



 An **Anna Freud** project

London Vanguards independent evaluation Summary report

Jenna Jacob, Anoushka Kapoor, Arthur Pander
Maat, Erin Nicholson and Julian Edbrooke-Childs

11 February 2026

Contents

Introduction	3
Method	3
Findings	4
Children and young people referred and supported.....	4
Addressing inequalities for marginalised groups.....	5
Support provided	6
Impact: children, young people, parents and carers supported by the London Vanguards.....	7
Impact: staff and key stakeholders	8
Best practice and learning	9
Wider landscape	10
Moving forward.....	10
Links to policy	11
Recommendations	12
Conclusion	14

Acknowledgements

Thank you to NHS England for commissioning this evaluation, and to Kamal Pasha, Perpetua Kamwendo, Claire Ruiz, Clare Bingham, Michael Cheetham and Corrine Clarkson for your support to our team. We would like to thank the London Vanguards for their support, and all participants who took the time to share their experiences through interviews, and the members of the professional, parent and carer, and young people’s advisory groups, for their valuable contributions throughout the evaluation. Thank you to NHS England, Violence Reduction Programme and London Vanguards colleagues for providing helpful comments on earlier reports. Thanks also to our wider CORC and Anna Freud colleagues for supporting this evaluation in numerous ways.

Introduction

The Child Outcomes Research Consortium (CORC) team at Anna Freud was commissioned by NHS London Violence Reduction Programme and Health and Justice Team (NHSE) to conduct an independent evaluation of the London Community Multi-Systems Violence Reduction Programme model, hereby known as the London Vanguard, between December 2022 and December 2025.

A mixed-methods realist process and impact evaluation approach was taken¹. The evaluation was underpinned by the evaluation logic model, developed by the research team and reviewed by NHS England colleagues and the evaluation's professional advisory group at the start of the evaluation. Through the evaluation, delivery of the London Vanguard was explored, including 1) the implementation 2) mechanisms of change, and 3) the impact of the London Vanguard in the specific context. Ethical approval was granted in June 2023 ahead of data collection (UCL ethics project ID: 21875/002).

The overarching aims of the evaluation were to:

- 1) examine the overall impact of the London Vanguard as a whole on children, young people and their parents and carers, workforce and organisations; and
- 2) explore best practice and learning that can be used to develop recommendations to inform service improvement and the future sustainability of the London Vanguard.

Method

Focus groups and interviews were held with 33 staff members, 25 key stakeholders, 19 young people and 11 parents and carers across four boroughs: Enfield, Islington, Newham and Southwark. Most participants were interviewed twice; once in 2024 and again in 2025.

A key performance indicators (KPI) dataset was also analysed, which included information on 1509 children and young people who were referred to the London Vanguard across 12 London boroughs. Referrals took place between April 2022 and June 2025. The development of the KPI data specification was led by NHS England and co-produced with the London Vanguard and lived experience experts. This pre-dated the evaluation.

Limitations

Some differences in type of delivery, interpretation of the data specification and how to enter data will have an impact on what the analyses show. The practitioner-rated outcome fields were completed using a combination of information derived from

¹ Pawson, R., & Tilley, N. (1997). An introduction to scientific realist evaluation. Evaluation for the 21st century: A handbook.

mental health and wellbeing outcome measures (some standardised and others bespoke), and clinical judgement. There were also differences across the ICBs in interpretation of the data fields e.g., recording “No” when the outcome was not relevant as well as when an improvement was not seen, which has caused a bias in the data. Therefore, our understanding of practitioner-reported improvement is limited. Not all activity is currently captured in the KPI data set, e.g., prevention, consultation and group work, so data analysis presents a partial picture. In NEL, KPI data from Newham between April 2022 and April 2023 pertains to the delivery of an alternative, aligned programme (Your Choice).

