Developing Preventative Practices: The Experiences of Children, Young People and their Families in the Children's Fund

The National Evaluation of the Children's Fund University of Birmingham & Institute of Education

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The National Evaluation of the Children's Fund (NECF) ran from January 2003 to March 2006. A large number of people were involved in a variety of ways. Here we list members of the team who worked on either part-time or full-time bases during the thirty-nine months of the evaluation.

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Executive Summary

- 1. The Children's Fund was set up in 2000, in part as a catalyst to move forward interagency co-operation and child and family-led preventative services in local authorities. It is, therefore, part of a long-term strategy aimed at strengthening communities and families as places where children and young people can develop as healthy, responsible and engaged citizens. The initiative targets children and young people aged five to 13 years who are considered to be at risk of social exclusion in all 150 local authorities in England.
- 2. This report aims to address the overarching question of which Children's Fund practices and approaches promote good outcomes for children and young people and support their pathways to inclusion.
- 3. We use the concepts of risk, resilience and protection to understand the responses of children and families to the services provided by the Children's Fund and the immediate impact these services have made on their lives.
- 4. We also begin to locate these experiences within some broader notions of social exclusion and inclusion in order to reflect on how learning from the Children's Fund might be taken forward.

The evidence from children, young people and their families

- This report is one output from the National Evaluation of the Children's Fund (NECF). Between January 2003 and March 2006 NECF examined the structures, processes and outcomes of the Children's Fund across all 150 English local authorities. NECF had three strands:
 - The use of large scale datasets to understand take-up, use and potential impact of the Children's Fund.
 - A series of 16 dynamic case studies of partnerships which examined the structures and processes of partnership working at strategic and operational levels and explored outcomes for service users.
 - A detailed study of themed services for five marginalised target groups: disabled children, children at risk of crime, black and minority ethnic children, Traveller and Gypsy children and children from refugee and asylum seeking families.
- 6. This report is based on evidence gathered from individual interviews with 185 children and young people and 184 parents/carers. The views of a further 170 children and young people were sought through focus groups and group activities.

7. Families were accessed via 72 Children's Fund services across the 16 Children's Fund partnerships in which NECF carried out in-depth work. It is therefore not a representative sample of children and parents using Children's Fund services.

Planning and accessing services for children and young people

- 8. Most Children's Fund partnerships targeted particular geographical areas or identifiable groups that are seen as experiencing relative deprivation or as 'at risk' of social exclusion.
- 9. Most children and families accessed Children's Fund services through self-referrals, so that parents could gain support for their child's behavioural or emotional needs, their disability or their academic development. However, children and parents also sought services which filled gaps in local provision.
- Some children were referred to projects via schools and in a few cases via other statutory professionals. Referral reasons were to tackle individual issues, such as behavioural or emotional needs.

Children's and families' experiences of Children's Fund services

Responsive holistic approaches

- 11. The Children's Fund enabled the development of responsive, specialist support tailored to the individual needs of the child and family. Children and families valued Children's Fund services which provided: fast responses and early intervention to prevent problems becoming more serious; child-centred approaches which worked at the individual pace of the child and supported their particular needs; holistic family-oriented approaches which were able to respond to the changing needs of the family over time and provide practical and emotional support for parents/carers.
- 12. A majority of Children's Fund projects were single service interventions and therefore multi-professional approaches were not experienced by most children and families accessing Children's Fund services.
- 13. Some children and families experienced co-ordinated multi-agency responses which helped to build a holistic package of support around them. This required practitioners to have a good knowledge of local resources and the expertise available, as well as being able to talk across professional boundaries.
- 14. Project workers played an important role in signposting and supporting children and parents to access other services, taking an advocacy role or helping to mediate between the family and other service providers. Such supportive signposting helped to increase children's and families' take-up of other services and opportunities in the community.

- 15. Children and parents valued non-judgemental, trusting relationships with project workers which were sustained for as long as the family needed support.
- 16. Families often valued project workers' independent role as a 'safe outsider' in mediating with school professionals, which has implications for the development of full service schools.
- 17. Parents valued being supported by practitioners from similar cultural backgrounds, but this was not such a concern for children.

Children's and parents' participation

- 18. Overall, participation of children and parents in the planning, delivery and evaluation of Children's Fund services was limited.
- Being consulted and listened to in either dedicated participation projects, or in projects that took participation seriously, impacted on children's sense of self efficacy and general confidence.
- 20. Many parents highlighted the importance of being kept informed about services and support for their child. Many parents did not have time to be more involved in the ongoing development of services, due to their work and childcare commitments.
- 21. Children and parents were involved in ongoing dialogues with project workers when support was tailored to their individual needs and valued these.

Open access versus targeted services and service sustainability

- 22. Many Children's Fund services created a range of different 'safe spaces' for children and young people (and sometimes for parents) using both targeted and open access approaches.
- 23. There may be a need for more targeted approaches initially, but children from marginalised groups who have developed a positive sense of identity may move on to more open access services and opportunities over time.
- 24. Targeted approaches helped to improve the accessibility of services for particularly marginalised groups, by ensuring that services were delivered in culturally appropriate ways.
- 25. Many children and parents were concerned about the often short-term nature of Children's Fund interventions and the implications for developing sustained trusting relationships with project workers.
- 26. Some parents saw time-limited interventions as appropriate, where the withdrawal of support was managed in such a way that children and carers felt informed and were able to manage their own way forward.
- Many children and parents were concerned about the arbitrary nature of the Children's Fund age limit of 13 years. Young people who reached the upper age limit felt that they

were left with nothing else to do. This reveals the need to link up provision and provide alternative opportunities when young people reach age limits.

28. Children and families also had ongoing concerns about valued Children's Fund services being discontinued due to de-commissioning processes. Although many Children's Fund services were filling gaps in local provision, parents highlighted the need for more sustainable services to improve community resources.

Outcomes for children

- 29. The focus on children and young people and their capacity to overcome social exclusion has meant that outcomes for children have a close match with the child level intentions of the Every Child Matters agenda: health, safety, enjoyment and achievement and making a positive contribution.
- 30. **Be healthy:** There were gains in children's self-confidence which had an impact on other areas of their lives. Where there were particular emotional needs, such as anxiety, depression or trauma, improvements were reported. A small number of children reported improved physical health and fitness and disabled children particularly benefited from services which allowed them to reveal their capabilities. Some services supported parents to access health services, which had a positive effect on their children's health.
- 31. **Stay safe:** The reduction in exposure of children to negative peer group influences was welcomed, as was engaging and diverting children who had offended or were at risk of doing so. Children experiencing racism and bullying at school valued opportunities to develop a positive self-identity and to engage in peer support to tackle racism.
- 32. *Enjoy and achieve:* Children who were at risk of school exclusion, had been excluded or were experiencing problems with attendance due to behaviour, improved their attendance or became happier and more positive about school. There were reported improvements in children's literacy and educational achievement through their attendance at homework clubs, book clubs and nurture groups. Some services helped to raise children's expectations and aspirations for the future.
- 33. Many children and parents felt that children gained from increased access to play and extra-curricular activities which were not previously available in the local area. Children enjoyed and achieved in these activities, which some parents felt gave them a different outlook and a greater sense of purpose. Many services enabled children to make friends with other children in the local area which helped to reduce their isolation.
- 34. *Make a positive contribution:* Where children had behavioural difficulties, there were improvements in behaviour in and out of school. Children and parents also reported children's improved social, communication and life skills. Children valued opportunities

to participate in shaping project activities and services and developed confidence and self-esteem as well as a range of new skills as a result.

Outcomes for families

- 35. Children's Fund services strengthened the capacity of families to provide safe environments and, in some cases, improved economic well-being.
- 36. Family and parent support services helped parents/carers to gain important practical skills, such as parenting skills, as well as increase their confidence and improve their emotional well-being.
- 37. Some parents felt that projects had been responsive to a range of family issues beyond the expected scope of the service.
- 38. Where mediating between families and statutory services formed a focus of Children's Fund practitioners' work, this often led to better relationships and improved communication between families and statutory professionals.
- 39. Children's Fund projects which provided childcare were highly valued by parents, particularly single parents, as it enabled them to return to work or study. Parents of disabled children valued respite provision to give them a break and enable them to spend time with their other children or to work.
- 40. Children's Fund services provided some children with access to resources and opportunities that their parents may be otherwise unable to afford.
- Some Children's Fund services helped to create more supportive social environments. However, the problems identified by parents and children at the level of community and environment were frequently beyond the remit of Children's Fund services.
- 42. While Children's Fund services often stood out as more responsive and different from previous contact with mainstream providers, there was little evidence of the initiative being able to influence mainstream practices or of multi-agency working which tackled the broader social conditions of children's development.

Recommendations for the future development of prevention

- 43. Although Children's Fund support for individual children was valued, a clear lesson from the initiative is that preventative services also need to be responsive to the emotional and practical support needs of parents and carers and other members of the family. That is, there is a need to address ongoing risks at the level of the family and signpost parents and carers on to other sources of support.
- 44. Front-line practitioners need to be supported to talk across professional boundaries and develop effective preventative practices around the needs of children and young people in collaboration with mainstream service providers.

- 45. Services should aim to develop children's and families' awareness and capacity to take up other services and resources in the community. This can help to address some of the wider dimensions of social exclusion that children and families may face and reduce dependency on the limited support available.
- 46. While short-term interventions can be appropriate if the withdrawal is carefully managed and children and parents are informed about it, services should be sustained for as long as children and families need them. This enables practitioners to respond to children's and families' changing needs over time and sustain their pathways towards greater social inclusion.
- 47. While responsive, flexible approaches potentially helped to support children's and young people's pathways out of exclusion, there is also a need for preventative work to address the wider social conditions of children's development. This includes work that focuses on the attitudes of those who are excluded or the material conditions in which families find themselves. Particular concerns raised by children and parents included: school exclusion and transitions between schools, bullying and racism, exposure to crime and anti-social behaviour, drug abuse, poor play and leisure facilities and poor services for marginalised groups such as disabled children.
- 48. While the Every Child Matters outcomes framework is useful in examining child-focused outcomes of services, prevention work should also focus on outcomes for families and communities, as well as for individual children.

Introduction

This report is one output from the National Evaluation of the Children's Fund (NECF). Between January 2003 and March 2006 NECF examined the structures, processes and outcomes of the Children's Fund across all 150 English local authorities. The complete analysis is brought together in the final report (Edwards *et al.*, 2006). Here we focus on what children and young people and their parents or carers told us about their experiences of the initiative and the short and medium-term outcomes for children and families of engaging with Children's Fund services. The evidence comes from case study work in 16 local authorities and with one inter-authority consortium.

In the first chapter we examine work on resilience and the building of protective factors and place them alongside approaches which advocate attention to the social conditions of children's development, including practices which are experienced as excluding. This review sets the scene for discussing the beneficial effects of the initiative, drawing out important lessons about preventative practices and identifying challenges and areas for further development.

In Chapter 2 we examine how the initiative was based on the concepts of risk and resilience, the targeting of services, the kinds of services in place, how services were accessed and how children and families experienced exclusion, including how they tended to locate risks of exclusion within the family, school and local community.

Chapters 3 and 4 present a detailed overview of what children, young people, their parents and carers valued about service provision. Parents very much valued, for example, the responsive practice they experienced and joined up inter-professional working designed to give them and their children support. The evidence, however, also revealed some ambivalence on the part of parents towards participation in the development of services.

In Chapter 5 we outline the reported short and medium-term impact of the work of the Fund on the lives of children and their families. Children's Fund services have resulted in a range of positive outcomes for children and families that closely match the Every Child Matters agenda (DfES, 2003). We also suggest areas for development where that impact might have been increased or sustained beyond the life of the Fund and the environments it has created.

In the final chapter we summarise lessons to be learnt from the Children's Fund for initiatives aimed at the social inclusion of vulnerable and marginalised children. We demonstrate what

the experience of the Fund has to offer the current Every Child Matters agenda, both in terms of achieving outcomes and in developing processes of inter-agency collaboration.

In summary, we find that the Children's Fund has revealed considerable need and a welcoming of services offering early interventions to prevent exclusion. There is, therefore, much to be learnt from what it has achieved. At the same time, it provides an opportunity to reflect on the challenges of the social inclusion and prevention agenda.

Chapter 1: Debates and Policies

1.1 Introduction

In this report, we use the concepts of risk, resilience and protection to understand the responses of children and families to the services provided by the Children's Fund and the immediate impact these services have made on their lives. We also locate these experiences within broader notions of social exclusion and inclusion in order to reflect on the overall capacity of the Children's Fund to make a sustainable difference in terms of the social exclusion experienced by some children and their families. While we are not in a position to take a longitudinal view of children's experiences and measure impact or explore indicators of outcomes for children and families, we are able to trace what different practices have meant for children and families, in terms of the perceived benefits and influence of the Children's Fund on the lives of children and their families (see also Edwards *et al.*, 2006).

We are using the concepts of risk, resilience and protection for three reasons. Firstly, as part of the broader prevention agenda, these concepts inform a range of government policies and initiatives, including the Every Child Matters outcomes framework and the Children's Fund (see Appendix A for an overview of the Children's Fund initiative). Secondly, a review of the literature reveals the different ways in which the concepts have been used and the scope there is for expanding our understanding of these concepts. Thirdly, an important gap in the research on risk, resilience and protection seems to be that very few studies are based on qualitative evidence gathered from children and families.

In this report, we use the concepts of risk, resilience and protection to map trajectories of inclusion over different timescales as reported by children and families themselves. The timescales analysed were often based on children and parents reflecting back over a number of months or years depending on the length of time they had used the service. We explore the types of practices and approaches available; the terms on which children and families engage in these practices; and the perceived outcomes for children, young people and their families and the ways that practices have supported children's and young people's pathways towards inclusion. We reflect on the potential for this immediate impact to be sustained in light of the multi-dimensional factors and processes that impact on social exclusion. Are service providers becoming more responsive to children's and families' specific needs and enabling a more 'reciprocal engagement' with a set of practices? What are the outcomes for children, young people and their families? How do these practices support children's and young people's pathways towards inclusion? And what, if any, are the limitations of an approach focused primarily on building individual resilience?

In order to answer the overarching question of which practices and approaches promote good outcomes for children and young people and support their pathways to inclusion, there are a cluster of more specific research questions which inform the structure of the report:

- 1. To what extent do particular practices meet what children, young people and their families see as their specific needs? (How do children and parents feel that projects have helped deal with the problem for which they were initially referred or led to self-referral?)
- 2. What benefits and changes, if any, have children and parents and carers experienced as a result of the service? (What differences in their lives have children, young people and parents reported?)
- 3. Which kinds of practices do children, young people and families value or find helpful? (For example, responsiveness, trusting relationships, informal approaches, timeliness and duration of services. To what extent have children and parents/carers been able to engage with and shape project activities and services?)
- 4. What are children's, young people's and families' experiences of multi-agency working and joined-up service delivery? (To what extent has the Children's Fund facilitated joined-up service delivery and/or access to other services?)
- 5. To what extent are services working at the level of the community, school, family or individual child or young person? (What are children's and families' experiences of practices working within and across these domains?)

1.2 Risk, resilience and protection: contested concepts

Risk

Policy interventions and preventative initiatives targeted towards children and young people are focused on early intervention with children and young people 'at risk' of later problems and, on reaching them, individually, through their schools or through their communities. These policy interventions draw on a large body of research focused on risk, using predominantly longitudinal survey data and quantitative approaches to identify risk factors which influence children's and young people's chances of negative outcomes in later life. Research evidence has identified risk factors as a result of problems in the community (such as growing up in a disadvantaged neighbourhood); in schools (through low achievement or attending a school whose organisation and ethos are poor); in individual characteristics (such as hyperactivity or impulsiveness); through involvement with a 'negative' peer group; and through family problems (ranging from low income to poor supervision). Several risk factors may interact to produce a particular outcome at a specified stage in a child's development (Little *et al.,* 2004). Thus, risk factors are thought to have a cumulative negative effect on children's and young people's lives, which may be reduced.

The risk discourse has been critiqued for a number of reasons. Much of the current literature on risk is based on biological and psychosocial constructs of risk, which focus on individual behaviour and outcomes and therefore are seen by some to stigmatise individuals (Armstrong, 2003). The identification and management of risk is therefore often premised on a deficit model of children and families, which overlooks the importance of the interaction with structural aspects of the environment. Little *et al.* (2004) caution that risk factors are difficult to identify and measure, and they can be confused with other professional understandings of 'risk'. There seems to be little consensus about which factors are significant and a lack of clarity about the causal links between these factors and future negative outcomes (Hansen and Plewis, 2004).

Resilience and protection

Researchers have argued that a helpful counterpart to a focus on risk is the concept of *resilience*, which attempts to give a more contextualised understanding of the processes by which children and families negotiate risk situations (Howard *et al.*, 1999; Rutter, 1990). The child development literature broadly argues that resilience is not a personal attribute or a static state, but rather a dynamic process depending on the interaction between the socio-historical context and the developing individual (Howard *et al.* 1999; Schoon and Parsons, 2002). Instead of focusing on a deficit model, a resilience perspective emphasises children's and families' strengths despite exposure to risk and recognises their agency or disposition in engaging with protective factors. Protective factors have been identified as relating to:

- attributes of children themselves, such as problem-solving skills, high aspirations, positive peer relationships;
- characteristics of their families, such as caring and supportive family relationships, a secure base and sense of belonging;
- aspects of their wider social context, such as the availability of external support or resources, positive school environment, opportunities for participation (Benard, 1991; Newman, 2002; Schoon and Bynner, 2003).

However, the concepts of resilience and protection, as well as risk, are heavily contested and the relationships between these concepts has not been clearly articulated in the literature. Researchers, policy makers and practitioners working within diverse fields may have very different notions of 'risk' and 'protection', linked to different understandings in the literature and related policy developments. McCarthy *et al.* (2004) outline three models of the interaction between risk and protective factors:

- the *additive model* is where risk and protective factors are seen as polar opposites that counterbalance each other;
- the *interactional model* sees risk and protective factors as dynamic and interacting with each other;
- the *pathways model* is focused on a child's negotiated pathway through several transitions or turning points, where risk and protective factors can enhance resilience.

The pathways model introduces the concept of resilience, and draws attention to the ways that children may be exposed to risk or engage with different protective factors within different contexts and at different points in their lives.

Several researchers have drawn attention to the fact that labelling of children as *resilient* can be as misrepresentative as labelling others *at risk* in deficit models (Howard *et al.*, 1999). The danger is that the concept of resilience is seen as a personal attribute of the individual, which can lead to perspectives which blame the individual for 'not possessing characteristics needed to function well' (Luthar and Cicchetti, 2000: 862). It has been argued, however, that resilience can be thought of in terms of different domains of functioning, rather than as a universal quality of the individual (Luthar, 1993). Resilience may be evident in one domain, for example, school, but not in another, for example, the family (Gilligan, 2001).

Much of the research on resilience has been undertaken in the US, and may not be universally applicable to other social contexts (Howard *et al.*, 1999). Some researchers also question whether children's understandings of risk and resilience differ from adult interpretations and perspectives, which has implications for the success of adult-designed interventions which aim to promote resilience (Howard *et al.*, 1999; Howard and Johnson, 2000).

A child's 'trajectory' and responsible action

Several researchers focus on a child's 'trajectory' or 'developmental pathway', to capture how a child may display resilience at certain points or periods of their life (Gilligan, 2004; Luthar and Cicchetti, 2000; Schoon and Bynner, 2003). Linked to the concept of a 'trajectory', is the idea of 'turning points' in children's lives, whereby a favourable experience may represent a turning point in a child's or young person's trajectory of development. Gilligan (2000: 39) argues that a relatively time-limited but positive experience can have a ripple effect, setting off a 'positive spiral of change', although not all circumstances will be amenable to the same degree of change.

The notion of an individual's trajectory of development accords with current education policy on personalisation and choice (DEMOS-Hay, 2004; DfES, 2004; Leadbeater, 2004). However, this approach arguably emphasises children's and young people's increased capacity for individual consumer choice. Edwards and Mackenzie (2005) argue for a concept of trajectory that also draws on the notion of responsibility for the well-being of others, as well as choice. They propose that resilience can be seen as a feature of relationally-oriented responsible action. However, this action will be dependent on what is possible in any setting. From this perspective, resilience is seen as a capacity to contribute to, as well as use resources in different settings, and that resilience manifests itself differently in different settings.

Family and community resilience

Other perspectives are beginning to emphasise family or community resilience more directly. In particular, community-based approaches to building resilience and support in the form of caring interactions between unrelated adults and children is at last receiving attention in the resilience literature and in preventative services more widely (Morris, 2005). There, the argument is that policy interventions which draw on the resilience framework should aim for a holistic approach, for community-based interventions and integrated service delivery, which aim to involve families and communities in addition to the young people themselves (Luthar and Cicchetti, 2000; Schoon and Bynner, 2003). The need for interventions to be appropriate to the cultural context and to build on communities' strengths and models of community empowerment is also acknowledged (Graham, 2004; McBride Murry *et al.*, 2001; Newman, 2002; Schoon and Bynner, 2003).

Children's networks are also increasingly seen as a potential source of informal social support which can help to protect children from adversity in their lives and build their resilience. Such networks include children's relationships with their peers, parents or carers, siblings and other family members, and relationships with others in the wider community (Gifford-Smith and Brownell, 2003; Gilligan, 1999). Morris (2005) suggests that there is substantial research evidence that indicates the value of involving individual children's networks in the child welfare services they receive.

1.3 Early intervention and prevention of social exclusion

Since 1997, the Government has identified social exclusion as a major policy priority and a wide range of government initiatives have been developed, targeted towards children and

young people deemed to be 'at risk' of social exclusion. These initiatives focus on reducing risk factors, building resilience, and promoting protective factors within the different settings of the family, school, community, or the individual child. This approach encompasses a broad concept of children 'at risk' in relation to early intervention and prevention of social exclusion. Policies designed to tackle social exclusion acknowledge the complex interplay of causes of vulnerability, resulting in a range of social problems which impact on children's future life chances, including unemployment, poor skills, low income, poor housing, high crime level, bad health and family breakdown (SEU, 2004).

The Social Exclusion Unit's Policy Action Team (PAT 12) report on *Young People* identified gaps in preventative services for children and young people and argued for a greater emphasis on early intervention and increased co-ordination of local provision (SEU, 2000). The reform and reconfiguration of services towards early intervention and prevention represents a key policy goal, which was given added impetus by the Green Paper, *Every Child Matters* (DfES, 2003) and the subsequent Children Act 2004. The Social Exclusion Unit's most recent report, setting out the future agenda for social inclusion, is firmly situated within the framework of risk and protection. Risk factors such as poverty, unemployment, poor educational attainment and family breakdown are identified, and strategies to tackle these are proposed, such as providing more support to children and families in the early years and at key transition points in childhood (SEU, 2004). Ensuring adequate and accessible early intervention services for young children and their parents now represents a key focus of the social inclusion agenda (Ryan, 2005). However, early intervention is not limited to intervention in the early years of children's lives.

Outcomes for children and families

Alongside governmental policies to prevent social exclusion, there has been increasing political interest in outcomes for disadvantaged children, within a wider debate about children's well-being. *Every Child Matters: Change for Children* (DfES, 2004) outlines a programme of change to improve outcomes for all children and young people and sets out five desired outcomes for children: being healthy, staying safe, enjoying and achieving, making a positive contribution and achieving economic well-being. In line with the Green Paper, it emphasises supporting families and carers; ensuring intervention before children reach crisis point; enhancing the integration of services and developing capacity in those organisations which work with children and young people (DfES, 2004). While understanding and tackling risk factors is still important, the focus of policies for children and families has now shifted towards a more holistic, outcome-oriented approach and towards promoting protective factors through service delivery. The rapidly changing policy context and development of the Every Child Matters agenda has been reflected in the implementation of

the Children's Fund at local level and migration into children's trust arrangements (see Edwards *et al.,* 2006 for a discussion of the origins and changing context of the Children's Fund).

The Every Child Matters framework lists a range of protective factors that are associated with social inclusion and overcoming disadvantage: strong relationships with family members and other significant adults; parental interest and involvement in education with clear aspirations; positive role models; outgoing natures; self-motivation and intelligence; active involvement in family, school and community life. These factors have a strong orientation towards educational outcomes. Indeed, with the Every Child Matters framework now located within the Department for Education and Skills, the role of education in children's services is becoming more prominent. Education-related issues and structures are increasingly central to the prevention agenda. Extended schools, for example, are being used by many local authorities as the basis for developing preventative services. There are, however, continuing concerns among practitioners that by adopting this approach, children who are excluded from schools may miss out on key preventative services.

Outcomes of prevention programmes

Despite a wide-scale acceptance of the importance of prevention, there is at present little evidence of outcomes of prevention programmes for children and families in the UK. Much of the current knowledge about the long-term impacts of prevention programmes draws on small-scale US demonstration programmes carried out in the 1960s and 1970s with extremely disadvantaged, high-risk children or their mothers, which focused primarily on the intellectual and cognitive development of young children or on improving the quality of life of their mothers (Peters *et al.*, 2000). Reviews of prevention and early intervention programmes have consistently concluded that programmes were often designed with a narrow focus, intervening at the level of the individual child or family, rather than holistically at all levels of child, family and community, and most programmes have not been adequately evaluated (Peters *et al.*, 2003; Gomby *et al.*, 1995).

