage*”. Women often described the period around their indexed offence and referral to Reach Out as one of deep crisis (“*the darkest time*”) in their relationships, security, or mental health. These histories and stressors were identified by women and Reach Out staff as central drivers of women’s offending behaviours and subsequent barriers to engaging in community orders and out of court resolutions.

Referrals

“Having teams like Reach Out is crucial” – probation officer

Referrals are made when women are judged to be unable to complete community orders, and so additional support is necessary. Referral pathways are:

- Probation – direct
- Just Women – New Dawn New Day group-based project
- NDND Out of Court Resolution Service – if women have barriers to engagement.

Roots of demand

“No one wakes up and thinks they’re going to do something [offend]. No one wakes up and thinks ‘I’m going to be a drug addict today’. There is always a run up and a story” – service user

This evaluation’s research suggests that demand for Reach Out (i.e. offending behaviours and poor subsequent engagement in criminal justice orders) is linked to traumas across the life course. These traumas put women in the way of further disadvantage, affecting their ability to cope with crises – which become tipping points into offending risks (figure 1). Women then enter services with a level of trauma and need that services may be insufficiently designed and resourced to address, resulting in disengagement. These are the three ‘roots’ to eventual referral to Reach Out – described in the following sections.

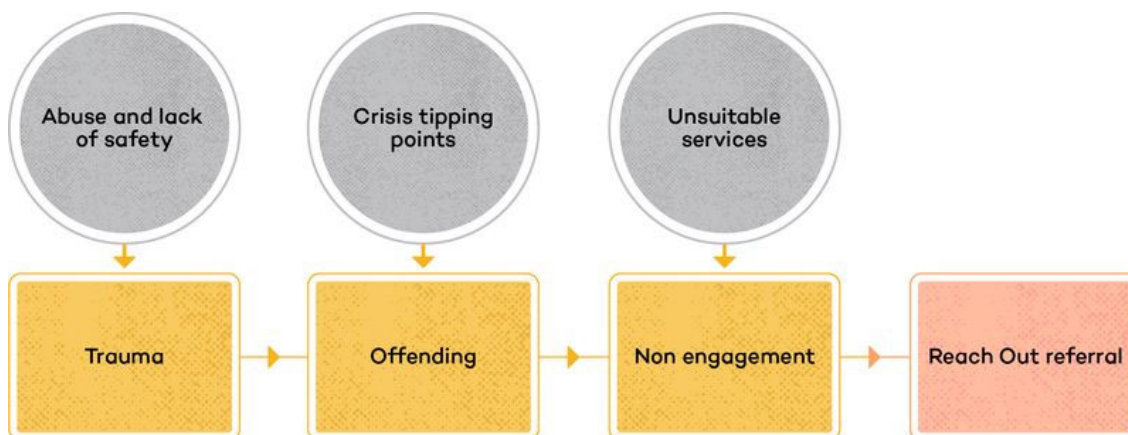


Figure 1: sequence of need resulting in Reach Out referral

1: Abuse and lack of safety

As described, trauma and lack of safety has shaped the lives and behaviours of the women referred to Reach Out. Typically this begins in childhood. Many – staff estimate perhaps close to all – service users are survivors of child sexual abuse. This can embed chronic harm (Independent Inquiry into Child Sexual Abuse (IICSA)

2020). Some women have grown up in families where safety is minimal – where offending behaviours are normalised, or as children they were removed into state care for safeguarding (Prison Reform Trust 2022). The experience can imprint a lack of security in relational and environmental security which repeats across women’s lives (IISCA 2020).

These early harms put women in the way of further trauma. Their experiences may affect relationships into adulthood – and ultimately the many offences resulting from conflict, coercion, and volatile relationships (IISCA 2020). Across the cohort subjection to domestic abuse was common. At least one in five (21%) were known to be subject to abuse and exploitation at the time of referral, including sexual exploitation, cuckooing, as well as weaponisation of the family court system (figure 2). Women’s attempts to create safety has resulted in agoraphobic behaviours in a number of women – seeding further tension into their relationship with the world (Salkovskis et al 1999). *“I used to lock myself [in]”* said one survivor of domestic abuse *“and never come out the house”*.

Women presented with high levels of co-morbidity across physical and mental health and cognitive function. Over a quarter of the cohort (27%) had physical disabilities. Physical ill health – such as diabetes, liver damage, ulcers, Fibromyalgia, injury and joint pain from abuse, epileptic attack syndrome – affected two in four (39%) women (figure 2). Undiagnosed neurodivergence was considered by staff to be a common factor affecting women’s relationships and safety, and a likely contributing factor to offending and disengagement. Nearly one in five (17%) women were suspected by staff to have learning impairments (figure 2).

Poor mental health was almost universal, affecting 92% of the cohort (figure 2). This included anxiety, depression, agoraphobia, bipolar disorder, post-traumatic stress disorder (PTSD), panic attacks, emotionally unstable personality disorder (EUPD), and suicidal ideation. Seven in ten women (70%) misused drugs and alcohol, with binge drinking particularly widespread and linked to higher rates of violent index offending within the cohort (Prison Reform Trust 2009). Interviewed service users described this as *“self-medication”*, often linking it directly back to adolescent coping responses to trauma (Centre for Justice Innovation 2023).

Service users’ descriptions of survival behaviours developed in response to abuse extended to violence and relational conflict. These were seen as coping mechanisms. One woman, charged with actual bodily harm (ABH), explained: *“If a man was aggressive to me, my instant reaction was to fight.”* She identified this as the result of having to protect her mother as a child. She went on to note that while this has negative effects it has also been a necessity in her environment: *“If I hadn’t learned that as a child, I probably wouldn’t be here.”*

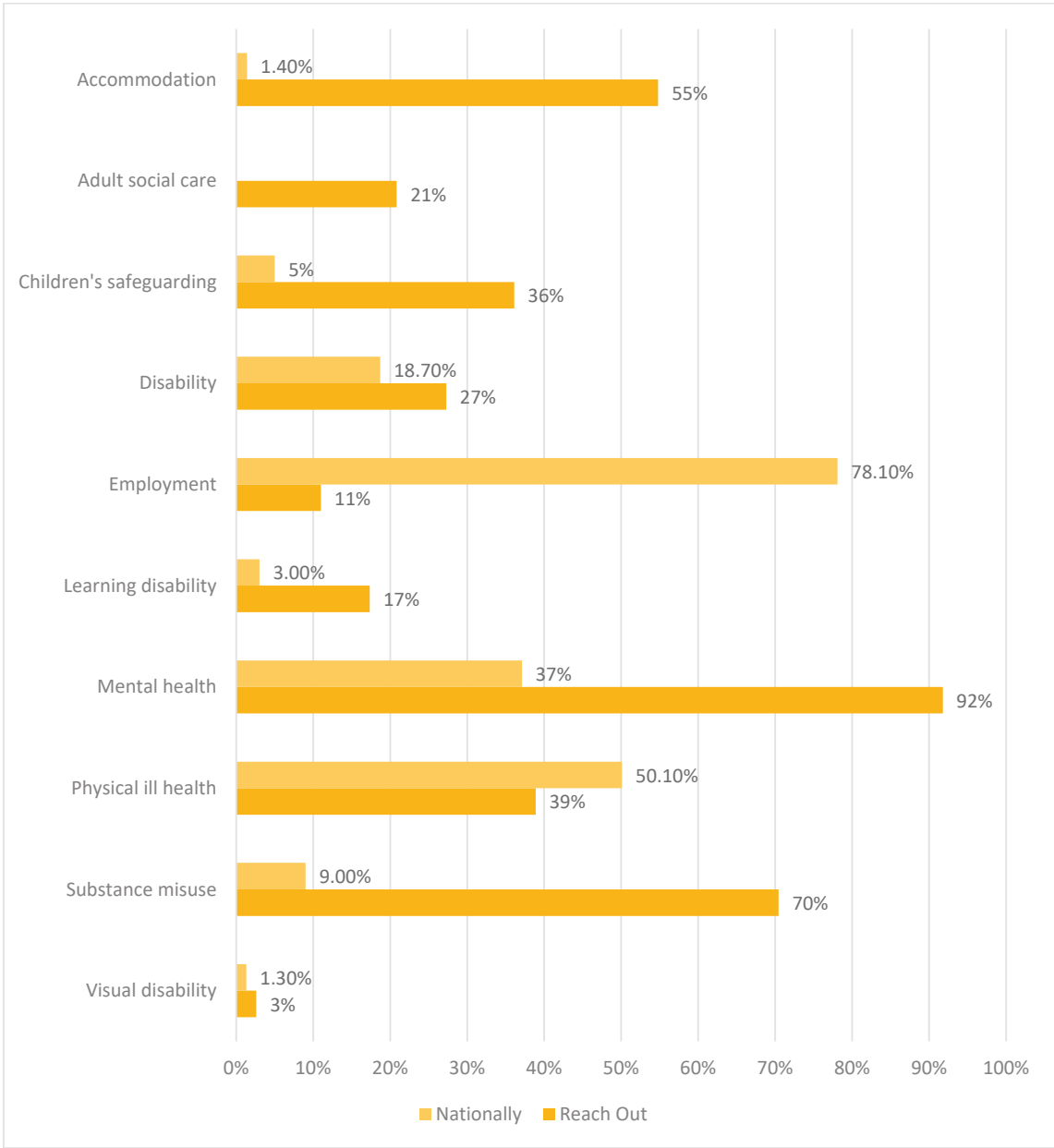


Figure 2: comparable rates of needs between Reach Out cohort and estimated England adult women population (n=various)

Disadvantage fed a material insecurity running through women’s lives. This undermined their capacity for action, and access to safety. Staff identified the cost of living crisis as a compounding pressure undermining women’s stability and security. Four in five women (78%) were unemployed on referral (figure 2). Over half (55%) were living in insecure and unsuitable housing, including subjection to street homelessness, ‘cuckooed’ tenancies, and temporary accommodation including hostels. In more than a third (36%) of cases safeguarding concerns had resulted in children’s social care involvement in women’s relationship with their children. This included the removal of children- or risk of removal – and the resulting trauma and volatility this created.

