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EUROCHILD

Eurochild is a network of organisations and individuals working in and across Europe to improve the quality of life of children and young people.

We envisage a Europe where every child grows up happy, healthy and confident, and respected as an individual in his/her own right. We work:

- to promote wide recognition of children as individual rights holders;
- to convince policy and decision makers to put the best interest of the child in every decision affecting them;
- to encourage all those working with and for children and their families to take a child-centred approach;
- to give children and young people in Europe a voice by promoting participatory methods in child and family services, raising children’s awareness of their rights and supporting child and youth led organisations.

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A. ABSTRACT

This paper summarises the key issues and messages from a collective report of four case studies of inspiring practice presented at the Peer Review Seminar in Belfast. These case studies provided examples of practice from Northern Ireland, Bulgaria, Poland and Wales.

The earlier assessment paper presented a full analysis of the approaches and activities of each case study taking into account the political context in which they operated. Particular attention was drawn to their journey towards developing a strong evidence base which demonstrated improved outcomes for children. The challenges, strengths and limitations they had experienced in this area provided a good base for shared learning and debate at the Peer Review Seminar in Belfast.

The presentation of the case studies, the collective report and contributions from social policy experts at the Peer Review generated lively debate and proposals in the following areas:

- Defining Early Intervention and Prevention in Family Support
- Common principles that underpin effective Family Support
- Links with European Commission social policy agenda
- Innovation, Effectiveness and Replication
- Exploration of what constitutes a strong evidence base
- Shared use of language in outcomes focused practice
- Developing a framework for evaluating good practice

This report builds on the earlier assessment report, by incorporating the insights gained from the discussions at the Peer Review Seminar and makes observations and recommendations that have taken into account contributions from seminar delegates.
Key messages and recommendations are as follows:

**THE EVALUATION FRAMEWORK**

1. An evaluation framework should enable contributors to describe their practice on a case study template in the following ways:
   - The social challenge they seek to address
   - The changes or benefits they aim to bring about
   - The rationale for seeking these changes (what is the identified social need?)
   - Why they consider their actions or activities will achieve these changes (the research base and knowledge of effectiveness of similar policy interventions)
   - Description of their actions and activities
   - How they ensure their activities are delivered within a children’s rights framework and are consistent with the principles that underpin effective early intervention and prevention work
   - How they know their activities are making a difference in the short and longer term (the methodology of evaluation and sources of both quantitative and qualitative evidence that captures the before and after of actions and activities)
   - The cost effectiveness of their activities in terms of the resources they need and the value that is created

2. An evaluation framework should place case studies into categories that allow for meaningful comparative analysis. Peer Review Seminar participants considered that a framework for evaluation should categorise practice according to the social challenges being addressed. This would enhance mutual peer learning and the ability to consider wider replication of an approach.

3. Case studies may not fit into one category but this is not problematic with potential to link themes and categories in an organic way as the process of gathering case studies further develops. Some case studies will have more robust evidence than others but by making links, projects can work together to develop core standards and approaches to evaluation. Ultimately this could strengthen applications for European funding in evaluating an approach that has potential for replication to meet a social challenge.

4. Shared principles (described in Section D) in early intervention and prevention work have universal relevance across Europe and represent what is often not captured in evaluations of evidence based interventions. These principles should be embedded in the evaluation framework along with a children’s rights approach.

5. A grading system will need to assess the extent to which a case study demonstrates that its approach is underpinned by the core principles, has sound methodology and is accompanied by evidence of the outcomes achieved. However, an inclusive approach is favoured, whereby case studies are not eliminated but placed in categories that allow for peer learning with others that are addressing similar social challenges.

