Prevention and Early Intervention in the Social Inclusion of Children and Young People

National Evaluation of the Children's Fund

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Prevention and Early Intervention in the Social Inclusion of Children and Young People

The Children's Fund was set up, 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.

This Report is not an account of what works across all Children's Fund partnerships in the 149 local authorities in England. Instead it offers some early evidence from some initial case studies to enable partnerships and policy makers to reflect on the evidence being gathered in one aspect of the National Evaluation of the Children's Fund (NECF).

Executive Summary

Background

- 1. The Children's Fund aims to put in place preventative services which provide support for young people and their families before they reach crisis, reducing the future probability of poor outcomes and maximising life chances.
- Earlier research shows that learning from short-life projects is not easy to achieve
 and that they therefore tend to have limited influence on broader developments
 within local authorities. However, the Children's Fund is a broad-based national
 initiative from which learning needs to be levered.

The Six Case Studies

- 3. Six of eighteen longitudinal case studies have been completed. In these NECF is examining the structures and process which have produced collaborative and participatory preventative work. These cases sit alongside another set of studies which are exploring the development of practices in work with specific target groups.
- 4. The evaluation is using activity theory as a framework for collecting the evidence and its analysis in the eighteen partnership case studies.

Developing a preventative strategy

5. In the six local authorities, we heard a range of understandings of the notion of prevention.

- 6. This multiplicity of understandings of prevention at the strategic level was further reflected in the subsequent funding of a wide variety of 'preventative' children's services.
- 7. There is a clear indication that Children's Fund services are providing support which would not otherwise be available to the families.
- 8. Several of the Children's Fund services we visited adopted a model of prevention based on resilience as the set of within-child, relational and environmental factors that reduce the child or young person's vulnerability.
- 9. Many of the services in the six partnerships were developing preventative strategy by creating opportunities for collaborative engagement with other services.

Creating the conditions for success

- Partnerships reorganised their structures to address the changing needs of their developing programme of services and to facilitate collaboration between services.
- 11. Repeated commissioning allowed for the development of priority areas of work and a more coherent rationale for targeting services, enabling partnerships to refocus their services towards prevention.
- 12. Partnership boards developed sub-groups to facilitate a more focused distribution of decision-making roles.
- 13. Locality and theme-based groups were set up to enable more effective horizontal (between services) and vertical (between strategic and operational levels) linking and networking in the development of a preventative strategy.
- 14. Collaborative forums enabled services to work together effectively, and where necessary partnerships offered structured support to services, for example in developing their capacity in relation to monitoring and evaluation.
- 15. Partnerships were generally reflexive, learning organisations. Systems were developed to enable partnership boards to learn from operational services.

Mainstreaming lessons about prevention

- 16. The Children's Fund has been a major player in initiating cultural change in the development of preventative services in some areas, developing more responsive practice and extending collaborative working.
- 17. In some cases service providers were acting as catalysts for change by challenging practice and perceptions among other agencies.
- 18. In some cases there were clear strategies to enable learning from the Children's Fund to inform future preventative services, but this was still at an early stage.

- 19. There was a clearly developing culture of monitoring and evaluation, which was most successful where partnerships had developed the capacity of service providers in this area.
- 20. There was scepticism among some board members about the capacity of the Children's Fund to influence preventative strategy, as it was being asked to 'punch above its weight', and was only one part of the wider picture of children's services.
- 21. In some areas it was difficult to change long-established practices and attitudes towards priorities in children's services.

Prevention and Early Intervention in the Social Inclusion of Children and Young People

Introduction

One strand of work in the National Evaluation of the Children's Fund (NECF) has been to examine the processes and structures which create the conditions for successful preventative services for children and young people who are at risk of social exclusion. The Children's Fund was established to 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 their life chances. In this report we focus on the provision of preventative services and early intervention in order to tease out current practices, their implications and the lessons to be learnt from them for the future development of children's services. The structure of the report is as follows:

- In Chapter One we place the Children's Fund emphasis on prevention in the broader context of policies for children, young people and their families and also try to clarify the terminology in use.
- In Chapter Two we provide a brief overview of the evidence sources for this report and give more detailed information in Appendix 1.
- Chapter Three examines the definitions of prevention which were used as the basis of strategy development at partnership board level, and investigates how this range of definitions was translated into the implementation of preventative children's services at the local level.
- In Chapter Four we explore the structures, processes and mechanisms with which
 preventative strategy was being developed and implemented in the six
 partnerships.
- Chapter Five focuses on the partnerships' strategies and challenges for migrating the learning from the Children's Fund to new structures in preventative services, including Children's Trusts.
- In the final chapter we summarise the ways in which Children's Fund partnerships have set about creating the conditions for successful implementation of preventative children's services.

¹ Two additional reports complement this one. The first focuses on multi-agency collaboration, and the second on participation. Both are available from www.ne-cf.org

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CHAPTER ONE

Prevention at local Children's Fund strategic level

The Children Bill 2004 and the associated consultation documents (DfES 2003, 2004a) have placed children at risk of social exclusion at the centre of the emerging child care policy agenda. In this paper we consider the changing policy and practice understandings that arise from the shift from 'children in need' to 'children at risk' – and the implications of this for the development of participative preventative services for children and families. We report the early evidence emerging from our work in six case study sites, and situate this evidence in the context of shifting policy on prevention.

1.1. The Children Act 1989

Smith (1999) summarises the story of 'prevention' in child care over the last twenty years, in which the notions of 'in need' and 'at risk' denote categories of children and families eligible for services and therefore local authority funding. In the discourse surrounding the Children Act 1989, 'preventative services', designed to keep children and families from requiring support from social services, were contrasted with services for children considered to be 'at risk of significant harm'.

The Children Act 1989 brought with it a set of duties and expectations for the provision of helpful services for children and their families. The Act recognised the importance to children of growing up within their families, and embedded in the Act is the expectation that the state has an important role to play in offering services to support children in families. Specifically the Act introduced the notion of 'children in need'. The Act defines a child as being 'in need if:

- (a) he is unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision of services by a local authority;
- (b) his health or development is likely to be significantly impaired or further impaired without the provision of such services; or
- (c) he is disabled'

(Children Act HMSO 1989)

Theoretically this definition enabled Local Authorities to work with a broad range of children who had needs that prevented them from reaching their full potential – as measured against the development of other less needy children. Whilst the definition offered by the Act is broad, it created an opportunity for services to be developed which address the needs of children before acute crises emerge. The anticipated outcomes of the legislation included the real opportunity for families to ask for and take up helpful services that prevented later difficulties. However, the actual implementation of the Act by local authorities focused services on those children with acute and severe needs. Smith (1999) notes that in the implementation of the Act,

seven in ten local authorities gave priority to children for whom social services departments already had responsibility. Children at a lower level of need were less likely to be prioritised. Specifically the children eligible for services provided under the umbrella of Part III of the Act were those children whose needs meant they were already identified as at risk of harm, or who were already receiving a high level of child welfare services. In the implementation of the Act it is apparent that services were targeted at the higher levels of prevention. This approach to service provision meant that those children whose needs were low level and who may or may not experience later difficulties did not receive a service.

