

CONFIDENTIAL

Evaluation of Rochdale Families Project

Policy Contexts and Research Evidence

John Flint

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1. Introduction

This report provides a summary of the policy context and existing research evidence on intensive family support, and related, projects.

2. Policy Context

A key focus of both the previous and current governments is early intervention and a whole-family and family-centred approach (Department for Children, Schools and Families, 2009b; Department for Children, Schools and Families, 2010a, 2010b and 2010c; Hughes, 2010; Loveless and Hickling, 2010) which have been highlighted in the *Every Child Matters* (HM Government, 2004), the *2007 Children's Plan* (Department for Children, Schools and Families, 2007), the *Healthy Children, Safer Communities Strategy* (HM Government, 2009), the *Youth Task Force Action Plan* (Department for Children, Schools and Families, 2008) and the *Think Family* initiatives (Cabinet Office, 2007). A range of national and pilot programmes have been established to ensure more intensive early intervention and preventative approaches are delivered to the most vulnerable and at risk children, young people and families. These include, for example, the Healthy Child Programme, the Nurse-Family Partnership Programme (see Barnes et al., 2008 and 2009) and the Sure Start Programme. These initiatives sit within the wider framework of statutory guidance provided by *Working Together to Safeguard Children* (Department for Children, Schools and Families, 2010a).

As part of the Youth Crime Action Plan, every local authority was provided with funding to implement *Think Family* services and system reforms. Fifteen *Think Family Pathfinders* were

selected, with a focus upon the most vulnerable families not currently being helped by services and delivering preventative work to avoid situations escalated. The principles of these Pathfinders were explicitly linked to those of Family Intervention Projects (see Kendall et al., 2010; Department for Children, Schools and Families, 2010b). Fourteen *Targeted Youth Support Pilots* were also established in 2005 to provide personalised packages of support at the earliest opportunity to vulnerable and at risk young people (see Palmer and Kendall, 2009).

A national network of *Family Intervention Projects* (FIPs) was established during 2006-2007 as part of the *Respect Action Plan* (Respect Task Force, 2006). 53 FIPs were included in this network, including 34 new projects and 19 previously existing projects. This national network had been preceded by a number of longer-established local projects and initiatives, including the Dundee Families Project, five projects delivered by NCH and local authorities, a project established by Sheffield City Council and the Rochdale Inclusion Project operated by Shelter (see Dillane et al., 2001; Scott, 2006; Nixon et al., 2006 and 2008; Jones et al., 2006a and 2006b). FIPs can be delivered through outreach support to families in their own homes, support in dispersed (temporary) accommodation or 24 hour support in a residential unit. In addition to these three models, there are three types of FIPs, each with a different emphasis: Anti-social Behaviour (aiming to reduce anti-social behaviour and prevent homelessness), Child Poverty (aiming to address poverty and worklessness) and Youth Crime (aiming to address the risk of children offending). As of March 2010 there were 68 Anti-social Behaviour FIPs, 32 Child Poverty FIPs and 150 Youth Crime FIPs in England (Dixon et al., 2010; National Centre for Social Research, 2009). In June 2010 two new types of family intervention were established, respectively part-funded through Housing Challenge and focusing on women offenders. The Scottish Executive (now Scottish Government) also established a *Breaking the Cycle* network of family intervention projects (see Pawson et al., 2009).

The Youth Task Force Action Plan established 52 *Challenge and Support Projects* from October 2008. These projects were aimed at preventing poor behaviour from escalating by supporting multi-agency working and solutions. The projects were expected to significantly reduce anti-social behaviour involving young people and to reduce first time entrants to the criminal justice system. It was envisaged that the projects would involve more than 15,000 young people and their families each year. In addition the Plan established 20 *Intensive Intervention Projects* (IIPs). These projects were conceptualised as an extension of existing Family Intervention Projects (FIPs) and aimed to turn around the lives of up to 1,000 of the most challenging and problematic young people each year. The IIP model was developed in recognition that a small number of young people involved in crime and anti-social behaviour were not actively engaged through current service provision. The IIPs would target young

people before they entered the criminal justice system and provide help to those young people and their families who demonstrated a number of risk factors but did not traditionally meet the thresholds for statutory or specialist services. IIPs are delivered by both statutory and third sector providers.

The new government is establishing a national programme focusing on turning around the lives of families with multiple problems. The government will create a single Early Intervention Grant, worth around £2b by 2014-15. This will draw together a range of funding streams and, alongside the Public Health Grant, will enable local authorities to take a strategic approach to providing support to vulnerable young people and families (HM Government, 2010). Key themes within the government's approach include early intervention, multi-agency working, promoting the role of families, partners, carers, peers and community champions and expanding the role of non-state service providers (HM Government, 2010; Ministry of Justice, 2010).