**KEY MESSAGES**

1. Evidence of effectiveness in early intervention and prevention in family support can come from a range of sources and is not the exclusive domain of interventions that have been subject to randomised controlled trials. Policy messages should highlight the need for a balanced perspective in evidence based approaches which are capable of reflecting critically on quantitative and qualitative data and analysis.
2. All the case studies included innovative aspects, capable of replication within their country or across Europe. This highlights Eurochild’s potential to respond to proposals within the EU to move resources towards evidence based approaches that embrace social innovation and replication. The proposed categorisation of case studies within the framework should assist in capturing this potential.

RECOMMENDATIONS FOR FUTURE WORK

- A smaller working group will need to take forward the proposed changes to the case study template. This will form the basis of the evaluation framework. This work will sit alongside further discussions about the ‘social challenge’ categories that will be used to locate case studies. Processes and guidance on how case studies will be graded or categorised according to their methodology, demonstration of underpinning principles and quality of evidence will need to be developed.

- Future work could include exploration of the significance of relationship based working, particularly as this transcends the different social political and economic contexts of members’ countries. A focus on relationships and engagement opens up discussion on how to best meet the needs of more vulnerable and marginalised groups who are exposed to poverty and social exclusion.

- More understanding and greater use of cost and outcomes tools and methodologies that calculate the social value created through early intervention and prevention could strengthen the case for demonstrating the cost effectiveness of NGO activity in this field and influence policy makers of the need to invest resources.

- Workshops and the development of resources to assist in the selection and use of accredited and reliable outcomes measurement tools in early intervention and prevention in family support in a European context would assist members’ knowledge and confidence in capturing the distance travelled.
C. THE CASE STUDIES – AN OVERVIEW

BULGARIA, NATIONAL NETWORK FOR CHILDREN

Home-improvement loans for low-income families and families at risk

Families belonging to the most vulnerable groups often live in substandard living conditions which may become a reason for their children going into institutions. These families sometimes have no access to healthcare and their children are not known by the educational system. In this context, the availability of socio-educational services is a question of survival. The National Network for Children (NNC) works to guarantee children’s rights and well-being in Bulgaria. It also advocates at state and local level to direct financial resources from the state budget and European structural funds to the implementation of social services.

This programme is implemented by NNC member NGOs and is a proven successful model of social work practice, providing holistic, multidisciplinary support to families through a partnership approach that achieves a greater scope of intervention. It demonstrates an alternative way to support low-income families and families at risk and prevent child abandonment and institutionalisation. It works to improve their living and sanitary conditions by providing non-interest loans for small home renovations. The overall aim is to develop a model of social work practice that identifies the problems of children and families at risk at an early stage and responds in a timely fashion by also providing support for medical expenses, government subsidies and family counselling.

The Fund for home improvements is provided by the leading NGO called Habitat Bulgaria (member of the NNC) to local community-based organisations (most of them also NNC members), which, respectively, offer small loans to the target families. Partner community-based organisations provide additional specialised services and training according to the individual needs of the different communities. Loan repayments are fed back into the Fund for Home Improvements to serve the next families at risk.

POLAND, NOBODY’S CHILDREN FOUNDATION

Good Parent – Good Start: Early prevention of young child abuse

This is the first Polish programme aimed at preventing the abuse of young children under 3 and promoting positive parenting. The project involves both national and local activities. It was launched in 2007 as a pilot programme in 2 selected Warsaw districts and by the end of this year it will cover the whole of the Polish capital. The assumptions of the programme have been included in the Strategy for Families which was adopted by the City Council in 2010. Since March 2010, the programme has been adopted in another city, Poznań, and is being implemented in 6 pilot rural areas.

