Executive Summary

The modern world is characterised to a considerable degree by continuing transformation and change: innovatory and radical developments emerge and become commonplace with great speed. Many of the physical expressions of change are easy enough to identify and list, perhaps starting with computers in all their manifestations and implications. It is however a great deal more difficult to be clear about the impact of these developments in social terms, and especially in relation to families and children. There is evidence nevertheless that quite fundamental questions arise for parents and families about aspects of the modern world, about the practises and forms of behaviour that can be accepted, about where the dangers and risks lie for children, and about how best to prepare them for these new worlds.

There is also a belief that children’s lives today have become more difficult, and that they are more vulnerable than formerly, with increased levels of divorce, drug-taking, poor educational outcomes, violence, and so on. It is however not a straightforward matter to establish a clear cause-and-effect relationship between these changes for children, and wider modern developments. What is not in doubt however is that it is now possible for young people to have instant contact with ideas and images in the form of music, film and literature, that were not available in the past, and that not all of these experiences are necessarily positive or valuable.

One significant consequence of these developments has been an increased emphasis on the notion and the importance of ‘Early Intervention’ with those children and young people who appear to be vulnerable or whose behaviour suggests a need for help and support. The idea also relates to the view that what happens to children when they are very young is likely to have a crucial influence on their well-being and achievement through childhood and into adulthood. Early Intervention therefore involves a course of action that includes identifying and providing support as early as possible for children in need of help and protection.

The phrase can, however, bear a number of interpretations such as: referring to the age of the child when intervention is found to be important or necessary; or, alternatively, referring to the time or stage in the development or appearance of problems in a child’s life. An inclusive understanding however refers to the point in time at which a child or young person becomes vulnerable to poor developmental outcomes.
Background to the Programme

The Early Intervention Programme (EIP) grew out of a need, identified by the Children’s Services Planning in Northern Ireland, to address children coming in to conflict with the law. After a successful pilot and extension of an early intervention project in the Southern Trust area, it was decided to roll this out across Northern Ireland. The EIP received funding in 2008 through the DHSSPS for a three year period, and the Health and Social Care Board (HSCB) commissioned the Programme. Five projects were established to cover each of the Trust areas, and these were delivered by three Agencies, that is: Action for Children (covering the Northern Trust area); Extern (two projects covering the Western and South-eastern Trust areas); and, NIACRO (two projects covering the Belfast and Southern Trust areas). The EIP’s aim was to support children between the ages of 8 and 13 years, vulnerable to offending and antisocial behaviour, and their families.

Independent Research Solutions (IRS) was commissioned to carry out an evaluation of the Programme, looking at the first two and a half years of the three year Programme. The findings that follow are based on a number of research procedures, including: desk research, made up of a literature review and an analysis of monitoring data; observations of practice; and interviews with a range of key stakeholders including, the management and staff of the Programme, referral agencies and children, young people and their parents/carers receiving the service.

Key findings from the monitoring data

The Programme is extensively monitored by the HSCB, with projects completing quarterly monitoring returns. These give details on: staffing structures and their participation, and workloads; and on new starts and discharges in the quarterly period. In addition each Agency produces an Annual Report. All manner of information is collected, and perhaps the most telling of this is the data in relation to outcomes. Children and their families are scored against an outcomes framework which includes evidence-based indicators of risk and protective factors across a range of five domains. This allows for a consideration of progression from admission to discharge for each discharged case. The youth diversion status for each child is also collected on admission, during the programme and on discharge and this information is also collated for the reports.

The evaluation carried out an analysis of the monitoring data and the key findings from this are reported below. In first two years, there were 409 admissions across the Programme, with an increase of 20% between year one and year two. All of the projects had expanded the service across their Trust area by the second year, with some going into more rural areas where there was evidence that they were covering regions of need. An analysis of the monitoring data made it clear that those children and their families admitted to the five projects were already experiencing a range of challenges and difficulties in their lives. This can be illustrated in a number of ways, such as: the number of other agencies involved with them, in addition to the referral agent; a great number having difficulties in school; over one-quarter were on the Child Protection Register; almost one-quarter were confirmed or under assessment for Attention Deficit

1 Areas with high multiple deprivation, high populations of children, high percentages of children with less than 85% attendance at school.
Hyperactivity Disorder (ADHD) behaviour; and around two-fifths were known to police on admission.