2: Crisis tipping points

“A lot of offending is women retaliating because they’re fearful. Trapped, shamed, humiliated – all of the above describe our clients” –team member

Abuse, trauma, and disadvantage made women were vulnerable to tipping points – normal and abnormal life events – which exceeded their capacity to cope, and were often the trigger for conflict and harmful behaviours which resulted in offending (Liddle 2016). Service users – including long term offenders – described the time leading into Reach Out as one of particular crisis. *“I thought, ‘this is the end’”,* said one woman. Another stated, *“I was ill – that wasn’t me at all”*. A third recalled, *“my mum had died, and I lost my mind”*.

Women described tipping points into their offending often being rooted in threats to the security of their relationships. Foremost were threats to relationships with their children, whether from abusive partners, family courts, or children’s safeguarding. One woman described the removal of her children by their father as, *“Absolutely horrific. I felt beaten, battered and just on the floor. For me it was the end of the world, I live for my children”*. She went on to attempt suicide.

These risks to the mother-child relationship are gateways to further adversities, compounding parenting and mental health difficulties and triggering negative coping strategies – including potential offending (Broadhurst, 2020). Bereavement, the breaching of safe physical spaces, and subjection to perceived prejudicial treatment by statutory services were all described by interviewed service users as triggers for offending. Women’s lack of safety led them to be trapped in what Reach Out describe as *“fight or flight”*, making them vulnerable to conflict with family, neighbours, and associates. *“Violence happens when their safe space is breached”*, described one team member, citing the example of an agoraphobic-presenting service user charged for kicking a police car after the police entered her home to arrest her son.

Service users described the exhausting stress of trauma and its impact on their daily lives. They recalled its effect on their cognition, trust, and ability to process events and perceive their own behaviours and choices. There was a sense of being continually pushed to an edge, and a lack of agency and safe and effective skills to address these challenges. The disadvantages in their lives made them vulnerable to further crisis tipping point into reoffending – conflict with neighbours, abusive partners who file malicious complains, public attacks on their character, and exposure to the criminality of family members and partners.

3: Unsuitable services

*“Temporary accommodation and getting evicted has put a hold on me moving forward.
Not knowing where I’ll be from one day to another” –service user*

Women were referred to Reach Out when at risk of non-compliance and disengagement with community sentences. This was despite good practice identified in probation by Reach Out staff and service users, Disengagement was shaped by women’s historical interaction with statutory services - experiences that has been negative. Service users cited experiences of disruptive or failed safeguarding experiences as children, of being placed in care themselves, of having their children placed in care, and of experiencing the judgement and punishment of the criminal justice system. Interviewed services users and staff identified repeated incidents of prejudicial treatment by statutory services which women described as making them feel shamed. These experiences could be so damaging that one woman cited it as a trigger for an attempted suicide.

As is widely reported in research on service responses to vulnerable women, austerity-driven service retrenchment has resulted in extensive gatekeeping against women’s needs (Equality and Human Rights Commission 2018). Often this is felt and evidenced to be prejudicial (Imkaan 2023). Staff and stakeholders described a system that responds poorly to traumatised women. Staff observed a lack of available specific provision for women’s needs, including, *“catch all”* EUPD diagnoses by mental health services; a lack of specific services for binge drinking; mandated programmes whose structural demands exceed women’s capacity; and group-work as the default in many specialist services.

The housing crisis is identified by Reach Out staff as the greatest single barrier to women’s capacity to engage services. In over half of cases (55%) women lacked safe, sustainable, and suitable accommodation. As one staff member described, if women don’t have somewhere to wash their clothes, somewhere to eat and sleep, they won’t have the necessary capacity to engage services, particularly mainstream services not built around their needs.

Case example: the impact of unsuitable services

“I did seek support and help for many years and was failed by many people”

This woman had been known to mental health services from aged 14 but only received a diagnosis of bipolar disorder when the state removed her children into care. *“I even walked into social services when my second son was born and asked for help but they wouldn’t give it to me, and months later they took the boys into care”*, she recalls. Now in multi-year family court proceedings with her abusive ex-partner, she talks of *“going through it again and the social worker talking these things about me – [that] I don’t deserve to have my children in my care. It’s been a s**t time and I’m still going through it”*.

This woman is a first-time offender, charged with actual bodily harm (ABH) against her ex-partner’s sister during their child custody dispute.

Service model

“We have been voices, faces, real people, who have listened to them, heard them, understood without judging them, and understood no matter what they’ve done” – team member

This chapter explains how Reach Out functions as a trauma-informed model to address the roots of gender-based trauma underlying women’s offending and service disengagement. Using staff and service user reflections, it describes the Reach Out model in terms of the five fundamentals of trauma-informed practice: safety, trustworthiness, choice, collaboration, and empowerment. It also explores how culture and structure within the Reach Out team enabled this practice.

Trauma-informed model

“I felt I had a friend and that’s how you’re meant to feel. I like talking to her on a deeper level when I’m angry or distressed” – service user

Reach Out accords with the five principles of trauma informed practice: safety, trustworthiness, choice, collaboration, and empowerment. This is illustrated by the aspects of its practice and behaviours, set out in figure 3 (below).



Figure 3: Reach Out’s alignment with the five components of trauma-informed practice, as described by service users and staff

Safety: Physical and Emotional

“My experience with them has been absolutely brilliant... this safety is really crucial for women” – probation officer

Criminalisation can create feelings of lack of safety (Women in Prison 2024). Reach Out sought to create safety by being relatable, accessible, and normalising women’s experiences. Staff aimed to increase women’s internal safety – from which they can build safer choices – by reducing women’s feelings of shame and othering affected by the criminal justice process. Describing how this was achieved, one team member explained, “We don’t say we understand – we haven’t walked their life. But we might say, “I’ve had a client go through something similar...” to normalise it and reduce shame.” A probation officer who repeatedly referred to Reach Out noted the “big difference” it made for women to have “people she can go to who aren’t judgemental”.

Physical safety was generated by the accessibility of the service across different sites. This included the NDND office which is women-only, centrally located, and set out to centre informality and comfort. Service users described their willingness to drop in informally. One woman – subject to insecure housing – termed the

NDND office her “sanctuary”. Accessibility meant increasing flexibility to compensate for the inflexibility often present in women’s lives. Many women faced barriers to travel, from costs and logistics, to the reluctance to pass through public spaces related to unsafe histories and associates. Outreach was therefore core to the Reach Out offer. Made possible by low caseloads of 24 cases per team member, women were able to be met in their own homes and neighbourhoods – which substantially enabled engagement.

A probation officer described this approach to accessibility and safeguarding as Reach Out going “above and beyond – being there in crisis, and on the end of the phone”. A police officer noted how rare this access and safety is: “They provide a safe place for somebody to talk to and disclose. Without them, she is just AWOL”.

Trustworthiness: Consistency, Boundaries, and Modelling Safe Relationships

“It takes a lot for me to trust them. But I do” – service user

Trust is an important component of sustained service engagement (Sheil, Rogerson and Storey 2025). Service users described feeling trust in the service build from its consistency and clear boundaries. “She comes round every week... She says what she’ll do and I’m prepared to do things for myself”, described one service user. This contrasted to women’s accounts of lack of trust in other services: “The new social worker doesn’t listen to me – doesn’t believe me. But [staff member] has my back”; “I’ve had a few of these [services] before and never got nowhere with them... When [staff member] came round... I felt instantly I would get along with her.”

Consistency was generated by the wraparound service model which meant women could have a number of interlocking stressors and needs addressed together. Added to this was the reliability of staff. “She always does what she says and she gets things done,” one service user said – an insight echoed across multiple accounts. The success of advocacy with other services furthered women’s trust. Examples were given in which Reach Out helped women navigate evictions, facilitated their placement into appropriate supported living, successfully challenged social care decisions, and secured mental health assessments.

“What you see is what you get,” said one service user. “And that’s what you need from someone.” Appreciation for the direct, bounded manner in which the team engaged with women was repeatedly raised by service user interviewees. The frankness with which the team spoke with women was considered fair – and that built credibility. Women describe workers being “straight to the point” and “firm but fair”. Boundaries were enforced and women’s ability to make choices was respected. As one woman explained: “If someone wasn’t that straightforward, it would be excusing my behaviour”.

Collaboration and Power-Sharing with Women Using the Service

“They make me feel equal and don't make me feel like I'm convicted. I can talk about literally anything and I'm not being judged. Everywhere else I go I feel like I get judged” – service user

Reach Out aimed to be collaborative with women – and in doing so build skills and capacity. Action and change was enacted with – not to – women. Support plans were co-produced and formal tools and checklists avoided. Sessions start with the open question “How’s your week been?”. “We don’t go in with our own agenda,” one team member said. From the start, women were encouraged to identify their own goals, define their own priorities, and move at their own pace. As one team member said, “It’s their plan, their focus, their goals”. At the end of each session staff contract with service users, asking ‘What can you do and what can I do?’, and confirming this later by text. This built shared accountability – and implicitly, an equality. “I know I’ve done it myself, but she’s helped—she’s run alongside me,” one service user described.

The collaborative approach sought to build women's connectedness. Women felt there was someone on their side, describing staff as: *"Like you're sitting with a friend, but a professional friend"*. This was echoed by another user: *"I have a friend and that's how you're meant to feel. I like talking to her on a deeper level when I'm angry or distressed."* This was highlighted as particularly important by service users, who related this to experiences of isolation in which their offending had often occurred.

