



MAPS Elevate Final Report

18 November 2025

Introduction

The MAPS Elevate Peer Support Programme was a six-month pilot initiative with the aim of reducing self-harm and suicidal ideation among a group of 10 young people aged 13 to 16, by facilitating a supportive peer-led environment and encouraging ownership and investment in self-care and wellbeing. Bi weekly sessions introduced a range of evidence based self-care strategies and tools, and fostered supportive peer connections in the proven MAPS non-judgemental, non-advisory environment.

The project was co-designed by MAPS Practitioners in response to a growing need for accessible, early intervention mental health support for young people presenting with low mood, self-harm or suicidal ideation. Drawing on the established MAPS Mentoring framework, Elevate combines trauma-informed and Cognitive Behavioural Therapy (CBT) guided self-help principles to create a safe and engaging environment where young people can build supportive peer relationships and together explore positive coping strategies.

Delivery

Total number of sessions: 11

Total number of participants: 13

Total number of safeguarding incidents: Three

Total number of staff involved in delivery: Six

Session structure: 90 minutes per session

- Welcome and check-in (15 mins): Peer connection (early sessions led by Practitioners, with gradual progression towards young people leading). Session introduction, safeguarding and code of conduct reminders, short discussion about the session theme.
- Session activity (60 mins): Therapeutic or skill-building activity to promote emotional wellbeing.
- Reflection and close (15 mins): Reflect on the young people's experience of the activity and how it might be integrated in daily life. Answer any questions. Collect feedback, Close.







Date	Session	No. of Attendees
24/04/25	Introduction, healthy eating workshop	3
08/05/25	Exploring sensory activities including kinetic sand	5
22/05/25	Self-care box creation	10
12/06/25	Journalling	9
26/06/25	External speaker: Introducing Kooth	9
10/07/25	Exploring plants for wellbeing	5
24/07/25	Exploring music for wellbeing – external music coach	6
07/08/25	Collaborative art project – external art facilitator	7
28/08/25	Reflective session: Which strategies and tools have been useful? Creating dopamine menus.	6
11/09/25	Chocolate making – external facilitator	4
25/09/25	Animal therapy – external facilitator	6

See Appendix A for further details on each session.

Outcomes and impact

The outcomes and impact of the programme have been measured using a multifaceted approach, bringing together various forms of quantitative data with qualitative feedback. Due to the small cohort size, quantitative data will not provide statistically significant findings, but are nonetheless indicative of the outcomes achieved for participants. Young people were asked to complete our bespoke MAPS Mentoring Outcomes Check-in at baseline, half-way check point and ending, as well as session specific feedback forms, although not all participants chose to give responses.

Session Feedback

97% of young people's responses stated they felt **safe and comfortable** at the sessions, with the remaining 3% accounted for by a single 'I don't know' response.

88% felt the session was **helpful in some way**.

85% said they had a chance to speak or share.





94% found something **useful or relatable** in what was discussed.

85% said they would come to something like this again.

The average star rating across all sessions was 4/5.

Outcomes against stated aims

1. Improved general wellbeing

Self-report data shows that by the end of the programme, 71% of participants felt improved connections within their relationships, reflecting the value of peer connection in underpinning wellbeing. Furthermore, 57% also experienced increased motivation to do well at school/college/work - with none reporting a reduction - and 57% reported a more positive view of their future. Whilst these statistics sit slightly below the typical outcomes from the MAPS Mentoring programme, given the complexity of need experienced by the Elevate cohort, these outcomes significantly exceeded expectations. These outcomes could also reflect the short-term initiative compared with working long term with a young person.

These successes were further exemplified by parents' feedback. 100% of parents who completed the closing survey reported that their child's wellbeing had improved since taking part in Elevate, with two-thirds noting this as a significant positive change. Referrer feedback reflected the same pattern, with all professionals reporting an improvement in the young person's wellbeing and two of the three respondents rating this as significant. Notably, no parents/carers or referrers reported any decrease in wellbeing following the programme. In light of the level of need of the young people, it would be anticipated that a significant number would experience a decline across the timeframe.

'He seems a lot more happier [than before Elevate], because now he has something to look forward to. He rushes home on a Thursday to make the session.' (Parent of B)

'Her psychologist has said she has been doing a lot better in the last few weeks'.