While the risk and protection-focused prevention approach has gained support both locally and nationally within the UK, commentators widely acknowledge that the relationship between risk and protective factors and long-term outcomes for children and young people remains unclear (McCarthy *et al.*, 2004). For example, emerging evidence from the evaluation of *Communities that Care*, a UK-based early intervention and prevention programme based on the US programme of the same name, concluded that undertaking community-based approaches to prevention is complex and difficult. It seems that strategies aimed at changing behaviour in communities need both time and resources to maintain a long-term programme of work and that there is a need for further development of methods of measuring 'risk and protection' effectively at community level (France and Crow, 2005).

Early findings from the *National Evaluation of Sure Start* (NESS) (2005) suggest that despite widespread support for Sure Start's focus on prevention and early intervention with young children and the principle of working in multi-agency teams, there have been a range of practical difficulties in the roll-out of local programmes. Challenges identified by the evaluation to date include complex management and governance requirements; the need for greater clarity of professional roles and ensuring the right skills mix; and not always reaching the most vulnerable groups.

Practical difficulties of implementation together with ongoing research into risk, resilience and protection have highlighted to policy makers that the causes of social exclusion involve a complex interaction of a range of factors, whether individual, relational or structural. As the Social Exclusion Unit states:

Social exclusion is driven by a complex interplay of social, economic and demographic trends, as well as difficult transitions in life and individual risk factors, like lack of parental support. Causes and consequences are interlinked and often difficult to disentangle from each other. (SEU, 2004)

1.4 Initiatives which draw on the concepts of risk, resilience and protection in the UK

Since the late 1990s, a range of preventative initiatives have been developed in the UK targeted towards children and young people 'at risk' of social exclusion.

The Children's Fund

The Children's Fund was established in 2000 and aims to develop services which support multi-agency working for preventative services for children and young people aged five to 13 years who are 'at risk of social exclusion' (see Appendix A and Edwards *et al.*, 2006 for further information). Targeted predominantly towards primary school-aged children, the Children's Fund provides preventative services which fill the gap between Sure Start and Connexions. The initiative aims to provide: 'preventative services which provide support for young people and their families before they reach crisis, with the aim of reducing the future probability of poor outcomes and maximising life chances' (CYPU, 2001: 7). A key objective of the Children's Fund is to prevent future negative outcomes and maximise children's and young people's life chances: 'To ensure children and young people... gain maximum life-chance benefits from educational opportunities, health care and social care...' (CYPU, 2001: 6).

Children's Fund partnerships have been established across all 150 top tier local authorities in England in 149 partnership arrangements, and have some latitude to develop programmes according to locally identified needs. The Government stipulation that 25% of programme spending be allocated to crime prevention activities from 2002, however, impacted on partnerships' abilities to implement programmes according to locally-defined needs (NECF, 2003a and NECF, 2003b). The 25% rule was, however, relaxed in 2004. The implementation of the programme has been driven by seven sub-objectives, which can be mapped on to the Every Child Matters outcomes framework, since they are based on outcomes relating to educational, crime prevention and health outcomes as well as improving the accessibility of service provision and building community capacity (see Appendix C). Central to the Children's Fund are concepts of prevention, partnership working and participation, and partnerships are expected to work collaboratively to create preventative services which harness and develop local capacity.

According to the Children's Fund *Guidance*, tackling risk and promoting protective factors is key to preventing social exclusion. The underlying focus is on children most in need or at risk, as the *Guidance* states, 'services must focus on those children, young people and families most at risk of social exclusion through poverty and disadvantage' (CYPU, 2001: 8). The Framework for the Assessment of Children in Need is seen as an important part of this agenda in providing 'a supportive and protective web around children and young people who are at risk of disaffection and disadvantage' (CYPU, 2001: 41). There is recognition that different levels or intensities of intervention are likely to be needed to correspond to different degrees of need or risk, expressed as four levels of prevention (see Appendix A and Edwards *et al.*, 2006). The *Guidance* provides a risk framework, comprising potential risk factors at the individual child, family and community levels, to help local partnerships identify areas in which to focus interventions. The framework also encourages a focus on protective factors, although provides less information about what these might be.

On Track

On Track was established by the Home Office in 1999 as part of its Crime Reduction Programme and is now part of the Children's Fund. On Track aims to identify what works in preventative services for children at risk of involvement in crime and offending behaviour, based on a combination of five core services, which operate as targeted interventions for children aged four to 12 years. These include home visits, pre-school education, parent support and training, family therapy and home/school partnerships.

Sure Start

Sure Start has been heralded by the Government as one of the most important policy developments for children and their families. Launched in 1998, the initiative provides 250 programmes of services targeted towards families with young children aged up to four years old. Sure Start is based on the principle of building protective factors within deprived localities for children and families and is targeted towards the most deprived children and families. This has led to a focus on helping parents into work, providing childcare and improving health and emotional development for young children in specific localities defined as deprived. The intervention focuses on enhancing the developmental trajectories of young children and aims to prevent future negative outcomes through working with both children and their carers, for example:

A child with poor social and emotional development is at risk of poor relationships with peers, academic problems, of later involvement in crime, of developing physical health and adult mental health problems. Key to social and emotional development is the child's early relationship with parents/caregivers. Efforts to support parents in understanding and fulfilling their children's emotional needs can help to provide a secure base from which to grow into well-rounded, capable adults with robust mental health. (www.surestart.gov.uk/surestartservices/healthrelated/socialandemotional/)

Under the umbrella of Sure Start, a range of locally-based services have been developed, such as Early Excellence Centres and Children's Centres, which aim to promote positive outcomes for children by integrating education, childcare, family support and health services.

Connexions

Connexions is a universal support service for 13 to 19 year olds, delivered by local partnerships through teams of personal advisors. Launched in 2001, it brought together the responsibilities of the previously diverse set of agencies responsible for this age group. The Connexions strategy was informed by a key policy document published by the Social Exclusion Unit (1999), *Bridging the Gap*, which drew heavily on the risk, resilience and protection approach. Despite being launched as a universal service, the primary goal of Connexions is to address the multi-dimensional problems faced by young people deemed to be at risk of social exclusion. Attention was to be given to 'those facing substantial, multiple problems preventing them from engaging with learning' or 'those at risk of not participating effectively in education and training' (DfES, 2000). An ongoing challenge has been how to combine sophisticated risk reduction work with its universal and generalist obligations (Hoggarth and Smith, 2004). DfES's *Youth Matters* Green Paper attempts to respond to this and other issues (DfES, 2005). It proposes a major reform of youth service provision in England and, as part of the move towards children's trusts, it calls for greater integration of Connexions with a wide range of services at local level.

Extended Schools

The concept of schools providing community services for children and the wider community is not a new one. However, government funding to support schools develop extended services was first made available in 2002-03 when 25 local authorities were asked to develop extended school pathfinder projects. By 2005-06 all local authorities were receiving funding to support the development of extended schools in line with the Government's vision, as set out in the Extended Schools Prospectus published in 2005, that by 2010 all schools will provide access to a core offer of extended services. The National Remodelling Team (NRT) was appointed in 2005 to support local authorities and schools in taking forward this agenda and by November 2005, 4,400 schools had indicated their willingness to work on developing extended services. There is no uniform model of an extended school as they are planned to fit local circumstances. However, it may be that extended schools are well placed to inherit the Children's Fund preventative agenda. Extended schools are regarded as one of the key mechanisms for implementing the Every Child Matters agenda.

The initiative calls for multi-agency collaboration and the involvement of the voluntary sector and parents in the provision of services which build the confidence and constructive engagement of children and young people. The core offer of extended services comprises: 8am to 6pm all year round childcare; study support activities including breakfast and afterschools clubs; parent support and swift referral to specialised agencies such as family support services; Child and Mental Health Services (CAHMS) and intensive behaviour support. They also provide wider community access to ICT, sports and arts facilities and adult learning. Through their role 'at the heart of the drive to raise standards' (Kelly, 2005) extended schools necessarily focus primarily on enabling educational performance and are linked closely with more personalised approaches to learning tailored to children's individual strengths and needs.

1.5 Implications for prevention practices

Descriptions of strategies that have been shown to be consistently successful in promoting resilience among children and young people, and which have been effectively replicated, are limited (Newman, 2002). However, there is a growing body of literature which highlights the implications of a resilience perspective for social policy interventions and prevention practices. With its focus on strengths and positive outcomes, the move to resilience demonstrates a shift of emphasis from crisis intervention to primary prevention before problems are manifest (Schoon and Bynner, 2003). Attention to resilience also calls for a shift from preventing children's and young people's problems, to promoting children's and young people's development and engagement in their communities and societies (Pittman *et al.*, 2001).

An ongoing challenge for preventative services is the need to be timely and responsive in order to give sustained support. Schoon and Bynner (2003) argue that continuing protective support should be directed at all children, particularly those where the risks are highest, in recognition of the fact that children may move in and out of risk situations as their family circumstances change. Furthermore, interventions which are sustained over longer periods of time have generally been found to be more effective (Luthar and Cicchetti, 2000).

For practitioners, concepts of risk, resilience and protection are proving to be useful tools in shaping their approaches to prevention. The NewCan Practice Framework aims to inform a range of risk/protection-focused interventions in child and adolescent mental health, including providing recreation/extra home visiting, parenting programmes, promoting a positive school milieu and ethos and social skills and nurture groups in schools (Browne *et al.*, 1999; Cunninham *et al.*, 1995; Webster-Stratton, 1998; Ofsted, 1999; Bennathan and Boxall, 1996). However, such practices mainly consist of discrete single agency interventions targeted towards the individual. The risk and resilience literature has yet to be fully applied or integrated into a multi-agency context; nor has it been used to develop joint collaborative working or participatory approaches with families, children and young people (Croom and Procter, 2005).

The idea of building resilience has also played an explicit role in the development of Child and Adolescent Mental Health Services (CAMHS). CAMHS defines children 'at risk' as those who have an increased probability of developing a mental health problem, and resilience as those factors which allow the individual child to thrive despite adversity. Early interventions for children with personal, social and emotional needs, where services are accessible, affordable, appropriate and collaborate with other agencies, are seen as essential in order to promote what Masten (2001) calls the 'ordinary magic' of resilience.

Some recent analyses have begun to identify characteristics of good practice when working with children and young people and the factors which can help promote resilience (see Table 1.1). Quinton (2004) identifies a number of key messages about what works in the delivery of family support services, including that parents wanted services to treat them like adults and as partners in problem solving; to be practical and professional; to take their needs seriously and to be fast and responsive. The Family Policy Alliance's (2005a) research with parents and service providers discusses the implications of these findings for the workforce. Key issues for frontline practitioners were identified as: to be valued; trained to work specifically with children, parents and families and work holistically in partnership with whole families; to

have a sound knowledge of local resources and to be supported by peers and managers and properly remunerated to retain skills and expertise.

Particular approaches that families valued included listening to and respecting parents' views on the support they need to help them care for their children; flexibility and the 'lack of stigma' that voluntary sector services provide; and group activities which enable parents to meet with other parents and reduce social isolation. However, uncertainty about access to funding represents a continuing barrier to the development of preventative services. The Family Policy Alliance emphasises the need for adequately resourced, accessible and sustainable services to support children and parents when they need it, addressing problems when they first emerge.

Key policy documents such as SEU (1999) and Hoggarth and Smith (2004) recognise the importance of developing trusting relationships between providers and families. The need for time to develop such relationships is outlined as part of the Social Care Institute for Excellence guidelines on involving users in service delivery (Family Policy Alliance, 2005b). This report explores the significance of these dimensions of practice and resilience-building factors through children's and families' experiences of the Children's Fund.

Ideal characteristics of multi-agency,	Factors which help to promote resilience
negotiated practice with children and	in children and young people (Newman,
young people (Edwards, 2004)	2002)
 a holistic focus on children and young people; following a child's trajectory; ability to talk across professional boundaries; an understanding of what other professionals can contribute to a responsive package of protection built around the child or young person; acknowledgement of the capacity of service users to help tailor services; an understanding that changing the trajectories of children and young people involves a reconfiguring of opportunities available to them, as well as building confidence and skills. 	 strong social support networks; the presence of at least one unconditionally supportive parent or parent substitute; a committed mentor or other person from outside the family; positive school experiences; a sense of mastery and belief that one's own efforts can make a difference; participation in a range of extra-curricular activities; a capacity to reframe adversities so that the beneficial as well as the damaging effects are recognised; an ability - or opportunity – to 'make a difference' by helping others or through work; not to be excessively sheltered from challenging situations which provide opportunities to develop coping skills.

 Table 1.1 Practices and approaches to building resilience with children and young people

1.6 Summary points

- This report aims to address the overarching question of which Children's Fund practices and approaches promote good outcomes for children and young people and support their pathways to inclusion. We use the concepts of risk, resilience and protection to understand the responses of children and families to the services provided by the Children's Fund and the immediate impact these services have made on their lives.
- We also begin to locate these experiences within some broader notions of social exclusion and inclusion in order to reflect on how learning from the Children's Fund might be taken forward. The concepts of risk, resilience and protection inform a range of government policies and interventions targeted towards children and young people, including the Children's Fund and the Every Child Matters agenda.
- However, notions of risk, resilience and protection are heavily contested. Researchers, policy makers and practitioners working within diverse fields may have very different notions of 'risk' and 'protection', linked to different understandings in the literature and related policy developments.
- There is limited evidence of outcomes of prevention programmes in the UK to date and the relationship between risk and protective factors and long-term outcomes for children and young people remains unclear.
- A range of characteristics of good practice when working with children and young people and the factors which can help promote resilience are emerging.

Chapter 2: Planning Services to Support the Social Inclusion of Children and Young People

2.1 Introduction

This chapter gives a brief overview of the ways that Children's Fund partnerships planned and targeted preventative services that were aimed at promoting positive outcomes for children, young people and their families 'at risk' of social exclusion. The next section gives a brief description of the kinds of services that were accessed by children and families in the case study samples. The following section gives an overview of the different ways that children and families accessed Children's Fund services and their reasons for accessing services. The chapter concludes by exploring children's and parents' own understandings of social exclusion and the risks of social exclusion.

The evidence drawn on in this chapter, as elsewhere in the report, is derived from a range of services across the 16 partnerships in which NECF carried out in-depth work (see Appendix B). One sub-set of services, in 16 partnerships, was selected on the basis of their proximity to each other and the likelihood, therefore, that targeted children or their siblings might be accessing more than one service. The other sub-set of services in 13 partnerships were selected because they were working with five specific groups of particularly marginalised children and young people; these included children from refugee and asylum seeking families and disabled children. The services, therefore, do not constitute a representative sample. Case study work, however, has enabled NECF to drill down from service provision to the expectations and experiences of children, young people and their families in order to examine in detail how service users were interpreting and making use of Children's Fund services. Out of all the services where evidence was gathered in the case studies, 72 services generated detailed child level data. This chapter also draws on quantitative data analyses of the targeting of Children's Fund services, provision and take-up and characteristics of service users, where relevant, to indicate whether findings from the gualitative data are supported more generally by experiences of the Children's Fund across England.

2.2 Planning and targeting Children's Fund services

As discussed in Hughes and Fielding (2006), partnerships interpreted Children's Fund *Guidance* about how to commission and target services in a variety of ways, according to different understandings of the concepts of 'risk', 'need' and 'prevention'. NECF's (2003) initial mapping of the Children's Fund illustrated the diversity at the outset of the initiative when important decisions about targeting strategies were made. As expected when the Children's Fund was set up, targeting was influenced by local emphases, priorities and histories. For example, in many instances, the Children's Fund was used to complement

existing strategies for prevention and social exclusion within the context of the local area. In addition, terms such as 'risk', 'protection' and 'resilience' were used in different ways between and even within partnerships in the processes of identifying and targeting those perceived to be most at risk of social exclusion.

Planning interventions based on analysis of risk is problematic. In Chapter 1 it was argued that risk factors are difficult to identify and measure. There is little consensus about which factors are significant and a lack of clarity about possible causal links between these factors and future negative outcomes for children and young people (Hansen and Plewis, 2004; Little *et al.*, 2004). Furthermore, when we look at interventions aimed at groups rather than individuals, the problems with using risk factors to target preventative interventions have been widely documented. They have significant implications for attempts to target preventative interventions at those most at risk, since individuals are not often easily targeted within such programmes.

In practice, when targeting services, Children's Fund partnerships relied on data collected for other purposes in order to develop proxies for identifying risk amongst populations. Many partnerships identified groups of children as being 'at risk' according to sets of criteria developed from a combination of indicators, conflated to produce indices of need. Indeed, many partnerships drew on the established Index of Multiple Deprivation. However, the use of such generalised proxies for need can hinder the identification of those most 'at risk' of negative outcomes. For example, this approach has meant that services were targeted at geographical areas (usually wards) or identifiable groups that were seen as experiencing relative deprivation or were considered to be 'at risk' of social exclusion.

The NECF survey of Children's Fund programme managers in the autumn of 2005 indicated that over 60% of the 110 managers who responded to the specific question reported that Children's Fund partnerships had funded services with specific groups in mind and then actively recruited users to the services (see Edwards *et al.*, 2006 for further discussion of survey results). Furthermore, over a fifth of the 110 programme managers surveyed said that the partnerships had funded services with specific groups in mind, but then made services also available to other groups. According to programme managers, only a small number of partnerships funded universal services as the primary targeting approach (7%). However, after the primary approach of targeting specific groups, the majority of partnerships funded services that targeted geographical areas as a secondary targeting strategy (63%). Partnerships were aware of the danger of establishing criteria which could potentially exclude some children, and attempted to recruit children and young people to services through well-

publicised and appropriate information and referral routes, rather than targeting individuals (Edwards *et al.*, 2006).

Partnerships also drew on qualitative or discursive understandings about groups considered to be most at risk of social exclusion and targeted services towards specific themed groups. According to NECF survey findings, children at risk of crime and anti-social behaviour were the most commonly targeted group (98% of partnerships, based on 119 partnerships). This reflects the higher priority given to this group of children during the course of the Children's Fund initiative by the Government stipulation in 2002 that 25% of partnerships' budgets should be allocated to crime prevention activities (this rule was subsequently relaxed in 2004). However, analysis of Quarterly Monitoring Data for the period January – March 2004 shows that health improvement, rather than crime prevention, was a high priority for many services, largely because many services were directed at children and young people with self-esteem problems (Edwards et al., 2006). We know that local programmes were inventive in the ways they tackled what many saw as the distraction of the 25% requirement and it is possible that the focus on self-esteem reflected one way of attending to both crime prevention and becoming a victim of crime or anti-social behaviour. According to NECF survey data, disabled children were also targeted by the majority of partnerships (89%), followed by children from black and minority ethnic communities (71%) and just under half of partnerships targeted refugee and asylum seeking children (44%). The NECF report on targeting by Hughes and Fielding (2006) explores the various rationales given to explain the choice of such themed target groups. In addition, the NECF reports on work with these specific groups discuss the basis upon which such groupings were chosen and/or constructed (see Barnes et al., 2006; Beirens et al., 2006; Mason et al., 2006; Morris et al., 2006; Prior et al., 2006).

Analysis of the Millennium Cohort Study (MCS:OS1) quantitative dataset suggests that the Children's Fund has to a large extent reached its intended target group, that is, children and families experiencing or at risk of social exclusion (see Edwards *et al.*, 2006 for a full discussion of the take-up and characteristics of Children's Fund service users). Service use was higher by single parents, by families living in rented accommodation, by those receiving state benefits and families in which there were more dependent children in the household.

2.3 Overview of Children's Fund services accessed by children and families in the sample

Across the 16 Children's Fund partnerships, there was a mix of services. Some were open to all children in the locality or based on a broad notion of children 'at risk' of social exclusion. The remaining services were specifically targeted towards particular groups of children deemed to be 'at risk' of social exclusion due to their particular behaviour or characteristics.

These groups were: disabled children, children at risk of crime and anti-social behaviour, black and minority ethnic groups, newly-arrived and refugee/asylum seeking children, children in the care of the Local Authority (looked after children), children who had experienced bereavement, and children whose families were homeless.

This report also draws on the experiences of children and families accessing a range of services which were focused on specific themed groups deemed to be most 'at risk' of social exclusion in eight case study partnerships. The target groups were: refugees and asylum seeking children; children from black and ethnic minority communities; children involved in crime or anti-social behaviour; and disabled children. In addition, the report draws on data from children and families gathered as part of research into Children's Fund work with Gypsy and Traveller children in one region where there was collaboration across a number of partnerships.

Children's Fund services used a wide range of approaches to service delivery. Projects included in the sample provided group activities for children and young people, such as before and after-school clubs, youth clubs, and evening, weekend and/or holiday activities. Examples include a library-based book club, homework clubs, child-minding service for disabled children and a mentoring project organising weekend activities. A small number of participation projects in the sample aimed to provide opportunities for children to develop skills to participate in decision-making processes and encourage greater social engagement. There were also several home-school liaison projects, which focused on supporting children perceived to be 'at risk' during transition periods such as the transition from primary to secondary school. These services provided group-based and individually-tailored activities for children in nurture groups and break and lunchtime clubs, as well as supporting parents.

Children and families also received help or advice tailored to their individual needs from family support services, as well as from Youth Inclusion Support Panels (YISPs), which were multi-professional teams working with children at risk of crime and anti-social behaviour. Some projects provided one-to-one specialist support for children, such as counselling services and help for disabled children to access mainstream play and leisure services. A few services focused specifically on parents, rather than working directly with children. These included a crèche with advice and language skills help for parents from minority ethnic groups.

The importance of schools to the developing preventative agenda was evident, with nearly half of the locality-based services delivered within schools or involving collaboration with school professionals. However, NECF only talked to Children's Fund service providers and

users and not with the host schools, so we are not able to comment about school-based services from schools' perspectives. The large proportion of Children's Fund services located on school sites is supported by quantitative data analysis of Children's Fund Quarterly Monitoring Data and the 2004 Pupil Level Annual School Census and the National Pupil Database. This found that 38% of primary schools and 43% of secondary schools had some Children's Fund activity in some way connected to them during one quarter (Edwards *et al.,* 2006). However, services in the sample targeted towards black and minority ethnic children and Gypsy/Traveller children were often delivered at local level by voluntary and community organisations in community settings or through outreach work and had low levels of collaboration with schools.

2.4 Ways that children and families accessed Children's Fund services

The different ways that children and families accessed Children's Fund services gives some indication of the ways that projects engaged with users and potential users, the extent to which services were open access or targeted and the role that children themselves played in the referral process. The majority of children and parents using locality-based services who talked with NECF referred themselves to projects. For children using targeted services, it was a mixed picture of self-referral and professional referrals. We cannot say whether this is a more general reflection of all Children's Fund service users, or just of those who NECF interviewed. Many children received information about Children's Fund services either in school or informally through a friend or sibling, or through another project and then self-referred. In some cases, parents or carers actively sought help and information, for example, from statutory agencies. A number of other families responded to publicity and outreach work in the form of invitation letters, posters or open days. In a few instances, children accessed services because their parents already had a role in running or setting up the project.

Most children who were referred to projects were referred by schools, in particular, head teachers or special educational needs co-ordinators, who often continued to work with Children's Fund project workers. Reasons for referrals were related predominately to children's challenging behaviour at school, low school attendance, school exclusion or potential exclusion. A few referrals within the school context were also triggered by concerns about the child's emotional health and well-being. In a few instances, youth justice professionals, social services and in one case, a health visitor also referred children to Children's Fund services. In terms of youth justice, referrals were made by the police or the YISP, in response to children having come into conflict with the police. Social services professionals referred children who were experiencing behavioural and/or emotional difficulties. There was less evidence of referrals from health professionals to the Children's

Fund. However, in one case a health visitor referred a family to a Children's Fund service in an attempt to provide more holistic support for a single mother and her children.

2.5 Children's and families' reasons for accessing Children's Fund services

Children and families using locality-based services gave five broad reasons for why they were either referred or referred themselves to Children's Fund services. Their reasons focus predominantly on meeting the specific individual needs of children or the family, and to a lesser extent, on improving community resources in their locality. The reasons were as follows:

- support with children's challenging behaviour and/or to address their emotional needs at home and/or at school;
- support for disabled children;
- support for the academic development of children;
- access to childcare/respite for the parent/carer;
- access to play and leisure services that parents could not otherwise afford for their children and/or were not available in the local area.

These reasons are discussed in more detail below and related where possible to quantitative analyses about the take-up and characteristics of service users across England (see Edwards *et al.*, 2006 for a full discussion of the take-up and characteristics of Children's Fund service users).

Support with children's challenging behaviour and emotional needs

The main reasons given by parents for accessing Children's Fund services involved seeking support for individual children. Parents reported a need for support with managing their child's behaviour at home and within school. This need was often linked to the child being at risk of school exclusion or non-attendance. Evidence from the Millennium Cohort Study (MCS:OS1) and Strengths and Difficulties Questionnaire completed by mothers about one or two of their older siblings suggests that children who used Children's Fund services in the wards where MCS:OS1 gathered evidence had higher scores (and hence more problematic behaviour) than children not using services. Although we cannot conclude from this that parents of children with more problematic behaviour were being directed towards or choosing services because of their child's behaviour, this evidence does provide some support for the position that Children's Fund services were reaching at least some of their target groups (Edwards *et al.*, 2006).