The introduction of the Act brought with it the 'refocusing debate', which engaged with the difficulties in shifting the focus of child welfare services towards support and prevention and away from acute interventions. The funding of this shift appeared to be a significant barrier to developing services as anticipated by the Children Act. Notions of parallel funding to stimulate support services whilst maintaining services to children with acute needs were discussed. Structures for providing the services were caught up within these debates, with suggestions of a separate service being developed for children at risk of significant harm.

The growing political interest in outcomes for disadvantaged children saw consultation documents – such as *Supporting Families: A consultation document* (1998) – begin to embed thinking about 'children in need' within a broadening debate about children's well being. The impact of social exclusion on children was beginning to be quantified in these documents, and the strategies for addressing the identified poor outcomes emerged. The needs of children for whom social care services would be relevant became part of a broader picture of the different pathways facing children. The children who were eligible for services provided under Part III of the Act were being located within a description of children at risk of social exclusion.

1.2 The Children's Fund

It is in this context that the Children's Fund came into being, with its emphasis on the provision of:

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).

The *Children's Fund Guidance* likens the journey from birth to adulthood to a game of snakes and ladders, in which the role of preventative services is "to provide more ladders and reduce the number of snakes". A less playful metaphor develops the Government department's definition of prevention:

'Better a fence at the top of the cliff than an ambulance at the bottom'. This image reflects the notion that relatively inexpensive and simple measures put in place early can save the need for more expensive, complex interventions precisely at a time when successful resolution will be less likely. The focus of Children's Fund investment is on early intervention. By 'early intervention'

we mean before a child's difficulties reach the stage where statutory services are required by law to intervene, but where there are risks which make this a probability. (CYPU 2001:37)

The *Children's Fund Guidance* (2001:37) represents four levels of prevention, proposing that early intervention at Levels Two and Three can reduce the future probability of bad outcomes and maximise the chance of good outcomes:

The four levels of prevention –

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 such as 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

[Sources: Adapted from Hardiker, P., Exton, K., Barker, M (1991)]

However, there is no clear and straightforward consensus about what constitutes 'prevention'. A recent report of the Dartington Social Research Unit (2004), *Refocusing Children's Services Towards Prevention: Lessons from the Literature*, finds that:

One person's prevention is another person's intervention. There is much confusion over the term, and no single definition can be counted on as definitive. (p. 18).

Following an extensive review of the research literature relating to preventative children's services, the report concludes that in the context of children's services, *prevention* is considered in terms of preventing social need or social or psychological problems, while *early intervention* refers to responses early in the development of a social need or of social or psychological problems. That is, prevention is not synonymous with early intervention, but they act hand-in-hand to achieve better outcomes for children in need.

1.3 The Children Bill 2004

The Government Green Paper, *Every Child Matters* (2003), calls for 'better prevention':

We need to tackle the key drivers of poor outcomes, including poverty, poor childcare and early years education, poor schooling and lack of access to health services.

A summary of responses to the Green Paper consultation are set out in *Every Child Matters: Next Steps* (2004a). The consultation process found that there was:

a strong consensus in support of profound change in the cultures and practices of working with children towards a system organised around children, young people and families with a sharper focus on prevention and early intervention. (p. 10).

In the section of the report which sets out the provisions of the Children Bill, however, 'prevention' is a term notable by its absence, replaced now by 'early intervention'. Next Steps reports that in the new legislation children and young people should receive effective help as soon as they need it, with better information sharing, a common assessment framework, lead professionals to ensure clear accountability, and multi-disciplinary teams based around universal services. The Children Bill identifies five broad outcomes for children, commonly known as: staying safe, being well, enjoying and achieving, contributing to society and economic well being. Margaret Hodge, Minister for Children, Young People and Families, said that the Bill introduces "A shift to prevention while strengthening protection" (2004:3). The drawing together of this range of outcomes for children moves the focus away from those children in need of social care services to a wider vision of helping all those children who may be at risk of poor outcomes in later life. In summary, in setting out the requirements for children's services, Government policy is developing a preventative agenda. It is in this context that Children's Fund partnership boards in six case study sites articulated their visions, understandings, and strategies for the implementation of preventative children's services.

CHAPTER TWO

How the Evidence Was Gathered

In this chapter we outline one part of the work of NECF: the eighteen longitudinal case studies of local Partnerships. We explain how we collected evidence in the first six of these studies, how we built-in short feedback loops so that our analyses could inform developments within the Partnerships and how we have analysed the evidence. More detail on the theoretical framework we used is in Appendix 1 and on the process of analysis is in Appendix 2. We also stress that this report has been produced after only eight months of field-work and that the evidence we discuss in the next three chapters needs to be read with that understanding.

2.1 The Eighteen Partnership Case Studies

One strand of NECF's work is to undertake detailed case studies of eighteen Children's Fund Partnerships between January 2004 and the end of 2005. Eight studies are Partnerships funded in Wave One in January 2001, six are from Wave Two and four are from Wave Three funding. The first six Wave One case studies started in January and ended in July 2004. A further six studies drawn from both Wave One and Wave Two are starting in September 2004. These studies are allowing NECF to identify what is enabling and impeding the development of collaborative working for prevention and participation in services for children and young people.

We are gathering information at several levels of activity in the case study sites. The main foci are the Partnership Board or its equivalent, the service providers, the services, the experiences of children and young people and outcomes for them. We are also examining interactions between these layers of activity and are locating them within the wider context of the local authority and its policies and structures, including Children's Trusts, and alongside changes in the national policy environment.

By using Activity Theory as an organising framework (see Appendix 1) we are able to do justice to the diverse histories and contexts of partnerships and to capture how the Children's Fund is informing systemic responses to the problems of social exclusion.