(Discussed how this was due to range of support measures, including Elevate, being put into place. Parent of C).

2. Improved Mood and Behaviour

All parents who completed the survey reported an improvement in their child's mood since taking part in Elevate, with two-thirds describing this as a significant change. Similarly, all parents observed positive changes in their child's behaviour following participation in the





programme. From the young people's self-report data, 43% reported feeling more able to take responsibility for their own lives.

This was further supported by referrer feedback which indicated consistent improvement across both areas. All professionals reported better mood and behaviour among the young people they referred, with 50% rating mood changes and 67% rating behavioural changes as 'significant'. No respondents reported any decline across either measure.

'B always seems to find positives in the group sessions and has mentioned he was sad they were ending. His overall behaviour is more positive.' (Parent of B)

'We can see a big change to his confidence, social interactions and how he now controls and conducts himself in social situations' (Parent of C)

'Sessions have been good and helpful. I no longer sit at home with nothing to do.' (M)

'F enjoys being able to share her feelings and thoughts. And helpful learning to understand how to control her feelings better' (Parent of F)

3. Use of Wellbeing Strategies

Every parent reported that their child had used wellbeing strategies introduced during the sessions outside of Elevate. Activities mentioned included journalling, self-care boxes, and creative exercises to support emotional regulation. The most commonly used approaches were creative expression (100%), self-care boxes (80%), and journalling (60%), followed by sensory activities (40%) and gardening (20%).

'I would definitely use music to help with my mood... The music is what I will use and remember' (B)

'I liked making the self-care box. I have used some things from it' (A)

'I like the ideas, music and activities' (M)





4. Reduction in Suicidal Ideation and Self Harming Behaviours

65% of parents reported that their child's self-harming behaviours or suicidal thoughts had reduced since taking part in Elevate. No parents reported any increase. This aligns closely with the project's aim to reduce self-harm and suicide ideation through early intervention and peer-led emotional support. Referrers' feedback underpinned this, with 100% of professionals reporting a significant reduction in indicators of risk, such as self-harm, crisis presentation and need for support among the young people they referred.

5. Facilitate a supportive peer-led environment / facilitate social connections to support peer to peer learning

All parents and professionals (100%) reported that their child or the young person they referred had said something positive about Elevate in relation to feeling understood, supported, and part of a group.

'C is very happy. It's lovely to see - she has come so far. I said to her when you take leaps like going into MAPS all sorts of opportunities can come out of it. Some of them may be quite positive like meeting [her friends]' (Parent of C)

'I feel like its giving him confidence to go out now. Hes been asking to go to friends houses, which he didn't used to ever do' (Parent of F)

'My child found that she is not the only one who is struggling in life. Although she does not communicate much with the other peers at MAPS, she feels that she is in the community.' (Parent of C)

'B is now meeting up with the people he has met at Elevate which is such a positive for us. I feel they will continue to be friends which is what we wanted to gain for B as he felt alone before Elevate' (Parent of B)

'Kids there are more easy to interact with' (J)

'I'm so glad I went to MAPS otherwise I wouldn't have met my friends' (C)

'It's a great experience. You meet new people and make new friends' (B)

'As a group, I feel accepted' (E)

'It's an inviting place. It's safe - I know everyone here has the same experience. Sometimes it's better when you know others are feeling the same.' (M)





Analysis and Learnings

The pilot Elevate programme has been overwhelmingly well-received by young people, parents/carers and professionals alike. By providing a child-centred, community-based intervention, the programme provides a bridge to the gap in services previously available to young people struggling with their mental health in Sutton. The model brings together the core trauma informed principles of 'Collaborative and Empowerment', 'Safety and Stability', 'Resilience and Recovery' and 'Dependability and Compassion' and directs young people towards the thinking embedded in Guided CBT: 'Psychoeducation: Understanding how thoughts, emotions and behaviours are linked', 'Self-monitoring: Increasing awareness of emotions, triggers and responses', 'Problem-solving and coping strategies: Building personalised tools to manage distress' and 'Behavioural activation: Encouraging engagement in positive, mood-boosting activities'. In doing so, young people are supported and empowered to actively participate in managing their own wellbeing.

Several aspects of the model were considered to be central to the programme's success and should be maintained moving forwards.