Parents in the case study sample also sought help with addressing their children's emotional needs, where children experienced bereavement, bullying, anxiety, depression, or trauma. MCS:OS1 evidence suggests that 16% of the sample were reported to have been bullied (either in or out of school) in the 12 months prior to interview and these children were more likely (1.6 times more likely) than those not bullied to have used a Children's Fund service. It is not known however whether they used a service *because* they were being bullied (Edwards *et al.*, 2006).

Support for disabled children

Many parents of disabled children cited their main reasons for accessing services in terms of seeking a range of support for their child. This included meeting their child's individual needs; providing opportunities to meet other children and parents in similar situations; help in accessing further sources of support and resources available to the family; the opportunity for their child to develop friendships in safe environments; and non-school based activities for the child. Evidence from analysis of the Quarterly Monitoring Data (January to March 2004) suggests that over a third of services (37%) were offering services for children with learning difficulties or special needs, which is higher than any other target group.

Support for the academic development of children

Some parents and children, particularly those from black and minority ethnic groups, saw services as sources of support with promoting the academic development of children. These activities included help with school work and, for children whom English was not their first language, support in developing their English language skills. Data collected in MCS:OS1 about the use of homework clubs more generally suggests that they were used more by children in single parent families and by children of Pakistani/ Bangladeshi, Black/ Black British or Indian ethnicity and by younger children whose mothers worked.

Access to childcare and respite for the parent

For parents, another important reason for accessing services was to gain access to childcare services that enabled them to work or study or receive respite, particularly for parents of disabled children. Quantitative data analysis from MCS:OS1 and the Families and Children Study (FACS) discussed in Edwards *et al.* (2006) supports the finding from the case study evidence that for some parents, Children's Fund services allowed them to engage in economic activity. The more the mother was connected to the labour force, the more both breakfast and after-school clubs were used (Edwards *et al.*, 2006). The quantitative analysis suggests that breakfast clubs were used more by children in single-parent families and younger children also used them more if their mothers were employed, especially if they worked longer hours. After-school clubs, however, were used more by children with mothers

with better educational qualifications, by younger children whose mothers worked and who lived in rural areas.

Some parents identified their need to access affordable, specialist childcare services, for example, for disabled children through Children's Fund subsidies. Indeed, many parents of disabled children cited their main reasons for accessing services in terms of receiving respite from caring for their disabled children, to enable them to have time to spend time with their other children or to do other activities. When the main reason for accessing services was to gain access to childcare and respite for parents or carers, few parents expected that any of their additional support needs, such as peer support, would be addressed. In many instances, however, services responded to parents' emotional and practical support needs and parents experienced benefits for themselves and their families beyond simply gaining access to childcare and respite.

Access to play and extra-curricular activities

Most children said that their main reason for accessing services was 'to have fun' and gain access to opportunities and activities that their parents could not afford or were not previously available in their locality. Similarly, many parents saw this as a key reason for accessing services, in view of the limited resources available to children and young people at the community level. For some families, Children's Fund services filled a gap in local service provision, while others wished to gain access to more appropriate services in terms of age or gender. Some families also expressed a need for support in liaising with and accessing other services for their children, particularly statutory services such as health and education.

Other reasons for access

Parents also accessed Children's Fund services for a range of other reasons. A few parents anticipated gaining more tailored support for themselves as parents, such as drug counselling, English language support and emotional and practical support. A small number of parents also actively sought support from projects for improving relations with their child's school.

2.6 Children's and parents' understandings of social exclusion

While many children and families had positive experiences of school and their local community, some participants raised concerns, which related directly to aspects of the social environment and risks of social exclusion which children and young people were exposed to in different domains of their lives. Concerns predominantly focused on bullying, racism, school exclusion, poor local play and leisure services and the risk of crime and anti-social behaviour. While parents, as we shall see later in this chapter, did cite support for their

individual child as one of the main reasons for accessing Children's Fund services, many children and parents discussed the risks of social exclusion in terms of issues of concern at the level of the school and wider community, that is factors outside the individual child or young person. To a lesser extent, parents identified risks of social exclusion at the level of the family. However, the issues discussed in the following sections are not definitive and should be seen as examples of some of the exclusionary issues facing children and families.

2.6.1 Perceived risks of social exclusion at the level of the family

A range of factors was identified at the level of the family, which were of concern to children and families. These included pressures placed on families, such as lone parenthood, longterm illness and older siblings in trouble with the police, as well as external pressures, for example, those associated with seeking asylum. These pressures were identified by families accessing a range of different Children's Fund services, including locality-based services as well as those targeted towards particular marginalised groups, such as disabled children, refugee and asylum seeking families and black and minority ethnic communities. In many instances, Children's Fund services were responsive to families' concerns and offered emotional and practical support where possible.

Pressures of caring for children in single-parent households

The pressures of caring for children as a lone parent, particularly for those working full-time, were highlighted by several families. Single parents also emphasised difficulties in accessing appropriate help for themselves and their children. Family separation, divorce, and access rights were issues of concern identified by a number of families. For example, one mother of eight children who was supported to care for her children worried about the impending release of the children's father from prison and the implications this might have for him gaining custody of the children. Kinship foster carers also highlighted the difficulties they experienced in accessing support to care for children, based on a 'postcode lottery'.

Caring for a family member with long-term illness or disability

The pressures placed on families caring for children or other family members with a longterm illness or disability was an issue raised by several children and parents. Some parents of disabled children were concerned that the complex support needs of the children restricted opportunities for their other children to invite friends to their home. For other families, problems arose when the primary carer developed particular health needs.

Siblings in trouble with the police

Several parents were concerned about the negative impact that having an older sibling who was in trouble with the police might have on other children within the family. One mother, for

example, was concerned that her three younger children would be affected by the behaviour of her two elder sons, one of whom was excluded from secondary school and had a history of involvement with the police. As she explained: *'I did get to the stage where I'm like, I can't cope with this anymore, I really don't want them here because I cannot have their influence rubbing off on the other three'.*

Pressures linked to refugee, asylum seeking or newly arrived status

Several families experienced specific problems associated with their refugee or asylum seeking status. For example, an asylum seeking mother and three children who had moved several times and were placed in interim accommodation when the family became homeless explained how difficult they had found the instability. The mother continued to suffer from panic attacks and mental health problems. Other refugee and asylum seeking families commented on mental health issues related to their experiences as refugees in their country of origin and their arrival in the UK, which affected both parents and their children. Particular concerns about children included emotional trauma, behavioural difficulties and difficulties settling into school.

Difficulties caused by English as an additional language

Parents, for whom English was an additional language, emphasised the practical difficulties they faced in supporting their children and in accessing services. These included concerns about not being able to help their children with homework due to language difficulties, as well as ongoing difficulties in accessing health and other services. Language difficulties often meant that mothers had to rely on other members of the family to help with translation and interpretation, which was not always possible or appropriate.

2.6.2 Perceived risks of social exclusion at the school level

While many children and families had positive experiences of engaging with school, children with a history of problems with school attendance and exclusion and some of the most marginalised children and parents, particularly disabled children and those from black and minority ethnic and refugee communities, reported a range of concerns in terms of their experiences with teachers and the school system.

Bullying and racism

Many children from diverse backgrounds reported that bullying within school was a major issue of concern to them. Several children felt that they were being bullied because of their disability, race or ethnic identity. One young person (aged 13) with multiple impairments explained: *'I don't have many friends in my school. [...] Because I've got a problem with my bowel....It makes me feel sad and lonely and not special and I don't want to go to school'.*

Children also discussed their concerns about racist bullying at school and some parents expressed concern about the way in which they felt that schools dealt with racism. The mother of one young person (aged 12), of mixed ethnicity commented on how helpful a Children's Fund project worker had been in alerting the school to this problem.

School exclusion and transitions

School exclusion was a concern raised by many families. One mother whose son had emotional and behavioural difficulties highlighted the lack of out of school provision for children excluded from primary school. Her son was excluded from primary school and had to stay at home for nine months before a place was found for him in a special school, as she commented: *'… if you're in secondary school there's places to go. But children in primary school there was nowhere for [my son] to play games, out of school, at special school'.* A Children's Fund Saturday club for disabled and non-disabled children, however, provided an opportunity for the boy to meet other children and engage in extra-curricular activities.

A number of families noted the risks faced by children during the transition from primary to secondary school, or from special school to mainstream school. Several children in the sample of locality-based services accessed school-based transitions projects which aimed to support children identified as 'at risk' during school transition periods, particularly between primary and secondary school.

2.6.3 Perceived risks of social exclusion at the community level

The majority of children and families interviewed reported a range of issues affecting them at the community level.

Poor play services and extra-curricular activities for children and young people

Having 'nothing to do' and 'nowhere to go' were major issues of concern to most children and families. Many highlighted a lack of enjoyable activities which were safe for young people to engage with: 'There's not anything for them to do that they can do safely and enjoy it without getting into any trouble'. Parents also noted missed opportunities to develop public parks and play spaces for children and young people in the locality: 'You wouldn't believe, we've got a big park with nothing on it. Nought on it, just grass'.

Parents also commented on the lack of sustainability of community resources for children and young people: 'They used to do clubs and things like that but everything just stopped round here. Stopped one thing one year and then the next and next'. Others explained that when there was provision, it was not always appropriate. For example, youth clubs sometimes had too wide an age range which can have a negative effect on younger children, or children can fall between the gap in provision for different age groups of children and young people. Some parents thought that particular age groups of children were neglected in terms of play and extra-curricular activities: 'there is nothing laid on for the...well what I call the major group like between the ages of nine and sixteen'.

Personal safety and anti-social behaviour

Many parents expressed fear about the safety of children and young people in their local area. One parent described her concerns about personal safety and crime in her local neighbourhood: *'In the last week we've had a rape. Two children have attempted to take some children away. We've had two women mugged, so it's getting a bit bad'.*

Personal safety was an issue of concern expressed particularly by refugee and asylum seeking families and by members of black and minority ethnic communities living in deprived areas. Some children described the local area they lived in as *'polluted with rubbish and gun violence'*. *'They make gangs'* and *'there are fights'*. They also referred to the fact that *'there's always police around our area in the night time'*.

Several parents thought that the lack of facilities or activities for young people in the locality put them at greater risk of engaging in anti-social behaviour: *'If there was more for them to doif there was more activities going on round the estate, they wouldn't want to be hanging round the corners...'*.

Exclusionary attitudes and behaviour amongst other community members

Many children and their parents expressed concern about the level of bullying they experienced within their local community. A young person (aged 13) emphasised his dislike for the estate where he lived because of the anti-social behaviour of other children and young people: '*They're all druggies and everything, they're all hyperactive. All they care about is guns and stuff....They cause trouble...*'. He explained that he was persistently bullied until his mother sought help from the Housing Association. Children experiencing bullying in the local area found that their only option was to stay at home, as one young person commented: '*I just don't like going outside, some people, I have had bad experiences with them and I don't like them*'.

Some families expressed concern about racial harassment locally. One asylum seeking mother described the racial harassment and bullying that her family had experienced: *'[people were]... targeting Asians and people, who weren't, you know, white... In the first couple of months I hardly went out of the house'.* She explained that the house represented a place of refuge from the outside world and described herself and her children as depressed,

terrified and anxious: 'I was falling into depression; the kids were scared, they wouldn't go out, and they locked the doors. You heard the doorbell and that would send them screaming... that's how bad it got'.

Children and families also highlighted the discrimination related to disability from other members of the community. One mother explained how the discrimination and adverse reactions towards her son's impairment restricted the social activities that the family could do together: *'We don't really get out much because of [our son's] needs. It's very hard to go anywhere with him because people just don't understand, they still have this panic'.*

In summary, the responsive work of the Children's Fund has revealed the extent of work to be done in the area of prevention. For example, parents and children reported gaps in local services for particular groups of children and young people, such as disabled children, Gypsy and Traveller families and refugees and asylum seekers. The lack of opportunities for peer support among parents was also raised as an issue by a number of parents.

2.7 Summary points

- Children's Fund partnerships have drawn on the concepts of 'risk', 'resilience' and 'protection' to varying degrees and in different ways in the planning and delivery of Children's Fund services.
- A focus for most partnerships has been to target particular geographical areas or identifiable groups that are seen as experiencing relative deprivation or as 'at risk' of social exclusion. These have included children at risk of crime, disabled children and children from black and minority ethnic communities.
- The majority of children and families accessed Children's Fund services through parents referring their children or the family, so that parents could gain support for their child in terms of their behavioural or emotional needs, their disability or their academic development. However, children and parents also sought services which filled gaps in local provision and provided local resources.
- Some children were referred to projects mainly via schools but also in some cases via other statutory professionals. In all these cases, referral reasons were to tackle individual issues, such as behavioural or emotional needs.
- Children and families perceived the risks of social exclusion predominantly in terms of issues of concern at the community, school and family level, rather than in terms of individual within-child factors. These include:
 - within the family: pressures of caring for children as a lone parent, difficulties over parental access rights, difficulties in accessing support for kinship carers, pressures of caring for a family member with a long-term illness or disability, sibling in trouble

with the police, pressures linked to their refugee/asylum status, and difficulties caused by English as an additional language;

- within school: bullying and racism, school exclusion and transitions between schools;
- within the wider community: poor play/leisure facilities, personal safety and antisocial behaviour, exclusionary attitudes amongst community members and poor services for particular groups.

Chapter 3: Children's and Families' Experiences: Responsiveness and Participation in Children's Fund Services

3.1 Introduction

Key messages from previous research and practice about what makes for effective delivery of services that support children and families emphasise:

- the importance of flexible and responsive services which intervene early to address problems when they first emerge;
- multi-professional and holistic approaches;
- trusting relationships between providers and families;
- the involvement of children and parents or carers in the development of services;
- opportunities to meet others in similar situations;
- services which are sustained for as long as families need them (see Chapter 1).

These messages provide the contextual background for exploring children's and parents' experiences of Children's Fund services. In this chapter, we highlight practices and approaches which children and parents valued and the ways these experiences related to children's and parents' previous experiences of service provision, as well as the limitations of these approaches. This chapter, therefore, focuses on children's and families' perspectives of different approaches to service delivery. The actual practices and intended practices of Children's Fund service providers are discussed in detail in the NECF final report (Edwards *et al.*, 2006).

In general, children and parents gave very positive reports about the help they had received and the opportunities that Children's Fund services had provided in their locality. This case study evidence is supported by the MCS:OS1 quantitative data analysis which showed the high levels of satisfaction with Children's Fund services among the majority (84%) of parents and children who used the services.

In this chapter, children's and parents' experiences of Children's Fund services are explored within an understanding of the working environment in which many Children's Fund practitioners found themselves. Aspects of that environment that were of particular importance were the marginality of the Children's Fund initiative within wider local authority structures and the nature of the initiative, which was experienced at local level as relatively short-term, in terms of the commissioning and funding arrangements. Both of these features of the initiative impacted on the extent to which practitioners were able to engage in multi-agency collaborations with mainstream service providers, influence practice within their own

organisations and develop sustainable, responsive and holistic services for children and families (Edwards *et al.,* 2006).

Firstly, we explore the different aspects of responsive and holistic approaches to service provision that children and parents valued about Children's Fund services. We discuss the potential and some of the limitations of practices providing specialist support tailored to the individual needs of children and families, the role of multi-professional working; and the approaches and skills necessary for project workers to build relationships of trust and respect with children and parents. In the second part of the chapter we focus on children's and parents' experiences of participation in the planning, delivery and evaluation of Children's Fund services. We consider the extent to which participation was perceived as an end in itself or as contributing to the development of preventative services.

3.2 Responsive and holistic approaches

The term 'responsiveness' is used to describe how practitioners in the area of prevention may go beyond simply delivering planned services and activities and work in child-centred ways by responding to children's changing trajectories over time (Edwards, 2004). This approach requires a holistic focus on a child or young person, engaging with family networks and working with other professionals and services to build a package of support around the child. A holistic approach is, therefore, based on an understanding of the multi-dimensional nature of social exclusion and the different kinds of support and protective factors that may be relevant within the different spheres of children's lives, for example, family, school and wider community.

As we suggested in Chapter 1, such approaches are features of 'multi-professional negotiated practice' with children and young people. Relationships based on trust and respect are essential to enable children and parents to effectively engage with the support offered and to influence service provision according to their needs and interests. Collaborative approaches require frontline practitioners to be able to talk across professional boundaries and have an understanding of what other professionals can contribute to a responsive package of protection built around a child. These approaches can, therefore, also entail a reconfiguring of opportunities available to children and families. Consequently frontline practitioners need a sound knowledge of local resources (Family Policy Alliance, 2005a) and need to have the skills to know how to access the appropriate support in a locality. NECF has argued elsewhere (Edwards *et al.*, 2006) that collaborative approaches which are simply reliant on existing networks and previous relationships between practitioners cannot necessarily respond to the emerging strengths and needs of children and young people.

The following sections discuss the potential and limitations of responsive and holistic approaches, based on children's and families' experiences of Children's Fund services. Children's and parents' positive experiences of responsive and holistic approaches need to be understood within the context of their often negative experiences of statutory agencies in the past. These are referred to, where appropriate, throughout this chapter. Many children and parents described statutory agencies' responses as slow and bureaucratic and, as we highlighted in Chapter 2, children and parents reported gaps in service provision for particular groups of children and young people in their locality. Such difficulties in accessing services can further exacerbate the social exclusion that children and families may be experiencing.

3.2.1 Services tailored to individual support needs

Delivering specialist support which is responsive and tailored to the individual needs of the child and family is a key element of many Children's Fund projects (Edwards *et al.,* 2006). This section explores the different aspects of individually-tailored support that children and parents valued about the Children's Fund services they accessed.

Responding quickly

Specialist support which was responsive to the individual needs of the child and the family was highly valued by parents who were experiencing difficulties with their child's behaviour at home and school. This often contrasted to parents' previous negative experiences of communicating with school professionals when their child's behaviour was problematic. For example, a mother whose son (aged 12) received support from a school transitions project valued the fact that home-school liaison workers were able to respond to her concerns when they arose: '*I can get hold of [the project worker] any time I want to, if I need to you know, help with homework, if we've got a problem at home with him, I can get hold of her basically 24 hours a day'.*

Timeliness of interventions

Timeliness of interventions and responding quickly to problems when they first emerge was important to parents and children, and Children's Fund services were valued for early intervention to prevent problems becoming more serious. A mother of a nine-year-old boy, who was experiencing behavioural difficulties at school and who received one-to-one support in weekly play sessions in school, felt that the support was timely, occurring when he needed it during the transition period before he moved up to secondary school: '*I think eight and nine is the right age, you know before they start to become a teenager, [it] sets them on the right path. [...] So I'm really pleased that [my son] had the support early, when he needed it ... when things started to go wrong for him'.*

Parents contrasted their experiences of responsive Children's Fund services to previous experiences of statutory agencies which they found slow to respond and bureaucratic. A parent of a 13-year-old young person who was getting into trouble both in and out of school contrasted the responsiveness and availability of the Children's Fund family support worker at moments of crisis to her experiences of contacting social services in crisis situations: *'Well, they said can you ring back? No, I can't ring back. You can see why people slip through the net.'*

Working at the child's pace

Child-centred approaches which worked at the individual pace of the child emerged as another important aspect of individually-tailored services. For example, a project which aimed to help newly-arrived children settle into school offered one-to-one support for a fiveyear-old boy from an asylum seeking family, both in school and at a community centre. Project workers gave him a special area where he could do activities that he liked doing at home, organised a weekly outing to which he could take a friend, and created opportunities for him to play with children from other schools. This enabled him to become calmer and more settled in school, make friends with his peers and to improve his English quickly.

Parents of disabled children also valued these flexible, child-centred approaches. One parent, whose son (aged six) had autism, appreciated the way that a support worker took a gradual approach to getting to know and working with both her child and herself to enable him to access a mainstream *Beavers* club. The support enabled the mother to gradually withdraw and eventually her son could enjoy his time at *Beavers* without his mother.

Specialist skills of project staff

Parents valued the fact that Children's Fund project staff had the necessary specialist skills in working with disabled children. Parents of disabled children also valued project workers' help in developing an individual support programme for their children to address particular issues, such as learning life and independence skills. For example, the parents of a young person (aged 13) with complex needs who attended a Saturday club for disabled children valued the fact that staff were responsive to their daughter's individual needs. Project staff worked with her on personal safety, hygiene and personal care and keeping a check on her eating during the day, to continue the work that her mother and the school nurse were supporting her with. 'The club is going to help her out with her hygiene...That's what we've had some trouble with as well. ...So really they work with you'.

Holistic family-oriented approaches

While many services provided individual specialist support in response to children's and families' needs, some services working with children in group settings adopted holistic, family-orientated approaches which were able to respond to the changing needs of the family over time. This responsive and flexible approach meant that services could offer higher levels of support during particular periods of family crisis or stress. For example, a Children's Fund Saturday club for disabled children played a vital role when a large family was at a particular crisis point, when one of the younger siblings was critically ill in hospital in another city. The mother valued the fact that the project was responsive and offered more support during this crisis period, and accepted that the frequency of respite provision had since been reduced to enable other families to benefit: 'Something like this will always be needed but our situation here is not as stressful or as stretched [now]. [...] You don't know what the next family is having to put up with'.

Responding to parents' emotional and practical support needs

Parents appreciated approaches taken by Children's Fund project workers which responded to parents' emotional and practical needs, as well as focusing on support for the child. Projects used a range of approaches to offer parents emotional and practical support. A mother who was depressed following the birth of her new baby and who was caring for her disabled husband and her two other children, appreciated the emotional support she received at a drop-in project which also offered affordable crèche facilities. *'I come for a cup of coffee and a chat and go away feeling a lot better. It's like a home away from home.'* Similarly, parents valued being offered support in the more informal setting of their home. For example, a single mother of three children who had depression and was experiencing difficulties with her eldest son's behaviour valued regular and informal support with parenting skills and behaviour management strategies, which was provided alongside activities for the children as respite for the mother.

The flexibility of practical support was important. A single parent with two children and who accessed a crèche and parental support project, described how she was able to drop in without making an appointment and with no strict time limit on how long she could stay and talk with service providers. Parents whose first language was not English valued the flexible interpretation and language support services offered by services working with particular black and minority ethnic communities which enabled them to access other services more independently. Other parents valued practical assistance from project workers, such as support with completing benefit forms and paperwork for a divorce. Other issues highlighted, particularly by single parent households or large families, were the importance of flexible

opening times for childcare services and the need for childcare to be available over longer periods of time to enable parents to work or study.

Limitations of delivering responsive, specialist support in some Children's Fund services

While the Children's Fund enabled the development of responsive, specialist support tailored to the individual needs of the child and family, there were also circumstances where parents and children identified limitations in the delivery of responsive, specialist support within Children's Fund services. These concerns can also be related to other forms of preventative provision and included:

- the need for more qualified specialist staff within educational support projects;
- a high turnover of staff or volunteers, which, for example, in the case of a mentoring project made it difficult for mentors to develop trusting relationships with children;
- the lack of staff supervision during lunchtimes at childminding services where parents were required to look after their children or make alternative arrangements;
- problems with the duration of projects which resulted in valued services being withdrawn;
- limited involvement of children and families in the assessment of needs and the development of strategies to adequately and appropriately respond to these, as explored further in Section 3.3.

3.2.2 Multi-professional approaches

In this section we discuss children's and parents' or carers' experiences of responsive, multiprofessional approaches to building support around their needs. While some children and families experienced co-ordinated multi-agency responses, the majority of Children's Fund projects were single service interventions which focused on, for example, after-school activities, with little evidence of collaboration with other services around children's or families' needs (Edwards *et al.*, 2006). A single service focus reflected prevailing patterns of response elsewhere in the system. For example, many parents commented on the lack of multiprofessional collaboration and co-ordination between statutory services. Parents discussed their negative experiences of being passed from one professional to another, the lack of information about how to access services, and having to repeat their children's life history over and over to different professionals.

Although multi-professional approaches were not experienced by the majority of children and families accessing Children's Fund services, there are important lessons to be learned from examples where this did take place. As we suggested earlier in this chapter, such approaches are based on an understanding of the often complex, multi-dimensional nature of

social exclusion and call for a multi-layered approach drawing on the expertise of different professionals. Such multi-professional approaches require frontline practitioners not only to have a good knowledge of local resources and the expertise available, but also to know how to access these and perhaps to change existing ways of working. The section considers the extent to which Children's Fund services appear to have facilitated children's and families' access and take-up of other services and opportunities within the community as a means of building protective factors and supporting children's and young people's pathways to inclusion within the school and wider community.

Supportive signposting

Many children and parents accessing a range of Children's Fund services commented on how they felt able to turn to project workers for information and advice about other sources of support. Project workers also helped children and parents to access these services, accompanying them to meetings, taking an advocacy role or helping to mediate between the family and other service providers. For example, a young person (aged 13) who took part in a participation project appreciated the fact that project workers could offer support in accessing other services if she experienced difficulties:

If you have a problem ... if you tell them they can help you deal with it. And then if you want more help from like someone professional they will give you numbers and stuff. And they will phone and take you there if you really want to.

Similarly, a parent described how empowered she felt by the support of staff at the drop-in project she attended when accessing other services: *'it's always with the thing of standing on your own two feet. It's like a springboard. They help you identify what it is you need and help you to get that, and then you feel more independent in yourself.'*

Children and families commented, for example, that by providing language support, helping with GP registration and accompanying them to appointments, a Children's Fund project helped to build their capacity to take up mainstream services, as well as providing more positive experiences of engaging with statutory professionals. These events played an important part in facilitating, for example, refugee families' access to mainstream services and helped to counteract some of the effects of social exclusion they faced.