The goal is to create a system for protecting young children from abuse and neglect through supporting their parents/caregivers in positive parenting by offering them free access to educational resources and support services. The programme is directed at parents of young children, in particular from the group at risk of child abuse and neglect. It combines universal and targeted approaches, working with professionals who have contact with children under 3 and their parents/caregivers. The model used to support families at risk of young child abuse is called the Local System for Prevention of Young Child Abuse (LSP). LSP is an interdisciplinary system of cooperation between local authorities, welfare centres, health centres, police, probation officers, psychological consultation points, day nurseries and NGOs. It works on 4 different levels:

- Provision of information on the project
- Identification of parents at risk
- Support to the family
- Intervention in cases of abuse
**UK, NORTHERN IRELAND, CHILDREN IN NORTHERN IRELAND**

**The Family Support Hub**

In Northern Ireland Children’s Services, planning is a statutory led inter-agency process designed to produce greater coordination and planning in delivering services to children and families. Family Support Hubs have emerged from this process with the aim of creating a strategic framework for developing family support. A number of key changes have taken place to set this framework in place:

- A transition from individual organisational planning to joint planning and eventually to joint commissioning of services
- A move from service based planning to needs based planning and from there to rights based planning
- A focus on outcomes bringing rights and needs together

The purpose of Hubs is to ensure more effective access to family support services. They are about linking together rather than creating new services though if gaps are identified a separate process of Locality Planning can assist. Hubs are virtual organisations with no space of their own. They have developed information sharing protocols/referral processes and other systems to support effective interagency working.

Locality planning exists to ensure agencies not only cooperate in the delivery of services but that they also collaborate on service planning. Whereas Hubs are designed to improve access to services for individuals, Locality Planning is designed to improve access to services for populations. Both processes are underpinned by a belief in integrated planning across sectors and organisations.

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**UK, WALES, ACTION FOR CHILDREN**

**Neath Port Talbot Family Action Support Team (FAST)**

The FAST service combines a range of preventative family support services for children, young people and families on behalf of the local authority. The structure of FAST means that packages of support can be tailored to match a family’s individual needs and a flexible and timely response to urgent situations can be organised.

The service aims to promote the well-being, safety and development of children, and to develop the positive self-esteem of their parents, by providing a range of outreach family support services and co-ordinated interventions for children, young people and their families. The service can prevent family breakdown and promote the reunification of families, where appropriate, by supporting referred parents to achieve acceptable standards of care for their children. The range of community-based services includes early preventative support, including work with parents with learning difficulties, through to intensive work with families where there are serious concerns for children's safety or welfare. For some children the project's support makes it possible for them to remain with their families rather than being accommodated by the local authority.

These four case studies presented diverse responses to meeting social challenges in parenting and family support. This diversity gave rise to challenges in identifying common characteristics which would assist in shared learning and the exploration of possibilities to replicate practice.

Each example was rooted in its country’s culture and social policy framework. The case studies responded to different levels of vulnerability and ages of children as well as different stages of intervention. For example, Poland’s case study practice centred on an interdisciplinary preventive approach of ‘progressive universalism’ to avoid stigmatising families whereas the Family Action Support Team in Wales included targeted work with children identified for reunification with their families.

The case study examples did not focus on single interventions but on holistic packages of support to meet families’ identified needs. The term ‘Early Intervention and Prevention’ was interpreted broadly incorporating both universal and targeted provision.
All case studies provided contrasting models of partnership. FAST is commissioned by the Local Authority. Good Parent Good Start involves inter-disciplinary cooperation with support from City Hall of Warsaw and District Authorities. In contrast, Habitat Bulgaria is entirely led and implemented by NGO’s. Northern Ireland’s hubs are a virtual network of statutory, voluntary and community organisations.

The activities in the case studies ranged from signposting families to appropriate services (Northern Ireland) through to ‘hands up’ support in Bulgaria via home improvement loans with accompanying health, education and life skills input from a network of local community based organisations.

Northern Ireland’s Family Support Hub model involves a structural change in how early intervention support is delivered and affects the whole country whereas Habitat Bulgaria has been working with local partners in nine selected communities. Good Parent Good Start aims to replicate its programme in all 18 Warsaw districts by the end of 2013. FAST provides targeted support in one Local Authority.

In describing their underpinning theoretical or conceptual framework, there was variety in use of language making it difficult to draw comparisons.