2.2. Selecting the Cases

When we selected the first six case study sites we took account of regional spread and type of local authority e.g. rural, urban, two-tier, metropolitan etc. We also looked for cases where there was strong evidence, in the mapping that we carried out in 2003 (NECF, 2004a), that the Partnership was taking forward the Children's Fund agenda of collaboration and participation in the development of prevention. These cases are therefore diverse, but in different ways present interesting examples of the catalytic influence that the Children's Fund was intended to have in the development of preventative services for children and young people.

When we selected services within each case study site we focused on one area within the partnership so that we could work with several service providers who had the opportunity to collaborate in various ways with each other. In our work with children and young people who used the services we tried to capture their experiences, not only of the services, but also of the environments which these services are attempting to change. Having gathered information from children and young people we were able to revisit services and partnership boards to ask questions which were informed by what we had learnt from the children and young people.

2.3 Working in the Case Study Sites

We worked with each site over a period of approximately seven months. During that period we made at least five visits of around one week each to the partnership. These visits were at four week intervals to allow us to analyse the evidence we had gathered before returning for the next visit. Once we had finished collecting all the evidence we continued the analysis and produced detailed case study reports which we presented to the programme teams and other key players within a partnership.

A typical work schedule over the site visits was as follows. These are in addition to meetings and additional visits to special events such as children's fora and meetings of partnership boards.

Week One: Interviews with members of the partnership board or its equivalent, with the programme manager and with other relevant key players in the local authority. Visits to service providers to set up the research programme with them.

Week Two: Interviews and observations with service providers, identification and initial contact with target children and young people, developmental feedback workshop with partnership board

Week Three: Interviews with caregivers of target children, interviews and other activities with children and young people, developmental feedback workshop with service providers.

Week Four: Ongoing work with children, young people and their families to prepare their contribution to the final developmental feedback workshop in week five. Follow-up interviews with service providers and other key players in the local authority identified during previous weeks.

Week Five: Follow-up interviews with some members of the partnership board and other stakeholders in local preventative strategy. Developmental feedback workshop with partnership board members, service providers and children, young people and families.

Final Visit (after two months): Presentation of case study report to the programme team and others.

2.4 The Developmental Feedback Workshops

These workshops are structured events which are designed to achieve three purposes:

- To give rapid feedback to participants on the evidence we have gathered and the patterns we are revealing.
- To enable us to check our interpretations with participants.
- To provide an opportunity to gather more evidence on different and changing understandings of processes and practices across diverse groups of participants.

The first two points are central to our commitment to share emerging analyses as soon as possible with practitioners and local partnerships so that they can be incorporated immediately into developing practice. The third point calls for a little more explanation.

The two hour workshops are based on a strategy for promoting organisational learning which comes from Activity Theory (Appendix 1). They are structured so that we present evidence we have gathered which reveals differences in understandings between participants, or contradictions between what people have said they want to develop and the means they are using to get there. An example of difference might be two descriptions of the purpose of participation which reveal different ambitions for the participation of children and families in the programme. A contradiction might be that Board members argue that they are aiming at interagency service provision, but are not using a commissioning process that encourages it. We show the evidence as quotations or video clips at the workshop and so create an opportunity for participants to discuss quite fundamental matters in a safe environment.

Differences and contradictions are not seen as weaknesses, but as points from which individuals and organisations learn and move on. Feedback from participants is that the opportunities for guided reflection provided by the workshops have been extremely useful.

2.5 Analysing the Evidence

In this report we are looking across all of the first six case studies to identify the tasks they are tackling, how they make sense of them and what they do. Because the Children's Fund was set up to build on diverse local practices it is important that we capture that diversity and place programmes in their local contexts. We therefore have needed to anchor our analyses within a framework that gives coherence, but can accommodate differences and changing processes. We have turned to activity theory which we explain in Appendix 1.

Our analyses have therefore been driven by key concepts in activity theory, such as what is the partnership working on? What are the expectations that people hold for that kind of work here? We can then look for relationships between these concepts. For example, how are local expectations shaping what it is that is being worked on? As we explained, when we outlined the workshops in 2.4, examining these relationships is an important part of the analysis. (A brief outline of the analytic process is given in Appendix 2.)

2.6 Checking the Analyses

We have done this in four stages.

- Checking themes within the cases in the developmental feedback workshops.
- Checking themes across the six case studies in a workshop with case study programme managers as we undertook the cross case analyses once we had finished collecting evidence in the six sites.
- Checking the themes developed with the case study programme managers with our broader programme manager reference group in another workshop.
- Checking broad themes with targeted groups of programme managers across England to clarify whether particular phenomena were common across similar authorities.

Again we see this process as more than verifying our analysis. It is also an important part of our knowledge management strategy which is based on managing knowledge emerging from the evaluation, and drawing practitioners into the on-going research to help us shape a responsive evaluation.

2.7 Presenting the Evidence

This report cannot be a definitive guide to what works: given that we have only looked at six out of the eighteen case study sites, it is far too soon in the evaluation to build models of effective working. However, we can identify patterns of practice, common themes, differences, tensions, contradictions and examples of how the work of the Children's Fund has been taken forward to support the wellbeing of children and young people. Very much in the spirit of the developmental feedback workshops, we offer these as points for reflection and further learning. We are, of course, very interested to receive reactions from other Children's Fund Partnerships. We have therefore set up an e-mail system on www.ne-cf.org which will allow partnerships to comment on the extent to which the pictures we offer in this report reflect experiences in other Children's Fund Partnerships.

CHAPTER THREE

Developing a preventative strategy

In this chapter we examine the definitions of prevention which were used as the basis of strategy development at partnership board level. We found that a range of understandings of prevention was articulated at strategic level, both within and between partnerships. This chapter investigates how this range of definitions was translated into preventative children's services at a local level. We also consider understandings of prevention at operational level, both in terms of a service-specific focus linked to the needs of the service user, and an extended notion of prevention, associated with an appreciation of resilience and collaborative working for early intervention.

3.1 Developing prevention within a local context

Before examining the development of Children's Fund preventative programmes within the six case study sites it is necessary to understand the context in which these partnerships came into existence. The Children's Fund was developed in a context in which there was little strategic development of preventative services for the 5-13 age group. Strategic partners spoke of 'a myriad of preventative services going on but they would not be co-ordinated, they would not be systematic' prior to the Children's Fund. In the six case study sites we heard that preventative services had historically been under-funded and underdeveloped, with little or no overall strategic guidance.