Children and parents valued the fact that Children's Fund project workers had a good knowledge of local resources and networks with other service providers, since this influenced their take-up of other services and opportunities within the community. A family worker supported a mother who is a single parent of three children to register and study for a GCSE English course, enabling her to gain new qualifications. The family worker also offered a

range of new experiences to the children, such as outings and library visits, while providing respite for the mother to attend antenatal classes and counselling during her pregnancy. The mother emphasised how helpful this support was: '*I wouldn't know where to look even if they were [on my doorstop] to be honest. The [family worker] knows the contacts to ask.*' Practical support from project workers, such as transport, assistance with form-filling and paperwork, was also important to facilitate access to other services. For example, one parent explained that a YISP key worker helped her to tackle her debt problems by accompanying her to the Citizens' Advice Bureau and '*she sorted all my filing system out ...*'. For families who have limited literacy and numeracy skills, such as non-English speaking refugees and asylum seekers and some Gypsy and Traveller families, this practical support was essential.

Referral and fast-tracking children and families to other services

Referring and 'fast-tracking' children and families to other sources of support and expertise was an important part of the work of some Children's Fund project workers. The role of key workers in identifying particular issues that required specialist support and referring children and families to a range of other services was found particularly helpful in addressing the complex, multi-dimensional needs of children and families. One young person (aged 12) had been in trouble with the police and had stopped attending school following an act of violence towards him. Following this, he was diagnosed with school phobia. As well as liaising with school and supporting him to complete school work at home, a YISP key worker referred him to Child and Adolescent Mental Health Services (CAMHS) for possible depression and was seeking an alternative school place for him. Following the key worker's identification of physical abuse against him, he and his family were also referred to social services. The young person appreciated the key worker's role in supporting him with different aspects of his life: 'She's helpful and kind and does a lot of things, like can get into schools and help your home life and stuff like that.'

Parents of children who required specialist support from statutory professionals valued the way that Children's Fund project workers fast-tracked referrals, as this meant that they were able to access statutory services more quickly. One parent of a young person (aged 13) with emotional and behavioural difficulties described a history of difficulties in accessing support for her daughter and her doctor's reluctance to refer her to CAMHS. Although the focus of the Children's Fund project her daughter attended was on participation, project workers responded to the family's individual needs by referring them directly to CAMHS, which the mother highly valued: *'if it hadn't been for [Children's Fund project] we'd still be banging our head against a brick wall'*.

Co-ordinating multi-professional responses

Through their contact with Children's Fund services, some children and families experienced co-ordinated multi-agency responses which helped to build a holistic package of support around them. Parents and children who received help from home-school liaison workers, family support or YISP key workers valued the role they played in mediating and liaising with school and other agencies, helping to make these services more accessible to them. This was often linked to a history of negative experiences of communicating with school and other statutory services. For example, a father of a young person (aged 13) who was experiencing depression and had low school attendance felt that the school did not respond appropriately to his son's situation: 'we felt like the school wasn't really grasping the magnitude of the problem and that they were seeing their bit of the fact where [my son] isn't coming to school...sort of intolerant, authoritarian, bureaucratic...'. However, a Children's Fund transitions project worker helped to co-ordinate support around the young person's needs among the different agencies involved, including counselling services and his school teachers, which had a positive impact on his school attendance. His parent commented on the difference in approach the family saw when the Children's Fund project worker became involved:

... when they got [project worker] involved, suddenly the whole thing just took on a different complexion, I mean his counsellor wrote a letter to the school and the head of the year and that and ... then the whole thing suddenly just sort of became so much more constructive and hopeful in some ways.

Family support workers supporting disabled children and their families helped to set up multiprofessional meetings in school, acted as advocates for families about the support needs of children in school and Special Educational Needs statements or facilitated access to a range of services, support and resources. For example, a young person (aged ten) with physical impairments and his mother were helped by a family worker to visit local secondary schools and find out about access. This assistance enabled the family to make an informed choice about which school to attend and for the project worker to put in place a range of extra support and resources to ease the young person's transition from primary to secondary school. The project worker's knowledge about how to access extra resources for the young person raised the mother's awareness of what was available for her son. For example, they obtained a computer through a Family Fund and the mother was helped to complete the forms to claim Disability Living Allowance: '*I didn't know about all these funds. If she didn't come then I don't think I would have known about them*'.

For some refugee and asylum seeking families, project workers from a service for newlyarrived children settling in school organised multi-professional meetings: individual packages of support were developed which provided art therapy, play activities and outings to help the children to settle in school. Their mothers were also helped to access counselling, tracing services, peer support groups, as well as advice and advocacy about asylum and immigration issues. For one family who received a Compulsory Relocation Order from the Home Office, the service co-ordinated a response from the school, GP and counselling service to explain about the support the child and mother were receiving and how important it was for the family to stay. However, their temporary housing situation remained an ongoing concern.

In some instances, information-sharing among agencies about children accessing services helped to identify children 'at risk' and enable early intervention with other siblings within the family. A mother of a nine-year-old boy who was experiencing behavioural difficulties at school explained that her son was referred due to his older brother's contact with the police and a referral to another Children's Fund project for young people at risk of offending. Through the school's pastoral system, a multi-professional meeting was called to discuss appropriate support for her younger son, involving his mother and her partner, teachers, educational psychologist, educational welfare officer and project workers from two Children's Fund projects. The mother appreciated the way that the projects shared information and co-ordinated support for the family, as this enabled earlier intervention for her younger son.

3.2.3 Trusting relationships with project workers over time

As we saw in Chapter 1, existing research shows that the engagement of children and parents through the development of high trust relationships between providers and families is a key element of responsive and effective service delivery and that these relationships can take time to build. The literature on resilience also suggests that a committed mentor or other person from outside the family helps to promote resilience in children and young people and can represent an important protective factor (Newman, 2002). Children and parents tended to talk about Children's Fund projects in terms of their relationship with project workers, as they often valued supportive relationships with a professional who was independent from statutory services. They identified trust, respect and sustainability as common principles which constituted positive relationships with project workers. However, these broad principles were manifested in different ways for children and parents. This section discusses what children and parents valued about their relationships with project workers as means to engaging them in services and supporting their pathways towards social inclusion.

Informal and approachable for children and young people

Children valued project workers who were informal and approachable. Two sisters (aged nine and ten), who had recently been adopted and were attending a project aimed at supporting them to settle into school, said that the project workers were *'like friends'* to them.

Children participating in group settings, such as participation projects and after-school clubs, also described how project staff were friendly, open and easy to talk to.

Some children described the importance of an informal atmosphere, where the rules were more relaxed than in school. For example, children were able to wear their own clothes, were 'not bossed around like in school', and they were, as one parent said, 'given more leeway.' In particular, some children felt that younger members of staff were less strict. Children appreciated an appropriate balance between setting rules for behaviour and also being respectful towards them. For example, young people accessing a participation project liked the way that project staff corrected their behaviour by talking and explaining rather than shouting. Similarly, a young person (aged ten), who accessed a play-care project with his disabled brother, commented on how project workers were easy to get on with and understood them: 'I like to play with [project worker] because they're all funny. They know what I mean when I say stuff instead of most grown-ups'.

Children are listened to and treated with respect

Developing trusting relationships with project workers is essential to engage children and young people in the process of negotiating support which is appropriate to their individual needs. Many children felt able to confide in project workers about problems they were experiencing and said that they found it easier to talk to project workers about problems than to family members or other adults. Children also valued confidentiality in talking about their problems, which was particularly important for refugee families due to the politically, socially or culturally-sensitive nature of the events that they have sometimes experienced. For example, a boy (aged 13) from a refugee family described the art therapy service as somewhere where 'you can talk about your problems...there are these people who are there especially for you and whatever you say, it will remain secret'.

Children appreciated the way that their concerns were taken seriously and project workers helped them to deal with problems. As one young person (aged 11) attending a break and lunch time activity club in school as a refuge from bullying said: *'you can talk to them [project workers] like and if you have any problems, you just tell them and they'll like sort it out'.* Similarly, children involved in participation or other group activity projects valued being listened to and project staff *'not walking off'* when young people were talking to them. A mother of a boy (aged nine) accessing a transitions project which offered one-to-one support and play sessions in school to tackle his behavioural difficulties, valued how workers treated her son with respect, which she felt helped him to feel *'more grown up...he didn't feel like he was being told off'.* This represented a *'completely different approach'* to how adults had

related to him previously and was linked to the project worker's independence from the school as 'a safe outsider'.

Children feel cared for and have positive adult role models

Families who were experiencing particular difficulties at home and parents of disabled children valued project workers who were warm and caring towards their children. A single mother appreciated the fact that her two sons were able to access a project where project workers 'give them a hug and show them affection'. Mothers from single parent families also suggested that practitioners could provide positive male role models for their sons. One lone mother felt that a project worker provided an important black male role model for her sons: 'it's nice for him because one worker is a black man he can look up to, they know what he's talking about, they've given him support, it's nice, because he hasn't got it at home'. Many parents and children felt that through their engagement in Children's Fund services, children developed greater levels of trust and were more able to communicate and socialise with adults, which may be particularly important for children experiencing difficulties at home. For example, a boy who was accessing a service for children whose families experienced domestic violence commented that the Children's Fund project workers were the only adults he knew who did not use drugs.

Project worker as a 'professional friend'

Many parents valued *'having someone to talk to'* for emotional or practical support or advice to deal with difficulties affecting themselves or their children at any time. This was often expressed in terms of project workers playing the role of a 'professional friend', that is a professional who was easy to talk to, responsive and available during and outside of usual project contact time. A single mother whose son had complex needs valued being able to contact the project any time *'to have a cry'* and knowing that they would be there to listen.

Some parents contrasted the kind of relationship that they had been able to develop with Children's Fund project workers to more difficult and restrictive relationships sometimes experienced with statutory providers. For example, a lone mother using a parental support project appreciated how approachable the staff were, and how this meant she felt that it was safe to be open with them, which she contrasted to feeling *'cagey'* with and overwhelmed by social services.

Independent and non-judgemental

For some parents, particularly those who had negative experiences of other services, it was important that the project worker was independent and non-judgmental. A mother whose

son (aged nine) was having difficulties with school and who was accessing a Children's Fund project aimed at supporting children during school transition periods, valued the project's independent non-statutory status: *'I think it's good because it's separate from the school, because if you have a child that's having difficulties at school...you feel suddenly you're against everyone in the school....It can make you feel a little bit isolated'.* Similarly, the mother of a nine-year-old boy who was attending a youth inclusion project due to concern about his aggressive behaviour, had found previous assessments of her son by other services *'very preachy'* and *'patronising'*, in contrast to the home-school liaison worker who was perceived as someone who was *'holding up her end'*.

Cultural appropriateness

Some parents from black and ethnic minority communities valued practitioners who were from similar cultural backgrounds to themselves. Some services targeted at particular ethnic minority communities were designed to address their specific support needs. Parents valued practical support, such as English language courses, translation support and the provision of culturally appropriate women-only groups.

Refugee parents commented on the importance of services being delivered in a culturally appropriate way. One refugee father, who worked for a parent-led community organisation for refugees and asylum seekers, commented:

Advice is always something that needs to be appropriate you know, when you are thinking of cultures. I mean, culturally appropriate advice is something that many different minorities would like to receive. When you are with a family you know, with the culture thing, you may have been linked to or fall into a culturally sensitive issue; and that may damage the person you are giving advice to unless you are aware of the parties, and know something.

Refugee parents who used this community-based organisation echoed this view and suggested that the lack of cultural appropriateness is a major reason why professionals from different ethnic backgrounds are sometimes unsuccessful in gaining access to families.

However, the importance of being supported by practitioners from similar cultural backgrounds was not such a concern for children and young people as for their parents. Children from black and minority ethnic communities developed relationships of trust with project workers from different ethnic and cultural backgrounds to their own and commented on their positive experiences of receiving support from practitioners. For example, despite coming from a different ethnic background, a girl (aged 13) from a refugee family described her positive relationship with the art therapist: *'[She's] a very nice lady and she has helped me a lot, so I think it would help other children as well.*'

In summary, it is clear that trusting relationships with project workers were a significant aspect of the support children and families received from Children's Fund services. Such relationships influenced the level of engagement of children and parents/carers in Children's Fund services and, in their view, was what made the difference in terms of supporting their social inclusion. The involvement of the voluntary and community sector in service delivery and the marginal position of the initiative within wider Local Authority structures has enabled flexible ways of working to develop within Children's Fund services, which contrasted to families' previous experiences of more rigid service environments, such as schools and social services.

3.3 Children's, young people's and families' participation in the planning, delivery and evaluation of Children's Fund services

The previous section discussed the importance children and parents attributed to being listened to and treated with respect. This respect enabled them to negotiate the kind of support that was of most help to them. This section focuses more broadly on the opportunities and mechanisms for children's and parents' participation in the planning, delivery and evaluation of Children's Fund services and their experiences of these processes.

The participation of children, young people and parents or carers in the development of the Children's Fund programme is one of the guiding principles of the initiative. The Children's Fund *Guidance* states that children, young people and their families should be actively involved in the design, delivery and evaluation of preventative services and that an 'ongoing dialogue' with them should be established (CYPU, 2001:13). Despite widespread commitment to the principle of children's, young people's and families' participation in these processes, partnerships were constrained by pressures to deliver within short timescales, which led to inevitable compromises and limitations in the development of work on these aspects of participation (NECF, 2004). In particular, the participation of parents or carers in design, delivery and evaluation has been found to be a low priority in the case study partnerships, with the exception of a small number of projects working specifically with families.

Although some partnerships took pains to ensure that participatory practices were a criterion for the commissioning of services, participation was often boundaried and located within specific services which focused on enabling participation. Among the sample of services studied in-depth by NECF a small number were explicitly focused on the participation of children and young people. These services aimed to:

- involve children and young people in decision-making about matters that affect them, which in one case meant involving children in strategic decision-making processes about the development of the Children's Fund partnership;
- build knowledge and understanding about children's rights to participate;
- enable children to develop transferable skills by planning, delivering and evaluating an event.

This section considers children's and families' experiences of participation and explores the ways that projects have engaged children, young people and their parents in the planning, delivery and evaluation of Children's Fund services.

3.3.1 Children's and young people's participation

Involvement in the planning and delivery of services and activities

The majority of Children's Fund projects working with children in group settings involved children and young people in services predominately through ongoing informal consultation and planning of activities within those settings. For many children, this meant being involved in making choices about the kinds of activities that were offered. Children liked being involved in selecting activities that they enjoyed, as one young person (aged 11) who was involved in a participation project said: *'cause it's giving us a say in what they do, they're not just telling us what to do'.*

In some instances, children and young people initiated ideas and suggestions for activities and events, which project workers then facilitated. For example, children participating in a project which encouraged young people to undertake 'challenges' in the community commented on how their ideas had been taken forward as activities for the group: 'the coffee morning was my idea and the Hallowe'en party was like sort of my idea and my friend's idea.' Children were involved in planning, organising and reviewing these 'challenges' that they participated in as a team.

Children involved in a participation project felt that provision had improved in response to what they had suggested, as a 13-year-old girl said:

They ask us if we like what we did and what we would like to improve on if we disapprove of it, so they can try and make it better next time [...] they always take what you think into account and they change it if you want it changed.

Other children commented on how their views had helped to shape project activities by offering activities for their younger siblings, as a girl (aged 12) said: *'they are going to do*

more with the little ones because we want that to change, because my sister doesn't get to do much at all'.

A few community-based organisations involved children and families in the planning and design of services from the outset and continued to involve them in the ongoing development of services. For example, a community-based organisation developed from refugee families coming together to discuss their concerns about the low educational attainment and school attendance of their children, and their developing anti-social or criminal behaviour. The young people were consulted about the problem and expressed their need for more support with their school work. In response to the young people's concerns, a homework club, after-school and holiday activities and a youth club were established. The young people were involved in running the after-school homework club and the planning and delivery of the holiday activities.

Involvement in design and implementation of individual support plans

Actively negotiating and being involved in decision-making about the design and implementation of individual support plans is an important element of responsiveness. Children and young people who received support from YISP key workers, school transitions project workers or family support workers felt satisfied that they had a good relationship with project workers and decisions about their individual support plans were made jointly. For example, a young person (aged 13) who was depressed and had low school attendance felt that he was involved in decision-making with the transitions project worker: *'we decide together what we're going to do and stuff'*.

Some children receiving individual support were able to renegotiate the support offered according to their interests and needs and shape the way that the service was delivered. Brothers (aged 12 and ten) who were involved in family group conferences with their mother chose who to invite to the meetings and suggested setting up a third, final meeting, beyond the usual two meetings. Their mother explained that the boys wanted to show all those who had been involved how their behaviour and school attendance had improved. The support worker set up a third meeting, as the mother said: *'We actually went to three meetings because the boys asked for it...because of the family conference lady, ...she felt yes, they deserved that third meeting to let everybody know what they'd done and what they hadn't done...'.*

Involvement in management and development of projects

Although most projects predominantly involved children in selecting specific activities within provision, rather than participating in the development of services, a small number of projects

established children's management committees, made up of service users. In these committees children were involved to varying degrees in the ongoing planning and development of the service. For example, one project initially consulted looked after children about whether they wanted the project to be specifically for looked after children or open to other children and invited the children to become members of a children's management committee to make decisions about the ongoing development of the project.

Children in a children's management committee of a project for children of mixed ethnicity valued the opportunities to shape project activities. One committee member (aged 12) explained that when the group was awarded a small grant, she suggested organising a conference for other children of mixed ethnicity from schools across the city. The children decided on the different activities they wanted to organise for the day, as the young person said: 'when we got told that we got some money, I don't want to be big headed, but I came up with the idea of the conference! They responded to that, just little things we all said we wanted, we got it'.

Some children were involved in other decision-making processes at project level, such as the recruitment of participation project staff. Children valued the opportunity to develop their communications skills, particularly interviewing skills. A mother of two children involved in staff recruitment commented on how the experience had increased their confidence: '*I* wouldn't have thought a couple of years ago that [they] would have quite happily done interviews... interviewing adults for their jobs'.

Involvement in the evaluation of project activities and services

Many project workers informally sought children's views about how to improve the service they were accessing. In children's and parents' experiences, children's views and suggestions about activities were taken seriously and where possible, acted upon. For example, children attending an after-school club met members of the Children's Fund Partnership Board and gave their views about ways to improve the project directly to board members within the informal setting of the after-school club. The children appeared to be satisfied with the feedback they received from project workers about what was possible.

Some children were involved in more structured review and evaluation activities, facilitated by project staff. Children in one participation project were involved in planning and carrying out an evaluation of other Children's Fund services in the area. A mother explained that her daughter had been involved in deciding which projects to shortlist, planning the interview questions, learning how to carry out the interviews and record them. Although the children did not have the overall responsibility of making decisions about funding allocations, the mother felt that the children's evaluations of services did influence the decision-making process: they 'took notice of what they had to say'.

Participation in the development of partnerships

A small number of children and young people participated in decision-making processes which fed into the development of the Children's Fund programme at strategic level. For example, one child (aged ten) contributed to a number of children's forums and panels, including a small grant allocation panel where the children were involved in decisions about funding small community projects, as she explained: *'when someone applies for the Children's Forum ...we get to choose if they get the money or not'.*

Valuing and rewarding children's and young people's engagement

Children and parents highlighted the importance of valuing and rewarding children's and young people's engagement and participation in projects and activities. Children appreciated being rewarded with gift tokens for their engagement with projects and for doing their homework when they were experiencing difficulties at school. Celebration events, prizes, thank-you letters and birthday cards were also valued at the end of children's and young people's engagement with a project. Parents thought that certificates were important in recognising children's achievements and helped to enhance their record of achievement.

3.3.2 Parents' and carers' participation

Dialogue with parents about services and support for their children

Parents of children receiving individually-tailored help from family support, YISP or transitions project workers valued the processes of negotiation and being involved in decision-making about their family's needs. For example, a mother whose son (aged 13) has challenging behaviour and who received support from a home-based family service, explained that the project worker involved her in decision-making and carried out the work in partnership with herself and her son: 'All three of us have worked together. I'm not just told you do this, try that. It's "what do you think we should do?" '. She felt more involved and better able to support her son.

Parents of children engaged in group activities also valued ongoing dialogues with project workers about activities and support for their children. A single mother living in a deprived area whose sons attended a youth inclusion project valued the way that project workers communicated regularly with her, consulted and involved her in the support for her sons: *'they talk to, involve you, so you feel as though you're involved, they will ring your phone, actually talk to you, tell you what's going on, ask advice'*. Parents of disabled children, in particular, valued project workers' attentiveness to their children's individual needs. Parents of a young person (aged 12) with multiple impairments commented on the ongoing dialogue

they had with project staff about support for their daughter: '*Everyday we just talk. It's just so family based*'.

Parents of refugee children emphasised the need for services to engage with family and community networks and support parents to address the concerns and emotional problems of their children, rather than children's problems being dealt with by 'specialists', such as therapists and counsellors, working with individual children and not engaging with families. In instances where children did need additional or alternative sources of emotional support, parents wanted therapists to work with them on how the family could support the child.

Keeping parents informed about services and support for their child

Many parents highlighted the importance of being kept informed about services and support for their child and were satisfied with this level of involvement in services. Parents felt confident that project staff would telephone immediately if their child experienced any problems. Parents of disabled children emphasised the importance of being able to rely on project staff to contact them if problems arose or about any changes to the programme: '*if there have been any problems at all for whatever reason then they've either contacted us or we've contacted them to say it can't happen because...and we can sort it out at the time. But they've never let us down'*. However, one parent whose son had emotional and behavioural difficulties would have liked a greater level of communication with project workers about her son's behaviour and progress and suggested inviting parents to an open evening at the project: '*sometimes I'd like them to invite you up ... Oh come up, have a coffee and we'll talk to you about your ... Have they seen the change in ... have they any concerns.... That would be nice'*.

Participation in the management and development of services

Only a small number of projects in the case study sample directly involved parents or carers in the management and ongoing development of services. Some projects invited parents to become members of steering committees, often in the early start-up period. For some parents, however, the responsive nature of the Children's Fund offered opportunities to influence the planning and development of services that filled gaps in local provision. One mother who tried to access bereavement counselling for her two sons following the death of their father described how she was passed around different professionals and was unable to access any support because of professional boundaries. As she commented:

I would be told it doesn't come under the Ed Psych's banner because it's not an educational thing, it's a medical thing. I went to my GP and my GP is saying "well no the reaction of your two children that's to do with the Education" and so you would be from pillar to post, from pillar to post, and there just wasn't anything.

The mother shared her experiences at a public meeting and through this, helped to secure Children's Fund funding for bereavement services in her area, which she and her sons then used and she was invited to become a member of the steering committee.

A small number of services involved parents in the development of projects. One parental support project held regular meetings which were open to any parents using the service. Parents commented on the welcoming atmosphere and supportive approach of the project to enable parents to give their views and input into the development of the service, without expecting them to necessarily attend meetings: '*If there is something I want to input into the meeting you can write it down or approach someone outside of the meeting and you know it will be fed in*'. Similarly, a refugee community-based organisation set up a committee of parents and community members who were committed to helping the community and/or had a background in health, education, or social work. The committee subsequently set up a series of meetings and consultation days with mainstream services, such as housing and education, in which they raised awareness of some of the difficulties that their community was facing.

Involvement in the planning and delivery of project activities and services

Services which predominantly focused on supporting parents involved parents or carers in planning and delivering different activities for the group. As one mother attending a community development project for a particular black and minority ethnic group said: '*The project staff ask what sort of activities we would like and they are good at listening*'. Parents were involved as volunteers in a range of activities and events for parents and children, such as running a computer class, organising fundraising events, helping to run a Saturday club for children, cooking meals for children and making a carnival float. While some parents enjoyed helping out as much as they could, others commented that they were accessing childcare services to free time for themselves to '*get things done*' and were not able to help. Parents appreciated, however, not feeling obliged to participate, as one mother commented: '*They don't make you feel guilty for not being able to help. At some places they do*.'

Limited engagement in planning, delivery and evaluation of services

As noted earlier, the participation of parents or carers was often a low priority in case study partnerships (NECF, 2004). Many parents commented that they struggled to find time to be more involved in Children's Fund services due to work commitments. For example, mothers whose children were involved in a participation project commented: '*It is hard for me to get more involved because I work split shifts and things, it is difficult*' and '*the only way I get involved is if I have got time off work and I can go off and do things with them.*' As we observed in Chapter 2, a key reason for accessing Children's Fund services for many parents, particularly single parents and parents of disabled children, was to gain access to

affordable childcare or opportunities for respite. Many Gypsy/Traveller parents also valued the opportunities provided for their children to take part in leisure activities in terms of providing a break for themselves. This suggests that many parents did not have the time or resources necessary to be involved in the planning, delivery or evaluation of Children's Fund services.