The challenge was therefore to find commonality in the case studies and to discuss whether case studies should be categorised and compared according to the social challenge they set out to address which would lend itself to more informed comparative assessment.

However, there was also useful learning in the case studies which had application across all categories of social challenge. Case study presentations formed a sounding board at the Peer Review Seminar. They opened up useful areas for shared debate on transferable practice and in formulating messages that assist in the process of developing an assessment framework that responds to changing funding and policy directions in Europe.
D. SHARED PRINCIPLES

A unifying factor in the case studies was their commitment to involve families in the planning, organising and development of practice. FAST works with families to develop an agreed service plan. Families referred to Habitat Bulgaria prioritise their most necessary home repairs, co-finance the renovations and are actively involved in the construction work.

The case studies referred to quality standards that they have adopted which inform their delivery of early intervention services. These help define the common threads and characteristics and principles which underpin effective family support and early intervention work. They include standards relating to relationships between professionals and families, multi-agency cooperation, accessibility, strengths based practice, needs led interventions, giving a ‘hand up’ instead of a ‘hand-out’ and promotion of social inclusion etc.

The quality assurance framework developed by Good Parent-Good Start had much in common with that adopted in Northern Ireland. The latter is influenced by the work of Pinkerton, Dolan and Canavan (2006)\(^1\), who argue that agencies which practice family support need to evolve in the direction of ten core characteristics:

- Working in partnership (with children, families, professionals and communities)
- Needs-led interventions (strive for minimum intervention required)
- Clear focus on the wishes, feelings, safety and well-being of children
- Reflect a strengths-based perspective which characterizes resilience
- Promote the view that effective interventions are those that strengthen informal support networks
- Accessible and flexible in respect of location, timing, setting and changing needs, and can incorporate both child protection and out-of-home care
- Families are encouraged to self-refer and multi-access referral paths will be facilitated
- Promote the involvement of service users and providers in the planning, delivery and evaluation of family support services
- Services aim to promote social inclusion, addressing issues around ethnicity, disability, and rural/urban communities
- Measures of success are routinely built into provision so as to facilitate intervention based on attention to the outcomes for service users to facilitate quality assurance and best practice

The Northern Ireland case study describes these characteristics as defining the ethos, operational principles and the key standards for Family Support provision in Hubs.

These characteristics appear to have universal relevance across Europe and to an extent represent what is often not captured in evaluations of evidence based interventions. They are the aspects of the delivery and implementation of a service which ‘form the critical but sometimes hidden, backdrop to any assessment of an intervention’s effectiveness.’\(^2\)

**Discussion** at the Peer Review Seminar opened up debate about what part, if any, these principles or standards could play in a future evaluation framework of best practice. It was felt that they should be adopted as ‘principles’ rather than ‘standards.’ Standards would require demonstrable measurements whereas principles allow for aspiration and indicate the preferred direction of travel.

These principles should sit within a framework that embraces children’s rights and one which reflects Eurochild’s mission ‘to voice and promote the interests of children and young people in Europe.’

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The extent to which case study contributors can demonstrate that their work meets core principles and are embedded in a children’s rights approach will assist in evaluating the relative strength of particular case studies in the future. However, an inclusive approach was also favoured, whereby case studies are not eliminated but placed in categories that allow for meaningful comparison with others addressing similar social challenges. This would open up opportunities for peer learning between countries, the development of a common approach to evaluation in a particular social policy area and added potential to use the learning to replicate practice more widely in Europe.
Case studies highlighted how integrated working helps enable access to the right mix of staff skills with the relevant expertise and experience. At FAST there are seconded staff from social services whose skills set is work with families with younger children. The Health and Social Care Board in Northern Ireland has provided some core staff on a short term basis to support hub development.

Poland’s Good Parent- Good Start is strongly based on integrated working with a ‘scheme for co-operation’ that is agreed by all partners and allows for consistency of approach and safe working practices.