The qualitative sample is likely skewed toward individuals most engaged or with positive experiences, as participants were identified and supported through a trauma-informed recruitment process. Those in acute crisis, such as children and families dealing with life-changing injuries, were often unable to participate, potentially excluding critical perspectives. Additionally, the presence of London Vanguards professionals during interviews, as requested by young people, may have reduced candid feedback on areas for improvement. While interpreter-assisted interviews introduced some translation concerns, they also broadened representation by including voices that might otherwise have been missed. Finally, awareness of being evaluated and concerns about service continuity may have led stakeholders and families to emphasise positive experiences.

Findings

Findings from both the quantitative and qualitative strand are presented as appropriate. For more detailed findings in line with each evaluation question, please see the full length report.

Children and young people referred and supported

- In all three ICBs, referral counts were variable, showing a peak over the first two years of the programme (range between 34 and 117 per ICB, per half financial year).
- Children and young people were referred to the London Vanguards through a wide range of other services and individuals, primarily social services (NEL and SEL) and peer or family referrals (NCL).
- All London Vanguards accepted a very high proportion of referrals they received (NCL 81%, SEL 97% and NEL 59%).
- From the available data, NCL supported older young people (median 20 years), while the other ICBs supported late secondary aged young people (NEL median 15 years and SEL median 16 years). NEL seemed to be working with more with both girls and boys, compared to the other two ICBs, who primarily supported boys.

- A high proportion of open cases (46.7%) had been supported for over 12 months. The median length of support for closed cases was 7 months.

Addressing inequalities for marginalised groups

- London Vanguard staff described the children and young people they support as navigating adversities and challenges because of health, race and social inequalities. It was widely recognised in interviews that a holistic approach to supporting the children and young people supported by the London Vanguard was taken, in response to the multiple adversities and social challenges they face, including health, race and social inequalities.
- Additionally, most children and young people were described by staff as living in the community with ‘genuine threats to their safety and life’ and who had experienced, or were at risk of, exploitation. Further, it was recognised by staff that children and young people impacted by youth violence were ‘marginalised along multiple axes’ and hence the London Vanguard were offering a novel community-based approach.
- A focus on supporting specific marginalised groups of children and young people was discussed in interviews. This was sometimes a focus on supporting boys; something that key stakeholders described as a gap in their own provision (Southwark); transitions out of the secure estate (Enfield); preventing homelessness (Newham) and a specific focus on supporting children and young people from Black ethnic groups (Islington).
- NCL mainly supported young people from Black ethnic groups (65%), which aligns with the focus of the support based on the specific need, but is different to the proportions of the ethnicities in the borough (17% in 2021 census data).
- In NEL and SEL, the ethnicities of the young people supported were more like the local population, although more young people from Black ethnic groups (29% and 40% respectively) and fewer young people from White and Asian ethnic groups were supported, compared to the local population (a difference of between 10% and 34%).
- Children and young people with current or previous interaction with the care system were higher in all three ICBs compared to the England average (between 5% to 15% compared to under 0.5%).
- Incidence rates of a range of traumatic experiences varied widely between ICBs. This included children and young people with particularly elevated rates of violence, abuse and traumatic experiences in and outside of the home, parental or family separation or conflict, discrimination, neglect, housing issues, relationship difficulties and emotional and mental health difficulties.
- Across all three ICBs, there were many more suspected disabilities, mental health and neurodevelopmental conditions, compared to diagnoses. Staff

described uncovering new needs which had gone unnoticed by other services; in particular, neurodevelopmental, speech and language, mental health, and learning needs.

- Key stakeholders often said in interviews that without the London Vikings, there are many children and young people in their borough who would not be otherwise supported.