Consideration must therefore be given to the scale of the task being undertaken by these partnerships. Strategic group members in all six case studies were clear that there is a limit to what the Children's Fund can be expected to achieve, with the funding available perceived to be 'a drop in the ocean against the money that is really needed to deliver good children's services'. Instead therefore Children's Fund partnerships spoke of more modest local objectives in beginning to create the conditions in which a preventative agenda could be developed. In particular the Children's Fund instigated a new strategic focus on prevention, creating opportunities for new partnerships and new ways of working.

The successes in preventative working in the case study partnerships are best understood in their historical contexts. The histories of the six case study partnerships can be mapped against the partnerships' initial Delivery Plans (Table 3.1). Although the Plans did not straightforwardly define 'prevention', they allow us to characterise the partnerships' thinking about prevention at this stage. It is clear from the table that not only were the six Children's Fund partnerships working with a range of historical contexts in relation to the provision of children's services, they were also developing diverse preventative strategies.

The Children's Fund was engaging with a challenging task in refocusing children's services towards prevention. Although some of the partnerships had begun to engage with preventative children's services before the Children's Fund period, for others the Children's Fund was developing preventative thinking from a relatively low base.

	History of the case study	Current model of prevention in the
	partnership	partnership
1	A strong historical strategic commitment to planning and delivering integrated services for children, and an aspiration to change the relationship between statutory and voluntary organisations. This was expressed as a culture shift in progress: much work had been done to build partnerships between voluntary groups and the statutory sector in the provision of preventative services.	Aims to provide a balance between services at the different levels of prevention as set out in part 1 of the Children's Fund Guidance. These aim to address both early prevention (level two), for example supporting children and young people through their transition from primary to secondary school, and heavy end prevention (level three) for example delivering customised services to children and young people with emotional and behavioural difficulties.
2	A high level of agreement on understandings of prevention had been achieved through a long professional collaboration across sectors and agencies. This had been developed through strong formal professional links as well as an informal network.	Moving towards a preventative approach that seeks to configure services around need rather than children and families being signposted to services simply on the basis that the service is available. Currently a move towards greater correspondence between the Children's Fund objectives and the outcomes defined in <i>Every Child Matters</i> and the Children's Bill.
3	A complex history of children's service provision: the Children's Fund partnership board built on an existing partnership, the Children's Services Plan Steering Group, which formed the basis for the Children and Young People's Thematic Partnership. A Children's Board and Joint Children's Unit (responsible for the implementation of policy as directed by the Board).	Shows a commitment to develop a new Children and Young People's Strategy, which will be one strand of the Community Plan - the overarching plan to be delivered through the Local Strategic Partnership. Through these links, the Children's Fund impacts directly on the priority task of raising and delivering aspirations for children
4	Prior to the Children's Fund initiative limited strategic processes or structures were in place to support the preventative agenda, with no one visibly championing the Local Preventative Strategy.	Did not define prevention per se within the Delivery Plan, but identified areas of need. Service delivery work through projects from early in the development of the partnership was orientated around explicit <i>communities of interest</i> (children in interim accommodation, children with disabilities, children from BME communities and asylum seeking children) and around <i>key themes</i> (parental support, emotional wellbeing and play).
5	A history of difficult working relations between the statutory and voluntary sectors at strategic level. In the early stages of planning different agencies brought different, and sometimes conflicting, agendas to Children's Fund partnership board discussions on the development of preventative children's services	Locates itself within a wider preventive strategy that targets children and young people whose particular personal, medical or family circumstances place them at risk of social exclusion. The Plan envisaged a 'web of interconnected preventive services' that set a foundation for sustainable change for children and young people at risk of social exclusion, but also in respect to the preventive strategy more widely
6	Prior to the Children's Fund, a notable lack of any established history of partnership working for prevention in the provision of children's services	Adopted a broad, holistic concept of preventative factors. The aim was to be child-focused, emphasising relationships between the project service users and providers. The preventative approach here can be characterised as a strength-based model of community development, aimed at building children's resilience and capacity to take responsibility for their lives.

Table 3.1 Histories and models of prevention in the six partnership case studies

3.2 Understandings of prevention at the strategic level

As discussed in previous NECF reports (2003, 2004a), the application of the Children's Fund guidance framework has encouraged local debates about definitions of prevention, the identification of children's needs, and criteria for the targeting and assessing of services. For example, the framework enabled partnerships to consider how individual children may move between levels of prevention, how previously unmet needs might be identified and how targeting fitted with addressing broader social issues. Local Children's Fund partnerships developed in diverse local histories of partnership working in prevention. In many partnerships there was a prior lack of engagement with services at Levels 1 and 2 as outlined in the Children's Fund Guidance. In these diverse contexts coherent, explicit and shared understandings of prevention were not easily achieved.

In order to engage further with the strategic development of prevention and early intervention, we asked partnership boards what they identified as the main focus of their activity. In the 91 interviews we conducted with members of Children's Fund partnership boards and other key strategic stakeholders in preventative children's services in the six local authorities, we heard a range of understandings of the notion of prevention. Although there were no clearly identifiable patterns in this diversity of understandings, definitions of prevention differed between statutory and voluntary sectors, between urban and rural settings, and both within and between partnership boards. Some examples of the multiple ways in which the strategic stakeholders constructed prevention are as follows:

- 'services for disadvantaged children'
- 'working with the most disadvantaged children, which can be interpreted as children most in need'
- 'those services that are provided in order to assist children and their families, where there is a risk or a danger that those children would not fully develop educationally, emotionally, or socially, without the provision of some type of assistance'
- 'we probably tended to see preventative services not as a universal service, but those targeted at certain children in need, within the definition of the Children Act'
- 'it means intervention rather than waiting for a whole range of issues to escalate to a point where there must be intervention. I would place prevention in the arena of more universal, non-stigmatising services that, in order to be useful, are developed in partnership with the users.'
- 'service provision away from heavy-end interventions towards earlier intervention and prevention'
- 'prevention is about making children develop an awareness of themselves and their group within the communities so that they can become more self-reliant, happy to be in school, and happy to learn'
- 'prevention is to do with building up self esteem, self worth, self value, so it's engaging the children, giving them time'

Partnership board members portray Children's Fund activity as focusing on good childhood, emotional support, self-esteem, keeping children occupied, and supporting

children in difficulties, among many other definitions and understandings. The partnership boards also acknowledged that in the realities of their lives children have complex levels of need:

'children can have levels 1, 2, 3 and 4 of prevention level needs at the same time within different aspects of their lives'.