Habitat Bulgaria knows its success in providing a holistic and multi-disciplinary approach to sustainable social development relies on its ability to make meaningful partnerships on the ground with other NGO providers and demonstrates this through an impressive list of agencies who work in partnership to provide health care, social work, education support as well as specialist agencies meeting the particular needs of the Roma community.

There was less mention in the case studies of the specific educational and training qualifications required of staff to deliver the activities although Poland’s Good Parent- Good Start referred to a highly qualified staff team made up of therapists, lawyers, psychiatrists, social workers etc. with the support of graduate or student interns.

This is an area that may need greater debate as it is clear that the picture over Europe is diverse as described in the comments paper provided by Daniel Molinuevo from Eurofound. While a ‘Bachelor’s degree-level or three year vocational qualification in (social) pedagogy are the predominant qualifications for direct work with children and families’ this is in no way the norm across Europe.

In a UK context there are signs of growing polarity between the high level of qualifications required to deliver evidence based programmes including Multi Systemic Therapy and Family Functional Therapy and the relatively low qualifications of staff delivering family support in many early years’ services. The commissioning climate with resource constraints drives down the capacity of voluntary sector organisations to deliver services with more qualified and therefore more expensive staff.

Where there is no benchmark for qualifications, the operational principles adopted by Northern Ireland can go some way to ensure that there is shared understanding of standards involved.

Poland’s Good Parent- Good Start standards refer to the skills and competency base required by staff which could have good applicability across countries. These include:

- Continuous training and development of knowledge and skills
- Familiarisation with risk factors and screening methods
- Knowledge about the psychological and social situation of families with small children
- Combining specialisation with broad general knowledge
- Undergoing regular supervision
- Personal development

Contributions to the Peer Review Seminar drew attention to the need to value relationship based working as a way of engaging with families, building their resilience, and empowering them to do things for themselves. As such, the personal qualities of staff including empathy are particularly important. Northern Ireland’s presentations referred to the development of ‘resiliency based’ user evaluation.

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4 Crepali C. et al. (2011), Parenting Support in Europe; A comparative study of policies and practices, Final Report, Dublin; European Foundation for the Improvement of Living and Working Conditions.
In the future, this tool may assist in evaluating the significance of the relationship and engagement between staff members and service users in building resilience. As such, it would be useful for Eurochild to receive updates on the tool’s development and to disseminate it more widely amongst members.

Eurochild’s future work could include further exploration of the significance of relationship based working, particularly as this transcends the different social political and economic contexts of members’ countries. A focus on relationships and engagement sparks debate on how to best meet the needs of more vulnerable and marginalised groups who are exposed to poverty and social exclusion.
Mary Daly’s synthesis report for the Peer Review in October 2011\(^5\) provided a useful overview of the policy context at European level acknowledging the growing interest in parenting support in Europe in the last decade or so. Some of the elements she drew attention to were policy and institutional frameworks around children’s rights, family friendly initiatives, early years’ provision and the balanced participation of women and men in family and working life.

Northern Ireland’s case study named its approach as being underpinned by the UN Convention on the Rights of the Child, specifically Article 18 regarding parents’ primary responsibility for the upbringing and development of the child and their rights to assistance in their child-rearing responsibilities.

Northern Ireland and Wales’s practice is firmly rooted in the context of their national policies for early intervention whereas Bulgaria and Poland’s case studies reflect efforts to provide interdisciplinary, holistic support in the absence of national frameworks. Habitat Bulgaria has linked its outcomes to the Bulgarian priority of deinstitutionalisation. Good Parent- Good Start has worked effectively at a local level to be active members of a municipal working group which has developed a framework ‘Programme Family’ but considers an obstacle to have been insufficient involvement from the health sector and would welcome a national framework for early, universal family support.