The government has also commissioned, or is expecting the findings of, a series of reviews, including the Graham Allen Review of Early Intervention (see Allen and Duncan Smith, 2010), the Munro Review of Child Protection, the Frank Field Review of Poverty and Life Chances, the Family Justice Review and will be producing the Child Poverty Strategy by April 2011. These reviews are occurring within a context of the need for savings in the current economic climate and the pressures of increasing demand on children's services (Department for Education, C4EO and ADCS, 2010; Local Government Leadership and City of Westminster, 2010).

3. Existing Research Evidence

Outcomes

A series of evaluation studies have been undertaken of Family Intervention Projects (FIPs). It should be noted that each of these evaluation reports contain a number of caveats that the researchers themselves have identified in terms of the limitations of the data. The key outcome findings of the each of these evaluations may be summarised as follows:

- The evaluation of the Dundee Families Project found that two thirds of 56 closed cases had successful outcomes and that 'the great majority of families made progress' (Dillane et al., 2001; Scott, 2006). Social work and housing respondents judged the situation of families at the end of the intervention as satisfactory in 19 out of 25 cases and 26 out of 30 cases, respectively.

- The evaluation of the Shelter Inclusion Project found that 60 per cent (of 45 households who completed the intervention) no longer exhibited any anti-social behaviour and a further 11 per cent had reduced levels of anti-social behaviour (Jones et al., 2006a, 2006b). 84 per cent of closed cases were assessed as no longer being at risk of homelessness and there were also significant improvements in financial management and school attendance and a small number of adults had secured employment.
- The evaluation of six FIPs by Nixon et al. (2006), based on 256 cases, found that the projects had helped the 'vast majority of families to achieve remarkable changes'. For 85 per cent of families complaints about anti-social behaviour had ceased or reduced to a level where the tenancy was no longer deemed to be at risk. In 80 per cent of cases, project workers believed that families' tenancies had been stabilised, with a consequent reduction in the risk of homelessness and there were also significant improvements in children's health, wellbeing and educational attainment.
- The evaluation of the design, set-up and early outcomes of the 53 FIPs established as part of the Respect Action Plan (White et al., 2008) found that 78 per cent of 885 referred families met the referral criteria and engaged with the projects. These families had high levels of anti-social or criminal behaviour and were homeless or at risk of homelessness as a result of anti-social behaviour. The evaluation found that early outcomes for 90 families who had completed a FIP intervention displayed 'considerable improvements' in all key areas. The proportion of families facing anti-social behaviour or housing enforcement actions reduced from 45 to 23 per cent and 60 per cent to 16 per cent respectively. Further positive outcomes included reduced risk factors of relationship breakdown and domestic violence and improved school attendance. However, 35 per cent of families were still reported to be involved in anti-social behaviour (White et al., 2008). Further monitoring of these FIPs (based on 7231 cases) found that the referral acceptance rate had fallen to 67 per cent (Dixon et al., 201; see also National Centre for Social Research, 2009). 65 per cent of families had a reduction in problems including parenting, relationship or family breakdown, domestic violence or child protection issues. There was a reported reduction in anti-social and criminal behaviour for 64 per cent of families. 56 per cent and 48 per cent of families with reported health risks and education and employment issues respectively had experienced a reduction in these risks and issues.
- The further evaluation of the Dundee Families Project, the Aberdeen Families Project and the three new 'Breaking the Cycle' Projects in Scotland (Pawson et al., 2009) concluded that it was 'a successful venture.' 70 per cent of families whose cases were closed during the evaluation period successfully completed their agreed support programme. Complaints of anti-social behaviour had reduced in 94 per cent of cases

and project staff assessed 81 per cent of families as being at reduced risk of homelessness or eviction. In half of all cases the assessed risk of family break up had been reduced, rising to 63 per cent amongst those who completed their support programmes. In 62 per cent of cases there had been reductions in depression and there had been reductions in alcohol abuse in 43 per cent of cases. Children's educational progress and prospects had improved in 66 per cent of cases.