Support provided

- A key feature of the London Vikings' work was described by staff as the collaboration between statutory and VCSE partners, and the importance of alignment in ethos. The London Vikings described the development of trusted relationships across varied organisations such as statutory, grassroots and voluntary and faith-based organisations. Examples of good partnership working provided described bringing different organisations that are supporting the children and young people together and working as one to ensure the best support possible.
- Staff described shared learning between the partners about what the community needs, rather than one or other of them dictating what they were there to do. There was an emphasis on listening to, and learning from the community partners' experiences. This was considered particularly important for the children and young people the London Vikings support.
- For those children and young people whose support included a formulation based care plan, in most instances this plan was both co-produced and shared (78%), and in a small minority the plan was co-produced but not shared (10%).
- Participants in all focus boroughs shared distinct examples of how they have incorporated co-production into their work, which included designing posters, renaming the services and being involved in staff recruitment. Children and young people described the benefits of co-production. Co-production was described in some focus boroughs as having strengthened in 2025, due to the developed links with networks and more young people.
- Although the London Vikings staff is committed to partnership working, they recognised it can sometimes slow things down. Other challenges included other professionals in the network having different perspectives about how to help the young person, difficulties in getting in touch with partners, and some challenges joining up and understanding working dynamics.
- Overall, the London Vikings described partnership working as leading to work being done quicker, and since information is shared with the network, people were more aware and held accountable for their part in the support.

Impact: children, young people, parents and carers supported by the London Vanguard

- In each ICB, mental health and wellbeing was the outcome that the highest proportion of children and young people were reported to have improved in: 54% in NCL, 52% in NEL, and 36% in SEL. Education status was reported to have seen particularly strong improvement in NEL (47%), while there was the strongest reduction in offending behaviour in NCL (36%) and SEL (32%). The proportion of children and young people reported to have an improved accommodation status was consistent across ICBs (27%-36%), as was the proportion that were reported to have a decrease in high risk behaviour frequency (33%-40%) and in high risk behaviour severity (30%-39%).
- It appears that, on the whole, children and young people whose parents and carers also received support were reported to have made slightly higher rates of progress towards their goals and slightly more improved mental health and wellbeing than those who did not.
- Our understanding of practitioner-rated outcomes is limited and rates of missingness were high across the board, so the findings should be interpreted with caution.
- **Mental health and wellbeing:** Staff, key stakeholders, children, young people, parents and carers described a range of positive improvements. Often this was young people feeling more confident, having an improved sense of agency and advocating for themselves, and an improved sense of self-esteem since receiving support from the London Vanguard.
- Many children and young people described being the 'best version' of themselves since receiving support from the London Vanguard, which was often described as a general sense of improvement overall and the ability to now flourish and succeed. Parents and carers also described improvements to their own lives, including improvements in their mental health and wellbeing.
- **Improved relationships:** Staff, key stakeholders, children, young people, parents and carers described improved friendships, engaging in more positive activities with friends, and often, improved family relationships. Parents and carers described taking different approaches with their children, implementing communication styles that they have learnt through this support that had also led to improved family dynamics.
- **Wider circumstances:** Staff described a range of areas of impact, including children and young people being comfortable enough to trust and talk to professionals and showing increased understanding of their difficulties, to better housing and getting involved in the community. They noted that by providing children and young people with a positive experience of mental

health services through the London Vikings, they may be more open to engaging with other services in the future. Children and young people described improvements in education and employment, through specific support provided by the London Vikings, for example, on applications.

- The importance of the long-term nature of the work of the London Vikings, rather than focusing on short term change was highlighted by both staff and key stakeholders.
- **Sustained change:** Staff as well as key stakeholders across all ICBs said that generally, most young people had sustained the positive changes across nearly a year. Key stakeholders credited the positive sustained changes to young people retaining the resources that they had learned through the London Vikings' support, the long-lasting, consistent and holistic, nature of the work, as well as the relationships formed with their practitioners. This was mirrored by children and young people, who said that they had continued to follow the advice of London Vikings staff over a period of time which helped them to continue to make positive choices and maintain positive changes.
- All interview and focus group participants were asked about any neutral or negative outcomes since receiving support, as well as positive ones. No neutral or negative outcomes were described, whereas some practitioners rated no improvement in some areas in the KPI data. However, this discrepancy could be due to data quality, and the potential for social desirability bias in the interviews. Additionally, meaningful change for some children and young people, for example, an improved housing situation, or improved relationships, may not show as change on standardised clinical outcome measures.