Some parents whose children were attending group-based projects, however, would have liked to have been more involved in the service and with project staff. One mother whose son attended a mentoring project which ran football training activities at weekends was not aware of the mentoring role of project staff and said that she would like to have more contact with practitioners so that she could support their work with her son, where appropriate. However, project staff had not been in contact with her: *'I wouldn't mind knowing what their aims are, what they want to do...[and to have] the opportunity to feed into it, to have a bit more dialogue'.*

3.3.3 What role does participation play in the development of preventative practice?

From the evidence we have discussed so far it seems that participation to enhance prevention occurs in three ways: in the development and refining of services; in helping children to become effective decision-makers who develop confidence through being listened to; and in the negotiation of personal trajectories or pathways through service provision. We shall discuss these separately here.

Despite the positive examples of children and parents or carers working with Children's Fund services presented in this section, overall participation in the planning, delivery and evaluation of Children's Fund services was limited. Only a small number of children were involved in the ongoing development of services, and few were engaged in strategic decision-making processes or evaluation of services to inform the development of Children's Fund partnerships. The majority of group-based projects consulted children about activities or outings and many children seemed satisfied with this level of involvement. In addition, many parents did not have the time or resources to be more involved in the ongoing development of services.

Being consulted and listened to in either dedicated participation projects, or in projects that took participation seriously, impacted on children's self-esteem or confidence. Here we can begin to see an important link between participation and resilience, as being taken seriously was clearly very important for the children and young people we met.

The third form of participation was more a matter of enhancing parental involvement in tailoring support to the individual strengths and needs of their children. This was highly valued by parents.

We have suggested elsewhere that participation in the Children's Fund encompassed a wide range of activities starting with consultation and moving through the variety of negotiations and decision-making practices we have just outlined (Edwards *et al.*, 2006). We suggest there is room for further conceptual development in relation to the purposes and forms of participation and that there are important lessons in the evidence presented here to inform that development.

3.4 Summary points

This chapter outlines lessons about the practices and approaches that children and families accessing Children's Fund services valued and the ways in which Children's Fund services were often seen as more flexible and responsive than service provision that had been previously experienced.

Services tailored to individual support needs

The Children's Fund enabled the development of responsive, specialist support tailored to the individual needs of the child and family. Although children and parents highlighted some limitations in the delivery of specialist support, they identified a number of aspects of Children's Fund services and interventions which they valued and which often contrasted with their previous experiences of service provision. These were:

- Fast responses and early intervention to prevent problems becoming more serious;
- Child-centred approaches which worked at the individual pace of the child;
- Specialist skills of project staff to support children with particular needs;
- Holistic family-oriented approaches which were able to respond to the changing needs of the family over time. This meant that services could respond to parents' emotional and practical support needs and offer higher levels of support during particular periods of family crisis or stress.

Multi-professional approaches

Although a majority of Children's Fund projects were single service interventions and therefore multi-professional approaches were not experienced by most children and families accessing Children's Fund services, there are important lessons to be learned from examples where this did take place. Key lessons include:

- Some children and families, particularly disabled children, refugee and asylum seeking children, and those with challenging behaviour, experienced co-ordinated multi-agency responses which helped to build a holistic package of support around them.
- Parents and children highlighted the importance of practitioners having a good knowledge of local resources and expertise available, to be able to signpost, refer and fast-track children and families on to other services.
- Many children and parents commented on how they felt able to turn to project workers for information and advice about other sources of support. Project workers also helped children and parents to access these services, accompanying them to meetings, taking an advocacy role or helping to mediate between the family and other service providers.
- Such supportive signposting helped to increase children's and families' take-up of other services and opportunities in the community.
- Information-sharing among agencies about children accessing services helped to identify children 'at risk' and enable early intervention with other siblings within the family.

Trusting relationships with project workers over time

- Children appreciated the way their concerns were taken seriously and project workers helped them to deal with problems.
- Parents valued project workers who were warm and caring towards their children and felt that they provided positive role models for their children.
- Parents also valued relationships where project workers were a 'professional friend' who they found easy to talk to, responsive and available during and outside of usual project contact time.
- Families often valued project workers' independent role as a 'safe outsider' in mediating with school professionals, which has implications for the Extended Schools agenda.
- Parents valued being supported by practitioners from similar cultural backgrounds, but this was not such a concern for children.

Participation of children and parents

- Overall participation of children and parents in the planning, delivery and evaluation of Children's Fund services was limited.
- The majority of Children's Fund projects involved children and young people in ongoing informal consultation and planning of activities. A small number of projects established children's management committees made up of children and young people who were service users. Many project workers informally sought children's views about how to improve the services they were accessing.

- Parents highlighted the importance of being kept informed about services and support for their child and were satisfied with this level of involvement in services.
- Parents reported that they did not have time to be more involved in the ongoing development of services, due to their work and childcare commitments. A key reason for accessing Children's Fund services for many parents was to gain access to affordable childcare or opportunities for respite.
- Being consulted and listened to in either dedicated participation projects, or in projects that took participation seriously, impacted on children's self-esteem or confidence.
- Children and parents valued an ongoing dialogue with project workers and collaborating with them to tailor support to their individual needs.

Chapter 4: Children's and Families' Experiences: Universal and Targeted Services and Service Sustainability

4.1 Introduction

In this chapter we discuss two cross-cutting issues about service provision, which are directly relevant to the developing Extended Schools and Every Child Matters agenda: (i) the tension between providing universal open access services or targeted approaches for particularly marginalised groups; and (ii) the sustainability of service provision. The chapter considers the implications of these two issues for meeting children's and families' short and long-term needs.

4.2 Universal or open access versus targeted approaches

As noted in Section 3.2.2, many Children's Fund services were single service interventions which worked predominantly with children, and sometimes parents, in group settings. These services focused on creating 'safe spaces' where children could engage in a range of activities, and often provided childcare or respite for parents or carers. The emphasis of many Children's Fund services on providing safe spaces for groups of children is supported by quantitative data analysis of Quarterly Monitoring Data across all Children's Fund services in the period January to March 2004. This found that the broad category 'club provision or play schemes', which includes breakfast clubs, after-school clubs and homework clubs, was the most important activity in terms of numbers of services and accounts for nearly a quarter of all services (see Edwards *et al.*, 2006 for a detailed discussion of Children's Fund services and take-up across England).

The resilience literature suggests that creating 'havens of respite' or 'arenas of comfort' (Gilligan, 2000) may be particularly important for children who are experiencing difficulties in other areas of their lives. While many parents valued the positive benefits of safe spaces for their children, some parents also said that they benefited themselves in terms of having a short break from their children which enabled them to have some quiet time, or to spend more time with their other children.

Children's Fund services have sought to create such 'safe spaces' in many different contexts, using both universal/open access and targeted approaches. According to the NECF autumn 2005 survey, the majority of Children's Fund partnerships across England either commissioned services with specific groups in mind and then actively recruited young people from those groups to the service, or then made services also available to other groups. Only a minority of partnerships offered predominantly universal open access services, which were perceived to be of benefit to a range of children and young people. In this section we examine children's and parents' experiences of both targeted and open

access services which offered children and young people 'safe spaces'. We explore their perspectives of the purposes of these spaces and the ways in which targeted and open access approaches help to prevent social exclusion and promote children's and young people's supported pathways towards inclusion.

4.2.1 Opportunities for children to develop peer support and learn in informal environments

Many of the services targeted towards children from particularly marginalised groups aimed to create spaces where children could build peer support and a positive sense of identity. Promoting 'cultural resilience' may be particularly important for children from minority groups, 'where the cultural assets of minority groups go unrecognised or undervalued by the wider community in which they live' (Newman, 2002: 19). In these instances, learning about their heritage and creating links with other members of their cultural or social group is important for the promotion of cultural resilience.

For example, a project working with children of mixed ethnicity aimed to promote a positive sense of identity and promote greater awareness about the children's cultural heritage as well as developing peer support. A young person (aged 13) participating in the children's management committee felt that he had developed skills to deal with racism and to support others experiencing difficulties related to their mixed ethnicity. He had also learnt about his cultural heritage and ethnic identity, which his mother felt was important: *'He'll pick up things from them that I can't teach him because I mean, I don't know nowt about it'*. Indeed, his mother suggested that her son had taught her what he learned, which made her reflect more on her own identity as a person of mixed ethnicity: *'He can teach me things that he's learnt... it's only like last few years I've thought about it myself....'*

Children from other marginalised groups, such as looked after children, refugee children, Gypsy and Traveller children and young people at risk of crime and anti-social behaviour, also valued opportunities to meet others in similar situations and develop peer support. Refugee children who attended a community-based Saturday school project which provided tuition in maths, English and first language skills valued the Saturday school as a place which helped to build a positive sense of identity and pride in their cultural heritage. The young people said that they felt safe to express themselves among their peers in this environment and contrasted their experiences of the Saturday school with the racism and prejudice they experienced in a mainstream school. In this safe space, however, children were able to develop supportive relationships, as shown when a girl was bullied: 'some people are racist about her...about where she comes from [...] But I supported her and she is good to me.' One parent felt that the sense of community and cultural pride that the project fostered helped to strengthen children's resistance to exclusionary attitudes experienced in

mainstream school: 'Well they are quite happy because they get to find their identity and be proud of who they are. Once you do that confidence comes back'.

Disabled children and their parents, particularly deaf and hearing impaired children, also valued safe play spaces and opportunities for children to meet others in similar situations. These experiences were felt to reduce the feelings of difference and isolation experienced in other areas of their lives, particularly within the context of increasing integration of disabled children in mainstream schools. For example, a project for deaf and hearing impaired children provided an opportunity for an eight-year-old girl with hearing difficulties to meet other children in similar situations, since she was the only child with a hearing impairment in her mainstream primary school. Her mother explained: 'so they tend to meet here or when they go on the trips. So it is a good way of them getting in touch. Otherwise she wouldn't really see anybody else who has hearing problems.'

While many services targeted at particularly marginalised children explicitly emphasised the importance of developing peer support and a positive sense of identity, some open access services also offered opportunities to develop peer support. Participation projects, in particular, enabled children to support each other and develop a greater understanding of common issues affecting children. For example, a young person (aged 13) who had behavioural difficulties commented on how she enjoyed being able to help other children at a youth-led conference: '*I felt really good to take part in the conference because I can talk to people about the stuff that's going on …we were talking about how to get over it and to help the rest of the children.*' Similarly, young people participating in another open access participation project valued opportunities to support younger children and helped to develop a system of peer support where older children act as mentors for younger children.

Other forms of safe space included informal learning environments that were not targeted towards specific groups. Children attending a Children's Fund book club, as part of a childcare service for working parents, said that they could access a wider range of books than they had previously and they enjoyed reading and being read to, as one young person (aged 11) said: '*I like all the science type books, because I can learn from those*'. One mother felt that the informal atmosphere at the club had helped to develop her daughter's reading skills: 'the atmosphere is completely different, she really likes to sit, she often doesn't want to leave to come home.' Parents of children taking part in a participation project also valued informal approaches to learning and developing new skills, as one mother said: 'She is learning really without realising that she's learning... I think with [my daughter] that's the best way'.

4.2.2 A need for both targeted and universal approaches

Young people participating in a project for children of mixed ethnicity highlighted the tension between targeted approaches and open access approaches. While targeted approaches created safe spaces for children from marginalised groups to develop peer support and a positive sense of identity, open access approaches encouraged greater interaction between marginalised groups and the wider community and challenged discriminatory attitudes. These experiences suggest that there may be a need for more targeted approaches initially, but that children who have developed a positive sense of identity may move on to more universal services and opportunities over time. This analysis is illustrated by the following example. The children's management committee of a targeted service decided to organise a conference to bring together 150 children of mixed ethnicity from schools across the city. One young person (aged 13) explained that the purpose of the youth-led conference was to raise awareness about common issues affecting each other and promote peer support: 'to bring multiple heritage individuals together and talk about what problems they've had and share experiences with racism and stuff'. However, another young person (aged 12) felt that the conference should have been open to all children, so that they could learn about and discuss the issues that children of mixed ethnicity face: 'Multiple heritage children know how they feel, know how they are, that they're a whole person, and I would like other people to know that.... We already know, we're telling each other what we already know'.

Similarly, some parents of disabled children highlighted the fact that services may be important for disabled children to develop a positive sense of identity during particular periods in their lives, but that they may move on to more open access play and leisure opportunities over time. For example, a parent of a boy (aged eight) who had a cochlear implant and who attended holiday activities at a centre for deaf and hearing impaired children commented that when he was younger, the centre offered a space where he could meet other deaf children, which helped to reduce his isolation: *'at that time he really needed the project and needed to see that he wasn't different, you know, there were other deaf children.'* The mother felt, however, that as her son was growing older, and since his cochlear implant had been fitted, his oral and aural skills had developed and he was more able to access mainstream clubs and leisure activities with non-disabled children in the community.

Disabled children and parents also highlighted a tension between providing specialist services and enabling disabled children to be integrated into mainstream provision. Some valued services which provided one-to-one support over six to 12 weeks to enable children to access mainstream play and leisure activities and eventually attend clubs independently. In contrast, parents of children with more complex needs valued specialist play settings which provided a structured, safe play environment, where staff had the appropriate specialist skills

to meet the individual needs of their child. Children's and parents' positive experiences of such specialist provision often contrasted to their previous negative experiences of trying to access mainstream play and leisure services. One parent commented about her daughter who has complex needs: *'I think she feels safe, I think she feels secure... I think she likes to unwind here because it is about enjoyment and it's about play.'*

4.2.3 Therapeutic spaces

Many services, which were targeted towards children experiencing particular emotional or behavioural issues, aimed at creating safe spaces in school through nurture groups and play and art therapy sessions. Children and young people valued these sessions as therapeutic spaces where they could express their feelings and talk about issues informally with project staff. Art therapy sessions, in particular, were targeted towards refugee or asylum seeking and newly-arrived children who were experiencing emotional and behavioural difficulties at school. A child (aged ten) from an asylum seeking family felt that the art therapy sessions were a place where children could feel happy: *'it's something for children that are lonely and upset and they need a place like art therapy to enjoy themselves, be happy. It's quite good.* Yeah it just feels good to be there'.

Refugee children attending another art therapy service in a primary school commented on how much they enjoyed painting their journeys and some of the cultural traditions which they practised in their country of origin. They explained that they preferred group-based work rather than one-to-one sessions, because *'we can share like each other's paintings'* and *'we could talk to each other about our ideas'.*

School transitions, home-school liaison and family worker services targeted towards children experiencing behavioural difficulties in and out of school organised small group or one-to-one sessions in school where children could talk informally about issues at home or school and where they could 'calm down'. For example, a school-based family worker service worked with a boy (aged nine) through informal play sessions in school to help him to learn to control his anger. His mother thought that this approach was helpful: '*it*'s like a time out place for him, a place for him to calm down where [project worker] can talk to him, talk through his problems, help him calm himself down and then he goes back into class....'

Services which created safe spaces which were open to all children, however, were also valued by children experiencing particular difficulties at home or school. For some children who were bullied, these services provided a safe refuge where they could enjoy spending time with their friends and talk to project workers about any problems. One girl (aged 11) who was bullied at school, appreciated the open access approach of a school transitions project,

which meant that she could take her friends along to break and lunchtime clubs: 'You can just like talk to ... your friends. ... They can like just come with you anyway and then they can get postcards as well. You don't have to go in on your own'.

4.2.4 Appropriateness of service delivery to culture and community needs

An important advantage of targeted approaches is that culturally appropriate services can be developed for particular groups of children and parents that service providers have traditionally considered 'hard to reach', helping to improve the accessibility and take-up of services. In particular, community development projects targeted at particular black and minority ethnic communities were developed according to locally identified needs, often in response to a gap in service provision for specific groups. This meant that services were delivered in culturally appropriate ways. For example, mothers from a black and minority ethnic group highly valued the fact that the project workers of a community development project were women from their community and they organised women-only English language classes. The classes were held at the children's primary school, rather than at a further education college, which was regarded as more culturally acceptable by the families. As one mother commented, through an interpreter: 'Some of the families do object for their ladies to go to the college. So that is why she found it better here because the children come to school here...and nobody is going to turn around and say to them well you can't go there'.

However, some open access approaches were developed in response to the locally identified needs of the wider community. Children and parents living in neighbourhoods with few play and extra-curricular activities for children and young people emphasised the importance of children being able to meet friends and have a safe place to play. For example, one girl (aged ten) valued a community play service which was established to address a locally identified need for play provision: '[before] *it was really boring round about, there is nothing for us there...I enjoy [being] with my friends here and playing with them, like all the different stuff we do and painting and play'.*

Within a context of poor play and leisure services for young people and concern about their being exposed to the risk of crime and anti-social behaviour, parents saw open access services which provided after-school and weekend activities as important in engaging young people and diverting them from negative peer group interactions. For example, one mother whose son attended a mentoring project which ran football training every Saturday said the main purpose was: 'to give him sort of stuff to do on Saturday, you know? So, he's not hanging around.'

4.2.5 Opportunities for parents to develop peer support

Parents of children from marginalised groups valued targeted approaches which enabled them to meet other parents in similar situations, helping them to develop social networks and reduce their isolation. For example, mothers accessing a community development project targeted towards their particular black and minority ethnic community valued opportunities to meet and socialise with other mothers in similar situations. Similarly, parents of disabled children valued opportunities to meet other parents of disabled children and share experiences of accessing resources for their children. As one mother whose son (aged seven) has complex needs said: *'talking to mums who had done it all before was just fantastic. And I found myself doing it to the new mums, you know, oh you've got...do you get this....'*.

There were also a few examples of parent-led groups which developed from Children's Fund services and provided opportunities for parents of disabled children to meet and offer emotional and practical support. One mother whose son (aged ten) has ADHD who accessed a family support service was also involved in running a support group for mothers of children with ADHD, which was supported by the family worker. The group provided an opportunity for parents to support each other and helped to reduce their sense of isolation, as the mother commented: '*It's really good, because we can all have a sit and a chat, and you don't feel as though you're the…the only one*'.

Similarly, refugee and asylum seeking parents described how parent-led and communitybased services had provided them with opportunities to meet other adults and socialise in safe spaces. Parents saw helping others in terms of benefiting themselves and improving their own well-being as well as helping those receiving advice and support, as one mother commented: *We can have the social networks, so that's a good thing. I feel I can help somebody else now... when new people are coming... and that I can tell them how I was and how far I've come.'*

A small number of open access projects working specifically with parents or carers also provided opportunities for parents to develop peer support. For example, one mother accessing a drop-in parental support project commented on how the project took a community development approach and provided opportunities for mothers to meet: 'A lot of people are inside and have got nowhere to go during the day, so what they are trying to do is build a little community-activity- get-together group for mothers that are at home'.

4.2.6 How do targeted and open access safe spaces support children's pathways towards inclusion?

Targeted provision often explicitly emphasised the importance of developing peer support and a positive sense of identity for particularly marginalised groups. They also offered specific experiences aimed, for example, at developing cultural resilience and learning about cultural heritage, or providing therapeutic spaces where children with particular emotional or behavioural difficulties could express their feelings and talk about issues informally.

Open access approaches also offered opportunities for children to develop peer support and raise awareness about common issues affecting children and young people. In addition, children and parents felt that they benefited from sharing experiences with people from other backgrounds and valued being able to invite their friends to projects. Within both universal and open access safe spaces, however, the emphasis tended to be on either providing respite from external conditions or building the skills and capacities of children and young people to deal with difficulties in their lives. The provision of safe spaces can play an important role in building individual children's resilience and social networks with their peers and can therefore be seen as part of the complex jigsaw of support needed to tackle social exclusion.

4.3 Sustainability of Children's Fund services

As we saw in Chapter 1, previous research has shown the importance of sustained interventions for achieving long-term impact (France and Crow, 2005). Sub-objective Seven of the Children's Fund, which focuses on involving 'families in building the community's capacity to sustain the programme' (see Appendix C), would suggest that sustainability was initially seen in terms of community capacity to maintain provision. Users of Children's Fund services, however, often talked about sustainability in terms of the length of the intervention and having access to a service for as long they felt they needed it.

A key concern was the often short-term nature of interventions and the implications of this for forging sustained trusting relationships with workers. Parents and children also discussed their frustration over what they saw as the arbitrary nature of the Children's Fund age limit and the impact on users of services when they reached 13 years of age. In this section we consider how problems with sustainability affected the potential impact of services in reducing the risk of social exclusion for children and young people and examine positive examples of how parents and children were supported during managed withdrawals of interventions.

4.3.1 Short-term interventions

Some children and parents commented that they would have liked valued interventions to continue or be available over a longer time period. Sometimes children's and parents' views about the duration of interventions revealed a potential mismatch with practitioners' opinions on the appropriateness of time-limited interventions. While users were concerned about loss of access to support, practitioners who discussed this focused on empowering service users and ensuring that they do not become dependent on the limited support available. For example, one mother expressed concern about the lack of follow-up support from a project designed to help to settle newly-arrived children into school. Although she felt that there had been some improvement in her children during the eight week intervention, and she understood the limited resources available to the project, she felt it might have been beneficial to have had ongoing support from the project worker, '*to see how they are doing since and whether there is the need for further work*'. The project worker, however, saw the time-limited intervention as appropriate to the family's circumstances.

However, many disabled children and parents accessing enabling schemes thought that the duration of the intervention was sufficient. These schemes offered one-to-one support usually over a period of six to 12 weeks to enable disabled children to access mainstream play and leisure activities independently by the end of the intervention. For example, five young people who had been supported to attend a youth club continued to attend once the enabling service stopped working with them.

4.3.2 Sustained relationships over time

A key element of responsive and holistic services identified by both parents and children, particularly those with complex, multi-dimensional support needs, was the need for relationships with project workers to be sustained for as long as families needed them. A young person (aged 13) commented on how important it was that he had been able to get to know his project worker over time: *'I got used to her...and I could talk to her more...because like it's over a longer period. And I didn't feel shy anymore.'*

Some Children's Fund project workers had kept an interest in a child's life and provided ongoing support for the family beyond the remit of specific projects. For example, one mother appreciated the way that a participation project worker took her two daughters '*under her wing*' during her imprisonment, to the extent that '*she is like a second mum to them*'. One of the two sisters (aged ten) commented on the importance of sustaining her relationship with the project worker: '*It would be sort of hard if [project worker] left because I am really close to her and she is like my step-mum sort of thing*'.

In another example, a project worker maintained the trusting relationship he had developed with an asylum seeking family in his own time after work. The young person (aged 11), who had accessed a play project for homeless children while her family were living in interim accommodation, valued the ongoing relationship with the project worker, who took an interest in her extra-curricular activities, such as going to watch her dance performance at the local theatre. Other more simple gestures such as sending birthday cards after children had ceased to access a project were also appreciated by children and parents, in terms of keeping in touch with project workers.

Several children and carers highlighted the negative impact of losing valued relationships with workers when time-limited interventions were withdrawn. A girl (aged nine) who had challenging behaviour and whose grandparents were the primary carers accessed a home-based family service which both she and her grandmother valued because of the relationship they had built with the support worker and the impact that this had had on their lives. However, they were concerned about the short-term nature of the support offered by the worker who was placed with the family for 12 weeks. They reported a negative impact from the withdrawal of the service: '*[the support worker] helped me a lot. I'm changing now. But now I've got a bit worse because she's gone'.* Without ongoing support, the grandmother also felt vulnerable: '*We've got her for 12 weeks and you think oh it's great, I can talk to [the support worker], and then it's gone, so who do you talk to then?*'

4.3.3 Managed withdrawal of interventions

There were also some examples of where there has been a managed, gradual withdrawal of support for children and families when the need for interventions was no longer so acute. In these instances, the reduction in intensity of support was managed in such a way that children and their carers felt informed and supported and able to manage their own way forward. A mother and four children who used a family and school support service appreciated the fact that it was withdrawn over time and valued the ongoing support made available if needed after the intervention had ended: '*I still have contact with [the project worker] [...] they don't just help you and leave you, they're there all the time [...] I know that I've only got to say to [the project worker] I need help and I know that help is there'.*

Other parents valued the practical support offered when a service was being withdrawn. For example, when a childcare service had to be reduced for a mother of three children, the staff helped her to find another nursery placement for one of the children and when the social worker moved on from the project, they set up alternative arrangements for the mother to continue to receive counselling at the same venue.

4.3.4 Arbitrary nature of age limits

A number of children and parents complained about the arbitrary nature of Children's Fund age limits for accessing provision and their concerns about children no longer being able to attend when they reached 13 years of age. Young people interviewed who had already left projects felt that they were left with nothing else to do, while others were concerned about the prospect of having to leave the project in the near future. A mother whose children (aged 11 and 13) attended a local participation project summarised a quite general concern about the lack of play and extra-curricular provision for young people aged over 13 years: 'We have got Sure Start for the really young ones, we have got the [Children's Fund] for up to 13s and there is nothing really for 13-year-olds upwards'. In a similar vein, a young person (aged 13) explained how she had enjoyed her time attending a participation project, but when she reached the upper age limit, she felt quite lost: 'I used to go there, but when I started secondary school I wasn't allowed to go...it wasn't fair. [...] they could actually do something else around here because the nearest place for us older kids is [...] up in [another district]'.

4.3.5 Ongoing sustainability of services

The Children's Fund has played an influential role in revealing the scope and complexity of the prevention and social inclusion agenda more broadly. It was clearly meeting local needs and there were concerns among service users about its sustainability. Many parents were anxious about the sustainability of services and the implications of services being discontinued as part of Partnership Board de-commissioning processes. For example, a single father who had experienced difficulties in finding a childcare place for his son (aged ten) who had learning difficulties was concerned about the service being discontinued. He was worried that without the subsidy from the Children's Fund, other specialist childcare services would be unaffordable for him.