The low caseload supported this collaboration, allowing for deep, responsive work that moved at women's own pace. Referring probation officers valued this approach. *"They are a massive source of support, tailored to what women need even over a long time"*, said one.

Empowerment: Building Skills and Women's Opportunity to Process

"Independent: that's how they've made me feel. I don't want to depend on people" – service user

Addressing offending behaviours required women to understand the roots of these behaviours and build alternatives. For some interviewed service users, Reach Out was the first time they had been offered the space to think about why they behaved as they did, and what it might look like to make different choices. This reflection was considered important by staff and by service users. *"I've never had an experience like this before: my decisions are respected"*, noted one service user. She went on to note how this approach was effective: *"Because they advise me on what to do it makes me think a bit more and do it that way and be good. If I'm making the wrong decision I like to learn from that"*.

Women were supported to explore consequences, reflect on patterns, and consider alternatives. One woman shared how this support helped her consider things from others' perspectives and reflect on how she might respond differently to the situations she used to be in. Others described now having developed with their support workers the reflection, perspective and tools to *"calm myself"*, use *"willpower"*, and take *"completely different approaches"* to situations which would previously be offending risks. These skills were discussed and practice around women's potential triggers, including conflict, contact with services, and proximity to drug use. Women were supported to see their patterns and develop alternative tools for coping and emotional containment.

Reach Out sought to connect women with their own voice and right to change: *"Now that I've been told this is not right, I know how to go about my life,"* one woman found. Women were supported to build the practical skills to navigate their rights and needs, and potential crises. This included skills linking them better into support - how to call the doctor, manage appointments, advocate with services. This advocacy was valued by other services, as a probation officer noted, *"These girls are every day putting themselves at some form of risk or another. With other services it's like banging your head against a brick wall whereas with Reach Out its direct contact and they're just at the end of the phone – always patient, always understanding"*.

Choice: Maximising Women's Control Over Their Lives

"If they feel like I'm not making the best decisions they give me options and put me in perspectives that make me understand it clear. I think about things from another perspective" – service user

Reach Out aimed to build women's capacity for action, giving them greater bandwidth to make choices away from offending, and be less vulnerable to contexts with offending risks.

Choice was in-built into the service, from the co-production of support plans, to the collaborative reflection on how trauma and other factors worked to influence women's choices. Service users emphasised the importance of work to reflect on, and build choices around, what constituted safe relationships. *"What I thought was normal she taught me wasn't normal... that's controlling and coercive behaviour... Without the service women wouldn't know it's not normal"*, said one service user, who went on to reflect that this gave her the tools to make different relational choices in the future.

Some cases entailed significant work to reduce women's drug and alcohol dependency – and broaden their capacity for safe choices. Service users described Reach Out supporting them to recognise, manage and mitigate triggers, and gain access to specialist drug and alcohol programmes and in-patient detox.

In interviews women cited the combined components of Reach Out's trauma informed model – particularly the space for reflection, development of coping skills, and address of major stressors in their lives – as enablers of greater control. *"I can choose my own decisions – I've learned that from her"*, concluded one service user.

Culture and structure

Led by a team leader with decades of experience working with women affected by trauma and abuse, the Reach Out culture and structure was designed to facilitate trauma-informed practice. Reach Out sought to enable this by building a strong team dynamic underpinned by reflective practice, a collaborative model of case management, and ensuring the safety of staff.

Team dynamic

"If we are a trauma-informed organisation, we need to display that in the staff team too", said one Reach Out team member, noting trauma-informed principles guided how the team itself worked together.

Time was invested at the start of the project in building team relationships. This provided time to initiate the models of reflective practice and collaborative case work which came to typify the service. Staff described the team dynamic as marked by a high degree of respect, psychological safety, and a shared commitment to collective care and individual wellbeing. *"Genuinely collaborative"*, is how staff described the team of three. All team members separately confirmed the practice of being attentive to one another's capacity, stepping in when someone else was overstretched. As one team member explained, *"Everyone wants the best for each other here. There's a work/life balance. And that's rare"*.

Reflective practice

Fortnightly reflective practice sessions provided structure for the team to process challenges that arose in case work. This recognised the primary importance and impact of staff-user relationships, particularly in work supporting a cohort sometimes surviving in dangerous, often volatile situations. In these sessions the team explored the complexity of their work, as well as how it felt, and tensions or uncertainty that arose. Staff voiced a particular appreciation for the space to explore difficult-to-articulate experiences, including emotional reactions to cases, moments of doubt, and interpersonal dynamics.

Team members cited the value of this to their development and confidence. One commented that since joining Reach Out, *"I've seen the difference in myself. From when I started, my confidence with clients... building relationships now feels completely different to my previous job"*.

Collaborative casework

The team brought to Reach Out professional backgrounds in domestic abuse, mental health, housing and policing. This gave expertise to external advocacy and brought a mix of skills and approaches to each case.

Complex cases often called for collaboration. As well as informal discussion, weekly team meetings – calling in wider NDND teams as needed – addressed complex cases, sharing knowledge and developing strategies. This enabled more dynamic thinking to address entrenched issues, and broadened safeguarding perspectives. Staff described greater confidence knowing colleagues were familiar with and inputting into their cases. As one put it: *“Everyone knows something about the case. We all suggest actions. If someone’s stuck, we draw on each other. I used to be petrified about being off in case my client needed something. But we all know what’s going on with each other’s clients”*. Service users had noted this continuity – remarking on the accessibility to the service.

In cases where personal resonance was too great, or a natural end point had been reached, staff were encouraged to be open about this. In those instances, cases could be handed over to another team member with fresh eyes and renewed capacity.

Case study: joint advocacy

The woman in her 40s had a life-long history of abuse, starting in child sexual abuse and extending into drug addiction, domestic abuse, and the removal of all her children. She suffered with psychosis.

The woman was being exploited and trafficked by drug dealers, and it became apparent that solo worker visits were unsafe: those abusing her were threatening to kill her with guns. The team began joint visits, making use of combined backgrounds in mental health – enabling access to assessments and pathways – and domestic abuse – enabling a push-back against the woman being declared intentionally homeless. There was resistance from services to accept statutory duties. Reach Out brought in police, housing and adult social care and with support of probation secured a place in supported accommodation after another victim came forward and detailed abuse by the same perpetrators. The woman lacked capacity to make safe decisions, and this additional level of support was necessary.

Staff safety

The team manager described safety of staff and service users as paramount. Service users and more frequently their environment and other parties in their lives pose a risk. Safety was dynamic and situational. It was managed through continual risk assessment, open communication, and collective responsibility. Check in calls prior to appointments assessed changing risk, and moved appointments to phone calls if needed. Each day a staff member was assigned to check colleagues in and out of appointments and provide cover if required. Where home visits weren’t safe, neutral locations were arranged in nearby spaces, minimising women’s travel and preserving safety without compromising engagement.

Engagement rates

“It’s all about homelessness. It’s not disengagement – it’s that she doesn’t have anywhere to sleep” – team member

Engagement with Reach Out was a preliminary step that supported women to go on to complete community orders and out of court resolutions, and other outcomes. Four in five (80%) of women in the Reach Out service successfully engaged (figure 4). This exceeds by 5% the rate of engagement with NDND’s wider cohort (75%), which included a lower spectrum of needs.

Engagement with Reach Out was presumed a route to engagement with other services. *“I feel safer now. I now know help is out there, before they were there to punish”*, said one service user who had been in care. Another young woman – also care experienced and whose own children were on course to being removed, said, *“Before I was here, I didn’t want to work with social [services]. Then when I came here [Reach Out] I started working with every single professional in my life. If I can have trust in these [Reach Out], why can’t I trust someone else?”*. This service user was able to keep both her children – and the safeguarding cases for both children successfully closed.

Statutory professionals noted the value of Reach Out’s engagement with women. *“It’s more dealt with in a low level less informal way which obviously the girls also like. It nips things in the bud before it escalates”*, observed one probation officer. Another probation officer notes that the women they’d referred to Reach Out had then had *“amazing”* engagement with probation. *“Without Reach Out they would have failed the requirement of their order and gone back to court”*, the probation officer concluded.

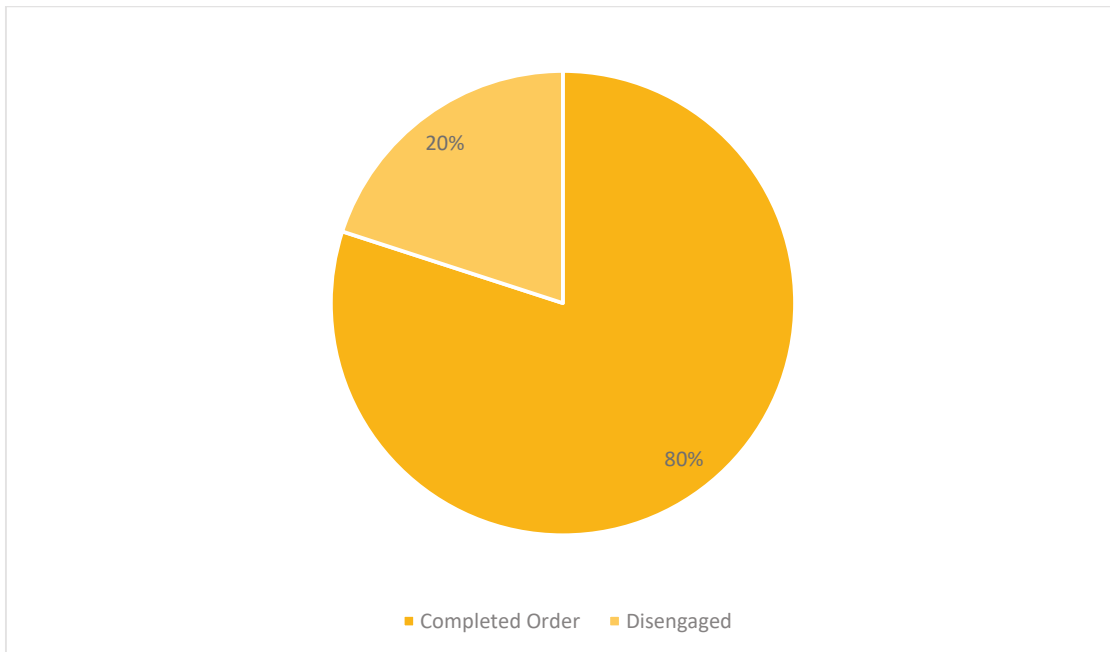


Figure 4: rates of completion of orders versus disengagement (n=70)

One in five women (20%) referred to Reach Out did not engage with the service (figure 4). There are no exit assessments in these cases, so we do not have access to service user perspectives. The staff view is that these cases were primarily those in which women’s capacity to engage was too narrow and unstable, as a result of

the environmental and relational pressures in their lives. Coercion, exploitation, and homelessness were common factors identified by staff in these cases. Staff observed that if women were focused on the daily struggle to eat, wash, and sleep safely, they didn't have space for engaging with Reach Out. Insecure housing was considered to be the most significant barrier to sustained engagement.