- Key delivery by two MAPS Practitioners
- MAPS Administrator to liaise frequently with parents/carers to ensure consistency of messaging for young people
- Alternative options to activities provided to empower young people to choose to participate

There were a number of challenges to delivery, and although the process was honed and adapted in live-time through team reflections and participant feedback, certain challenges prevailed. Most significant was the inconsistency of attendance. Whilst 13 young people were engaged in the programme, attendance at sessions fluctuated, reaching 10 only once. To some extent, this is to be expected for this cohort of young people, however we would adapt the model for subsequent programmes, to include enhanced early engagement and more frequent sessions in order to minimise the likelihood of this.

Recommendations

Source funding to support the following recommendations:

- 1. MAPS to conduct a Home Visit to introduce the service, set out participation expectations and build relationships with the young person and family.
- 2. Participants to be provided with a programme outline at the start to alleviate anxiety around unpredictability of sessions.





- 3. Sessions to be held weekly or at the least fortnightly to sustain engagement and create increased momentum.
- 4. Total number of sessions to be reduced to 10, combining Sessions 8 and 9 so that reflection is conducted whilst taking part in the collaborative art project.
- 5. Total number of young people engaged to be increased to 15 where possible to underpin weekly attendance.
- 6. Trial the use of checked and trained volunteers to support staff capacity.

Appendix A: Session Outlines

Session 1 - Healthy Eating Workshop

The first session introduced the group to Elevate through a light, food-based wellbeing activity. Young people worked together to create fruit kebabs and smoothies, encouraging social connection, creativity, and discussions about healthy choices that support mental wellbeing.

Session 2 - Sensory Seeking

This session focused on exploring sensory tools for emotional regulation. Young people rotated between stations with air clay, kinetic sand, LEGO, and fidget toys to identify which activities helped them feel calm or focused. The session promoted self-awareness and inclusive coping strategies for managing distress or dysregulation.

Session 3 - Self-Care Boxes

Participants created personalised self-care boxes to support emotional wellbeing. Through decorating and discussion, they explored what comfort items or activities help them feel grounded. The creative format encouraged peer sharing and gentle connection within a relaxed, low-pressure environment.

Session 4 - Journalling

Young people learned how different types of journalling can help process emotions and track moods. They designed their own journals and completed activities such as "Year in Pixels" to reflect on daily feelings. The session strengthened emotional literacy and provided practical self-care tools for ongoing reflection.

Session 5 - Kooth





A guest speaker from **Kooth** (<u>www.kooth.com</u>) introduced the group to the online mental health platform, supporting digital awareness of accessible wellbeing services.

Session 6 - Plant Potting and Kooth Reflection

This creative gardening session encouraged mindfulness and responsibility. Young people decorated and named plant pots, then chose and planted herbs. The activity linked growth and nurturing to personal wellbeing, supported by reflections surrounding content discussed in the previous Kooth session.

Session 7 - Music Session

Led by a music teacher from Sutton Music Trust (www.suttonmusictrust.co.uk), this workshop introduced ukulele playing as a form of self-expression and stress relief. The inclusive, light-hearted environment promoted confidence, teamwork, and joy in learning a new skill.

Session 8 - Collective Art Project

Participants collaborated on a shared art piece exploring themes of identity and emotional expression. The session encouraged teamwork, communication and the therapeutic benefits of creativity, reinforcing group cohesion and peer support.

Session 9 - Reflective Session and Dopamine Menu

This reflective wellbeing session brought together all the coping strategies the young people had learned and developed throughout Elevate, using a visual summary to support inclusive learning. The group then explored the concept of dopamine and created personalised "dopamine menus" listing mood-boosting activities and support contacts. The session encouraged reflection, self-awareness, and practical wellbeing planning.

Session 10 - Chocolate Making

A chocolate-making expert (www. delivered a hands-on workshop exploring mindfulness through creativity and sensory experience. The group learned about cacao, crafted chocolate lollies, and participated in a sensory tasting. The session promoted calm focus, sensory awareness, and pride in personal achievement.

Session 11 - Animal Therapy Session

The final session provided a therapeutic and grounding experience through animal interaction. Participants engaged in calm, structured activities with therapy animals, supporting emotional regulation, empathy, and closure to the project cycle. It was a fun and unique shared experience that enhanced connections within the group and ended the programme on a positive (www.petsonthegreen.com).