Parenting support is relevant to Europe 2020 and, for example, is implicit in at least one of the ten integrated guidelines (guideline 10 on promoting social inclusion and combating poverty). However, family policies and parenting support are not within the competence of the European Union. Member States set their own targets within the collaborative framework of the Open Method of Coordination (OMC). A challenge, therefore, is how one can replicate practice across Europe when there is no shared political consensus about investment in early intervention and prevention.

The Peer Review Seminar opened up a wider discussion on the opportunities and challenges that emerge from proposals within the European Union to move resources towards evidence based approaches that embrace social innovation and social experimentation.

European Union ‘added value’ is offered through the European Alliance for Families which provides a platform for exchange of experience and good practice on all family policies, including parenting support. Since 2007, it has been collecting good practice examples in 10 different policy areas. However, in common with Eurochild, it is looking to develop a framework for evaluation which will assist comparison, promote mutual learning and employ a common language and understanding of terminology. The work is underway and within the framework good practice will be assessed in the future on the basis of effectiveness, transferability and sustainability.

The context for this emerging framework is based on recognition that social needs are now more pressing and at a time when resources are more limited, new solutions must be found. Social Innovation relates to new responses to social demands.\(^6\)

In looking at effectiveness, the proposed framework will rank practice more highly if it is evaluated through use of a Randomised Controlled Trial (RCT). This approach is consistent with the methodology promoted by the European Commission on social policy experimentation which tests innovative solutions at small scale with a view to disseminating them widely. Social policy experimentation uses randomised control groups to evaluate the specific value added of the measures and considers what would have been the situation if the measure had not been implemented?

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14 - Peer review seminar: Early intervention and prevention in family support - Synthesis report
The funding challenges presented in the case studies from Wales, Poland and Bulgaria, highlighted real concerns for sustainable NGO activity at a time of budgetary constraints. Therefore, Peer Review participants acknowledged the need to respond to the changing culture in Europe and the steer from the European Commission on social innovation, mutual learning and replication of practice.

However, there was concern at an over reliance on social policy experimentation and randomised controlled trial methodology as the way forward in allocating resources and validating evidence of what works in early intervention and prevention. The consensus at the Peer Review Seminar was that the randomised controlled trial was not the ‘gold standard’ for research. 7

Participants’ concerns about randomised controlled trial methodology centred on the following:

- How (in a social policy context) you can ensure that the control group replicates the recipients of an intervention
- Concern about using a clinical model of evaluation that is not strengths based and that cannot take into account participants’ varying levels of resilience and the protective factors already in place
- Concerns at the lack of follow up studies of lasting impact on parents and children in programmes that have been subject to RCT
- The extent to which interventions shown to be effective in other countries including US, New Zealand and Australia can translate to a different European context
- The expense of conducting a RCT and high costs of running ‘evidence based’ programmes with fidelity. This model of service delivery is unrealistic in many Member States and would be unaffordable to smaller NGOs
- Ethical issues connected with withholding services from a control group
- The extent to which RCTs stifle innovation. If innovation emerges from new ideas then opting for and diverting resources to established models that have been subject to RCT methodology limits innovation. Evaluation should be cyclical rather than a static process and RCT methodology inhibits this dynamic process
- Proportionality – it would be wasteful to invest funds on a RCT for low cost models of service delivery, for example a micro finance initiative. Robust evidence of effectiveness can be captured in other ways including demonstrable improvement in household conditions etc.

To reflect this feedback from participants at the Peer Review, policy messages from Eurochild should aim to influence the European Commission on the extent to which social policy experimentation and randomised controlled trials should be embraced as the dominant methodology in demonstrating evidence based practice in the field of early intervention and prevention. In general RCTs were considered to have their place but sit alongside other credible forms of evidence.

7 Stewart-Brown S. et al. (2011), Should randomised controlled trials be the ‘gold standard’ for research on preventive interventions for children?, Journal of Children’s Services, 6(4).
H. WHAT IS EVIDENCE?