Impact: staff and key stakeholders

- The experiences of staff and the impact mobilising and delivering the London Vikings offer has had on them is reflected throughout the evaluation findings. In particular, the challenges of setting up partnership working and the benefits of them once developed, the uncertainty caused by the short-term funding, and the impact of co-production enabling them to understand and respond to the needs of their communities, among others.
- In interviews, London Vikings staff discussed the demands and pressures of the wider system having an unintended impact on their work; for example, external providers in busy teams neglecting to update the London Vikings staff regularly. Staff also described tensions in a wider system that does not share the same ways of working or goals for the young people as those working in the London Vikings.

- Key stakeholders described their work with the London Vikings as an opportunity to share learning and support each other as well as collaboration leading to the best support being provided. In some focus boroughs, key stakeholders described the London Vikings as complementing their work, providing clinical expertise, and collaboration in the form of referring children and young people to the London Vikings for support.

Best practice and learning

- Areas of best practice, as highlighted throughout the findings from the evaluation include support that is flexible, embedded in the community and responsive to individual needs, genuine co-production which leads to bespoke support that is more aligned with those it seeks to support, and partnership learning between services has demonstrated to be effective and beneficial for the children and young people being supported, as well as providing an opportunity for learning from one another and bringing different knowledge and skills to the support offer.
- Additionally, the short-term funding cycle, which was described as in contrast with the amount of time it takes to engage, build relationships with, and provide meaningful support to children and young people navigating adversities.
- The role of bridging support for children and young people was described as being sustainable and preventative; it was considered important to establish a relationship between the young person and other support services to ensure continuity of support.
- Staff reflections on how to transfer learning between different short-term funded pilots included continuing to come together at shared learning events, to share and learn from the evidence and what has worked across different areas. However, in addition, staff highlighted the importance of also keeping shared learning spaces local to London only, because the remit of the London Vikings can be different to that of out-of-London London Vikings.
- Staff also reflected on additional sustainability considerations, besides funding. These included buy-in across the partnership (especially from statutory services), more therapeutic training for staff, as well as senior decision makers believing in and investing in the offer. Having dedicated staff who are interested in and able to work with the children and young people without feeling overwhelmed. The importance of a team of people with the right skills and experiences that complement one another was also raised as best practice. Finally, in order to sustain the work, some focus boroughs have been placing emphasis on linking children and young people with community resources, so that support it built and can continue beyond the London Vikings.

Wider landscape

- Some key stakeholders described the London Vikings as offering something unique in a space where there is a scarcity of support for children and young people (Islington and Southwark). Others said that London Vikings sit within many other programmes in the area, but that within that, the London Vikings complement other services and offer something unique that would not otherwise be available (Newham).
- Key stakeholders in all focus boroughs reflected that the London Vikings however also sit within wider systems that they may not be able to influence, e.g., housing, and that wider systems may have limited awareness of the London Vikings' work and remit but by 2025, some London Vikings were described as having become better known and leading to strong relationships with partners.
- While systems change was described as not being effected yet in its entirety, staff highlighted that wider system change could be possible through investment, commitment, and 'genuine interest' from senior decision makers who can influence policy. By 2025, the London Vikings were described as having become better known and leading to strong relationships with partners.