Given the complexities of defining 'prevention' and 'need', it was perhaps inevitable that interpretations varied among partnership board members according to agency affiliation as well as personal experience. The difficulties in arriving at a shared and understood definition of prevention amongst partnership boards are covered in detail in a previous NECF report (NECF, 2003)

3.3 Putting preventative strategy into practice

The understandings and definitions of prevention developed by the strategic partnerships were reflected in the subsequent funding of a wide variety of services under the banner of prevention in the partnerships. Even amongst the relatively small number of services we worked with there was much variation, including:

- universal services, for example:
 - Play schemes
 - Crèche facilities
 - Breakfast and After-school clubs
 - Participation projects
- target group led provision, for example:
 - Childminding services for disabled children
 - Family support
 - School transition projects
- services meeting more particular / acute needs, for example:
 - Bereavement counselling
 - Youth Inclusion Support Panels
 - Integration of newly arrived children into schools

Thus within each partnership we observed a range of services, not all of which fit a neatly defined model of prevention. The diversity of approaches to prevention provided a means to ensure increased opportunities for learning, to reconcile the competing ideas and practices of partner agencies, and to therefore lay the foundations from which an authority-wide preventative agenda might be developed.

3.4 Service-specific understandings of prevention

Each of the services observed by NECF primarily developed a notion of prevention with a service-specific focus, based on meeting the presenting needs of their service users. The vast majority of evaluation evidence suggests that Children's Fund services are successfully identifying and addressing these needs. The views of the children, young people and families who accessed these services were overwhelmingly and uniformly positive.

Users reported that many of these services acted as a much needed support mechanism at a time when no other service was either appropriate or available. For example, some families were faced with a range of demanding circumstances and the Children's Fund services provided crucial support. An illustrative response by a mother of two children accessing a particular service was as follows:

'It really does make a big difference. And then come Wednesday morning back to school, back to normal but Monday night we're okay because we're going to (the Children's Fund service) on Tuesday and it's something to look forward to and they love it'.

Another mother faced with the loss of her husband and the responsibility for two school aged children had no support until the service was established:

'I don't know where I would be, the truth be told, if I didn't have some form of bereavement counselling for the children, and I think the children would be not as accepting of the situation, I really do believe that.'

Less targeted services also provoked very positive responses. Location, availability, cost and staff skills were all presented positively across a range of services. For example, the following quotation referring to a new library-based after school club was typical of the parents of service users:

"...because of the proximity I couldn't have asked for anything better really. And the staff are just fantastic, you know. They put up with me and my late arrivals and things like that. And they're doing a cracking job'.

Many projects were felt by service users to be innovative, providing services that had not been available previously. For example, a crèche-based family support project was unique within its area. We spoke to a young mother who had been unable to find a suitable crèche place or counselling service prior to being offered a place at this service.

'I really can't think what I would have done if [the Children's Fund service] wasn't here. I can't think where else I would have gone.'

The above service is also an example of the focus at project level on attempting to fill gaps in statutory service provision. A further example comes from a service provider:

'a lot of the children that come on the scheme are either being bullied at school or they're the ones that blend into the background. They've got slight

problems that are not being addressed because the schools can't afford to do it either'.

Although this is anecdotal evidence of the positive outcomes of Children's Fund services in this partnership, it nevertheless suggests the significant value of these services for the families using them. There is a clear indication that these services are providing support which would not otherwise be available to the families.

3.5 Extended understandings of prevention at the operational level

In addition to addressing prevention by meeting very specific presenting needs, amongst some services there was evidence of an extended understanding of prevention that was based on a wider appreciation of the needs of service users. These understandings are not necessarily partnership-wide or even derived from the Children's Fund partnership. This variation prevents an easy categorisation of models of prevention within the Children's Fund programmes; however some commonality can be seen in approaches taken by services within and across the six sites. These included understandings of resilience and protective factors, and collaboration through sign-posting and referral to other agencies for early intervention. Both of these approaches were rooted in an understanding of how a collective approach to service delivery can lead to improved outcomes for young people. Furthermore both of these approaches can be seen to be variably influenced by the thinking of local Children's Fund strategic partnerships and historically constituted ways of working amongst service providers.

3.5.1 Resilience and protective factors

Several of the Children's Fund services we visited adopted a coherent model of prevention based on an understanding of resilience. Rather than exclusively focussing on the risks factors or environmental hazards that are considered to predispose children to poor outcomes, these services are attentive to the ways in which children, families and communities try to shield themselves from and cope with these adverse circumstances. The services examine how interventions might promote and strengthen those coping mechanisms and, ultimately, prevent negative outcomes. Protective factors can be seen as an umbrella term for the set of within-child, relational and environmental factors that reduce the child or young person's vulnerability to risk, encompassing a number of contributory notions such as self-esteem, the development of positive relationships, and opportunities for safe play. The idea of resilience is therefore based on a holistic view of the child, incorporating a consideration of how risk and protective factors interact and shape each other in relation to an individual child. This dynamic approach thus avoids the simple deterministic depiction of certain risk and protective factors leading to a particular outcome.

Services can be seen to be explicitly working towards an understanding of resilience, as illustrated in Examples 1 and 2.

Example 1 Specia

Special Needs Inclusion Weekend Play Project

Sarah has ADHD and complex health needs. She is bullied at school because of her disability and her social interaction with friends at home is limited by her younger brother's complex support needs. Through attending the weekend play project, she was able to make new friends, which has boosted her self-esteem and might have mitigated an insecure orientation towards other people. Her mother felt that Sarah was also developing social skills which also helped at school, where she was more able to stand up for herself.

Example 2

Ethnic Minority After School Club

The group runs twice a week, in the early evening at a local library and is for children from a single ethnic minority group from three local schools. The children have the chance to use the computers and choose books. The group also take part in day trips during weekends and holidays. The children are encouraged to play relatively freely, socialise with other children and access facilities they may otherwise not be able to.

The welcoming environment and the social contacts that the children experience through attending the group might provide a protective influence against the isolation they may experience in their school and neighbourhood as members of a minority group. As many of the service users are new arrivals into the country, one of the aims of the project has been to integrate these children 'into the new society...they need to learn what the society is all about, because they come from a different country, we have different habits'.

In one case study site the focus on resilience was particularly strong throughout the programme of services, with explicit consideration given to individual, family and community support. This was evidenced in the targets and indicators put in place by the partnership. The targets reflected objectives in the areas of the child, the family, the community and the organisation, all derived from a clear understanding of resilience factors. For example, amongst the projects in that area there was strong evidence of a focus on individual social and emotional well-being. In particular there was a focus on confidence building, and raising self-esteem, and the development of positive relationships, both for the child and the family.