- A report on the Westminster Family Recovery Programme (Local Government Leadership and City of Westminster (2010), based on a sample of 22 families, found that there had been a 69 per cent reduction in 'accused offences' and an 83 per cent reduction in the average number of 'suspected offences' per month. There had also been a 21 per cent increase in the proportion of individuals registered with a GP, 80 per cent of children for whom truancy was an issue had increased their school attendance and threats of eviction and overcrowding had been reduced. In addition, the report claimed that there had been progress in child protection cases, an increased engagement with mental health services and a greater proportion of families effectively implementing a domestic violence safety plan.
- An interim evaluation of the four IIPs delivered by Catch22 (Renshaw and Wellings, 2010) found that, although only small numbers of young people had reached the exit stage of the projects, analysis suggested substantial reductions in problematic and risky behaviour and also reductions in over ten risk factors, including enforcement action, exclusion from school and negative peer groups.

A common finding of previous evaluations has been that family members have generally been very positive about the FIPs and have also identified significant improvements in their situation as a result of the FIP intervention (Dillane et al., 2001; Scott, 2006; Jones et al., 2006 a and 2006b, Nixon et al., 2006; Pawson et al., 2009).

It should be noted that FIPs have also been subject to criticism. Garrett (2007) argues that the core accommodation unit elements of some FIPs 'erode any sense of authentic citizenship' amongst families and 'infantilize' adults. He is also critical of the extent of coercion and surveillance. Gregg (2010) criticises the 'mis-targeting and misrepresentation' of families within the FIPs, with a focus upon anti-social behaviour when families were actually targeted for exhibiting statistical risk factors. He is also critical of the inadequacy of professional mental health services provision within the FIPs, questions the extent to which the support is actually 'intensive' and contends that FIPs have not delivered sustained reductions in anti-social behaviour in the wider community.

Cost-benefits

It has been claimed that tailored and co-ordinated support packages around the needs of the whole family may produce estimated savings of £49,000 per family per year (Kendall et al., 2010; HM Government, 2010; see Nixon et al., 2006; Pawson et al., 2009 and Gregg, 2010, for methodological discussion of the challenges of cost-benefit approaches).

The evaluation of the Dundee Families Project calculated a cost saving of £117,600 per annum based on 11 cases (Dillane et al., 2001; Scott, 2006). The evaluation concluded that at worst, the project cost no more than conventional mechanisms but that it was more likely that it had actually generated real cost savings. The evaluation of Shelter Inclusion Project argued that the cost of £9,000 per household represented 'good value for money' (Jones et al., 2006a and 2006b). The evaluation of six projects (Nixon et al., 2006) found that the average total cost of closed cases ranged from £3,954 to £5,991 in 2003-04 in projects without a core unit and the average total cost of closed cases in projects with a core unit ranged from £27,214 to £36,850 in 2004-05. This was contrasted with an estimated annual cost of a family evicted for anti-social behaviour with three or four children requiring custodial care, residential care and foster care of £330,000. The evaluation concluded that the projects offered 'excellent value for money.' The evaluation of five FIPs in Scotland (Pawson et al., 2009) calculated an average per month cost for families of £1,300 to £1,900 and the average cost of a closed case to be £15,500 to £23,000, based on an average duration of intervention of 12 months. The evaluation concluded that the projects may be cost-effective in the short term and that it would not require many positive outcomes for the project benefits to outweigh project costs, although this was dependent upon timescales and outcomes being achieved. A report on the Westminster Family Recovery Programme (Local Government Leadership and City of Westminster, 2010) based on a sample of 50 families argued that the projects provided 'immediate and longer-term reductions in service costs'. The report calculated average estimated cost avoidance per family of £41,000 compared to an average cost of project provision of £19,500 and therefore that there was £2.10 estimated public purse costs avoided for every £1 of project expenditure. A recent publication (Beatty, 2010) has developed a framework for cost-benefit analysis for early childhood interventions.

Factors Linked to Positive Outcomes

Although there is a great deal of differentiation between FIPs and each is affected by their local context (Nixon et al., 2006), previous evaluations have identified a number of common factors that appear strongly linked to achieving positive outcomes, including:

- The perceived independence of the projects and project workers, and their differentiation from 'traditional' statutory agencies (Dillane et al., 2001; Jones et al.,

2006a). The voluntary sector management of the Dundee Families and Rochdale Inclusion Projects was a further important element in this independence (Dillane et al., 2001; Scott, 2006; Jones et al., 2006)