Moving forward

The evaluation highlights several key findings and considerations for the future of the London Vikings:

- **Potential for Expansion:** Evidence from the evaluation suggests there may be scope to broaden the London Vikings' reach, including targeting girls, the education sector, and widening referral thresholds. However, decisions will depend on local needs assessments, in alignment with the London Vikings' prioritisation of children and young people with the highest levels of need. Collaboration willingness was evident throughout the evaluation, which could support scaling to new boroughs or specific groups. This must be balanced against reduced funding projected for 2025-28.
- **System-Level Challenges:** Embedding the London Vikings' trauma-informed, public health approach was described as challenging in systems with differing practices and perceptions of the children and young people supported. Increasing visibility and clarifying the London Vikings' role could mitigate these issues. There is also potential for closer collaboration to address systemic attitudes and to drive change.
- **Funding and Sustainability:** Short-term funding contrasts with the long-term support needs of traumatised children and young people. Uncertainty around

funding affects relationship-building and long-term violence reduction outcomes. Current commissioning pathways exacerbate this challenge.

- **Sector Fatigue and Learning Opportunities:** The wider system was described as showing signs of fatigue with short-term pilots. Learning from existing programmes and fostering co-existence is an area to prioritise. Initiatives like the Violence Reduction Academy and continued scoping work can support shared learning and complementarity across programmes.

Links to policy

- Approaches like London Vanguard are strategically valuable because they break down silos between health, social care, community, and justice settings, aligning with the mission-led push for cross-department co-operation.
- The London Vanguard directly aligns with the NHS England 10 year plan², and the UK Labour Government mission³. By offering psychological support, family or carer support, and building links between health, social care, community and justice services, the London Vanguard aim to prevent violence and its escalation, which aligns with the 10 year plan aims of focusing on prevention and reducing serious harm and knife crime over time.
- Through this evaluation, the London Vanguard have demonstrated that integrated, community-based care can succeed in a complex city context, offering lessons for workforce redesign and service integration to meet the 10 Year Plan's ambitions. Scaling this across the NHS will require sustained investment in training, IT systems, governance, and local ownership.
- Further, according to the Labour Government's 2025 NHS mandate⁴, there is a strategic shift from hospital-based care to community care, prevention rather than treatment, and integrated services. By focusing upstream on prevention in the community, the London Vanguard can reduce serious violence, helping to relieve some of the burden on policing and the youth justice system, and complementing measures such as more neighbourhood police, with community-based interventions. This feeds directly into the "Safer Streets" mission.
- The London Vanguard also fit with broader NHS aims to reduce health inequalities, support young people's mental health, and prevent long-term harm; all of which support a healthier population and a more sustainable healthcare system, and the potential to reduce waiting lists and future costs.

² NHS England. (2025). Fit for the Future: 10 Year Health Plan for England

³ Prime Minister's Office 10 Downing Street. (2025). Plan for Change: Milestones for Mission-led Government. <https://www.gov.uk/missions>

⁴ Department of Health and Social Care. (2025). Policy paper: Road to recovery: the government's 2025 mandate to NHS England. <https://www.gov.uk/government/publications/road-to-recovery-the-governments-2025-mandate-to-nhs-england/road-to-recovery-the-governments-2025-mandate-to-nhs-england>

- Many vulnerabilities that lead to youth violence, including poverty, social exclusion, marginalisation, and poor mental health are also barriers to opportunity. The Government’s missions emphasise opportunity, fairness, and social mobility. By offering support to children and young people, especially those from marginalised communities, the London Vanguard model can help reduce those barriers, giving children and young people a better chance at education, employment and healthier lives.
- The aim of the London Vanguard model corresponds closely to the ambition of Young Futures Hubs⁵, and as such the learning from this evaluation should be taken into account, including how to ensure children and young people who may not otherwise receive support can be provided with accessible support in the community, through the VCSE’s expertise, and the emphasis on co-production, partnership and collaboration.

Recommendations

The following recommendations were developed based on the evaluation findings and further consultations with our three advisory groups and Peer Power young advisors. Although these recommendations are aimed at different parts of the programme, they are interdependent.