Example 3 illustrates how an understanding of resilience and protective factors has guided the intervention provided for one family by a service within this locality. By explicitly recognising factors representing risk and vulnerability, the service is adopting a more holistic approach towards the problem at hand by understanding both the direct and the indirect contributory factors that must be dealt with. Thus the service has been able to address particular needs and to build links with other services to address further contributing factors that they may be unable to deal with themselves.

Newly Arrived Family Integration Project

Example 3

T and her mother, M, are from Southern Africa and arrived in the area in 2003. T is five years old and had never been to school before arriving in the UK. While living in Africa M was taken into custody. She was raped and tortured during that time. After one month in detention she was helped to escape but only managed to take T with her, leaving her husband and other daughter behind.

Observed Vulnerability

M has lost contact with her husband and other daughter and does not know where they are or whether they are dead or alive. M explained that it was a big shock for them both when they arrived in the area. The difference in cultures and customs was very dramatic. T was understandably very upset about being separated from her father and sister and would frequently cry and ask about them. She was extremely withdrawn and rarely spoke (even in her own language with her mother). Furthermore, T was becoming disobedient at home and her behaviour difficult to manage. M was very depressed and was sleeping a lot. As a consequence, she was spending very little time with T at home.

Provision Developing Resilience

A project worker from a Children's Fund service noticed that there was very little interaction between mother and daughter. Following a period of intensive classroom support mother and daughter are now attending joint sessions with the Art Therapist at the educational support service, who is encouraging interaction between them, in an attempt to improve their relationship. The Children's Fund is promoting resilience by helping T and M to come to terms with the adverse conditions they faced in their country of origin and upon arrival in this country. In addition, the Children's Fund service can be perceived as having recognised the emotional strain on the mother that reduced her ability to respond to her young child's emotional needs and which placed T at risk for an insecure orientation to other people. The effects that the educational support service has had in strengthening the coping strategies of T has been observed in the friendships that T has developed with other children in the school, some of whom have accompanied T to sessions. Since attending the service it is clear that T is happier and more settled at school: "she has very much come out of her shell". She will happily converse in her own language, and is starting to say a few words in English. T is also more comfortable around other people, and is therefore less reliant on her mother. In addition, sessions at the educational support service also seem to have helped to reaffirm her cultural identity, as the focus of many of the group sessions is on countries of origin and differences in cultures (e.g. food, clothing, music, and dancing). In order to address her own traumatic experiences M has been helped by the service to access specialist counselling. M is very aware of the impact of how she is feeling on her relationship with her daughter. The Children's Fund service played a key role in preventing T and M from being compulsorily relocated to a town outside the locality. This has meant that there has been continuity in the support provided for T and her mother. The project has also helped M to access the tracing service of the Red Cross and English language lessons. The Children's Fund service, in collaboration with other services, has hereby contributed to reducing the social isolation of M and T, providing access to activities and centres that help to structure and give meaning to their daily activities and create social relationships from which they can draw emotional support. The positive effect that this is expected to have on the mental well-being of M will in turn increase her capacity to give more attention and care to T.

3.5.2 Collaboration for early intervention

The development of joined-up service delivery is discussed in depth in the recent NECF report: 'Collaboration for the Social Inclusion of Children and Young People' (NECF, 2004b). Multi-agency working is seen to be a necessary element in the development of responsive child-centred preventative services. In order to prevent negative outcomes, services are seen to need to work in combination to address the various needs of an individual child. This report therefore addresses the various models of collaborative working in providing preventative services apparent in the six case study sites, and evidences the various ways in which the projects we visited were creating opportunities for involvement in other services. For example, services were signposting their users to other services, raising awareness of services that were available and appropriate to their needs, and therefore enabling self support. Several services were also found to be making onward referrals to other Children's Fund services and to statutory services. This was a means of ensuring early intervention should a problem be realised, and illustrates a shared focus amongst these services to identify and address the wider needs of a young person, and to ensure a long-term collective input towards meeting these needs. One service user told us:

It's like a springboard here to go and do other things. You get a lot of support across the board but 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

The focus on universal intervention informed the work of a service based at a playcentre, in developing a play-work ethos of universal access within which there was attention to individual needs that may require specific interventions. Where necessary, children and families were then referred on to other services. In the same locality, a community library project also operated on the principle of universal access, providing a safe and affirming space for children, contributing to the development of their well-being. This project provided resources and opportunities that many families might have found difficult to access. Both services, as non-stigmatising universal forms of provision, offered multiple points of entry for children who might be at risk at some point in their life cycle. The regular 'normal' contact these projects had with children meant that the service could identify and respond to early signs of distress or anxiety. The situating of the community library project in existing children's provision also enabled quick referrals to be made to the relevant service. In these examples universal services therefore universal services can be seen to be supporting collaborative preventative activity.

At an individual service level there is therefore an understanding of how they might link with other services, within the Children's Fund programme and more widely. This can be seen as the development of multi-agency working and partnership for prevention through the raising of awareness for cross-referral and therefore the ability to meet the wider needs of their clients. Service providers may not explicitly link this

notion of multi-agency working and cross-referral to prevention but it is clear that the associated increased knowledge of other services available in the area will allow them to better meet the needs of their clients and to signpost for early intervention should a problem be identified.

The recent NECF report (NECF, 2004b) highlights several examples of ways in which collaborative working for prevention has been enabled by the local Children's Fund partnership. In particular structures and processes have been established in order to allow for the development of collaborative ways of working between Children's Fund services, including collaborative forums and thematic and themebased groupings, as outlined in the following chapter. Elsewhere a commitment to this way of working is ensured through explicit criteria within the commissioning framework. In other partnerships such an approach predates the Children's Fund and can be seen to be based on the long-standing practice of service providers. In one partnership, where such an approach was particularly prominent in the thinking of the strategic board, variation between wards reveals the importance of historically constituted practice at service level as the driver for operational collaboration in delivering preventative services. The networks that have been developed over time are strong and productive. The degree of trust built up between different services has meant that children and families can either be signposted to relevant providers, or, where there is a need for more tertiary forms of intervention, referrals can be made. At the time of our evaluation these networks remain largely service-led forms of collaboration. The networks are professionally relevant, enhancing service provision, rather than having been transformed by the various funding frameworks on which these local providers have been dependent.