- The combination of the threat or actual use of sanctions and enforcement mechanisms with supportive interventions (White et al., 2008; Jones et al., 2006b). However, Jones et al. (2006a) and Renshaw and Wellings (2010) also identified the voluntary approach to participation to be a key factor of successful outcomes. Renshaw and Wellings (2010) further identified the difficulties in using formal sanctions and the importance of rewards.
- A flexible approach, with scope to use resources creatively, to try new ideas and to 'think outside the box' (Dillane et al., 2001; Scott, 2006; White et al., 2008; Local Government Leadership and City of Westminster, 2010; Renshaw and Wellings, 2010)
- Effective multi-agency working, embedded within local partnerships and co-ordinated and integrated support packages (Dillane et al., 2001; Scott, 2006; Nixon et al., 2006; Jones et al. 2006a and 2006b; White et al., 2008; Renshaw and Wellings, 2010)
- The recruitment and retention of high quality staff (Scott, 2006; White et al., 2008) with the ability to support and challenge families based on professional values of listening, being non-judgemental, promoting wellbeing and establishing relations of trust (Nixon et al., 2006)
- Dedicated key workers with small case loads and the capacity to deliver intensive support (White et al., 2008; Scott, 2006; Renshaw and Wellings, 2010), although the actual number of contact hours did not appear significant (Dixon et al., 2010)
- A whole family approach and the ability to work with all household members, including parents (Jones et al., 2006; White et al., 2008; Local Government Leadership and City of Westminster, 2010; Renshaw and Wellings, 2010)
- Long term commitment, persistence and consistency to families, including staying involved with families for as long as necessary and in some cases for at least years (Dillane et al., 2001; Scott, 2006; Nixon et al., 2006; White et al. 2008; Renshaw and Wellings, 2010). Dixon et al. (2010) found that the longer the period of intervention the greater the likelihood of successful outcomes and that this was the most important explanatory factor
- The capacity to work across many types of households and flexibility in referral criteria (Jones et al., 2006a and 2006b; Renshaw and Wellings, 2010).
- Preventing an over-dependence on project workers from developing amongst families and focusing on sustainable skills and strategies (Pawson et al., 2009)
- Dixon et al. (2010) also found some socio-economic and demographic factors to be linked to more or less successful outcomes, but only for specific domains

Issues

Although the evaluations of FIPs have generally been positive and several have claimed their cost effectiveness and value for money, a number of issues and challenges have also been identified, including:

- Evaluations have been subject to critique (Garrett, 2007; Gregg, 2010). Garrett (2007) claims that the Dundee Families Project was 'less than an emphatic success', and highlights the levels of re-referrals and the dissatisfaction of some families. He also criticises the sample size and 'lack of data' of the evaluation by Nixon et al. (2006) and states that the evaluation is 'far too buoyant and emphatic'. Gregg (2010) argues that the evaluations are largely based on qualitative measures, with small sample sizes (biased towards those with positive experiences and outcomes from FIPs, see also Dixon et al., 2010) and dependent upon subjective evidence from project stakeholders, with no control groups. He therefore states that there is no objective evidence for the scale of behaviour change claimed in some of the evaluations, nor its sustainability.
- All of the evaluations have been explicit in stating that there is weak evidence about whether positive outcomes for families will be sustained once they have exited a FIP intervention (White et al., 2008; Pawson et al., 2009; Jones et al., 2006b). However, Nixon et al. (2008) undertook a follow up study of 28 families from the NCH projects and found that 20 of these families had been able to sustain positive change and had not been subject to further complaints about anti-social behaviour and their homes were not at risk from enforcement action at the time of the research, although Gregg (2010) contends that the data indicates that only 31.5 per cent of tracked families had reduced anti-social behaviour outcomes. Dixon et al. (2010) followed up 283 families between none and 14 months after exiting a FIP and found that 84 per cent and 71 per cent of families had sustained positive outcomes in family functioning and anti-social and criminal behaviour, respectively. 63 per cent of families had sustained health outcomes but only 34 per cent had sustained education and employment outcomes. The evaluation of the Dundee Families Project (Dillane et al., 2001; Scott, 2006) reported that considerable numbers of families were still doing well following the end of the project intervention, particularly in relation to housing issues, but that some families still had serious difficulties and in two cases children had subsequently been taken into care.
- Some concerns have been identified about the robustness of exit strategies and future support packages provided to families (Jones et al., 2006b; Scott, 2006; Renshaw and Wellings, 2010; Gregg, 2010). The study of the Dundee Families

Project found that the situation for some families deteriorated soon after exiting (Dillane et al., 2001; Scott, 2006).