Example circumstances of disengagement

Overwhelming relational demands: care experienced young woman whose aunt and sister were also Reach Out service users. She was overwhelmed by the number of agencies and challenging relationships in her life.

Coercive relationships: A woman in mental health crisis resulting from long-term domestic abuse. She would call services and then be too afraid to open the door. She disengaged from all services. A second, neurodiverse woman was cuckooed by multiple perpetrators. She engaged sporadically but ended up with a custodial sentence. She has since moved away with family.

Homelessness: A street homeless woman evicted from temporary accommodation. Re-housing was her priority, but breach of tenancies meant services wouldn't place her and she had no support to manage her drug and alcohol use.

Survival offending: A woman reliant on shoplifting to fund her heroin addiction was unable to stop offending.

Unsafe to staff: A woman with severe unmet mental health needs. She was never met in person because of her abuse to staff. Threats to staff resulted in case closure.

Outcomes

*“If you read my papers from two years ago you’d say, “that’s not the same person”–
service user*

Reach Out was able to support the successful completion of community orders and out of court resolutions, and stimulate other positive outcomes related to offending risks. *“It definitely made a difference to women’s progress”*, observed a probation officer. *“They’re more stable, more engaged, less likely to reoffend”*. This chapter sets out the outcomes achieved by Reach Out, covering reoffending rates, mental health and wellbeing, drug and alcohol use, abuse and exploitation, accommodation, employment, and children’s safeguarding.

Reach Out’s outcomes include:



These results are explored in more detail in the sections below.

Criminal justice outcomes

“I haven’t been convicted since working with Mercedes. Before that I used to be convicted quite a lot. I was a rebel and I didn’t give a shit and would just do what I want. Mercedes makes me think twice” – service user

Reach Out enabled a substantial drop in reoffending to 18% (figure 5). This reduction is 8% greater than the reduction in offending shown in the government published evaluation of a similar pilot by Together Women (Ministry of Justice 2024). It is 17% greater than the reduction in offending by the comparison cohort in the Women Together evaluation. It should be noted however that post-exit data for Reach Out is not for a full year after exit, at which point reoffending rates may have risen.

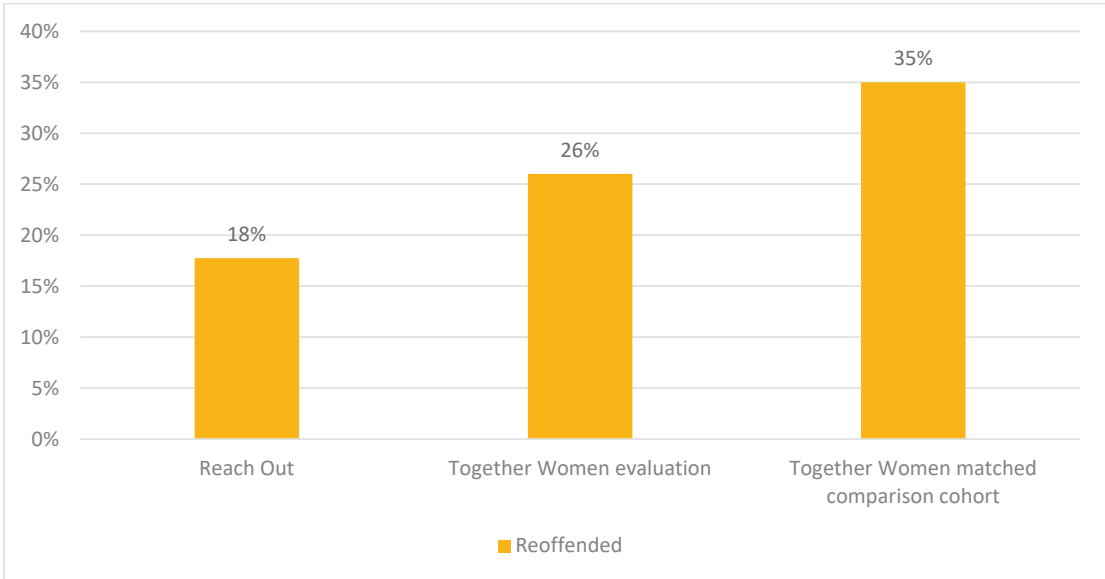


Figure 5: Reach Out reoffending rates compared to Together Women

For women in Reach Out who were already known to Reach Out as repeat offenders, reoffending rates reduced to 27%. Eighty-three percent of the cohort completed their community sentences.

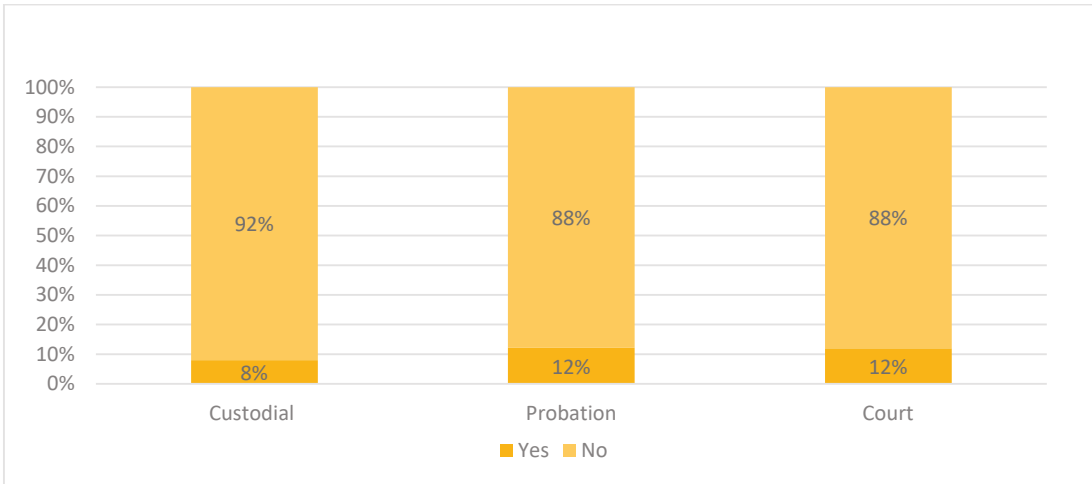


Figure 6: post exit women re-entering probation, court system, and custodial sentences

The reduction in reoffending reduced demand on the criminal justice system. Demand on policing needs reduced as the average number of offences per woman reduced by two-thirds – from three to one. Post-exit 12% of the cohort were re-summoned to court on new matters and returned to probation (figure 6). In two-thirds of these cases (8% of the total cohort) women received custodial sentences (figure 6).

Estimating attribution for the criminal justice outcomes in each case, the Reach Out team in a post exit survey were asked to systematically judge attribution of change for each case. The team estimated 77% of those not reoffending were unlikely to have achieved this without the support of Reach Out. This was echoed by statements made by several service users in interviews that they would have reoffended or returned to prison without Reach Out support. In only 6% of cases did Reach Out judge its support was not material to offending cessation.

Resilience to offending triggers

“I’ve struggled with mental health since I was 14. Alcohol was my way out. I could have dealt with things differently, but I didn’t know how. Now if there is a confrontation I am now the peacekeeper. I don’t judge – I used to but now I know everyone has a story” – service user

Service users described a reduction in their vulnerability to offending triggers. They felt support with relational healing had improved their relationships with themselves and others. They found clearer thinking, increased self-worth, and new tools to practice reflection and perspective increased their and made them less vulnerable to conflict, coercion and control. *“I just gave in on everything before... [but] it has turned around loads”*, recalled one woman.

Women were able to employ learned new strategies to manage anxiety, anger, and difficult interactions. Situations that once triggered anger or reinforced low self-worth—like conflict or confrontation—could now be responded to without offending behaviours. *“Before I would have battered him”*, said one woman describing confrontation by her neighbour. *“But I didn’t. I rang the police. I just thought of my baby. I was upset and angry, but I calmed myself down”*. Previously learned behaviours have been replaced with new learning that enabled more deliberate responses, shaped by a growing awareness of options and consequences, and illustrating women’s increased capacity for action in their lives. Being able to process and think rather than respond straight away were fundamental to ongoing self-advocacy and independence.

Mental health and wellbeing

“I haven’t self-harmed since the service. Three years ago I self-harmed every day. I was on drugs. I didn’t see a reason to live, didn’t see anything in my life” – service user

Poor mental health is a defining factor for Reach Out users and their offences. Almost all women (92%) presented with mental health needs.

