KIKit, Birmingham [http://www.kikitproject.org/](http://www.kikitproject.org/)


Councillors met Mohammed Asfaq, Founder and Director of KIKit Pathways to Recovery.

During the presentations and discussion the following key points were noted:

- KIKit was based in one of the most deprived areas of Birmingham. The community had struggled with cohesion issues and in the past there had been times when there was very little consultation done before new settlers. For example, recently there had been 5 coaches of women and children resettled by central government. This had been with no prior knowledge by the local community and no consultation. Community groups had to sort out issues afterwards such as helping people understand the locality and systems including anything from booking GP appointments to when to put bins out. MA noted that this sort of issue can divide communities if not well handled.

- KIKit was formed by Mohammed Asfaq and he was passionate about addressing inequalities around drugs and gangs. He reported that his personal experience had showed him that there was very little support that was culturally sensitive. He questioned why were BME people not accessing services? He felt commissioning was not focussing on BME communities and had previously not been affective. KIKit was set up to address some of those issues.

- The building had been donated by a local business person. Local tradespeople had donated time. MA went back to college to study. The organisation had employed local people including young people and women to address some of the issues faced by women in the area.

- KIKit had become one of leading BME services in the country around substance abuse. KIKit had also been commissioned to provide sexual health services and for support around gangs and reducing crime. KIKit was a partner on the local Police Independent Advisory Group.

- [Change Grow Live](http://www.changegrowlive.org) - KIKIT are a sub-contractor to this. KIKIT deliver BME provision around health. KIKIT also work with the Police and Crime Commissioners Office around gangs’ issues. In addition to this, KIKIT work on Prevent.

- Starting the work on Prevent had been a challenging time as perception of Prevent was about spying and targeting particular groups. There were concerns they (KIKIT) may lose credibility. However, two of KIKIT’s service users were arrested and on national news. The two individuals were groomed because of their vulnerability. MA stated that Prevent sat under safeguarding and it was important to remember that it was addressed in exactly the same way as safeguarding for vulnerable individuals in other areas.

- KIKit is now a Home Office national example of best practice. The model used had been evaluated by Coventry University and a vulnerability assessment developed looking at what to do with each individual. The model focussed on cross vulnerabilities to help individuals. These could be around mental health, drugs and alcohol, sexual exploitation etc. and there was a focus on safeguarding. The model was jointly developed with Home Office Psychologists based on push and pull factors and scoring them. This combined a needs
assessment and vulnerability toolkit. MA believed KIKit was unique in this development of this approach.

- KIKit’s work was cross-cutting over three areas - Health and wellbeing - drugs and alcohol - community safety.

- For the alcohol programme, KIKit had worked closely with Alcohol Anonymous (AA). Mohammed commented that this was originally a Christian faith based organisation. They had worked with AA and with local mosques to adapt the AA model to fit it with Islamic traditions. This developed a 12 step programme to work with via the local mosque.

- Councillors were shown information about the organisation’s 5 phase multilingual support delivered in partnership with Reach Out Recovery.

- The diversity in recovery and Muslim Recovery Network focused on addiction. The aims were to develop a care plan based on the addiction. For example, dealing with cravings using CBT (Cognitive Behavioural Therapy), looking at obstacles and barriers for example language and cultural barriers could be looked at in more detail.

- KIKit had been operating for 10 years. They felt that patterns for becoming addicted such as peer pressure and experimental use were mirrored across all groups but barriers and obstacles to support and treatment were different. The treatment system appeared to be designed for average white male person and there were very few culturally sensitive services.

- Regarding community perception of working with Prevent, MA felt “either we go with what the community says or what the evidence says”. At first, Prevent seemed to focus on the Muslim community, “once we started working on it we realised there were a lot was scare tactics being mentioned about it without a base. Nobody has ever asked us for information on the community”.

- When KIKIT developed a model it was evidenced through the community as to how it would show benefit. The organisation obtained the trust of the community by helping people in the local mosques.

- 3 case studies are available on KIKIT’s website. http://www.kikitproject.org/about-us/

- KIKit used a social value database that calculated savings for local authorities based on the prevention work that had been done. This model showed the work had an added value of approximately £12 million.

  KIKit video Pathways model

- Pathways project - pathways in community on issues of radicalisation and extremism. At the beginning the Prevent Policy was not been rolled out appropriately. There had been blurred messages and there was a negative perception in some communities. Now there was much more balance.

- The aim was about establishing pathways within the community, so people in the community could highlight issues and concerns which could be dealt with within the communities’ themselves.
Mohammed gave an example of “a mother whose son was looking up extremist Islamic content on the internet, the son then started saying to the mum that she should cover her face/pray in a certain way. There were also a range of other issues including autism and previous drug abuse. He started to just concentrate on religion and was hanging out with a new similar friend who she didn’t know. She didn’t know where to go for help and was concerned if she went straight to Prevent could be negative for everyone. She then found out through the local mosque that KIKIT could help. Through the mosque she was referred to KIKIT. KIKIT went to her home and were introduced to her son. Counsellors started the process - engaged a mentor – and started to implement the framework. The young man agreed to do the programme and was introduced to a theology expert. He had a manipulated view of the Koran and the specialist was able to show what the Koran actually was. The programme was delivered by the Muslim community in the Muslim community. There were no statutory bodies involved. The mother got help from female support workers. Protective measures were put in place so there was no need to go to channel. The programme sits alongside channel.”