The Children's Fund has revealed what can be done with early intervention for this age group and there were worries among users that the experiences of the Fund might be lost. One mother who had seven children, one of whom had a physical impairment, commented on the need for sustainable services supporting families within the community:

You don't know when your life's going to take a dive for the worse.[...] So it's not like we can say, "Oh, yeah, well we'll open this playgroup up here because we know that these families are going to have hard times and that", so it needs something set and not thinking, "oh we'll let it go for six months and see what happens".

4.4 Summary points

This chapter has identified a number of important lessons about targeting and universal services and sustainability from children's and families' experiences.

Open access versus targeted safe spaces

- Many Children's Fund services created a range of different 'safe spaces' for children and young people using both targeted and open access approaches in different contexts, where children could engage in a range of activities.
- Targeted approaches created safe spaces for children from marginalised groups to develop peer support and a positive sense of identity, whilst open access approaches encouraged greater interaction between marginalised groups and the wider community and challenged discriminatory attitudes. This suggests that there may be a need for more targeted approaches initially, but that children who have developed a positive sense of identity may move on to more universal services and opportunities over time.
- Many services targeted towards children experiencing particular emotional or behavioural issues created safe therapeutic spaces in school where children could express their feelings and talk about issues informally with project staff. School-based safe spaces which were open to all children were also valued by children experiencing particular difficulties at home or school as a safe refuge from bullying, where they could invite their friends and talk informally to project workers about problems.
- Community development projects targeted towards particular black and minority ethnic communities were developed according to locally identified needs, which helped to improve the accessibility of services for marginalised groups by ensuring that services were delivered in culturally appropriate ways.
- Parents of children from marginalised groups valued targeted approaches which enabled them to meet other parents in similar situations, helping them to develop social networks and reduce their isolation. A small number of open access projects also provided opportunities for parents to develop peer support, which they valued.

Sustainability of Children's Fund services

- Time-limited interventions were seen by some parents as appropriate and there were several examples of withdrawal of support being managed in such a way that children and carers felt informed and were able to manage their own way forward.
- Many children and parents disliked the arbitrary age limit of 13 years. Young people who reached the upper age limit were left with nothing to do. This highlights the importance of linking up provision and providing alternative opportunities when young people reach age limits.

- Children and families were anxious about valued Children's Fund services being discontinued due to de-commissioning processes.
- Sustainability is not just about the duration of services, it can also be addressed by developing children's and families' capacity to access and take up other services and resources and the development of those resources. The Children's Fund offered highly valued provision geared at early intervention and prevention, which could build on and work with local community strengths.

Chapter 5: Outcomes for Children, Young People and their Families

5.1 Introduction

The Children's Fund was geared towards promoting social inclusion through improving school attendance and academic performance, reducing children's anti-social behaviour and the chances of their being victims of such behaviour and to reduce health inequalities within areas. Other intended outcomes were the accessibility of preventative services, the development of services which were seen as effective by the most excluded groups and the involvement of families in building the capacity of their communities to sustain preventative activities (see Appendix C).

All of these objectives demand that attention be given to both the capacity of individuals to negotiate pathways of inclusion and the opportunities for such negotiations. That is, we needed to look at both the developmental trajectories of children and young people and the social conditions of their development across the different domains that constitute their lives.

Children and parents frequently self-referred to services they found accessible and described a number of benefits for their families as social units. These benefits were often childcare or respite for parents and carers, but also included additional support for parents or carers and siblings. The improvement of community resources was less frequently mentioned. Examples here included safe play and leisure facilities that otherwise the parents could not afford or were not available in the local area.

In this chapter we focus on actual outcomes for children and their families. We review evidence from the 16 case studies to examine services intended for all children living in a particular area, as well as those targeted towards particular sub-groups. We draw on the concepts of risk, resilience and protection to explore how services were building protective factors for individual children, parents or carers and families which might help them resist processes of exclusion. We also consider the extent to which practices helped to build more supportive social environments and enabled service users to negotiate pathways which allowed them to draw on the resources available to them in their wider communities.

5.2 Benefits for individual children and young people

Most children and parents identified benefits of accessing Children's Fund services in terms of building an individual child's resilience and capacities to deal with difficulties. The language often used by both parents and workers in this respect was that of building 'confidence' and 'self-esteem' and the impact that this had on different aspects of children's lives. Within the resilience literature, important protective factors for the individual child have been identified as problem-solving skills, high aspirations, positive peer relationships and positive school experiences (Benard, 1991; Newman, 2002; Schoon and Bynner, 2003). Many of the benefits cited by children and parents also resonated with these protective factors.

The benefits also link directly with the Children's Fund sub-objectives relating to education, crime and anti-social behaviour and health (see Appendix C). While some of the outcomes reported were clearly linked to these areas, there were also broader outcomes which closely match four of the five child level intentions of the Every Child Matters agenda: health, safety, enjoyment and achievement, and making a positive contribution. We have grouped the benefits for individual children using the Every Child Matters outcomes and will discuss each set of outcomes in more detail.

5.2.1 Be healthy

- Improved emotional health and well-being
- Improved physical health and fitness
- Improved access to health services

Improved emotional health and well-being

One of the major benefits of participating in Children's Fund services reported by children and families was improved emotional health and well-being for children, including increased confidence and self-esteem. Many services, working across a diverse range of contexts, appeared to result in improved emotional health. Analysis of Quarterly Monitoring Data from all Children's Fund services (January to March 2004) found that many services are directed at children and young people with self-esteem problems (34% of services). Many children and parents felt that children had gained in self-confidence and this often had an impact on other areas of their lives. For example, a boy who had been bullied at school and who joined a participation project had gained self-confidence, as his mother commented: '*He's not one of these street-wise kids. His coming over here is bringing him out of his shell'*.

Where children and parents were accessing support to address children's particular emotional needs, such as anxiety, depression or trauma, they felt that there had been some improvement. Several parents whose children had experienced bullying or emotional distress commented that their children were '*happier within themselves*'.

Newman (2002) identified the presence of strong social support networks and an ability or opportunity to 'make a difference' by helping others as important factors for promoting resilience in children and young people. Services designed specifically to address the impact

of both pre and post asylum seeking experiences have helped refugee and asylum seeking children and young people overcome their fears. A refugee girl described how attending oneto-one art therapy sessions had helped her to overcome her initial fear of other children in school:

When I was in [previous country of residence] there was a lot of bad things [...] I always kept on thinking about. [...] So I got dead frightened when I came to England, I was scared to see new people or to go to school, the children - you don't know what the children are saying.

Improved physical health and fitness

For disabled children who have either internalised messages that emphasise their lack of capacity, or who have never had access to environments in which they can develop their physical abilities, the opportunity to explore and demonstrate their capabilities is particularly significant in terms of enhancing both their emotional and physical well-being. Parents of disabled children reported children's increased confidence and a sense of achievement in their new abilities. A young person who attended a sports club for disabled and non-disabled children explained his sense of achievement: '*I don't get tired; it just makes us feel happy and full of energy. I'm happy about it, excited about it. Something I feel proud to be able to do'.*

A small number of children reported improved physical health and fitness more generally. One boy (aged 12) saw a community play project as an opportunity to do more exercise, saying that on Saturdays he used to do *'nothing, just sit down and watch TV and stuff'*. He commented that having joined the play club, *'now I'm getting more exercise this way'*. Another project was specifically aimed at increasing children's physical fitness through afterschool fitness activities. Children were referred based on criteria relating to children's weight or physical health; emotional difficulties; or risk of social exclusion. A girl attending the project commented that she liked it because *'it gets you fit a lot and we have a nice coach'*.

Improved access to health services

A number of parents sought support from Children Fund services in accessing health and counselling services for themselves or their children. Some services supported parents to access health services, which had a positive effect on their children's health. A family support service offered ongoing support to a single mother in accessing health services for her three children: *'[the family support worker] picks them up for appointments and helps look after the kids'.* The family worker also provided respite for the mother, enabling her to attend antenatal classes and counselling during her pregnancy.

Building parents' skills also helped to improve communication between parents and health professionals about children's needs. For example, a mother accessing an English language course provided by a black and minority ethnic community project commented on how she was able to access health services for herself and her children for the first time without needing to rely on the help of others.

5.2.2 Stay safe

- Reduced risk of committing and becoming victim to crime and anti-social behaviour
- Safe from bullying and discrimination through support and care for each other

Reduced risk of committing and becoming victim to crime and anti-social behaviour

Parents and young people valued how Children's Fund services, which provided weekend and after-school activities, kept them from negative peer group interactions and the risk of offending. Parents believed that without these opportunities to engage in after-school and weekend activities their children were at risk of '*hanging around on the street*' and '*getting into trouble*'. For example, a football club was seen by a mother as a diversionary activity with a purpose for her son (aged ten), keeping him away from other teenagers on the estate who cause trouble:

Mostly because there's nothing to do, so they're just really terrorising people...there's just police round all the time... the estate's really bad. I'm glad the littler ones have got something to do to occupy their minds because they would just grow up and follow the bigger ones, getting into trouble...

The poverty of the physical environment in which some children live and the absence of opportunities for creative activity due to physical or socio-economic constraints is a key factor in the development of anti-social behaviour. For parents of children who have offended or been in contact with the police, finding ways to engage their children and divert them from re-offending was seen as very important.

Some young people felt unsafe in their local neighbourhood and valued leisure and extracurricular activities where they could make friends in a safe environment away from their estate where they were bullied. Some children with challenging behaviour valued nurture groups and break and lunchtime clubs in school, as a way to keep them out of trouble and mixing with older teenagers. For example, one young person (aged 12) who had challenging behaviour both in and out of school valued break and lunch time clubs: *'it's made me like not hang around with the bad people and kept me out of trouble'*. He commented that if he did not attend the clubs, *'I'd start mixing with the older people again'*.

Safe from bullying and discrimination through support and care for each other

As highlighted in Chapter 4, children experiencing racism and bullying at school reported how they had benefited from Children's Fund services by having opportunities to develop a positive sense of self and to engage in peer support to tackle racism. Some group settings enabled particularly marginalised children, such as black and minority ethnic children, refugee children, looked after children and those at risk of crime and anti-social behaviour, to meet other children in similar situations and to support each other. For example, a foster grandparent of three looked after children commented on the stigma that other children attached to children in care. One of the children she cared for (aged 14) explained why it was important for looked after children to meet other children who understood their difficulties: '*At least you can meet people who are in care and discuss things like "how are things going for you" and all that sort of stuff, instead of comparing living in care kids with someone who's living with their parents'.*

In a few instances, children commented on how project workers had supported them while they dealt with ongoing risks at school, such as bullying, even when this was beyond the remit of the project. For example, two brothers attending a junior youth inclusion activity project reported that one of them had been subject to bullying at school and that, although they sought help from their teacher on a number of occasions, it was only stopped following the intervention of the Children's Fund project worker:

My football coach got involved. He just told them. Because he worked with them and knows people... he gone to the school and he said [my brother] was being bullied and then it stopped.

5.2.3 Enjoy and achieve

- Improved school attendance and happier within school
- Improved educational attainment and literacy
- Increased access to play and leisure services which were not previously available in the local area
- Enjoying and achieving in play and leisure activities
- Increased aspirations
- Development of friendships and increased interaction with peers

Improved school attendance and happier within school

Parents of children who were at risk of school exclusion, had been excluded or were experiencing problems with attendance due to behaviour, reported improvements in their child's attendance or that the child or young person was happier and more positive about school. One boy (aged nine), who was frequently suspended for disruptive behaviour within the classroom, was referred to a family worker who provided support to both the boy and his family. His parent commented on the change she had seen in his behaviour. '*He got suspended for four days and after that the Family Worker started working with him and since then his behaviour has been so much better. He has got loads of friends in school now*'.

We also found that some young people who had challenging behaviour or were experiencing bullying or mental health problems developed more positive attitudes towards school as a result of support from YISP key workers, family support and transitions project workers.

Improved educational attainment and literacy

There was also reported evidence of improvements in achievement and enthusiasm for learning. Children and parents talked of children's literacy and other educational achievements through their attendance at homework clubs, book clubs and nurture groups which created safe, informal learning environments. Family support services could also help to foster achievement. For example, one mother commented on the significant improvements she had seen in her children as a result of home teaching support offered during a period of exclusion from school: '…I've got a ten-year-old now and a 12-year-old they can read they can write, before that would never have happened. And I do put it all down to the help we've had from outside'.

Services seemed to deal well with the interaction of behaviour and achievement. The example of Rachel in Box 5.1 shows how a child's potential trajectory to social exclusion was disrupted through her attendance at a Children's Fund nurture club. Not only did the challenging behaviour reduce, which was her reason for accessing the service, but she also showed reported improvements in literacy, a growing interest in reading and an ability to make friends.

Children and parents, who specifically sought support with children's school work and academic development, also felt that these needs had been met by the Children's Fund services they used. For example, black and minority ethnic children and parents who accessed services specifically for support with English language skills felt that these needs had been addressed through a community development project which provided language support. However, where the emphasis was on raising achievement, new demands did arise. For example, some children accessing a homework club for Somali children wanted more specialist support for particular subjects.

Box 5.1 Rachel's story

Background

Rachel (aged ten) lives with her mother and brothers and sisters and is believed to have psychological problems following several months in hospital as a result of a serious road accident two years previously. Rachel was described by both her mother and the school as having severely challenging behaviour both at home and in school.

The project

Following a referral from the school, triggered by her challenging behaviour, Rachel and her mother began to access a Children's Fund school-based Family Worker Support Service. This mainly consisted of attending a nurture group within school once or twice a week. The Family Worker also occasionally visited their home.

Practices that the child and parent valued

Practices that Rachel and her mother valued included: availability of support from the family worker anytime: '[Rachel] says she loves it, if she's got anything at school, you know, any trouble, she says I'm going to come and tell [the Family Worker] [...] she's got someone that she can actually go to, to talk to'; the non-judgmental and non-stigmatising approach to service delivery, where the nurture group was promoted as a positive group for a range of children, as Rachel points out: 'everybody wants to go nurture group'; and the regularity and structure of play activities provided by the nurture group, which encourages and rewards positive behaviour. The mother in particular valued the practical support provided to her around parenting skills and positive discipline: 'now I am working with the nurture group and with the Family Worker [...] I'm much stricter with her now and its worked because she knows she can't get away with it here [at home].'

Benefits for the child

Rachel and her mother felt that she had benefited from the nurture club in a number of ways which have helped disrupt her pathway towards exclusion. These included improved literacy and interest in reading: Rachel explained that: '*It helps with my reading*' and her mother commented: '*before she would read a book and just read just for the sake of the words but not taking it in what it meant and now she's [asking] me questions now*'. Improved behaviour: the frequency of her challenging behaviour has reduced considerably. According to the mother: '*she just blossomed [...] she's allowed out in the playground now*'. She added: '*this nurture group is tremendous for her [...] its like having a different girl.*' Improved relationships with her peers: according to the Family Worker, Rachel has made friends, is more tolerant of others and is less reactive to criticism. The mum describes how: now children come up to me ' "*can Rachel come and play with me today?*" and *it's lovely*'

Another key outcome of the service has been the improved relations between the mother and the school, which in turn has strengthened the relationship between Rachel and her mother. With support from the Family Worker, the mother had developed ongoing communication with a broad range of teachers and assistants within the school. This meant that Rachel felt more responsible and talked about her behaviour at school with her mother: '[now] she always tells me if she's been naughty, if she's had a bad day with the [form teacher]. And she tells me if she has walked out of class. I think it's because I'm always in contact with the school.'

Increased access to play and leisure services which were not previously available in the local area

As discussed in Chapter 4, many children and parents saw the benefits of Children's Fund projects in terms of providing children with access to play and extra-curricular activities which had not previously been available in their local area or which were either inaccessible or

inappropriate. Children and parents living in economically deprived neighbourhoods with few play and extra-curricular activities for children and young people emphasised the importance of children being able to meet friends and have a safe place to play. Parents explained that some community-based projects had been set up in response to gaps in local play and leisure provision identified by parents and community members often based on concerns about young people being at risk of crime and anti-social behaviour.

Enjoying and achieving in play and leisure activities

Play was also recognised as valuable for children's development. Many children and parents reported that children enjoyed and achieved in a range of different play and leisure activities, which gave them a different outlook and greater sense of purpose. Parents of disabled children, for example, commented on how projects had helped their children to develop greater independence and life skills by supporting them to access mainstream play and leisure services independently and their being challenged within play environments.

Increased aspirations

As noted earlier, high aspirations have been identified as an important protective factor for children and young people experiencing adversity (Newman, 2002). Some parents felt that the Children's Fund had raised their children's expectations and aspirations for the future through a range of activities that gave broader range of experiences than were possible within school curricula. For example, since becoming involved in an arts project over two years previously, a young person (aged 12) who has a statement of Special Educational Needs had a reduced need for support at school and wanted to pursue art as a career. In another example, a Gypsy/Traveller mother reported that a Children's Fund project provided access to experiences that were not usually available and which she felt helped to raise her children's expectations: 'I thought it might learn them a bit. And like give them a chance to get off this old site [...] She was giving them the opportunity to do things and see further afield what they can do...'.

Children's Fund projects which helped to raise children's aspirations could also lead to more positive attitudes to current schooling. Children experiencing bullying or mental health problems and who had low school attendance believed they had developed a range of interests, a greater sense of purpose and more positive attitudes to school. They attributed changes of this kind to help from Children's Fund family support and transitions project workers. Matt's story, outlined in Box. 5.2 shows how his trajectory of social exclusion was disrupted and how he was gradually supported towards greater inclusion by a school transitions project.

Box 5.2 Matt's story

Background

Matt (aged 13) was depressed and withdrawn, was experiencing headaches and sleeping problems, as well as a loss of interest in school and reluctance to attend. Matt related this to being bullied: *'in the first part of the year I was bullied and stuff and then later on I just had some health problems*'. His father said that Matt *'became very isolated and inward looking'*.

The project

Matt was referred through school to a Children's Fund transitions project which provided group activity sessions in a safe space attached to the school and helped to mediate between the young person, his parents, the school and counselling services.

Practices valued by the young person and parent

Matt and his father felt that they had a good dialogue with the project worker who involved them in negotiating appropriate support for Matt. As Matt said: *'we decide together what we're going to do and stuff'*. His father praised the constructive approach of the project worker in engaging with Matt and in mediating with school and counselling professionals: *'she was so proactive and seemed to have constructive suggestions that Matt could say, yeah I can buy into that ...'*

Benefits for the young person

Matt enjoyed the motorbike and woodwork activity sessions run by the transitions project and felt that he had gained in confidence as a result of the support: *'I've become a lot more confident than I was before I started coming'*. His father also commented on the change he had seen in his son since his engagement with the project:

'He's more co-operative, he's more communicative, he's actually interested in things ... now, he actually can even see beyond himself and he can think, you know "it'd be nice if I made some brownies and took them into [project worker], you know she'd appreciate that". And so he's sort of thinking, he's much more confident but he's also thinking beyond himself whereas a year ago he wasn't.'

Matt also appeared to have developed interests and become more engaged in a range of activities, which gave him a greater sense of purpose and raised his aspirations for the future, as he said: *'I want to either be a carpenter or a photographer'*. His father also reported that the project had helped Matt to relate to and trust adults, particularly men, and that his behaviour at home and relations with his parents had improved.

With the support of the transitions project worker who played a mediating role between the family and the school, Matt and his parents were more hopeful about his prospects for reengaging with school in the future: *'In Year 9, my parents want me to at least try and go'*. Matt's anxiety about school appeared to have been reduced through the package of support from a range of professionals which the support worker had helped to co-ordinate, as his father said: *'through the kind of team effort, the counsellors and the tutoring and [project worker]'s work here, Matt is a much happier, much more positive, much more balanced, much more in sort of inclusive individual than he was.' The gradual support over time enabled Matt to steadily increase his confidence in being outside of home and helped to raise his expectations and aspirations to attend school and gain qualifications in future. This shows how the support offered helped to disrupt a trajectory of social exclusion towards a pathway of greater inclusion.*

Development of friendships and increased interaction with peers

Projects also helped children to develop friendships and reduce their isolation within their communities. Many parents and children reported a range of benefits from projects for

individual children in terms of making friends and having fun that were not always part of the original reason for accessing the service. Families appreciated the fact that services enabled children to make friends with other children in the local area and to spend time playing and doing different activities with their friends. For some children, meeting others at projects led to friendships which were sustained outside of clubs as well as potentially beyond the life of the project. For example, a child (aged ten) attending an after-school club said: '*I've been coming here a lot of times...and I have made a lot more friends.*' His mother talked about how important this was for him, since he found it difficult to make friends because of his ADHD:

...coming to the after-school club now, he has got a circle of friends...they were in his class at school but before they weren't friends and now it is sort of "oh we do this together, we do that together" and it has helped a lot like that.

5.2.4 Make a positive contribution

- Improved behaviour in and out of school
- Increased social, communication and life skills
- Increased opportunities for participation in services

Improved behaviour in and out of school

Parents of children with behavioural difficulties reported improvements in their child's behaviour both in and out of school as a result of their engagement with Children's Fund services. As noted in Chapter 2, the analysis of Quarterly Monitoring Data from all Children's Fund services (January to March 2004) found that many services were directed at children and young people with behaviour difficulties (26%). Where children's challenging behaviour was a focus of the intervention, many families reported improvements in their child's behaviour in and out of school, which helped to improve family relationships. For example, Rachel's story in Box 5.1, shows how her challenging behaviour in and out of school was reduced considerably following her participation in a nurture group. Her mother commented on how she could now 'take [Rachel] out' and 'she even helps me with the shopping'.

There were, however, a few instances of where children's behaviour did not improve significantly following a Children's Fund intervention despite this representing the primary reason for accessing a service. For example, a mother of a young person (aged 12) who received support from home-school liaison workers did not feel that her son's behaviour had changed, although she valued the workers' role in mediating between the family and the school: '*I think they do a fantastic job, I really do but no, there's not been much of a change*

in [my son] at all, not really [...] I think he's just one of these children, he doesn't listen to what he's told'.

Increased social, communication and life skills

Children learnt to trust and socialise with adults in projects where staff worked flexibly and responsively. Children and parents also reported children's improved social, communication and life skills through their engagement in Children's Fund activities. For example, the mother of a child (aged 11) who was referred to a participation project for behavioural issues described how her son has gained a new sense of responsibility. *'it's given him responsibility [...] he doesn't always need me around, he is growing up, he can communicate with other adults and stuff like that ...he was quite shy'.*

There was also evidence of increased independence in the case of disabled children. For example, one mother spoke of how her disabled son was now able to catch the bus into town on his own to meet up with friends; not only was he learning to be able to do this on his own, his new mobility meant that he could do activities that a non-disabled young person might do.

Increased opportunities for participation in services

As we saw in Chapter 3, children valued opportunities to make a positive contribution and participate in shaping project activities and services; what mattered was being listened to and action taken. Children and parents reported that children had gained in confidence and self-esteem as well as developing a range of communication and life skills through their participation in Children's Fund projects, including communicating with adults, public speaking, interviewing skills for staff recruitment, computing and literacy skills, such as writing newsletters. One child (aged ten) explained.

[the project] has given me more confidence, because I used to be quite shy and now I don't mind talking in public and being the editor [for the newsletter]. I used to rather sit in a corner alone and read a book but now I would rather shout out and talk to people.

5.3 Building the capacity of families to support their children

As noted in Chapter 1, engaging with children's family networks is increasingly recognised as a potential source of informal social support which helps to protect children from adversity and build their resilience. Approaches which emphasise family resilience have identified protective factors for children and young people at the level of the family in terms of promoting caring and supportive family relationships, a secure base and a sense of belonging (Benard, 1991; Newman, 2002; Schoon and Bynner, 2003). Many children and parents accessing Children's Fund services identified a range of benefits for family members other than the child or for the family as a whole. In some instances, support was designed to meet the practical and emotional needs of parents and carers as a means of enabling them to better support their children. In others, support targeted towards an individual child produced additional benefits for parents or carers or the family as a whole. All of these approaches appeared to be building the resilience and capacity of families in ways which enabled them to negotiate pathways of inclusion for their children.

Some Children's Fund services strengthened the capacity of families to provide safe environments and in some cases improved economic well-being, relating to two of the Every Child Matters outcomes. We shall look at each in turn.

5.3.1 Stay safe

- Whole family support: improving the emotional well-being and life skills of family members enabled carers to better provide safe homes and stability for children and young people
- Tackling risks at the level of the family
- Improved communication between parents and statutory professionals helped improve access to statutory services

Whole family support: improving the emotional well-being and life skills of family members

While only a few parents anticipated gaining emotional and/or practical support for themselves, those services which focused on supporting children within their family networks and which provided support to families as a whole also evidenced short-term impacts. These interventions often strengthened family groups and their capacity to tackle social exclusion in the longer term.