In four of five (80%) cases Reach Out achieved a statistically significant improvement in women’s self-reported mental wellbeing measured by the Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS)². Through the course of Reach Out there was a rise in the number of women reporting positive wellbeing (50% to 82%), and a corresponding drop in the number of women reporting low wellbeing (22% to 7%) (figure 7). This improvement in mental health was fundamental to women’s trajectories. *“If I didn’t have the support, I probably wouldn’t be here now”*, said one service user.

² As measured on the Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS).

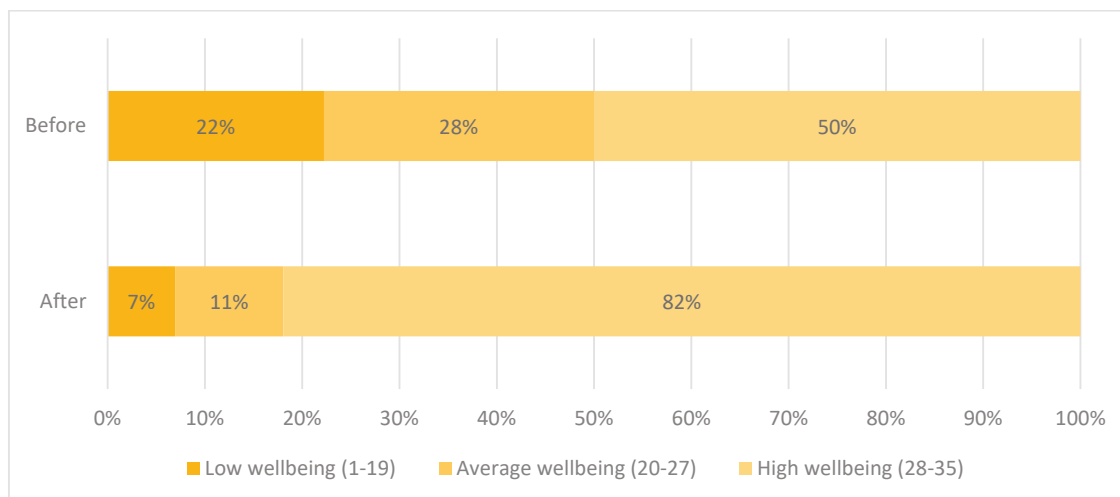


Figure 7: SWEMWBS scores before and after Reach Out (n=72)

There was a reduction in women’s mental health burdens. In disclosed cases of self-harm, three in five women (60%) reduced their self-harming and the remainder (40%) ceased self-harming altogether. Anxiety and stress reduced. One woman with agoraphobic behaviours described nearly daily panic attacks reduced to less than weekly occurrences. This enabled her to move from being “scared of going out” to now “trying to make more friends... I got out loads more now”. Women with mental disorders who hadn’t had stable or safe-feeling access to clinicians previously described feeling “more normal” in their needs and better able to take medication and contact clinicians when support was needed.

Service users related changes to their mental wellbeing to feeling more connected, facilitated by their relationship with the Reach Out team. This brought women into more positive relationships, both with themselves and others. “It helped me be less judgemental of myself and realise it was not just me”. This improved women’s relationships with other services and sources of help. “It made me feel I could speak”, described one woman. Another noted she had “never known how to relax and trust, let alone trust a process” – and Reach Out had enabled that.

With the lifting of mental burdens women’s SWEMWBS scores showed increases in optimism about the future. “I feel more free”, stated one woman. “I just want to live my life and be happy...I feel like I will now”, said another. These shifts from survival to greater opportunity marked an increase in women’s capacity for action, and reduced vulnerability to offending risks. SWEMWBS scores showed women’s increased confidence in decision-making, management of their daily lives, and confidence to plan for the future. This led to a realisation of opportunities – important in preventing reoffending.

Drug and alcohol use

“If it wasn't for their help I would definitely still be using” – service user

The majority of women (70%) accessing Reach Out struggled with drug and alcohol misuse. Of these women, during Reach Out seven in ten (69%) reduced their dependency and showed progress towards recovery (figure 8). Drug and alcohol misuse is hard to address, making this a significant outcome.

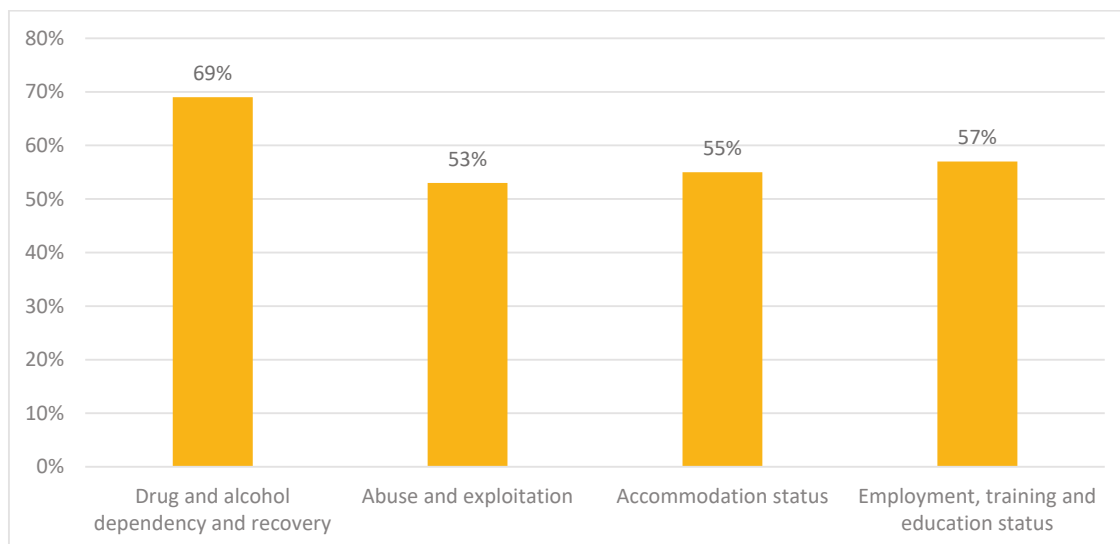


Figure 8: percentage of service users reporting improvement at referral and exit (cessation in the case of abuse and exploitation)

Drug and alcohol misuse had contributed significant harm to women’s lives. It was a driver of offending across the cohort. It also contributed to the removal of children, street homelessness, and conflict, coercion, and violence. Reducing dependency therefore affected the potential recurrence of these events and reoffending. *“I’m getting my old self back”,* said one woman now clean from crack. *“[I’m] getting my health back, getting alert again”.* *“I can’t say I’ve conquered the drugs but I am confident I won’t go back to the drug life”,* observed another.

Women described Reach Out as instrumental to changes in their drug and alcohol use. One woman noted Reach Out’s support to enable her to come off drugs so she could keep her newborn daughter. *“They’ve helped me control my drinking,”* said another. *“It’s like a little rehab. I used to drink every day and do naughty stuff but now I focus on my life”.*

Abuse and exploitation

“It’s also shown me that I’m worth it, that I’m wanted, that a relationship isn’t about being used, this is what a relationship can be and can look like” – service user

Staff thought it likely that all or most women referred to Reach Out had been subject to gender-based violence, including high – perhaps universal – subjection to child sexual abuse. At referral one in five women (21%) disclosed current abuse, including domestic abuse, sexual violence, and sexual exploitation. In over half these cases (53%) women secured safety from these situations by the time of exiting Reach Out (figure 8).

Staff estimated in the majority (80%) of these cases Reach out support was an essential factor in the change. *“The way I understand relationships has changed,”* said one service user. *“I feel better able to spot those patterns I didn’t know before - how to tell the difference between manipulation and abuse, and a good relationship and a bad one. And have had a chance to reflect on that learning and take it in”.* These shifts reduced women’s future risk of further abuse – and the risks and trauma it generates that may lead to reoffending.

Accommodation

“They’re very thorough, they couldn’t help you enough. She has managed it all” – service user

Over half of women (55%) referred into Reach Out were subject to insecure or unsafe housing, including rent arrears, risk of eviction, temporary accommodation, street homelessness, and cuckooing of their tenancies. Women's homes were sometimes the site of the offending behaviours of associates and family, exposing women to reoffending risks.

By the end of engagement with Reach Out over half (55%) of women with insecure or unsafe housing reported an improvement in their accommodation status (figure 8). Improvements included women moving from homelessness to temporary and permanent accommodation, and women in temporary accommodation moving into permanent accommodation. Staff estimated that in four in five cases (83%) this positive change had required Reach Out. Often the work undertaken was complex and lengthy because of a shortfall in housing availability. It sometimes took NDND's existing relationships with housing providers to secure placements.

When women presented at Reach Out they often named housing as a priority. Given the centrality of housing issues to cases where women didn't engage and secure positive outcomes, stable accommodation was a crucial factor in reducing women's reoffending. In cases where women presented with insecure housing, 25% went on to disengage, compared to 19% in New Dawn New Day's wider cohort.

Employment, Training and education, and financial security

"I'd love to work in the service myself, to help women who've been in my situation" – service user

Women described a shift in their capacity from survival to space for broader action. This shift towards greater independence and security was realised in women's education, training and employment status. On referral, three in four women (75%) were unemployed, reducing to two-thirds (67%) by exit. Women often had debt problems that they needed a third party – Reach Out – to resolve.

Women described a desire for purpose and meaningful contribution, often in the shape of support to women with similar experiences, seeking to replicate for others the positive changes they had realised through Reach Out. *"I enjoy being back at work – it gives me purpose again"*, said one woman. *"Having that type of relationship again. I'm not just a housewife locked in doors. I know it sounds silly, but before I felt I was worth nothing. People treat me like a person again. Before I was non-existent"*. *"Being here has shown me that [offending] way was not the right way and that there are other paths in life"*, said one young mother supported into volunteering.