The monitoring data on discharged cases suggest that there was considerable improvement shown for all those who completed the programmes across each of the five projects: this involved around three-quarters of all discharges, with about one-tenth disengaging. Each case is scored on a 1-9 scale, where 1 represents having a ‘lot of difficulties’ through to 9, which indicates ‘very good’ across the five factors. The progression across five factor domains (that is individual, parenting, family influences, community influence, and education factors) between admission and discharge is clearly shown in the graph below.

The graph shows an almost complete reversal from the level of difficulties experienced on admission to the level of difficulties on discharge: indeed it is almost a mirror image; indicating the positive outcomes for the children and their families as a result of the intervention. Although this form of scoring may be criticised as being subjective, its strength is that the scoring is usually agreed between the staff, the referrers, the children themselves and their parents. The evaluation also carried out a validation exercise based on a sample of cases, and the results from this indicated that the comments from parents and children reflected accurately the scores on the outcome indicators on admission and on discharge.

Figure showing the levels of risk/protection factors across a range of domains at admission and at discharge (percentages)
Value for money

An examination of the costs of the Programme indicated that in the second year (when projects were well established) the average cost of a service was £4,610. This is a substantial saving when compared to interventions designed to deal with children who have progressed further down the path of troublesome behaviour, such as care or custody interventions which can be 30 times (or more) this cost. Attempts have been made to estimate the cost to society of not intervening when there is an obvious need identified. An example in the literature suggests savings of £110,000 for one child, if effective intervention had been put in place before problems escalated. Of course, a programme cannot be considered to be value for money, based only on what it costs: the intervention must also be seen to produce positive outcomes for the service users. Given the progression shown through the monitoring data and the examples of positive change commented on through interviews with stakeholders, it is clear that the Programme is indeed showing value for money.

What is the reason for the success of the Programme?

A large number of interviews were carried out with a range of key stakeholders and perhaps most importantly the service users themselves. Referral agents, and the children and their parents, all praised the work of the project and the staff in each of the projects, and it was agreed that their commitment and approach were the main reasons for their successful engagement with the families. The literature review has included references to meaningful engagement as a key factor in bringing about and maintaining positive change in children and their parents. Research studies have identified approaches and activities that contribute to meaningful engagement. These include that: the clients have an active role; a collaborative approach is taken; and, the staff are characterised by certain qualities, including being open, sensitive, understanding, non-judgemental and flexible. In interviews with parents and children in this study, there was a great deal of support for the view that open and responsive qualities of these kinds were strongly present in the personalities and activities of the staff.

Perhaps one of the most important messages of the report was that the intervention was not designed for the child or young person alone, but that it was also intended to support the parents, and - in some cases –other members of the family. This family support approach was considered to be one of the main reasons for the perceived success of the Programme, and many felt that an intervention which focused solely on the child was unlikely to have an impact of the same quality and strength. The research literature in this area confirms this view, and suggests that there has been a shift of

\(^2\)Department for Children, Schools and Families (2010).
emphasis within the policy and strategy dimensions in relation to early intervention, to include the need to work in partnership with the family. The following is a snapshot taken from an interview with a parent, condensed to present the main points: clearly this provides support for the view that working with both the child and parent is of considerable importance in achieving important levels of success.

Case example

The Mother described her son at the start of the programme as having a really bad temper, breaking windows in cars, arguments in the house, so that sometimes she had to get out in case he would ‘stick a knife in my back’ and he wasn’t attending school. She said that when (name of project) came on board she thought ‘how’s taking him out for a game of snooker going to help? But after almost one year at (name of project) he was said to have changed, he controls his anger better, she’s had no complaints about him, he goes to school (where he wasn’t before) and is doing well- ‘all the teachers speak highly of him... he’s matured’ and they have a better relationship. It wasn’t just for him though as it helped her too - she learned parenting skills which she said had worked and she got other help – for example - being put in touch with a charity which provided her with a cooker; and getting help and advice on family tax credit as she was thinking of going back to work.
Effective interventions are also said to be those which include a multi-modal and multi-agency approach. The EIP was found to encapsulate both approaches in that the work of the projects addresses a range of factors in the young people’s lives, in their family lives and in the work with other involved agencies. The projects attempt through various methods to reduce risk factors and increase both protective factors and resilience. They address these through an ongoing assessment of need, and a consequent development of individually tailored plans, which are designed, supported and agreed to by everyone involved. This includes the staff, the referral agents and the parent/s and children. This approach also makes it possible to be flexible and to be open to negotiation and change.