There is often little, if any, consensus on what constitutes evidence based practice. Approaches range from evidencing the need for an intervention, the use of research to determine a theoretical approach, through to use of accredited evaluation tools and randomised controlled trials.

In considering the development of an evaluation framework, the Peer Review Seminar considered whether it was helpful to view evidence as a continuum; one where innovative services in their early days could be included at one end and case examples of promising practice, which have gathered evidence of their impact and outcomes, included further along the continuum?

This approach has much in common with the work in England of C4EO\(^8\) (validated practice) and Project Oracle\(^9\) which incorporates a theory of change and logic model alongside graded standards of evidence. However, this approach assumes that practice which has been the subject of a randomised controlled trial is the most evolved and reliable, sitting firmly at the ‘gold standard’ end of the continuum.

Peer Seminar presentations and debate concluded that there were unacceptable limitations in this approach and that other evidence can have an equal but different value to that gained through RCT.

The case study and comments paper from Northern Ireland helps shape this debate by reminding us that evidence of effectiveness can come from a range of sources as illustrated on the following diagram.

Reference was made to the work of Canavan, Coen, Dolan, Whyte 2009\(^{10}\) who consider the tension between what have been described as ‘blueprint’ models versus ‘subjective practice-based’ models of intervention, arguing that the former approaches, based on highly prescribed structures and process, have the potential to negate relationship based working, good questioning in the interests of the child and understanding of individualised nuances of need.

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\(^8\) C4EO http://www.c4eo.org.uk/themes/general/localpracticeexamples.aspx
\(^9\) http://www.london.gov.uk/sites/default/files/Project%20Oracle_FA2.pdf
There are also significant limitations to the ‘subjective practice’ approach as it is not informed by external evidence. They argue that what is really needed is a balanced perspective capable of reflecting critically on quantitative and qualitative data and analysis.

In conclusion, participants defined a continuum of evidence as one that moved from ‘evidence informed’ practice at one end to ‘evidence based’ at the other through a process of reflective practice. A robust evidence base was not considered the exclusive territory of practice that has been evaluated through RCT.
I. SOCIAL INNOVATION AND THE CAPACITY TO IMPLEMENT ELSEWHERE

Contributors to the Peer Review Seminar considered the innovative potential in the case studies and their capacity to be implemented elsewhere. Each case study was reviewed separately on the basis that they were responding to very different social challenges.

In brief, the holistic approach of Habitat Bulgaria was considered to be highly innovative but there were concerns at the lack of governmental programme participation. There is relatively high potential for implementation of this practice in other EU Member States, with the system of interest free loans and provision of monitoring and support having a high potential to improve the living conditions of families in ‘poorer’ European Member States.

In relation to Poland’s case study, parallels were drawn with the provision of other evidence based parenting programmes which made it difficult to identify the innovative aspects of this particular programme, although the inter-disciplinary cooperative network of NGOs, public services and local authorities was considered to have innovative potential. The qualitative standards referred to earlier in this report were also seen as innovative. There was scepticism that the prevention, screening methods and training programmes would reduce child abuse and neglect in that they may lead to greater awareness and identification. It was suggested that the innovative potential was more lodged in how access to family support services was enhanced. It was considered that there was a relatively high potential for implementation of this practice in other European countries.

The case study from FAST was viewed as a service working with a higher threshold of vulnerability in families and being more about intervention that prevention. The approach was considered as being in the tradition of ‘Family First’ activities. It was described as innovative in that it provided flexible, tailored support to families which prevents longer term removal of their children where there is still a chance of improvement in parental skills and responsibilities. The established evaluation criteria were seen as helpful in enabling FAST to join with others in Europe to collect experiences of working with this approach. Some challenges were envisaged in that this is not a standardised programme.

The Family Support Hub model in Northern Ireland was considered to be of particular interest to the European Union as most public sector organisations are facing new social demands for redistribution in the context of budget austerity. Overall, however, the conclusion was that it would be difficult to transfer this model as it relies on very specific local circumstances that would need to be changed quite extensively to fit another country’s legal and administrative structures.