3.6 Summary

In this chapter we investigated the range of definitions of prevention which were used as the basis of strategy development at partnership board level. This diversity was evident both within and between partnerships. In addition, we examined how this range of definitions was translated into the delivery of preventative children's services at the local level. The key points to emerge here were as follows:

- In the six local authorities, we heard a range of understandings of the notion of prevention.
- This multiplicity of understandings of prevention at the strategic level was further reflected in the subsequent funding of a wide variety of 'preventative' children's services.
- There is a clear indication that Children's Fund services are providing support which would not otherwise be available to the families.
- Several of the Children's Fund services we visited adopted a model of prevention based on *resilience* as the set of within-child, relational and environmental factors that reduce the child or young person's vulnerability.

 Many of the services in the six partnerships were developing preventative strategy by creating opportunities for collaborative engagement with other services.

The next chapter further develops these findings, offering some examples of ways in which coherent models of prevention are beginning to be developed, both at strategic and operational levels, and highlighting some of the tensions and contradictions inherent in this development.

CHAPTER FOUR

Creating the Conditions for Success

In this chapter we explore the mechanisms with which preventative strategy was being developed and implemented in the six partnerships. We summarise the context in which the Children's Fund was establishing preventative services, and ask what structures, processes and mechanisms the partnership boards put in place to achieve better outcomes for children. These included establishing or extending sub-groups with specific remits, restructuring the partnership, and reviewing the commissioning process.

4.1. Balancing current need with prevention

In interviews with partnership board members we heard concerns about the difficulty of balancing response to pressing needs with longer-term preventative strategies within a finite resource. The priority of meeting high-level need was constantly balanced against the importance of putting greater emphasis on prevention. This was a tension which was strongly articulated in one of the developmental workshops with a partnership board:

'we seem to be funded to do one or the other [prevention or acute intervention] and you can't actually stop the funding for crises and cross your fingers and hope that not too many people will die in the five years while prevention and early intervention takes over'.

Although this tension was often spoken of, it was possible to maintain an appropriate balance:

'It is always difficult in education when you've got a lot of schools working with very troubled and troublesome, sharp-end kids, to support those children and do preventative work as well. It's a continuous struggle to balance that out, but we do not put all our eggs in one basket. We do not just do Tier Three and Tier Four work. We do lots and lots of preventative work.'

The tension between early intervention and meeting acute needs reflected an anxiety that refocusing children's services towards prevention demanded an increase in funding if gaps in services were not to develop.

4.2 The perceived status of the Children's Fund

We heard concerns about the perceived status of the Children's Fund within the local authority, and its capacity to influence the broader agenda in children's services. The following examples offer two very different ways in which the profile of the programme influenced the development of a coherent model on the basis of Children's Fund principles.

In one city authority the Children's Fund was described as fitting within a tightly bounded strategic debate regarding the preventative agenda for the city. Thus the Children's Fund was initially seen as a funding stream or budget able to support this drive and lacking the profile to develop its own programme based on Children's Fund principles. The development of a local preventative strategy therefore emerged out of local professional practices, and independently of the local Children's Fund partnership. The main motivation for services engaging with the Children's Fund was to access resources. Funding was seen as enhancing the local preventative strategy that emerged out of a history of local practice, without compromising service integrity, as indicated by one service provider:

'I don't think it would change the way things were done, except that it would give us more access to doing short-term work. I think it was because we felt it was in line with a lot of our objectives and improving kids' health and welfare really'.

In a county-wide authority, the structures of the two-tier council, together with the requirement of the local authority to oversee the grant, had led to local services becoming remote from the strategic group. This 'wheel and spoke' model brought on-going tensions in building a model of prevention. Professional agencies had been leading agendas such as the concept of prevention. For example, the large statutory agencies of Education and Social Services would match the Children's Fund criteria relating to prevention with the requirements of their institution. Thus, local district Children's Fund partnerships were left to think about the conceptual development of prevention as it suited their local situation. A subsequent disengagement of the District Council from the Children's Fund initiative had been identified. This in turn led to disengagement amongst service providers from the concept of prevention proposed by the central steering group. Whilst there was a high level of agreement on understandings of prevention at the operational level, this had been achieved through a long professional collaboration of all the agents involved in the Children's Fund activities in the locality. There were strong formal professional links as well as an informal network of people, and there was also a collective understanding of the needs in the area. Thus an informal definition of prevention which predated the Children's Fund was developed from practice rather than driven by Children's Fund guidelines or local authority strategic development:

'it's terrible to think that if you call it diversion activities you can get money from the Crime Reduction Partnership. If you call it play - forget it. So I use the language to get the money because it creates the reality behind it.'

This pragmatic approach to the implementation of preventative strategy suggests that the Children's Fund was regarded here as a funding stream rather than as a catalyst for change.

4.3 Partnership structures

The development of partnership structures can be seen as a key mechanism in the implementation of a preventative strategy. In particular such structures can be seen to facilitate collaborative working at an operational level, based on an understanding of prevention as requiring several services to work together to meet the various needs of

an individual child. Characteristic of the partnerships' ongoing learning was a review of their structures. This included both far-reaching revision of the overall structures of the partnership, and the development of sub-groups with specific remits. For example, in one partnership the original structure of nine 'themes' had proved time-consuming to co-ordinate. In response to this, and in line with *Every Child Matters*, the partnership board created a structure with just four thematic areas, whose terms of reference and composition were informed by extensive consultation with service providers. The capacity of this partnership board to develop and refine strategic processes exemplified an approach to learning which Board members described as being 'light on its feet'. The development of a co-ordinator role for each theme, and the co-ordinators' representation on the Steering Group, provided a structure for the promotion of vertical learning and information exchange between operational and strategic levels.

In the same partnership thematic group meetings were put in place, and there was emerging evidence that these groups were already functioning to allow collaboration through information exchange about children using Children's Fund services, facilitating subsequent referral between agencies. Opportunities also existed for embedding good multi-agency practice through joint training. One example of this was the way in which the Disability Inclusion Co-ordinator had promoted a change of culture within existing services through training and awareness raising at different levels. Other examples of vertical networking and learning came from partnerships where Board members were on commissioning sub-groups or area monitoring panels. There they worked more closely with providers and users than they could on the larger Board.

Partnerships brought together service providers to develop their capacity. This was achieved through the development of area meetings, in one case initially to develop a plan for their locality, and to encourage partnership working between service providers. In particular, service providers were encouraged to collaborate and submit joint bids for funding. Where area meetings were put in place by partnership boards they encouraged the development of local networks, in an attempt to facilitate multiagency working at the operational level. In several case study sites the role of area or thematic co-ordinator was highly valued by the service providers. In particular area meetings enabled high quality discussion amongst service providers about the development of local networks, and the facilitation of multi-agency working at operational level.