Parenting and children's safeguarding

"Keeping my daughter was the biggest thing. I wouldn't have known how to deal with things without support" – service user

Through support to women, Reach Out enabled significant improvement in the safeguarding of their children. Women in the cohort had an average of 2.5 children. At referral two in five cases (38%) were open to children's safeguarding. Two-fifths of these (42%) were closed by exit from Reach Out (figure 9). Demand

reduced across all stages of the safeguarding pathway – early help, child in need, child protection, and kinship care. Foster care numbers was the only exception³.

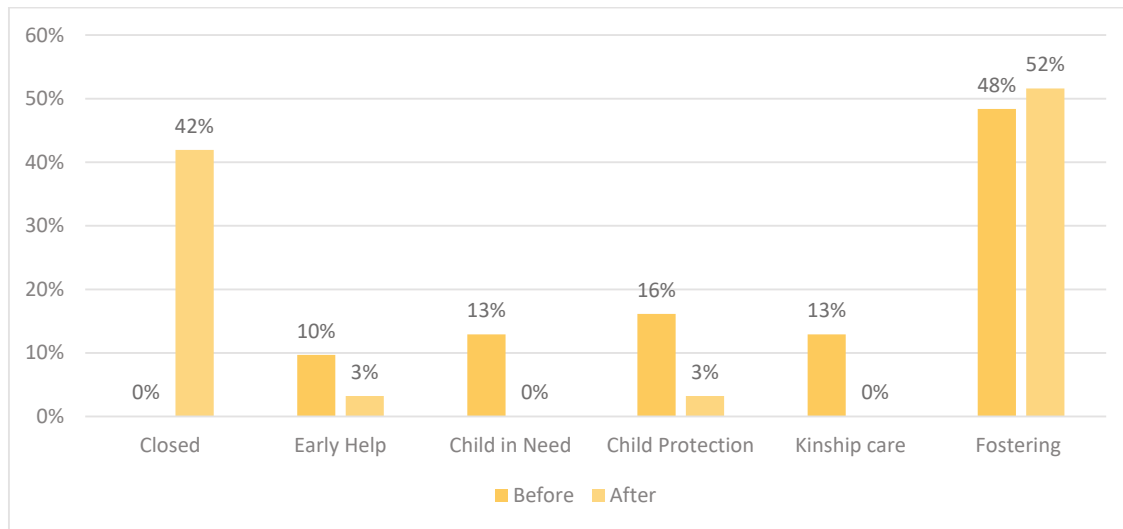


Figure9: change in statutory child safeguarding outcomes before and after Reach Out

Reach Out supported these outcomes by strengthening women’s space for action and tools for resilience. This improved individuals’ capacity to parent and to effectively self-advocate and engage with safeguarding procedures. *“Because I was a first time Mum I didn’t know what to worry about and what not to worry about – they supported me with every little thing”*, said one young mother.

Support to broaden women’s coping mechanisms, reduce drug and alcohol use, and safely exit abusive relationships, reduced women’s isolation and strengthened the family unit with their children. Reach Out’s advocacy – including official complaints – prevented prejudicial treatment by social workers. *“It gave a completely different outlook on the case”*, said a social work manager from a case in which Reach Out’s advocacy enabled children on course to be removed to stay with their mother.

Being able to stay in their children’s lives and reduce or end social care involvement was of primary importance to women and their sense of security. It affects the risk of reoffending by bringing purpose, love, and stability into women’s lives, and averting the significant trauma of child removal. Women described the relationship with their children as their main motivator, as well as a source of enrichment and stability, carrying lasting impact on their future choices. Interviewees stated that maintaining their role as mothers was the biggest reason they worked to change their behaviour.

³ Numbers of children in foster care remained high. Notably this was driven by two cases in which 14 children were fostered.

System impact

Reach Out's outcomes have a financial and efficiency impact on public services and generated wider social value. This chapter sets out these cost savings and the benefits experienced by statutory frontline staff. The calculations are available in [Appendix C](#).

Cost saving

Reach Out produced realisable one-year savings to the public sector of £24,000 per case (after subtracting the cost of the Reach Out service)⁴. This generates estimated savings across the whole cohort of £2,400,000.

The savings accrue to:



The benefit of Reach Out is potentially wider than these costs – repeating over subsequent years. Social value impacts, such as long-term impact to children's wellbeing, and the efficiency gains from women's improved engagement with services, are not costed due to paucity of existing cost-benefit modelling. A wider story of social value accompanies the £24,000 per-case savings.

Example of cost saving

The following page shows the story of 'Jen'. It shows what happened to her with Reach Out and what was predicted to happen to her (based on her own estimation and the professionals working with her) if she hadn't had access to Reach Out. The result was an estimated saving of £106,000 in public sector and commissioned spend as a result of using Reach Out.

⁴ Per woman the estimated mean cost of Reach Out is £4,067 (2025).

Jen's Story

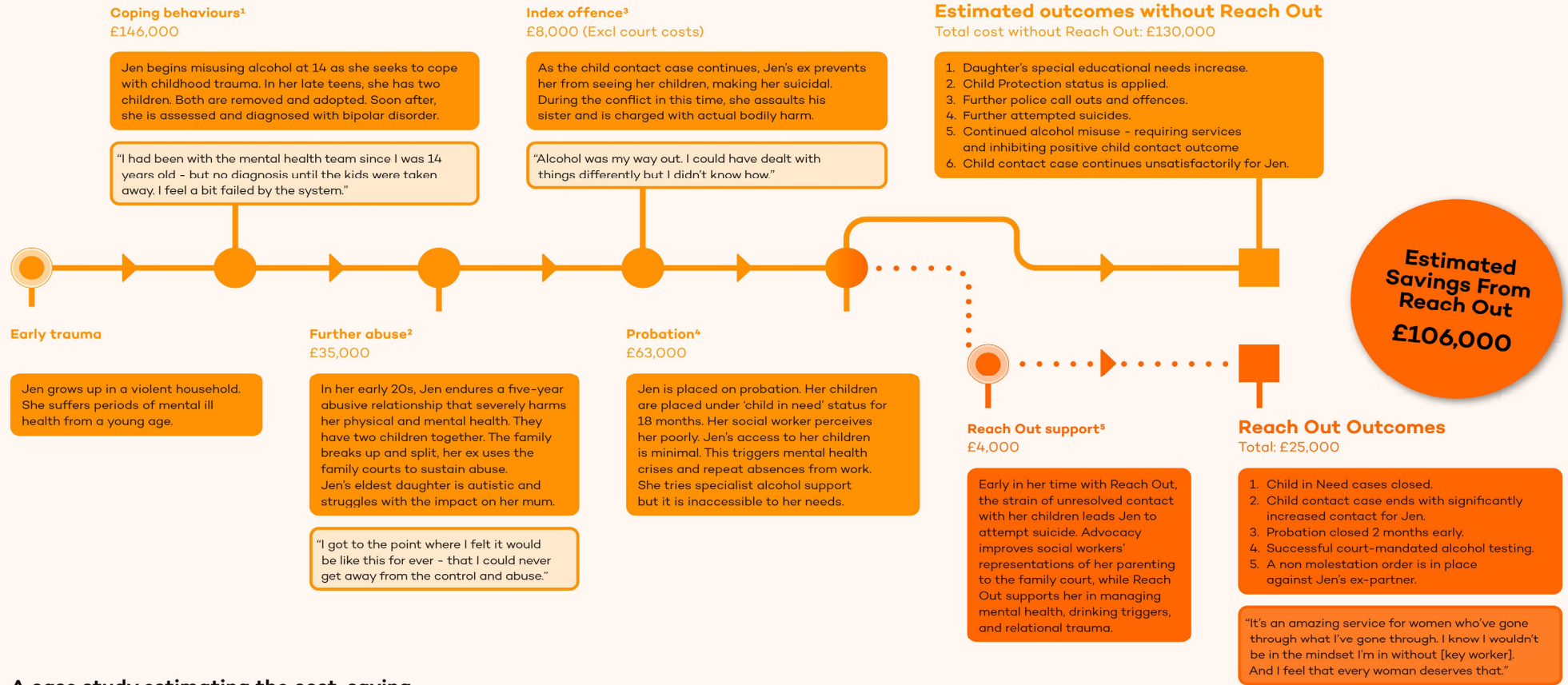
with Reach Out



What was achieved with Reach Out



What Jen and key workers estimate would have happened without Jen's access to Reach Out



A case study estimating the cost-saving of access to Reach Out

"I've got big dreams and I just want to chase them. I'm the first single mum in my family. I want to 100 percent show that I can do the best for my kids. When my little one grows up and is at nursery I will get back to working."

1 £77,900 to NHS for treatment of bi-polar disorder impact of alcohol use ; £50,060 in lost productivity; £17,645 to children's social care.
2 £20,622 cost to NHS; £3,000 cost of advocacy; £10,000 cost of lost productivity; £1,485 special educational needs costs.

3 £8,145 to police
4 £1,845 special educational needs; £8,481 children's social care; £2,260 probation; £785 alcohol testing; £36,021 to NHS for sciatica, suicide attempt and GP; £3,200 for Turning Point alcohol service; £10,722 in Personal Independence Payments.

5 £4,000 Reach Out at New Dawn New Day
6 Reach Out costs plus; £8,481 children's social care; £2,620 probation; £785 alcohol testing; £4,615 to NHS for suicide attempt; £3,200 for Turning Point alcohol service; £5,500 Non Molestation Order.