Peer Review Seminar participants broadly agreed that a framework for evaluation should categorise practice according to the social challenges being addressed. This would enhance mutual peer learning and the ability to consider wider replication of an approach used in more than one country.

It was acknowledged that case studies may not fit into one neat category but this was not seen as overly problematic with the potential to link themes and categories in an organic way as the process of gathering case studies further develops. Some case studies may have more robust evidence than others but by making the links, services could work together to develop some core standards and approaches to evaluation. Ultimately this could strengthen applications for European funding in evaluating an approach that has high potential for replication to meet a European social challenge.
J. LESSONS LEARNED – DEVELOPING A FRAMEWORK

The case studies presented at Peer Review were relatively recent service developments and, as such, were at the beginning of a journey in providing evidence of their effectiveness.

Collectively they demonstrate some good practice in developing a sound evidence base. These approaches and elements inform what should be incorporated in an evaluation framework. This includes:

- Case studies that were informed by research and/or practice from other countries. Examples include the befriending service in Poland which is modelled on HomeStart in UK. Habitat Bulgaria benefits from the wealth of experience and knowledge that Habitat for Humanity has brought to knowing what works in the elimination of housing poverty.

- The tracking of aggregated population level trends in Northern Ireland and evaluation of existing research on how to influence each of the identified outcomes.

- The pilot of service before replication in other villages and districts in Bulgaria and Poland.

- Habitat Bulgaria’s longer term follow up of progress - 18 months after intervention.

- The use of Outcomes Based Accountability™ at FAST.

- Use of before and after accredited measurement tools including Strengths and Difficulties questionnaires at FAST.

However, there were also acknowledged challenges or gaps in the approaches:

- Challenges in measuring the effectiveness of outcomes when working in partnership with other agencies; how can we know which activity is making the most difference?

- Challenges when a single agency is offering a range of interventions to a family to know which activity has the most or least impact or an understanding of the interplay between the different elements in a package of support.

- Lack of fidelity to evidence based programmes e.g. FAST uses elements from a range of programmes to support changes in parental attitudes and behaviours.

- Gaps in using cost effectiveness methodology including social return on investment (SROI). At FAST, for example, support to one family whose children did not require public care could be seen to amount to 75% of the service’s annual budget.

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11 http://www.home-start.org.uk/homepage
12 http://www.habitatforhumanity.org.uk/
13 http://www.idea.gov.uk/idk/aio/8940584
14 http://www.sdqinfo.com/
15 http://www.thesroinetwork.org/
K. MOVING FORWARD

In developing a common assessment framework which can provide a credible and robust base on which to assess inclusion of good practice, it would help if the case study template were simplified and allowed for more consistency in the language and ways contributors describe the change process.

The Peer Review facilitated discussion on the use of the language of outcomes and whether there was shared understanding of the terms typically used in Outcomes Based Accountability™, logic modes and theories of change. Typically these models use words that include ‘inputs’, ‘activities’, ‘outputs’, ‘indicators’, ‘outcomes’ and ‘impact’. While a glossary of these terms goes some way to break down language barriers, it was clear that they remained ambiguous and confusing to participants.

In summary, it was agreed that the evaluation framework should be revised to enable contributors to describe their practice in the following ways:

- The social challenge they seek to address
- The changes or benefits they aim to bring about
- The rationale for seeking these changes (what is the identified social need?)
- Why they consider their actions or activities will achieve these changes (the research base and knowledge of effectiveness of similar policy interventions)
- Description of their actions and activities
- How they ensure their activities are delivered within a children’s rights framework and are consistent with the principles that underpin effective early intervention and prevention work
- How they know their activities are making a difference in the short and longer term (the methodology of evaluation and sources of both quantitative and qualitative evidence that captures the before and after of actions and activities)
- The cost effectiveness of their activities in terms of the resources they need and the value that is created