The literature in the area of early intervention emphasises the importance of having well trained and knowledgeable staff in order to effect change in children and their families. The range of data collected during this evaluation included examining the background of involved staff. The results indicated that the staff at each project had a range of backgrounds and experience, many with degrees and qualifications in a range of disciplines. This is supplemented by having clear and structured appraisal systems in place, which identify any additional training needs, so that all staff members undertake courses in areas that are relevant to the needs of the children and the parents with whom they work. Below is a snapshot taken from an interview with a referral agent, condensed to present the main points: it demonstrates the skills and experience of staff, the level of support that they can provide for children and their parents, and the ability to help to promote and effect change in the family.

Case example

10 year old presenting with aggression, anger, trouble in school and in the community, hanging out with an older peer group, on the edges of anti-social activities related to drink and drugs, parents struggling. The problem was correctly identified as the death of a grandmother. Worked with young person, and with the family so they had a better understanding of how to deal with the child. Parents separated during time of engagement at the project so staff supported mother and child emotionally through that transition. Parent was said to have benefitted from this support. Young person has turned around - drawn back from fringes of offending, no longer associating with older peers, settled down in class – the project worked with the school too. Still some work to do on anger but in six months so much improvement in all areas of her life, can’t wait to see the improvement in another four or five months.
The Programme is aimed at supporting those children and young people who are vulnerable to offending and antisocial behaviour, and decisions are made on the basis of an assessment of the set of risk and protective factors present in each situation. However it is generally recognised within the related literature and research, and by staff and practitioners, that individual lives are often very complicated, and that it is not always easy to disentangle the risk of offending from other possible negative contexts and influences. The range of problems being experienced by young people, in addition to contact with the police, can be very large, and may include, for example, mental ill health, family breakdown, the need for care placements, school exclusion, difficulties engaging within the community, self esteem issues and so on.

However, a great deal can – and is – being done within this Programme to address these other issues. The case examples described above provide evidence that the interventions achieved by the Programme have produced positive outcomes in many areas, including helping to provide support with problems not identified in the original assessment of need. Other examples were given of positive outcomes resulting from the support received by the children and parents from the Programme. Alongside the prevention of offending, examples included: re-engaging with school; coming off the Child Protection Register; averting care placements; rebuilding family relationships; improved parenting skills; engagement in the community; and reduced overall stress on parents.

Recommendations from the evaluation

The general conclusion of the evaluation is that the Early Intervention Programme is achieving significant success in relation to its aims and objectives, most importantly in effecting positive change in the children and parents with whom it worked. However it was also felt that there were a number of elements or emphases in the work of the Programme where changes or adjustments might help to strengthen its overall success. Some recommendations are therefore included in the report (these are dealt with in more detail in Chapter 6, pages 156-173), the first set of which refer to the practical activities such as:

• ensuring that referral agents stay involved throughout;

• encouraging more participation of parents;

• considering the duration of some programmes (if fixed length), and

• ensuring that the projects do not intervene too early.

There are also recommendations which are more operational in nature, such as:

• reviewing the referral criteria to ensure the right cohort of children are worked with;

• reviewing the outcomes framework in order to standardise this across projects and in addition to give consideration to:

  • include the measurement of ‘softer’ outcomes;
Final comments

IRS has carried out many studies into interventions aimed at diverting or preventing offending in children and young people, and have found that the answers to ‘what works’ are never straightforward, perhaps because the challenges and difficulties in the lives of these children and their parents are complex. Nevertheless these studies, and indeed the literature reviews generally, do suggest that there are elements, or aspects, that constantly emerge as necessary within successful interventions. These include: a holistic approach to the problem; multi-agency partnerships involving all those with a stake in the child’s life; dedicated and experienced staff; and, clear aims with measurable outcomes.

This study has concluded that the Early Intervention Programme included all of these aspects and more. However, it also discovered that there were relatively few services of this nature, especially those working in a holistic way with the young people at risk of anti-social and offending, and also with their families. The rise in demand for this service was evidenced across all projects, by the increase in referrals by the second year and the increase in the numbers on the waiting lists held by projects.

The range and complexity of the problems that children and their families can experience, suggest that they cannot be the responsibility of any one Department or Agency. If this is not recognised, the likely consequence will be that the problems will continue to grow and to require more intensive interventions and resources. The departments that are needed to contribute to dealing with the problem will probably include education, social services, police, youth justice, and in some cases mental health. Therefore, all should be involved in the solution.