Recommendations for NHS England:

- The continued development of London shared learning events in addition to the national shared learning events, to encourage the transfer of learning and development of cross-London networks.
- Support the London Vanguard to ensure there is strong and consistent buy-in from senior decision makers, who understand, have belief in and trust in this work.
- Consider further reductions in mandatory KPI reporting fields, particularly fields that did not have varied responses, or were not considered a priority by the London Vanguard.
- Provide clear and consistent guidance and training on completion of the national KPI data set to the London Vanguard.
- Consider providing guidance in relation to systems for KPI reporting that may streamline or assist with data entry across the London Vanguard, such as software that would allow staff to access and modify fields consistently.

⁵ Prime Minister’s Office 10 Downing Street. (2025). Young Futures Hubs to launch offering vulnerable young people lifeline. <https://www.gov.uk/government/news/young-futures-hubs-to-launch-offering-vulnerable-young-people-lifeline>

- Encourage or clarify the use of a single value to be used in all instances when a data field is not considered appropriate, e.g., the ‘Z’ (not applicable) value, which has not been widely adopted to date.
- Support the London Vanguard in their wider systems work, particularly in the areas identified that are not aligned with the London Vanguard’s ways of working and may not be ready to change.
- Consider the learning from the London Vanguard in the commissioning of future services, including statutory services, such as CAMHS.
 - CAMHS and adult mental health services could apply learning from the areas of effective practice as evidenced in this evaluation, e.g., improving access; not excluding patients for using substances, being more flexible in the support offer, providing more outreach, and a wider range of holistic interventions.

Recommendations for London Vanguard staff:

- A continued advocacy for, and emphasis on flexible approaches to support, particularly in ways that we have found through the evaluation to be effective for young people. For example, meeting children and young people where they are at, and providing responsive, reliable and flexible support.
- In addition to providing direct support to parents and carers where appropriate, parents and carers should additionally be regularly updated and informed about the support that their child receives, where feasible and appropriate.
- Linked to both sustained outcomes and the sustainability of the programme, consider the long term support and networks around the children, young people and their families.
- Consider the most suitable ways of tracking long term outcomes of young people who are no longer regularly engaged with the support.
 - This is likely to be the ‘wider circumstances’ outcomes and may include tracking their goals, or wellbeing.

Recommendations for both NHS England and London Vanguard staff:

- Alongside other sustainability considerations (such as training, dedicated staff, and community involvement) long-term consistent funding is required to deliver the direct work required (for example, youth work and work with VCSE organisations), as recognised by staff as well as parents and carers.
- In any further roll-out of the Vanguard, allocating more time to mobilisation and the crucial work of aligning partner organisations is key. A phased

approach is suggested that allows time for working with local teams to understand how mobilisation could work in practice, speaking to senior leads to ensure they are on board, and ensuring the relevant arrangements are in place for an agreed way forward.

- Collaboratively agree on the most feasible and appropriate way to capture and monitor the prevention, consultation and group work, activity and outcomes.
- Continued commitment to ensuring children, young people and parents and carers are supported by staff they can identify with, or who exhibit cultural humility to ensure inequalities that have already been experienced are not compounded.

Conclusion

Our evaluation highlights the unique and flexible approach of the London Vanguard, in supporting children, young people, parents, and carers via a bespoke, community-based offer. The London Vanguard address societal adversities and promote holistic wellbeing, bridging critical gaps left by traditional mental health services such as CAMHS. Their ability to engage marginalised communities, particularly boys and children from Black backgrounds, through trust, cultural humility, and co-production is a particular strength. Evidence from this evaluation suggests that children and young people experience better access to support, and improved outcomes in a range of areas, with the strongest impact when whole-family support is provided. The London Vanguard's collaborative model with statutory and VCSE partners has matured into effective delivery, and its emphasis on genuine co-production ensures relevance and sustainability. Overall, the evaluation demonstrates the London Vanguard's vital role in early intervention, prevention, and systemic change for children and young people who may be affected by violence.