System efficiencies

“Reach Out has been an absolute godsend... Agencies need to understand the impact and value of Reach Out—it’s been fundamental” – probation officer

In evaluation interviews, professionals from probation, social care, community mental health, and the police described Reach Out as “invaluable”. “Their engagement with probation is amazing. It’s been a really good, positive impact on probation”, said one probation officer, noting Reach Out’s ability to progress seemingly entrenched cases. “It’s been amazing”, said another. “Helped our ladies complete requirements and reduced the time and capacity we have to spend. Their approach is something probation doesn’t have time to do”. Professionals identified Reach Out as enabling sustained engagement with women, facilitating and informing multi-agency working, and relieving pressure on statutory teams. They found it allowed services to focus on cases they could better serve – while Reach Out worked closely with women to support disclosures, facilitate self-advocacy, and provide the wraparound support needed to address complexity. Universally, professionals asked to rate Reach Out on a Likert scale rated it as having an extremely high positive impact. “They are her support network”, observed a social worker. “Other agencies don’t work in quite the same way”.

Professionals noted the ability of Reach Out to uniquely engage women other services could not. “Other services aren’t liked by some and don’t feel they can openly talk”, noted a social worker. Reach Out provided the necessary physical and psychological safety. “This service doesn’t close the book on that person—unlike other services”, noted a Reach Out staff member. “They’ve helped me build trust with women I couldn’t reach,” one probation officer shared. “They’ve worked to the women’s capacity, not their own”, a probation officer reflected, adding that Reach Out’s trauma-informed model was successful in engaging women who otherwise would have breached their court order.

Reach Out’s work had a notable effect on the progress and outcomes of statutory services. “Until Reach Out was in place, I tried to manage this stuff myself—and I can’t. It’s not physically possible”, said one probation officer. Statutory practitioners reported reduced call volumes, fewer crisis interventions, and increased completion of statutory requirements “She visited much more than I did and always shared information,” said one social worker. Reach Out facilitated joint visits and shared safety planning. Their deeper work improved understanding about women across the system, making decisions more responsive to women’s needs. This was supported by the empowerment of women’s own capacity to engage and self-advocate, increasing women’s participation in the criminal justice and safeguarding systems.

Conclusion

Funded by Ministry of Justice, Reach Out set out to increase completion rates for community orders and out of court resolutions among women at high risk of disengagement, by providing a trauma-informed, intensive and flexible support that addressed the underlying gender-based trauma linked to their offending.

This aim was achieved. Supported by Reach Out, four in five women sustained engagement and completed their community orders and out of court resolutions, despite all having been predicted to disengage. Reoffending rates fell to 18% - well below comparable services. There was significant progress across outcomes that were associated with future offending risks. Across the cohort, 80% of women reported improved mental wellbeing. Sixty-nine percent of those with drug and alcohol issues reported a reduction, and 53% reported greater safety from abuse. For the 55% of women in insecure housing, 55% reported improved housing security, and in 42% of cases where children's social care had open safeguarding cases, these were closed.

These changes generated measurable public sector savings of £24,000 per case, demonstrating value for money alongside social value.

What worked well

Reach Out's outcomes were rooted in its application of the five core components of trauma-informed practice:

- **Safety** – enabling women's psychological and physical safety and accessibility through outreach and NDND's women-only office space. Women described the service as a "*sanctuary*". Safety planning was contextual and dynamic.
- **Trustworthiness** – consistency and non-judgemental, direct, and relatable behaviours, supported by boundaries, were significant for engagement, outcomes, and change. Staff modelled reliability and followed through on advocacy.
- **Choice** – support plans were co-designed and the service moved at women's pace around the needs they identified. Staff provided options rather than directives, helping women build decision-making skills and control over their lives.
- **Collaboration** – all work was a collaboration between women and staff – with a collaborative attitude taken to work with other services. Accountability was shared – "What can you do, and what can I do?" Women felt treated as equals rather than cases to be managed.
- **Empowerment** – women were given space to reflect on their patterns of behaviour, process trauma, and practice new coping strategies that better served them. Practical skill-building increased their ability to act independently and avoid reoffending triggers.

This consistent application of trauma-informed principles was enabled through the team's collaborative dynamic, and underpinned by the specialism across the team's professional backgrounds. Low caseloads, flexible outreach, and wraparound advocacy and emotional support meant the service could respond to crises, address root causes of offending, and keep women engaged where mainstream approaches had been unsuccessful.

Limitations

More robust exploration of the limitations of the programme was prevented by core members of the Reach Out team moving on by the time qualitative interviews were undertaken. However, this loss of staff was itself revealing, pointing to the greatest challenge in the Reach Out model: access to sustainable funding. By the time of evaluation, two of the three staff had left the team for the purpose of finding more financially secure positions. This was despite staff's satisfaction with how the team worked together, and in the work and its outcomes. Given the evidenced importance of the team's attributes and skills to achieving Reach Out outcomes, it is important that funding is suitable and sufficient to develop and retain a skilled staff team able to address the crises and complexity women present with.

The need for less formal, step down support was raised by service user interviewees and repeated by staff. Women's trajectories are not linear, and their risk of further challenges and crises remain. The embedded nature of trauma requires long-term support, accessible as needed. Not having this available is potentially a strong risk for recidivism.

The important role of family, friends and trusted parties in women's lives was illustrated in some cases. More research and documenting of impact is needed to understand how services can centre and build social and supportive capacity already within women's lives, as well as women's own capacity.

Implications for wider provision and policy

Reach Out has shown that trauma-informed practice is cost-effective and delivers outcomes in cohorts where mainstream services are not just less effective. It demonstrates that investment in low caseload trauma-informed practice can produce both rapid and system-wide savings—freeing capacity in statutory services while achieving better individual outcomes. The Reach Out model provides a blueprint for moving beyond generic criminal justice interventions that may poorly serve women with complex trauma.

This is relevant to current policy concerns. Breach of community orders and out of court resolutions remains a significant driver of women entering custody: women are more likely than men to be imprisoned for short sentences linked to non-compliance rather than new serious offences (Prison Reform Trust 2017). Reach Out's ability to engage women predicted to fail their orders, and reduce breaches, directly supports the strategy's aim to reduce unnecessary female imprisonment.

Reach Out was positively described by probation officers who referred into the service. Its collaborative model and strong outcomes were considered "*a massive source of support*" that "*definitely made a difference to women's progress*" – supporting them to be "*less likely to reoffend*". This has particular value to the probation service during an extended period of staff shortages, high caseloads, and recruitment difficulties which limit the relational work useful to address trauma. Reach Out demonstrates a specialist model cost-effectively able to bridge this gap and work effectively in partnership with probation officers.

More broadly the service addresses gaps across public services opened by continued financial pressures. NHS England's 2024–25 data shows record waiting times for community mental health support, with women facing particular challenges in accessing gender-specific provision (NHS England 2025). Poor mental health remains one of the strongest predictors of breach and reoffending among women. Reach Out's improvements in wellbeing (80%) suggest that trauma-informed, non-clinical interventions can play a major role in prevention and early intervention.

Replication

Replication of the Reach Out model developed by NDND may be possible across the footprint of women's centres in England and Wales. Several enablers are relevant for replication:

- **Sustainable funding:** shaped around women’s trajectories and needs, not around budget cycles. Moving beyond short-term pilot cycles would preserve continuity of relationships by retaining skilled staff, and enable development of the evidence-base and case for investment.
- **Workforce stability and training** in trauma-informed approaches, supported by reflective practice and manageable caseloads. This may require organisational confidence in more flexible models of safeguarding.
- **Integration with referral pathways:** in particular, with probation to reach women early in their orders; and with mental health, and housing, which are fundamental to women’s stability and capacity to engage, and to the reduction of survival stressors and offending risks.
- **Mediated impacts of children’s safeguarding:** family courts and children’s social care can both determine the structure of women’s relationship and access to their children. This has a significant impact on offending risks – generating tipping points that exceed women’s capacity to cope.
- **Access to housing solutions:** a replication that enabled access to safe, suitable accommodation may strengthen outcomes for those women unable to engage with Reach Out. Solutions should be considered – including the Rosmerta social investment project being developed to leverage capital funding into safe accommodation for women.
- **Local partnership working:** with cross-sectoral governance and inquiry to navigate complex systems and address barriers unique to each area.
- **Adaptation for diversity,** ensuring cultural competence and specialist provision for Black, minoritised, and migrant women, and planning redress of inequalities which emerge.

Recommendations

Reach Out

6. **Continue delivery:** continue to deliver the Reach Out service, working with funders to secure sustainable ongoing funding
7. **Share:** share and promote the programme with the wider community of trauma-informed practitioners across public services
8. **Broaden step-down support:** seek funding for step-down support to women, to reduce the risk of recidivism on service exit
9. **Continued evaluation:** seek to build on the insights and practice outlined in this early-stage evaluation, ensuring service users have a means of influencing delivery and insights
10. **Post-exit sustainment data:** work with probation and police data to track recidivism 12 and 24 months post exit; liaise with Justice Data Lab to benchmark this data with other services.

Ministry of Justice

4. **Continuation funding:** continue funding of Reach Out using funding agreements of minimum of five years whose terms safeguard flexibility and innovation at the discretion of the provider
5. **Replication and scale:** Replicate the Reach Out model across two or more women’s centres, with a view to scaling if outcomes and system impacts and cost benefit are replicated
 - c. Robustly evaluate this replication, including the impact on probation officers, police, and social workers
 - d. Ensure oversight nationally of the pilot – if suitable via the Women’s Justice Board
6. **Share:** publish and share the results of this evaluation.