Some of the services working with disabled children adopted an holistic family-oriented approach. For example, a service working with deaf and hearing impaired children encouraged all family members to become involved. The service recognised the importance of providing support and advocacy for parents, of working with the whole family to develop skills and understanding in relation to signing, and engaging siblings in activities, as well as direct work with children who are deaf or hearing impaired. One parent reported the benefits of this in relation to her hearing son: '*My son's definitely gained from mixing with other brothers and sisters who are in a similar situation to him. So that's good because....he was very resentful of his sister for a long time.*'

There were also examples of the benefits gained from practical support being provided to the whole family. Kerry's story in Box 5.3 gives a detailed example a 'young carer' who together with her family benefited from the practical and emotional support provided by a home-school liaison service. The service served as an advocate for the mother and signposted the child and her family on to other services. The examples also highlights the complexity of need and the depth of work that might be labelled prevention.

Several Children's Fund family support services, which worked with children and parents or carers, helped to increase the confidence and improve the emotional well-being of the parents, as well as having benefits for the children. A grandmother who was the primary carer for a girl (aged nine) felt that the emotional support offered by the family support worker had helped to raise her own confidence and motivated her to return to work: '*I've seen a difference in meself personally. And so I started bucking up meself as well because she had actually taken off me, you know, a bit of pressure. And I started motivating myself back and I went back to work and that.'*

Some parents commented that they had developed support networks with other parents or carers through parental support services, which helped to reduce their isolation. Others commented on how project workers had helped them to gain important practical or life skills, including parenting skills. These ranged from developing knowledge about health and disability issues affecting their children, to strategies to deal with challenging behaviour or developing their English language and ICT skills. A parent of a child (aged six) with autism and learning difficulties gained practical knowledge about her son's diagnosis and greater awareness about communicating with her son: '...*it was really good because I had no idea what autism was*'. A mother of two children in a single parent household said that she had learned strategies to deal with her son's aggressive behaviour without losing her temper: '*I felt that everything was just spiralling out of my control....I've noticed a big difference yeah.* By the way I can turn things around now without [my son] even realising'.

Overall, many Children's Fund services helped to build stronger family relationships in terms of providing interests for children outside the home, improved behaviour of the child within the home and improved relationships between children, parents and siblings.

Box 5.3 Kerry's story

Background

Kerry (aged 11) lives with her mother and three younger brothers. Kerry often cares for her mother and siblings *'especially when mum's ill'*, since her mother had a serious accident two years ago, resulting in frequent periods when she is unable to care for the children.

The project

Kerry was identified by the head teacher and special educational needs co-ordinator as being 'at risk' whilst she was at primary school, due to concerns that she was tired during the school day and may not have been eating properly in the morning. When Kerry moved to secondary school, home-school liaison workers, funded by the Children's Fund, made contact with the family and invited Kerry to attend break and lunchtime activity clubs.

Practices valued by the child

Practices that Kerry valued included: the creation of safe spaces as a refuge from bullying where she could meet friends, have a snack, do her homework and talk informally to the project workers about any issues of concern; informal and approachable project workers. She was confident that the project workers would be supportive and help her to deal with problems: *'you can talk to them like and if you have any problems, you just tell them and they'll like sort it out.'* Kerry also valued the way that project workers responded to and tailored services to her individual support needs. For example, Kerry used to attend the clubs twice a week, but following an incident of harassment at school, she was able to seek refuge at the lunchtime clubs every day: *'I went there like twice a week ...but on that Friday, I had some trouble and the police and everything were involved. So after that, every lunchtime, I've gone in there'.* She also appreciated being able to bring her friends along to the club and the food and drinks available at break time.

Benefits for the child and family

Kerry saw the main benefits of the break time clubs at secondary school as providing a supportive safe space where she could go: '*in my old school, I used to always like stay in the toilets or anything, just to like stay in because I never liked going out. And now there's always somewhere that I can go'.* Project workers felt that Kerry's relationship with her mother had improved since being in contact with the project, as Kerry was now more supported in her role as a young carer. The project workers also appeared to have improved communication between the school and the family, providing a point of contact for informal support and advice for Kerry's mother. Information-sharing between the project workers, school staff and the family meant that Kerry had, as the project worker commented, *'many looking after her'.* All of Kerry's class teachers were aware of her situation and were supportive on an academic and pastoral level. The project worker felt that this supportive environment created at school had prevented the need for more intensive intervention from Social Services.

Benefits of holistic approaches

Kerry valued the way that project workers co-ordinated support for the child and parent/carer, for example, when Kerry reported a problem of sexual harassment from boys at the school, the project worker supported her mother in an advocacy role. The project workers also helped to co-ordinate support and facilitate access to other services for Kerry and her mother. Through contact with social services, Kerry was put in touch with a young carers support group. The project workers also negotiated a travel pass for Kerry's mother from the local authority. The project is meeting the child's specific reasons for accessing the project and is responsive to other issues and needs presented by the child or parent, adopting family-focused, multi-agency approaches to co-ordinate services.

Tackling risks at the level of the family

As indicated in Chapter 2, many children and parents commented on a range of risk factors within the family that were not seen as the reason for accessing Children's Fund services and were often beyond the scope of projects. These were ongoing risks which may adversely affect children's and young people's pathways towards social inclusion. These risks included domestic violence, pressures experienced by single parents, pressures of caring for siblings or other family members with a long-term illness or impairment, physical or sexual abuse experienced by a member of the family and pressures linked to families' refugee and asylum seeking status.

While these conditions were not seen by parents as reasons for accessing Children's Fund services, in some instances, parents felt that projects had, through a family-oriented approach, been responsive to these issues. A number of single parents, for example, valued the practical and emotional support they received from project workers; for other parents and children, it was support and signposting to access resources for family members with a long-term illness or impairment. In some cases parents received emotional support and supportive signposting to access services for themselves or other family members who had experienced rape and sexual abuse in the past. For example, a YISP worker supporting two boys (aged 12 and eight) who had Acceptable Behaviour Contracts also offered emotional support for their mother in dealing with the sexual abuse of her daughter. She described the impact of the YISP worker: 'She has helped me through my bad patches with [my daughter]...I just broke down in front of her, I just couldn't hack it'.

Improved communication between parents and statutory professionals

As discussed in Chapter 3, many Children's Fund project workers played a mediating role between families and statutory agencies, particularly where families had previous negative experiences of communicating with professionals, such as school teachers or social workers. Where this was a focus of Children's Fund practitioners' work, this often led to better relationships and improved communication between families and statutory professionals. One mother commented on how a family support worker had helped to build her confidence in communicating with her son's teachers.

Before I wouldn't come in and talk to people in school, it would be a case of they would phone me to talk to me and I would be like "well yeah I will pick him up". That was it. Whereas now I have the confidence to come in and talk to the teachers, tell them my problems, tell them what problems I have with the school. [The family worker] has made me realise that I can do that without being victimised by the school.

5.3.2 Achieve economic well-being

- Affordable childcare and respite opportunities helped parents and carers to be economically active
- Play and extra-curricular activities provided children with access to resources that parents could not otherwise afford

Affordable childcare and respite opportunities

While many parents tended to describe their reasons for accessing Children's Fund projects in terms of a need for support to meet their children's individual needs, another important reason was for parents to gain access to childcare services. Children's Fund projects which provided childcare were highly valued by parents, particularly single parents, as it enabled them to return to work or study. A single mother of two children studying for a social work diploma commented:

[it would be] impossible to do my course, absolutely impossible, I would not be able to do it because like I said, I don't have any family around here at all and I am doing this and I'm trying to do my university diploma and working and trying to raise three kids on my own...for me to move forward in life, it is ... an essential part of me moving forward.

Another single parent valued the affordable childcare since this meant that she could work full-time and earn enough money for holidays and presents for her son without having to work through her lunch break, as she used to: *'I haven't got a worry. I walk through this door at ten past eight and he's looked after 100% until he is picked up after school'.*

As we saw in Chapter 3, parents of disabled children highly valued respite provision to give them a break and enable them to spend time with their other children or to work. A mother of a young person (aged 11) with learning difficulties felt that a childminding service for children with special needs was vital to enable her to work and have a break from caring for her daughter: *'I wouldn't have been able to have this job if it hadn't been for everybody here...if it hadn't been for [project worker]...This...has given me a life basically....it's a break for me to go to work because it's a break away from [my daughter].'*

Access to resources that parents could not otherwise afford

For some families, Children's Fund services provided children with access to resources and opportunities that their parents may be otherwise unable to afford. A mother whose children attended a range of Children's Fund play and leisure activities commented on how much she valued the resources available to her children.

This has helped a lot for us because we don't have a lot of money...There's only so much you can afford to do. Things like bowling and things like that it works out really dear and if you're [going as] a family. But like the Children's Fund, they've sponsored our sort of stuff.

Children and parents using many different Children's Fund services commented on how much children enjoyed the opportunities for trips and outings to new places outside their local area that compensated for their parents being unable to do so. A young person (aged 12) appreciated being able to access new activities and opportunities through a Children's Fund project: *'[I'm having] fun and doing more activities that maybe I wouldn't get to do if I didn't join'*. Her mother also appreciated that the Children's Fund was compensating for her inability to pay for activities for her child: *'everything costs money these days and they wouldn't be able to do half as many things as they do now, because it is a struggle'*.

5.4 Areas for development to improve outcomes for children and families

The previous sections in this chapter have highlighted the emphasis placed by Children's Fund services on working with individual children and with the wider family and the benefits these approaches had for children and families at least in the short-term. This section explores the extent to which Children's Fund services in the case study areas were able to influence or shape other environments experienced by children and young people and the implications this had for promoting the inclusion of children and families in the wider community.

As we noted in Chapter 1, community-based approaches to building resilience are receiving more attention in the resilience literature and in preventative services more widely. Such approaches aim to involve families and communities as well as young people, and aim for integrated service delivery. The need for interventions to be appropriate to the cultural context and build on communities' strengths and models of community empowerment has also been recognised. Protective factors at the level of the community identified in other research include the availability of external support or resources, positive school environments, and opportunities for participation (Benard, 1991; Newman, 2002; Schoon and Bynner, 2003).

5.4.1 Building more sustainable communities

In the case studies explored for this research, there was a dearth of examples of Children's Fund services developing protective factors at the community level. The majority of Children's Fund projects were single service interventions focused on specific aspects of children's behaviour or attitudes and when there were cross-service collaborations they too tended to focus on individual children and specific aspects of their behaviour. There was therefore relatively little evidence of collaboration with other services in order to work on improving the wider social conditions that underpin children's development. Indeed, children and their families did not expect Children's Fund services to tackle the complex, mutuallyreinforcing dimensions of social exclusion. They appreciated the services that were delivered and did not expect them to be addressing the more structural and attitudinal causes of social exclusion such as targeting the systems which worked in exclusionary ways.

In the small number of cases where services were based on holistic community-based approaches, these did seem to help create more supportive social environments and to begin to address some of the wider dimensions of social exclusion that children and families were experiencing. In these cases, key benefits for children and families included providing access to play and extra-curricular activities for children that were not previously available in the local area and thus filling gaps in community-level provision. This work was highly valued by parents and went some way towards tackling their concerns about poor play and youth service provision in their locality coupled with continued exposure to crime, anti-social behaviour, bullying, racial harassment and drug abuse in the neighbourhood. However, these problems were far-reaching and ongoing and therefore beyond the capacity of the Children's Fund to address. Box 5.4 gives an example of how Children's Fund services are often unable to address wider community issues, such as a mother's ongoing concerns about her sons being at risk of crime and anti-social behaviour within their neighbourhood.

The seventh sub-objective for the initiative was to involve families in building the community's capacity to sustain the programme and create pathways out of poverty (see Appendix C). Concerns about sustaining services correspond to what we have seen to be the primary focus of local partnerships on strengthening children and families and reveal that this sub-objective required more attention. There were examples of where parents took the initiative and led on the development of services, for example, over a bereavement service discussed in Chapter 3.

Examples of Children's Fund services which have aimed to build resilience at the level of community, however, demonstrate how such approaches can contribute to sustained impact. This was particularly evident for groups traditionally excluded from dominant communities by virtue of their ethnic or cultural identities. For example, services working with refugee and asylum seeking families provided practical support in finding appropriate housing and schools where they would not feel isolated and where they could build the community networks which would provide ongoing support. Work with black and minority ethnic children in both the case study authorities where we focused on this theme, built on existing voluntary and community sector organisations working with black communities in recognition of their strengths (see Morris *et al.*, 2006). The availability of resources that illustrate and value black

cultures and the presence of adult role models from within black communities were both identified as important in helping children develop positive identifications with their communities and thereby strengthening the community itself.

Box 5.4 Ben's and Alex's story

Background

Ben and Alex (aged eight and 11 years and of mixed ethnicity) live with their mother. The family was concerned about the neighbourhood in which they live, in particular the lack of play and leisure facilities, their experiences of ongoing racial harassment and the use of drugs on the estate. The mother had a history of depression and commented on the difficulties she experienced with her sons' behaviour.

The project

The boys were referred to a Children's Fund youth project initially through the local Youth Inclusion and Support Panel (YISP) as one of the boys had been involved in a minor burglary/theft incident. Both boys attend the project. The project runs a youth activity club and is open to young people on the estate between the ages of eight to 13.

Practices valued by the child and family

The mother and the two boys valued: access to a safe space which provided a refuge from bullying; the practices of project workers in valuing and rewarding their engagement through celebration events: 'they even let my son have his birthday here, he was over the moon'; and approachable and caring workers who provided positive role models for children. The mother also found the emotional and practical support helpful for dealing with the boys' behaviour and valued having someone to talk to on an informal basis who treated her with respect, as well as being kept informed and involved in decisions about her sons' support: 'They talk to you, involve you, so you feel as though you're involved, they will ask you, talk to you, tell you what's going on, ask advice'.

Benefits for the children and family

The mother and boys felt that the boys had gained in confidence and self-esteem: 'Through the club, Ben has got a lot more confidence, he's come out of his shell, he's mixing with different age children [...] he was so quiet and withdrawn'; had made new friends and gained access to new opportunities: 'they've taken the boys for lovely days out, where they take them off the estate'. The mother felt that the project gave Alex 'something to look forward to, giving him maybe another outlook'. The mother also benefited herself in terms of having some respite and peace of mind that her children were safe: 'It's ever so nice to have those two hours of peace [...] and you now they're safe, you know they're having fun'.

Wider community issues

The mother had ongoing concerns about what will happen when the project comes to an end or when her children became too old to attend the project. She did not see any long-term changes happening to the local environment or their wider situation as a result of the project. She felt that the situation for her son would be the same at the end of the project as it was before he joined: *'the project is up to about 12 and then Alex will have nowhere to go, then we're back to nowhere, because where will Alex be? On the streets.'* She was concerned that her children would be at risk of drug abuse and felt powerless to change their situation: *'I can sit here now and say my eleven-year-old son, in another two years, is going to be either smoking weed or he's going to be taking cocaine and it destroys me, but there's nothing I can do.'*

5.4.2 Multi-agency working to change mainstream provision and wider social conditions

Chapter 3 discussed multi-agency working to support the child and parents in negotiating provision and this chapter has highlighted some of the benefits of this approach.

Children's Fund services stood out as responsive and different from previous contact with mainstream providers and there were many examples of project workers mediating relationships between families and statutory agencies in ways which were helpful to both parties. The challenge of influencing some of those services so that mediation became unnecessary, was, however, more difficult to address. As we indicate in the final report of the evaluation (Edwards *et al.*, 2006), the marginal position of the initiative which enabled the flexible working that was so highly valued by service users also meant that the influence of the Fund on other services was correspondingly limited. Some services did work on changing attitudes of the excluders, but they were not well placed to do so. Box 5.5 shows how action to build a young person's resilience to deal with racism helped at the individual level, but without linking up with the school to address racism more broadly, the impact was only limited.

There were, as we have seen, glimmers of forms of interagency collaboration which recognised that multi-professional practice for the prevention of social exclusion is not only a matter of strengthening individuals and families, but needs to include attention to the broader social conditions of development such as housing and community resources. Far from criticising the implementation of the initiative at a local level, we highlight these areas for development as part of the unfolding account of the complexity of need to be addressed in future preventative work.

Box 5.5 Sarah's story

Background

Sarah (aged 12) is of mixed ethnicity and experienced racist bullying at primary school.

The project

Following contact with the project workers, Sarah attended weekly group sessions on issues of identity and racism in school with other children of mixed ethnicity, facilitated by a project worker. She later became a member of the children's management committee of the project, participating in decision-making about the management and delivery of project activities. The project aims to work with children on issues of cultural heritage and identity to reduce the number of the school exclusions and Child and Adolescent Mental Health Service referrals of multiple heritage children relating to problems of identity.

Practices that children and parents and carers value

Sarah and her mother highly valued the creation of safe spaces which provided the opportunity to develop peer support and social networks with others in similar situations. The project provided an informal learning environment where Sarah and her peers could discuss

issues such as cultural heritage and identity and develop protective factors to deal with racism. Sarah valued informal and approachable project workers: '*They're kind, friendly, they just listen to you and they know what you're experiencing…I feel that they [project workers] understand*'. She valued her participation in decision-making about the management and delivery of project activities and felt that the staff took the children's views seriously and responded to them. Sarah was concerned, however, about reaching the age limit of 13 years and no longer being able to participate in the project: '*When I'm 15, 16, I don't want to stop it, I want to carry on'*.

Benefits for the child

Sarah felt she had gained from meeting other children of mixed ethnicity, developing new social networks with her peers. She felt that she was more able to support and seek support from others in similar situations, enabling her to develop protective factors and resilience to deal with racism: *'[before] I would tell my mum but I would just keep it to myself, I wouldn't tell other children, but then at primary school I knew I could tell someone at the club'.* Sarah's mother thought that through her participation in the project, Sarah had gained confidence, had a more positive outlook than before and was more able to deal with bullying and seek help from others: *'I'd say it's given her confidence. ...She's more positive now whereas before it were like if she had problems or anything at school it was like she'd just hold it all in...She will stand up to them'.*

Sarah perceived the opportunities to participate in the project as enabling her to develop a sense of responsibility: 'I feel more like an adult...'. Through her participation in a conference, Sarah gained confidence, developed communications skills, and felt that her contribution was valued: 'On the conference, we were all sat at the front, in front of everyone, I felt special when I was singing, I felt special when I was reading my speech, I just felt special all that day. And it's in the newspaper'.

Wider school issues

Sarah and her mother did not feel that the issue of racist bullying in school was being addressed and commented on their negative experiences of raising this issue with the school management. Sarah felt that teachers did not listen or take action in response to her concerns about bullying. Although Sarah was a member of the School Council, she felt that there was little space for young people's concerns to be heard: *'they don't really like change about, you know like bullying policy or anything like that, they don't do anything about that'.* Although the project facilitates supportive safe spaces for children of mixed ethnicity experiencing racism within schools, project workers do not seem to be having an impact on the practice of school staff or raising awareness about racist bullying within the school environment. This represents an ongoing challenge for schools and a potential barrier to Sarah's pathway towards inclusion.

5.5 Summary points

It is evident that most children and families using the Children's Fund services we examined were able to identify some short or medium-term benefits, which were evidence of increased resilience, or factors that were protective in relation to the risks to which they might be exposed. These outcomes both correspond with the relevant Children's Fund sub-objectives and introduce other benefits, linking with the Every Child Matters outcomes as summarised below.

Reported benefits for children were:

Be healthy

- Improved emotional health and well-being
- Improved physical health and fitness
- Improved access to health services

Stay safe

- Reduced risk of committing and becoming victim to crime and anti-social behaviour
- Safe from bullying and discrimination through support and care for each other

Enjoy and achieve

- Improved school attendance and happier within school
- Improved educational attainment and literacy
- Increased access to play and leisure services which were not previously available in the local area
- Enjoying and achieving in play and leisure activities
- Increased aspirations
- Development of friendships and increased interaction with peers

Make a positive contribution

- Improved behaviour in and out of school
- Increased social, communication and life skills
- Increased opportunities for participation in services

Reported benefits for families were:

Stay safe

- Whole family support: improving the emotional well-being and life skills of family members enabled carers to better provide safe homes and stability for children and young people
- Tackling risks at the level of the family
- Improved communication between parents and statutory professionals helped improve access to statutory services

Achieve economic well-being

• Affordable childcare and respite opportunities helped parents and carers to be economically active

• Play and extra-curricular activities provided children with access to resources that parents could not otherwise afford

Areas for further development:

Building more sustainable communities

By improving community resources, some Children's Fund services helped to create more supportive social environments. However, the problems identified by parents and children at the level of community and environment were frequently beyond the remit of Children's Fund services.

Multi-agency working

While Children's Fund services often stood out as more responsive and different from previous contact with mainstream providers, there was little evidence of the initiative being able to influence mainstream practices or of multi-agency working which tackled the broader social conditions of children's development.

Chapter 6: Key Lessons about Early Intervention for Social Inclusion

6.1 Reflections on risk, resilience and protection and outcomes for children

The concepts of risk, resilience and protection have informed a range of government policies and initiatives, within the broader prevention and social inclusion agenda. Following the lead given by Sure Start, early intervention for the prevention of social exclusion of children and young people as a major policy goal was given added impetus by *Every Child Matters* (DfES, 2003) and the Children Act 2004.

In this report NECF has drawn on the concepts of risk and protective factors, to show how Children's Fund services helped to disrupt children's trajectories of exclusion and realign them towards opportunities for greater inclusion. In building a picture of the effects of early intervention and the changing pathways of engagement, NECF has used the concepts in two ways so that it can do justice to the intentions of the initiative:

- to capture the focus of interactions between practitioners and children and their influence on individuals and families;
- to explore the wider structural and relational factors of social exclusion that children and families experienced and the extent to which the Children's Fund addressed these.

Focusing on the shaping and reshaping of children's trajectories has allowed NECF to see children, young people and their carers as active agents in the construction of their lives, with the potential also to work on the social conditions of their individual development.

Given that the evaluation was not a longitudinal one, the case study elements of NECF have necessarily relied on the accounts of valued practices and short and medium-term changes in behaviour provided by carers and children. These evidence sources enabled NECF to examine also the extent to which children and parents were able to engage with and shape Children's Fund services.

In this chapter we summarise the findings presented earlier which indicated how services were targeted and accessed and what service users valued about Children's Fund interventions. We then link the short and medium-term outcomes for children and young people that were reported to us to the long-term outcomes set out in the Every Child Matters framework. We conclude by offering an analysis of the children's experiences which suggests that the marginal position of the Children's Fund has not been conducive to a complex response to the multi-faceted aspects of social exclusion described to us by children

and carers. In doing so, we recognise that the Children's Fund was experienced at local level as a time-limited initiative which was designed to commission providers who delivered particular services for children or children and families. It was not set up to reconfigure the wider social conditions of children's development.

NECF has focused on how Children's Fund partnerships responded to diverse groups of children and families in order to reflect on the capacity of the initiative to address the needs of children and families in different circumstances. We consider the details of the approaches adopted to work with specific groups of marginalised children and their impact elsewhere (Barnes *et al.*, 2006; Beirens *et al.*, 2006; Mason *et al.*, 2006; Morris *et al.*, 2006; Prior *et al.*, 2006). In this chapter we discuss the perceived short and medium-term impact that Children's Fund services had on different spheres of children's and families' lives and discuss the lessons that can be drawn from children's and families' experiences of the Children's Fund to inform the current Every Child Matters and prevention agenda.

From the perspectives of children and parents it was clear that the Children's Fund had a positive impact on many children and families. Although we are able only to report short and medium-term outcomes, there is evidence of disruptions of trajectories of exclusion which may continue in the longer term. Unsurprisingly, given the focus on children and their families in the accounts discussed in Chapters 2, 3, 4 and 5 there is less evidence of action which is achieving positive impacts on systems and practices which are exclusionary.

In summary, NECF has found considerable evidence of work with children and families which was highly valued and which resulted in positive outcomes for children, young people and their families. It has also, as we suggest in Edwards *et al.* (2006), revealed the complexity and scale of the prevention agenda. The evidence discussed in the present report indicates that one way in which that agenda can move forward is to consider how the contexts of children's development can be addressed through focuses on exclusionary practices and on the concerns outlined by parents about the negative effects of local environments.

6.2 Lessons for prevention from the Children's Fund

There are many important lessons about preventative practices from children's and families' experiences of the Children's Fund.

6.2.1 Targeting and accessing Children's Fund services

Children's Fund partnerships targeted areas or groups where children were 'at risk' of social exclusion and focused on early intervention.

Children's Fund partnerships drew on the concepts of risk, resilience and protection to varying degrees and in different ways in the planning and delivery of Children's Fund services. Whether services were aimed at specific groups or were open access and universal, the focus was direct intervention with children or children and families. There was some limited evidence of local capacity building for the longer-term sustainability of services as a result of user engagement through working, for example with black and minority ethnic groups. But generally it was difficult to engage parents and this aspect of capacity building was underplayed in the initiative.

Most children and families accessed Children's Fund services through parent referrals aimed at help for their children or activities.

Parents referred their children to gain access to support with a child's behavioural or emotional needs or for support with a child's disability or their academic development. Children and parents also sought services which filled gaps in local provision and improved resources in clubs and play activities in and out of school.

Statutory agencies tended to refer for support with behavioural or emotional difficulties.

There were also examples of children referred to projects *via* schools or professionals from other statutory agencies such as the schools' psychological services. In all of these cases, referrals were to tackle behavioural or emotional problems. It seems that the initiative was addressing a need for early intervention with school age children prior to the stage where full statementing might be necessary.

Children and families perceived the risks of social exclusion largely as issues of concern at the family, school and community levels, and not simply in terms of within-child factors.