The programme works in local mosques - working with Muslim community through the Mosque. Staff and the Imams are trained so that they have pathways in place. The training is on a range of cross-vulnerabilities - drugs/gangs/radicalisation and provides information on services through the local authority. There could be mentoring support either 1:1 or lived experience, or through channel mentor.

At the beginning there was some resistance – people were worried about a range of issues such as drugs/gangs/knife crime/radicalisation. The model was to address the concerns and set up specific pathways for support. If had focussed on Prevent alone it would not have been the same.

KIKIT had developed a vulnerability assessment which they only used when they were concerned someone was being radicalised or groomed.

KIKIT was working with the Home Office approved channel intervention provided. This meant that referrals directly from Channel could come to KIKIT. The organisation was becoming an official channel mentor.

Sometimes programmes were delivered and advertised at Mosques. Some Mosques and individuals were happy to engage with this, others could be a bit more resistant. KIKIT found often younger people were happier to engage in this way.

KIKIT had worked looking at the work of Dr Lewis Herrington. His research had looked at the propensity of those involved in loan actor terrorist offences of having a history of substance misuse and their vulnerability to grooming. He considers the importance of the 12 step recovery programme.

KIKIT representatives sat on the Community Safeguarding Panel within the Local Authorities safeguarding structure. This sits alongside Channel and people were recruited for membership in a similar way to school Governors recruitment process (skills match and interview/ DBS check etc.). They also worked with the local police Group and partners in the community and voluntary sector. The Schools Prevent Officer also sat on the panel and the panel was supported by Council Leaders. There are options for the community to contribute.
MA noted that some organisations were very strong opponents of Prevent such as CAGE. Sometimes, when errors occurred in national policy these were highlighted to national media and sometimes promoted in certain areas, potentially to turn community against Prevent. There are some people in the community who do not want the programme to work. MA felt these people should not be given a platform and he would recommend not trying to get anti-Prevent bodies on board just move on.

KIKit was working with 30 mosques - winning over hearts and minds. They often carried out ice-breaker exercises looking at cross-vulnerabilities. Part of their role was around educating the community and developed hubs. Every Friday their practitioners were at the mosques, working in youth services and local colleges. They worked alongside an online project with schools programme around grooming which was separate from KIKit.

KIKit’s Pathwayz programme had engaged over 17 individuals in 2017-18. 375 individuals in total had been provided low level support. Two service users with tickets to Syria were helped, engaged, and educated; they learnt they were victims. 70 individuals had been offered more intense support.

Councillors were shown a video about an extreme right group targeted vulnerable crack addict who was ex-army. http://www.kikitproject.org/about-us/

Confidence building in community needed a structure and process. Manchester Council had just commissioned KIKit to set up structures to support the community. Mosques that had been reported as being totally anti-Prevent were happy to work with them through these new structures. There was a 2.5 year commissioning plan. The links made could draw in other faiths for example the Hindu and Sikh community. Other communities suffered from anti-Islamic hate crime and racism.

When working with vulnerable individuals vulnerable, KIKit worked with mentors and outreach workers who reflected the community they were working. This helped people to be actively engaged. The initial connection was very important and once these initial engagement barriers were broken down it became easier. KIKit supported all communities and recognised that marginalisation can take place in all communities.

A really good community cohesion strategy worked to fight extremism and radicalisation. Part of this was through schools and community workshops. Themes such as drugs and gangs and using video clips and case studies on range of issues could help to engage. There was lots of under reporting of issues and challenges faced within the communities.

The Home office allocation from Prevent funded 2 members of staff. Community safety budget could be used for community cohesion events. Mohammed recommended that the Home Office could be approached for funding through their community engagement funding mechanisms.

There could be a challenging relationship between bodies delivering Prevent and the local community and there was not always the same degree of community partnership in this model. It could possibly be seen as “doing to rather than with”. MA felt that Prevent funding should only be allocated where people acknowledge the funding openly and don’t keep it secret. He felt organisations who won’t openly disclose the funding undermined organisations that do.
• KIKit was now working with Luton, Cardiff, Manchester Bradford, Coventry and Birmingham and had been asked for Leeds, Liverpool and Newham.

• Following a question from Cllr Sheikh regarding training in schools, MA suggested that if the training for teachers was good, teachers were empowered to only act where necessary and made less referrals. It should be kept in the context of all safeguarding. KIKit had worked with schools and had very good feedback. KIKit encourage schools to work with parents and talk about cross vulnerabilities in the community so the parents are equipped. KIKit found in their experience, once parents understood they were supportive. KIKit worked with Birmingham Council’s Prevent Coordinator on this.

• Following a question regarding community groups, MA stated that Local Authorities should do more and really hold to account groups they are funding including through proper evaluation. He felt this should be core part of commissioning process which should also include commissioning culturally sensitive services. He felt if it was in the contract etc. that X amount of the BME community had to be engaged then it will be done. It was important that investment in the community and voluntary sector was done well.

• At KIKit, clients confidentially did not go to Home Office. The Home Office did not know the names of the people just the details of vulnerabilities etc. and common trends etc.