Independent trusts and foundations, including the Corston Coalition

3. **Bridging funding/solutions:** while Ministry of Justice funding remains damaging to women's equity and outcomes, provide offers of bridging funding or other guarantees sufficient to sustain practice and teams, including sustainment of Reach Out
4. **Strengthen trauma-informed focus** use the results of this evaluation to stimulate strengthening of gender-based, trauma informed practice, and wider policy discourse on gender-based abuse as a root cause of public service demand.

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Appendix A: interview questions

Service user interviews

Engagement

1. How long have you been in the service?
2. Had you had contact with New Dawn New Day before?

What you want

3. What hopes and changes in your life did you want when you first engaged with Reach Out?
4. To what extent have these hopes and needs been met? If they haven't been met, why not?
5. What difference has this made to your life, including your work, health, coping strategies, housing situation, relationships, probation, and any dependent children?

Experience of the service

6. What have been the best things about the service and the way staff have worked with you? How does this compare to your experience of other services?
7. What have been the least good things about the service and the way staff have worked with you?
8. Are there ways the service could improve so you feel safer, more empowered, and able to make the changes you want in your life?
9. What three words would you use to describe the service and how it has made you feel?

Your final thoughts

10. Is there anything else you would like to add?

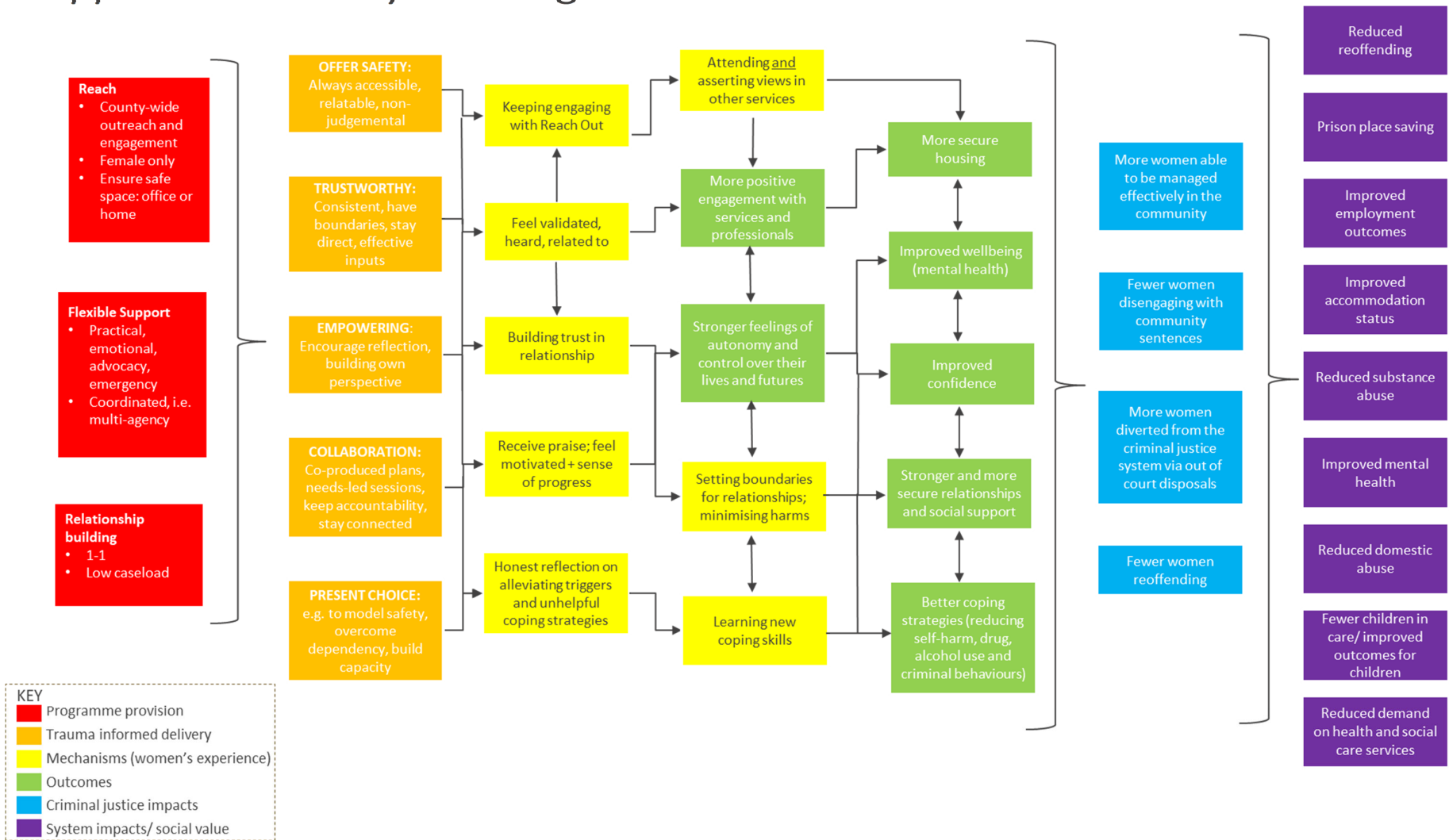
Stakeholder interviews

1. How many women have you referred to Reach Out
2. How would you describe the characteristics / approach taken by the service?
3. What impact has this had on you: your workload and outcomes?
4. What impact do you estimate this has on women regarding (Likart scale from severe negative impact to high positive impact):
 - a. Reduced offending
 - b. Reduced drug and alcohol use
 - c. Employment outcomes
 - d. Improved accommodation status
 - e. Prison-place saving
 - f. Improved mental health
 - g. Reduced domestic abuse and sexual violence
 - h. Children's social care outcomes
 - i. Health and social care use
 - j. Engagement with other services

Staff workshops and interviews

These were conducted using emerging questions from the data.

Appendix B: Theory of Change for Reach Out



Appendix C: cost-saving calculations

Cost	Cost components & sources	Unit cost	Unit cost Inflation (Bank of England online calculator)	Whole cohort: Units per 98 cases	Deadweight & Attribution	Cost adjusted for deadweight & attribution	Commission-er
CSC	£3,572 is the average saving per case 38% of cases were open to CSC 2.5 children per case	£3,572	£3,572	£332,553	100%	£332,553	CSC
Mental Health (community MH team)	Before the intervention, 22.2% of cohort women had very low SWEMWBS scores (below 20) which we can use as a threshold for needing treatment; After the intervention, this dropped to 6.9%. A change of 15.3% Cost is from Southall Black Sisters <i>Cost Benefit Calculator</i> (cost-benefit-calculator.xlsx using Jones, K., Burns, A., Unit Costs of Health and Social Care 2021, 2021. Personal Social Services Research Unit, University of Kent) for assessment and CMH mental health cluster. Assuming monthly contacts of CMH.	£3,186	£3,293	£49,369	100%	£49,369	NHS
Mental health (GP)	92% of cohort have mental health issues. Assume all using primary care for support. 80% reported positive change. So 74% of the cohort. Which we will assume means 50% reducing in GP costs. Assuming GP (£45) with prescription (£33) every 6 weeks (PSSRU 2024 (p.73))	£676	£676	£24,513	100%	£24,513	NHS
Domestic Abuse (output)	In 21% cases DA and exploitation was happening In 53% of cases with known DA it ceased. In 80% of these cases estimated attributable to RO Assuming it ended 3 years early – using Home Office fiscal costs (Oliver 2019)	£7,245	£9,301.13	£191,417	80%	£153,134	DWP

Domestic Abuse (health)	As above	£1,200	£1,540.56	£31,705	80%	£25,364	NHS
Domestic Abuse (police)	As above	£645	£828	£17,041	80%	£13,633	Police
Domestic Abuse (victim)	As above	£370	£475	£9,776	80%	£7,821	Victim services (aka PCC)
Domestic Abuse (criminal)	As above	£170	£218	£4,492	80%	£3,593	Criminal justice
Reduced reoffending - police	An average of 3 offences before and 1 offence after - so reduction of 2 offences. Cost is recorded crime (£526) with arrest, custody, investigation and charge (£7,159) (Southall Black Sisters <i>Cost Benefit Calculator</i> cost-benefit-calculator.xlsx)	£15,370	£15,894	£1,557,630	77%	£1,199,375	Police
Reduced reoffending - probation	Average probation cost is £3,150 pp (https://questions-statements.parliament.uk/written-questions/detail/2024-08-30/3546)	£3,150	£3,150	£308,700	100%	£308,700	Criminal Justice

Drug and alcohol improved	70% of cohort have drug and alcohol needs. 69% of those struggling reported a positive change. So this means 48%. Unit cost saving to HSC £1,686 (p13 https://www.drugsandalcohol.ie/37540/1/Drug-treatment-outcomes-research-study-dtors-costeffectiveness-analysis-2nd-edition%20%281%29.pdf)	£1,686	£2,696	£126,812	80%	£101,449	NHS
Prison place saving	If we apply the same ratio as there is in reoffending (RO 18% vs the Women Together comparison group of 35%) - then prison places would have been 15.6% but under RO are 8%. Cost pre prison place for women is £55,411 (https://assets.publishing.service.gov.uk/media/5f96b7c2e90e077b054f58d8/costs-prison-place-costs-prisoner-2019-2020-summary.pdf)	£55,411	£70,537	£525,357	100%	£525,357	Prison
Improved accommodation	About 17% of the whole cohort experienced a change in accommodation status. Cost is for one off homelessness application – (p7 Shelter (2012) <i>Briefing: Immediate costs to government of losing a home</i>). NB very hard to cost for accommodation as each woman's pathways will be different and include a mix of increased and averted costs.	£2,501	£3,706	£61,740	83%	£51,244	Housing (LA)
					Cohort	£2,796,104	£2,796,000*
					Per case	£28,532	£28,000*
					Cohort - net service costs	£2,397,518	£2,400,000*
					Per case - net service costs	£24,464	£24,000*

*Rounded to nearest 1,000

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