- There have been reported weaknesses in interagency working, including referral processes, both in terms of recruitment of families to the FIPs and accessing services for families during their period of FIP intervention (Dillane et al., 2001, Scott, 2006; Renshaw and Wellings, 2010). Some FIPs have also experienced problems in recruiting and retaining staff (Pawson et al., 2009).
- There is a lack of research evidence about the reasons why some families do not engage with FIPs or subsequently disengage during the intervention. There is also a lack of knowledge about the outcomes for these families, or what alternative forms of support could be provided (Aldridge et al., 2008; Dillane et al., 2001; Scott, 2006; Jones et al., 2006b; Gregg, 2010; Garrett, 2007).
- FIPs had been less able to address mental health issues (Pawson et al., 2009; Gregg, 2010), although an increase in engagement with mental health services was identified in one recent report (Local Government Leadership and City of Westminster, 2010).
- It is difficult for FIPs to have, or demonstrate, a wider impact on communities (Jones et al., 2006b). However, Nixon et al. (2008) found that in 92 per cent of cases, project workers assessed that the risk to communities had reduced or ceased at the point when families exited the projects. A report on the City of Westminster Family Recovery Programme projects (Local Government Leadership and City of Westminster, 2010) claimed that these had achieved increased feelings of safety and satisfaction amongst local residents, with 48 per cent of neighbours reporting reductions in anti-social behaviour, based on a survey of 95 neighbours of 22 project families.

Key Findings from Related Initiatives and Approaches

The Family-Nurse Programme was valued highly by clients who reported that the programme was making a difference and that they had gained confidence as parents. There were also indicative reductions in smoking during pregnancy and better breastfeeding rates. The client-Family Nurse relationship was identified as the key to the effectiveness of the programme. Caseload size and wider family involvement were identified as effective working (Barnes et al., 2008 and 2009).

An early impact evaluation of the Think Families Pathfinders (Kendall et al., 2010) found that 48 per cent of families exiting the support programme had reduced levels of need and a reduction across all risk categories. The risk of family violence was reduced by 70 per cent

and risks of lack of family support networks, debt and housing status were reduced by almost 50 per cent of families. There was a net improvement in employment status and a third of individuals successfully addressed emotional and mental health issues or drug and alcohol issues. There was a 50 per cent reduction in the number of individuals engaged in anti-social behaviour and there were reductions in school attendance problems, negative impacts of caring responsibilities for young people and child protection risks. Families' levels of resilience were also increased. However, one fifth of families had additional needs identified that could not be supported or did not engage with the support. Preliminary Social Return on Investment analysis of 53 families indicated a net benefit saving of £1.5m.

The evaluation of the Targeted Youth Support Pathfinders (Palmer and Kendall, 2009) indicated that they had achieved positive changes in how professionals delivered support to vulnerable young people and improved knowledge, skills and behaviour of practitioners; however, there had also been increased workloads. Three quarters of young people were positive about the support that they received and the package of support was deemed to be effective in nearly two thirds of cases. However, only one fifth of young people had their assessed long-term needs met within the timeframe of the research. Key factors linked to effective interventions included positive relations between young people and lead professionals, effective challenge linked to co-ordinated, consistent and continuous support, awareness of the range of interventions and services available and the young people's own motivation to change.

The evaluation of the Early Parental Intervention Pilot Projects in Wales (Wright et al., 2010) found that tailored holistic support for families could achieve positive outcomes for families in a relatively short period but commonly problems are multiple and chronic, requiring medium to long term (and possibly permanent) intervention. The evaluation also found that parenting support needs to be combined with direct work with children. Some models of projects had kept families united and the intensive level of working enabled deep, chronic family problems to be addressed, leading to multi-faceted improvements in family life. Some projects had also worked well with families who did not initially accept that they had a support need. The evaluation concluded that practical assistance, social integration, intra-familial communication, the structure and stability of family life and parental attitudes to children all needed to be addressed.

The personalisation of support services, including the use of personalised budgets has been identified as an important aspect of effective support and positive outcomes, particularly when it is linked to whole-family approaches (Simpson and Murray-Neil, 2010; Duffy, 2010; Duffy et al., 2010). The importance of a co-ordination role is highlighted in a recent study (Aperia Limited, 2010) which found that at least 25 services, provided by nine public sector organisations, may be provided to low income families. This may appear very disjointed and

disorganised from the perspective of the families themselves. The study also found a lack of effective targeting and estimated that 28 per cent of low income family households with children in early years were not accessing any of the available support services.

4. Summary

There is a wider continuing policy focus upon early intervention and whole family approaches. The existing research evidence on Family Intervention Projects suggests that they have generally been effective and have generated cost-benefit savings. However, there are a number of weaknesses in the evidence base, particularly in relation to longer-term outcomes and issues of non-engagement. A number of factors have been identified as being linked to positive outcomes, including independence, the combination of support and enforcement, flexibility, multi-agency working, a whole family and holistic approach and the quality and commitment of project workers. Evaluations of related early intervention and whole family initiatives have also provided positive indicative findings.

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