Issues of concern within the family included: the pressures of being a lone parent, pressures of caring for a family member with a long-term illness or disability, concern about siblings in trouble with the police, pressures linked to their refugee or asylum seeking status, and difficulties caused by English not being the first language. Children and parents perceived the risks of social exclusion within school to include: bullying and racism, school exclusion and transitions between schools. Within the wider community, risks of social exclusion were seen in terms of poor play and extra-curricular activities for children and young people;

personal safety; exclusionary attitudes amongst community members; and poor services for particular groups.

6.2.2 Developing preventative practices in the Children's Fund

Services tailored to individual support needs

- The Children's Fund enabled the development of responsive, specialist support tailored to the individual needs of the child and family.
- Children and parents particularly appreciated:
 - Fast responses and early intervention to prevent problems becoming more serious;
 - Child-centred approaches which worked at the individual pace of the child;
 - Specialist skills of project staff to support children with particular needs;
 - Holistic family-oriented approaches which were able to respond to the changing needs of the family over time. This meant that services could respond to parents' emotional and practical support needs and offer higher levels of support during particular periods of family crisis or stress.

Multi-professional approaches

- A majority of Children's Fund projects were single service interventions and therefore multi-professional approaches were not experienced by most children and families accessing Children's Fund services.
- Some children and families, particularly disabled children, refugee and asylum seeking children, and those with challenging behaviour, experienced co-ordinated multi-agency responses which helped to build a holistic package of support around them. These multi-professional responses required practitioners to have a good knowledge of local resources and expertise available, as well as being able to talk across professional boundaries and as we indicate in Edwards *et al.* (2006), collaboration was greatly assisted by the programme teams.
- Project workers played an important role in signposting and supporting children and parents to access other services, accompanying them to meetings, taking an advocacy role or helping to mediate between the family and other service providers.
- Such supportive signposting helped to increase children's and families' take-up of other services and opportunities in the community. For some families, particularly those with refugee and asylum seeking status, this was particularly important in making mainstream services more accessible and providing positive experiences of engaging with statutory professionals.

• Information-sharing among agencies about children accessing services helped to identify children 'at risk' and enable early intervention with other siblings within the family.

Trusting relationships with project workers over time

- Children and parents developed trusting relationships with Children's Fund project workers who they felt listened to them and treated them with respect. Project workers often played the role of a 'professional friend', that is a professional who was easy to talk to, responsive and available during and outside of usual project contact time.
- Families often valued project workers' independent role as a 'safe outsider' in mediating with school and other statutory professionals, which has implications for the Extended Schools agenda.
- Parents valued being supported by practitioners from similar cultural backgrounds, but this was not such a concern for children.
- However, there was a danger that such relationships were reliant on the skills and abilities of individual practitioners, rather than a more systemic approach and may therefore have limited impact if they are not sustained.

Participation and its role in the development of preventative practice

- Despite some interesting examples of children's involvement in the ongoing development of services, overall, participation of children and parents in the planning, delivery and evaluation of Children's Fund services was limited.
- Being consulted and listened to in either dedicated participation projects, or in projects that took participation seriously, impacted on children's self-esteem or confidence.
- Many parents highlighted the importance of being kept informed about services and support for their child and were satisfied with this level of involvement in services.
- Many parents reported that they did not have time to be more involved in the ongoing development of services, due to their work and childcare commitments.
- Children and parents were involved in ongoing dialogues with project workers when support was tailored to their individual needs.
- Participation requires further conceptual development if it is to be connected effectively to prevention.

Open access versus targeted safe spaces

 Many Children's Fund services created a range of different 'safe spaces' for children and young people (and sometimes for parents) using both targeted and open access approaches. Some safe spaces operated as respites from pressures for children or their parents; others combined this function with opportunities to develop peer support and raise awareness about common issues affecting children and young people or parents/carers.

- The more targeted approaches explicitly emphasised the importance of developing peer support and a positive sense of identity. The latter was particularly so for marginalised groups, such as children from refugee and asylum seeking families, disabled children, looked after children and children from black and minority ethnic families.
- Open access approaches encouraged greater interaction between marginalised groups and the wider community and challenged discriminatory attitudes. This suggests that there may be a need for more targeted approaches initially, but that children who have developed a positive sense of identity may move on to more universal services and opportunities over time.
- There was evidence that targeted approaches helped to improve the accessibility of services for particularly marginalised groups, by ensuring that services were delivered in culturally appropriate ways.
- Other valued safe spaces were open access services developed in response to local need for play and extra-curricular activities for children and young people.

Sustainability of Children's Fund services

- A concern for many children and parents accessing Children's Fund services was often the short-term nature of interventions and the implications for developing sustained trusting relationships with project workers. This reveals a potential mismatch with practitioners' views about the appropriateness of time-limited interventions. While users were concerned about loss of access to support, practitioners may be concerned to empower service users and ensure that they do not become dependent on the limited support available.
- Time-limited interventions were seen by some parents as appropriate and there were several examples of withdrawal of support being managed in such a way that children and carers felt informed and were able to manage their own way forward.
- Many children and parents were also concerned about the arbitrary nature of the Children's Fund age limit of 13 years. Young people who reached the upper age limit felt that they were left with nothing else to do. This highlights the importance of linking up provision and providing alternative opportunities when young people reach age limits.
- Children and families also had ongoing concerns about valued Children's Fund services being discontinued due to de-commissioning processes. Although many Children's Fund services were filling gaps in local provision, parents highlighted the need for more sustainable services to improve community resources.

 Sustainability is not just about the duration of services, it can also be addressed by developing children's and families' capacity to access and take up other services and resources and the development of those resources. The Children's Fund offered highly valued provision geared at early intervention and prevention, which in a small number of instances, built on and worked with local community strengths. However, the Children's Fund is only part of the complex jigsaw needed to address social exclusion more broadly.

6.2.3 Outcomes for children, young people and their families

Short and medium-term impacts of services for individual children and young people relate to four of the five Every Child Matters outcomes.

The focus on children and young people and their capacity to overcome social exclusion has meant that outcomes for children have a close match with the child level intentions of the Every Child Matters agenda: health, safety, enjoyment and achievement and making a positive contribution.

The reported outcomes for children were:

Be healthy

- There were gains in children's self-confidence which had an impact on other areas of their lives. Where there were particular emotional needs, such as anxiety, depression or trauma, improvements were reported.
- A small number of children reported improved physical health and fitness and disabled children particularly benefited from services which allowed them to reveal their capabilities.
- Some services supported parents to access health services, which had a positive effect on their children's health.

Stay safe

- The reduction in exposure of children to negative peer group influences was welcomed, as was engaging and diverting children who had offended or were at risk of doing so.
- Children experiencing racism and bullying at school valued opportunities to develop a positive self-identity and to engage in peer support to tackle racism.

Enjoy and achieve

- Children who were at risk of school exclusion, had been excluded or were experiencing problems with attendance due to behaviour, improved their attendance or became happier and more positive about school.
- There were reported improvements in children's literacy and educational achievement through their attendance at homework clubs, book clubs and nurture groups. Children and parents who specifically sought support with children's school work and academic development felt that these needs had been met.
- Many children and parents saw the benefits in terms of providing children with access to play and extra-curricular activities which were not previously available in the local area.
- Many children enjoyed and achieved in a range of different play and leisure activities which gave them a different outlook and a greater sense of purpose.
- Some services helped to raise children's expectations and aspirations for the future.
- Many services enabled children to make friends with other children in the local area and reduce their isolation.

Make a positive contribution

- Where children had behavioural difficulties, there were improvements in behaviour in and out of school.
- Children and parents also reported children's improved social, communication and life skills.
- Children valued opportunities to participate in shaping project activities and services and developed confidence and self-esteem, as well as a range of new skills as a result.

Children's Fund services strengthened the capacity of families to provide safe environments and in some cases improved economic well-being.

Parents reported a range of benefits for themselves and for the family as a whole as a result of services which provided access to childcare and respite, as well as those which responded to the practical and emotional support needs of parents and carers. The short and medium-term impacts for families relate to two of the Every Child Matters outcomes:

Stay safe

• Family support services helped to increase the confidence and improve the emotional well-being of the adults, as well as having benefits for the children. Support networks with other parents or carers were developed through parental support services and

isolation was reduced. Project workers also helped parents to gain important practical or life skills, including parenting skills.

- In some instances, parents felt that projects had been responsive to a range of family issues beyond the expected scope of the service. These included support with pressures of single parenthood, long-term illness or impairment within the family, physical or sexual abuse in the family, and support with the pressures of refugee and asylum seeking status.
- Where mediating between families and statutory services formed a focus of Children's Fund practitioners' work, this often led to better relationships and improved communication between families and statutory professionals.

Achieve economic well-being

- Children's Fund projects which provided childcare were highly valued by parents, particularly single parents, as it enabled them to return to work or study. Parents of disabled children highly valued respite provision to give them a break and enable them to spend time with their other children or to work.
- For some families, Children's Fund services provided children with access to resources and opportunities that their parents may be otherwise unable to afford.

Children's Fund services focused on building resilience and disrupting individual trajectories of social exclusion. Many services also built the capacity of families to support their children's greater inclusion.

Although children and parents reported that risks of social exclusion were to be found in schools and neighbourhoods, service provision focused on interventions aimed at building resilience through work with individual children or children and their families. Children and families experiencing multiple dimensions of social exclusion sometimes noted the limited potential of interventions which focused on only one aspect of exclusionary conditions and appreciated efforts made in multi-dimensional approaches.

Building the capacity of families and communities to develop and sustain preventative services was rarely a priority.

As noted earlier, there were some concerns about the sustainability of services. Some of these reflected the reliance on provision experienced by service users. In other cases there was a recognition that the Children's Fund was revealing a considerable amount of need and a fear that once funding was withdrawn, support would cease. In this context, the underplaying of work on the building of community capacity to sustain services through the

engagement of parents was particularly marked. Elsewhere (Edwards *et al.*, 2006) we suggest that the Children's Fund underestimated the effort required for building the capacity of carers to become engaged in service development in some areas.

Multi-agency collaboration to support children's trajectories was developed by partnerships.

Joined-up provision is an important feature of the Every Child Matters agenda. There was evidence that the Children's Fund was enabling cross-agency responses which were greatly appreciated. However, as we demonstrate elsewhere (Edwards *et al.,* 2006) there is little evidence to suggest that the Children's Fund has been able to influence the practices of mainstream services in this regard.

6.3 Summary points

- The Children's Fund was established with an ambitious remit: to both tackle the problems of social exclusion among vulnerable children and their families and to play a role in the development of integrated responses to the risks of exclusion. It was expected to effect change in the lives of children and to prepare the ground and offer examples for an increased emphasis on early intervention for the prevention of exclusion.
- The accounts that we have presented in this report suggest that services which met parents' needs for support with their children and filled gaps in local provision were highly valued by children and parents. For most children and families, these services had a number of benefits in the short and medium-term which have helped to build the resilience of children and families to disrupt or resist trajectories of social exclusion. Since the evaluation is not a longitudinal one, however, we cannot talk of the long-term impact of the Children's Fund in sustaining children's and young people's pathways towards greater inclusion.
- Children's Fund services, by working in flexible and responsive ways, have revealed the scope and complexity required for preventative work with children and families and some progress has been made towards a more family support focus within preventative services.

6.4 Recommendations for the future development of prevention

 Although Children's Fund support for individual children was valued, a clear lesson from the initiative is that preventative services also need to be responsive to the emotional and practical support needs of parents and carers and other members of the family. That is, there is a need to address ongoing risks at the level of the family and signpost parents and carers on to other sources of support.

- 2. Front-line practitioners need to be supported to talk across professional boundaries and develop effective preventative practices around the needs of children and young people in collaboration with mainstream service providers.
- 3. Services should aim to develop children's and families' awareness and capacity to take up other services and resources in the community. This can help to address some of the wider dimensions of social exclusion that children and families may face and reduce dependency on the limited support available.
- 4. While short-term interventions can be appropriate if the withdrawal is carefully managed and children and parents are informed about it, services should be sustained for as long as children and families need them. This enables practitioners to respond to children's and families' changing needs over time and sustain their pathways towards greater social inclusion.
- 5. While responsive, flexible approaches potentially helped to support children's and young people's pathways out of exclusion, there is also a need for preventative work to address the wider social conditions of children's development. This includes work that focuses on the attitudes of those who are excluded or the material conditions in which families find themselves. Particular concerns raised by children and parents included: school exclusion and transitions between schools, bullying and racism, exposure to crime and anti-social behaviour, drug abuse, poor play and leisure facilities and poor services for marginalised groups such as disabled children.
- 6. While the Every Child Matters outcomes framework is useful in examining child-focused outcomes of services, prevention work should also focus on outcomes for families and communities, as well as for individual children.

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Appendix A

The Children's Fund Initiative

The Children's Fund Prevention Programme was announced as part of the UK 2000 Spending Review, following the work of the Social Exclusion Unit and in particular the 'PAT 12' report 'Young People at Risk' (SEU, 2000), which highlighted the need for joined-up and multi-agency services for children and young people at risk of social exclusion. Full guidance was issued in early 2001 and each local authority area in England was invited to develop a multi-agency Partnership Board, which should include community representation and voluntary and community sectors, to design a strategic plan for the delivery of services locally. The Children's Fund was delivered across all 150 top tier local authorities in 149 partnership arrangements.

The strategic plans outlined the demographic features of the area, structures in place for the delivery of the programme, details of interagency collaboration including capacity building with voluntary and community groups and evidence of consultation with children and young people. They also provided information on intended strategies for the prevention of social exclusion and the participation of children, young people and their families in the development of provision. This approach was key to ensuring that local plans addressed local need, and thus there is a great deal of variety across the Children's Fund Programmes.

The Children's Fund *Guidance* (CYPU, 2001) was issued by the cross-departmental Children and Young People's Unit, which managed the Children's Fund as part of a wider portfolio of preventative services for children, young people and families. Changes in the structure of children's services within central Government, culminating in the Children Act 2004, led to the Unit being absorbed into a new 'Children, Young People and Families Directorate' located within DfES in late 2003. The *Guidance* set out the overarching objective of the Children's Fund:

to provide additional resources over and above those provided through mainstream statutory funding, specific programmes and though specific earmarked funding streams. It should engage and support voluntary and community organisations in playing an active part and should enable the full range of services to work together to help children overcome poverty and disadvantage (CYPU, 2001: 6).

Beyond this, there are two key objectives and seven sub-objectives. These encourage local Children's Fund partnerships to focus on effective collaborative working to address needs linked to education, health, anti-social behaviour, user involvement and capacity building. Partnerships were also expected to enter into an 'ongoing dialogue' with children, families and their communities in order to facilitate their participation in the development, design and delivery of Children's Fund programmes and services. Such services should offer early intervention, and be multi-agency and focused on prevention.

Local programmes have been funded in three waves that reflect an assessment of need in each local authority. The actual funding allocation was based on an assessment of need linked to the Index of Multiple Deprivation (which assesses each local area across a range of measures) and the waves were phased so that areas of most need received funding first. The first wave of programmes was funded from January 2001; Wave Two from February 2002 and Wave Three from December 2002. Funding was initially secured until 2006. It was subsequently extended until 2008, although the allocation has reduced over time in order to promote the mainstreaming of effective services and the establishment of links to the emerging joint planning and commissioning arrangements arising from the Green Paper *Every Child Matters* (DfES, 2003) and the subsequent Children Act 2004. The total budget over the period 2001-08 will be £960m. Funding to Children's Fund Partnerships was allocated in response to the successful submission of the plan each Partnership developed, as outlined above.

In conceptualising prevention, the *Guidance* provided a model for understanding the focus of the initiative using four levels – ranging from broad generalist services though to focused remedial services. The model draws on the earlier work of Hardiker (1991; 1999) and Children's Fund services were expected to address levels 2 and 3:

Level One: Diversionary. Here the focus is before problems can be seen – thus prevention strategies are likely to focus on whole populations.

Level Two: Early prevention implies that problems are already beginning to manifest themselves and action is needed to prevent them becoming serious or worse.

Level Three: Heavy-end prevention would focus on where there are multiple, complex and long-standing difficulties that will require a customisation of services to meet the needs of the individual concerned.

Level Four: Restorative prevention focuses on reducing the impact of an intrusive intervention. This is the level of prevention that would apply to, for example, children and young people in public care, those permanently excluded from school or in youth offender institutions or supervision and/or those receiving assistance within the child protection framework (CYPU, 2001: 37).

NECF's mapping of the Children's Fund revealed that in planning services partnerships developed programmes of services that targeted geographical neighbourhoods, areas and communities but also particular target groups (NECF, 2003a). These target groups tended to be those that have traditionally found their needs unmet by mainstream services. NECF has carried out its evaluation to reflect both of these foci.

For further information, see NECF (2003a; 2003b; 2004a; 2004b; 2005a; 2005b), Edwards et al (2006), Barnes *et al.* (2006), Beirens *et al.* (2006), Hughes and Fielding (2006), Mason *et al.* (2006), Morris *et al.* (2006), Prior *et al.* (2006), Spicer and Smith (2006) and NECF website: http://www.ne-cf.org.

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Appendix B

Description of Evidence from Children and Families

Two sets of qualitative data were analysed for this report, which resulted in in-depth individual data for **185** children and young people and **184** parents/carers. The views of a further **170** children and young people were sought through focus groups and group activities.

Families were accessed via **72** Children's Fund services, with which NECF was conducting case study research as part of the evaluation. It is therefore not a representative sample of children and parents using Children's Fund services.

For both sets of qualitative data, a range of methods were used to elicit the views of children and their parents, including individual semi-structured interviews with children and parents, as well as group interviews with children and parents, where appropriate. A key resource used in interviews with children was a log-book, *Me and My World*, which allowed children to describe themselves and their lives, including their family, school and wider community. Topics covered in interviews included:

- Children's interests, likes and dislikes, aspirations;
- Children's perceptions of good and bad things about home, school, their local community;
- Parents' perceptions of opportunities and services for children and families in the local community;
- Children's and parents' experiences of the Children's Fund project they were accessing (how they heard about it, why they accessed it, what they liked and disliked about it; experiences of participation; how they and their family had benefited and the impact of this on other areas of their lives);
- Children's and parents' experiences of other services they were accessing in the local community.

In some of the locality-based case study areas, we also involved children and young people in group discussions reflecting on the initial findings (developmental workshops) and, in some instances, giving feedback to service providers and Partnership Board members. Children's and young people's views were elicited through participatory techniques such as map-making, taking photographs of their local area, drama and video techniques and making masks to present their messages to service providers and Children's Fund Partnership Board members.

Research in the locality-based case study partnerships

The first set of data was based on NECF case study research conducted with 16 partnerships working with **38** services across England in the period January 2004-July 2005. Interviews were conducted with **79** households including interviews with children, young people and their parents and carers.

- Interviews with **76** children
- Interviews with **70** parents/carers

This resulted in in-depth individual case study data for **92** children. The main characteristics of the children and young people included in the locality-based case study sample were:

Total number of children: 92			
Male: 58	Female: 34		
Age range:	five to 15 years (majority (69) were aged nine to 13 years)		
Ethnicity:			
White: 58	Black and minority ethnic: 2	3 Mixed ethnicity: 9	Not known: 2
	Black British6Black Caribbean3Black African8South Asian3Other3		
Number of disabled children*: 18			
Number of children with refugee/ asylum seeker status: 5			
Number of children from single-headed households: 24			
Number of children from large families (three or more children): 26			

* This includes children with ADHD, autism, emotional and behavioural difficulties, learning difficulties, physical, sensory and multiple impairments and complex needs.

The transcripts of interviews and child case studies were analysed and summarised in the form of a template covering the five key research questions (see Chapter 1). The templates gave a summary of biographical information about the child and family and key issues and responses from the children's and parents' interviews, illustrated with quotations. Thematic analysis of the qualitative data from the templates was coded and collated to form the basis for the report.

Research with particularly marginalised groups of children

The second set of qualitative data was based on NECF research with a sub-set of services in 13 partnerships across England in the period January 2004-October 2005. These were working with five specific groups of particularly marginalised children and young people. A range of methods were used including individual and group interviews, focus groups, group-based activities and observations. This resulted in data from individual children and parents/carers across **34** services:

- Interviews with 93 children
- Interviews with 114 parents/carers

More general data was also gathered from groups of children and parents/carers accessing services:

- Focus groups and group interviews/ activities with **170** children
- Focus groups with **21** parents/carers

The breakdown of each thematic group is as follows:

Refugee and asylum seeker children and their families across 9 services

- Individual interviews with 23 children
- Focus groups with a total of 41 children
- Individual interviews with 13 parents/carers
- Focus groups with a total of 21 parents/carers

Disabled children and their families across 9 services

- Individual interviews with 11 children with a range of impairments, including deaf and hearing impairments, autism and physical impairments.
- 9 group activity sessions with a total of 32 children with autism and learning difficulties.
- 6 sentence completion exercises and 6 observations of groups of children engaging in project activities, including children with autism, children who were deaf or had hearing impairments, those with complex needs and multiple impairments.
- Individual interviews with 44 parents/carers (4 of whom were foster carers).

Children at risk of crime and anti-social behaviour and their families across 6 services

- Individual interviews with 19 children
- Focus groups with a total of 20 children
- Individual interviews with 11 parents/carers

Gypsy/Traveller children and their families accessing one service delivered across five Local Authority areas

- Individual interviews with 10 children
- 5 group interviews with total of 16 children
- Individual interviews with 23 parents

Black and minority ethnic children and their families across 9 services:

- Individual interviews with 30 children and informal interviews with a further 8 children
- Focus groups/ group interviews with a total of 61 children
- 7 observations of groups of children engaging in project activities
- Individual interviews with 23 parents/carers (including one foster carer)

Quantitative data analysis

This report also draws on a web-based survey conducted in the autumn of 2005 with programme managers across the 149 Children's Fund partnerships in England. 120 programme managers responded to provide an updated picture of the initiative during the final year of the evaluation.

This report also draws, where relevant, on quantitative analyses of a range of datasets to give an overview of broad questions of provision and take-up of Children's Fund services across England. This includes:

- Data provided in the Quarterly Monitoring Data generated by DfES from reports submitted by programme managers about the activities in their local areas. These data are not ideal but they are the best source of information about the activities of the Children's Fund in the round.
- Information gathered from the second sweep of the Millennium Cohort Study (MCS:OS1) about the use of a sample of specific Children's Fund services. The evidence gathered related to locality-based services in 74 wards including those based in schools, but did not include services which were available across targeted partnerships through, for example, thematic programmes.
- Data collected in the Families and Children Study (FACS) and in MCS:OS1 about the use of generic services of the kind provided under the Children's Fund banner (see Edwards *et al.*, 2006 for further information about these datasets).

Reference

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Appendix C

Sub-objectives of the Children's Fund and the Every Child Matters Outcomes

Sub-objective One

• To promote attendance in the schools attended by the majority of five to 13-year-olds living in the area.

Sub-objective Two

• To achieve overall improvement educational performance among children and young people aged five to 13.

Sub-objective Three

• To ensure that fewer young people aged between ten and 13 commit crime and fewer children between five to 13 are victims of crime.

Sub-objective Four

• To reduce child health inequalities among those children and young people aged five to 13 who live within the area.

Sub-objective Five

• To ensure that children, young people, their families and local people feel that the preventative services being developed through the partnerships are accessible.

Sub-objective Six

• To develop services which are experienced as effective by individuals and clusters of children, young people and families commonly excluded from gaining the benefits of public services that are intended to support children and young people at risk of social exclusion from achieving their full potential.

Sub-objective Seven

• To involve families in building the community's capacity to sustain the programme and thereby create pathways out of poverty.

Mapping the Children's Fund sub-objectives to the Every Child Matters (ECM) outcomes for children and young people:

Sub-objectives 1-4 are individual focused outcomes and correspond directly to the ECM outcomes:

- **Enjoy and achieve:** sub-objectives 1 and 2 (school attendance and educational performance)
- **Stay safe** and **Make a positive contribution**: sub-objective 3 (reduced risk of being a victim of crime and committing crime)
- **Be healthy:** sub-objective 4 (reduced health inequalities)

Sub-objectives 5, 6 and 7 are cross-cutting delivery-focused outcomes which relate to all five ECM outcomes.

Every Child Matters (ECM) Outcomes

Five key outcomes for children and young people:

Be healthy

- Physically healthy
- Mentally and emotionally healthy
- Sexually healthy
- Healthy lifestyles
- Choose not to take illegal drugs

Stay safe

- Safe from maltreatment, neglect, violence and sexual exploitation
- Safe from accidental injury and death
- Safe from bullying and discrimination
- Safe from crime and anti-social behaviour in and out of school
- Have security, stability and are cared for

Enjoy and achieve

- Ready for school
- Attend and enjoy school
- Achieve stretching national educational standards at primary school
- Achieve personal development and enjoy recreation
- Achieve stretching national educational standards at secondary school

Make a positive contribution

- Engage in decision-making and support the community and environment
- Engage in law-abiding and positive behaviour in and out of school
- Develop positive relationships and choose not to bully or discriminate
- Develop self-confidence and successfully deal with significant life changes and challenges
- Develop enterprising behaviour

Achieve economic well-being

- Engage in further education, employment or training on leaving school
- Ready for employment
- Live in decent homes and sustainable communities
- Access to transport and material goods
- Live in households free from low income

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