Involvement in locality and theme-based processes contributed to an understanding of how services might link with other services within and beyond the Children's Fund programme. In addition to collectively addressing the needs of the target group, a shared focus on cultural change was evident in some partnerships. This included changing public perceptions of the target group, changing the approaches of statutory agencies to the Children's Fund, and raising the awareness of the needs of the group.

4.4 Commissioning services

In each of the six case studies we found that the commissioning process had been a key mechanism in the implementation of preventative strategy. A crucial dimension

of the partnerships' ability to create the conditions for the successful development of preventative strategy was their ability to reflect on, and learn from, the initial round of commissioning. Partnership board members told us that effective use of learning from the first round of commissioning had enabled them to put in place a streamlined, more coherently structured, and better targeted process for funding services. This learning was particularly evident in relation to the partnership structures at work in the process of intelligent commissioning, and in the targeting of services for key groups. However, we heard from all of the partnerships that the need for a rapid start up to service delivery had caused concerns to local programmes. Difficulties were reported by strategic stakeholders in the six case study sites in trying to deliver quickly on a range of very complex issues, and many of them said that the provision of preventative services would have benefited from an extended period of planning and consultation. This was said to be a particular tension where partnerships were commissioning new services rather than re-funding existing provision. As the partnerships had been required to set up systems to roll out the Children's Fund in a short period of time, there had been little time to plan ahead for effective preventative services.

4.4.1 Structures for commissioning

In the most successful cases, partnerships created the conditions for effective commissioning of preventative services by setting up collaborative 'commissioning panels', which commissioned services against clearly defined criteria. Where members of partnership boards took on a specific commissioning role, a clearly focused approach was put in place. For example, in one partnership a refined approach to commissioning led to service specifications which were underpinned by national Children's Fund principles and sub-objectives. In one of the partnerships external consultants were appointed with a specific remit to develop intelligent commissioning, and to clarify existing roles and responsibilities in the commissioning process. These appointments were highly successful in introducing logical frameworks for commissioning. Here strict monitoring requirements were used to streamline projects which were not delivering preventative services.

Another factor in creating the conditions for successful commissioning of preventative services was the introduction of sub-groups of the partnership board with a specific focus on commissioning. In these cases decision-making about applications for funding became more focused, and this was particularly the case where members of sub-groups devoted considerable time and commitment to developing their role. For example, in one of the partnerships a collaborative commissioning sub-group successfully took responsibility for overseeing the commissioning process, while in another a sub-group effectively took on the role of implementing monitoring and evaluation strategy.

Partnership boards made use of the learning from the initial round of commissioning to put in place sophisticated service specifications, with detailed targets drawn up and negotiated with service providers. This close collaboration with service providers was characteristic of the most successful commissioning processes. In one partnership in particular a collaborative commissioning process was put in place to eliminate the division between commissioner and provider, involving area and thematic task groups

which represented the interests of stakeholders. At their best mechanisms for learning from the initial commissioning process involved co-ordination of a wide range of evidence, including that from formal and informal meetings, from local evaluation, from externally appointed consultants, and from the participation of children and families working with central teams. There was clear evidence that learning systems had been put in place to effectively inform the development of preventative strategy in the Children's Fund.

4.4.2 Targeting services for commissioning

A feature of intelligent commissioning of preventative children's services was a clear and coherent approach to targeting. Successful commissioning was notable where specific groups of children at risk of social exclusion were targeted, in terms of localities and themes. Definitions of the needs of an area or thematic target group were informed by an understanding of resilience and protective factors, through a focus on the needs of the child in the family, in school and out of school, and in their community. One partnership in particular shifted over time from an emphasis on targeting services within localities characterised by deprivation, to greater targeting of services to 'communities of interest', that is, specific groups of children at risk of social exclusion. Another partnership sought to add value to the existing commissioning strategy by targeting 'at risk' children and young people in wards and districts with high levels of deprivation that did not currently receive significant regeneration investment. This involved a mapping of intensity of need against existing provision. Value was also added by targeting identified groups of children that local needs analysis indicated were vulnerable to social exclusion.

Learning from the initial round of commissioning enabled partnership boards to develop targets and indicators in order to set and maintain priority areas of work for funding and to develop appropriate programmes of services. For example, this enabled one partnership to set targets against the Children's Fund objectives, assess project performance and take-up of user groups, streamline projects which were 'not delivering', and consider which preventative services could be mainstreamed. In another of the six case study partnerships, work on target setting was part of a drive to 'stay very close to the projects', ensuring strong accountability, whereas historically projects had been given money and 'allowed to just get on with it'. Ongoing commissioning also provided an opportunity to reorganise structures and programmes to reflect emerging national agendas, such as engaging with the five outcomes outlined in Every Child Matters.

4.5 Summary

In this chapter we investigated the mechanisms which were being used by the case study partnerships in developing preventative strategy. We identified the following features in the creation of conditions for successful implementation of preventative strategy:

- Partnerships reorganised their structures to address the changing needs of their developing programme of services and to facilitate collaboration between services
- Learning from the initial round of commissioning allowed for the development of priority areas of work and a more coherent rationale for targeting services, enabling partnerships to refocus their services towards prevention
- Partnership boards developed sub-groups to facilitate a more focused distribution of decision-making roles
- Locality and theme-based groups were set up to enable more effective horizontal (between services) and vertical (between strategic and operational levels) linking and networking in the development of a preventative strategy
- Collaborative forums enabled services to work together effectively, and where necessary partnerships offered structured support to services, for example in developing their capacity in relation to monitoring and evaluation
- Partnerships were generally reflexive, learning organisations. Systems were developed to enable partnership boards to learn from operational services

The Children's Fund initiative was engaging in a challenging task in refocusing children's services towards prevention. In some of the partnership case studies this was still work in progress. However, the features identified above were positive characteristics of partnerships which were creating the conditions for successful collaborative working for prevention.

CHAPTER FIVE

Mainstreaming Lessons About Prevention

In this chapter we consider the six Children's Fund partnerships in the context of the preventative strategies in their local authorities. We firstly analyse the extent to which the partnerships are considered to be catalysts for change in the development of preventative services in their local context. We also ask what are the factors enabling or inhibiting the development of links between the Children's Fund and broader preventative strategy. Finally in this chapter we identify the partnerships' strategies and challenges for migrating the learning from the Children's Fund to new structures in preventative services, including Children's Trusts.

5.1 The Children's Fund as a catalyst for strategic change

The development of the Children's Fund was widely viewed by strategic partners as a major player in initiating cultural change in the development of preventative services across local authorities. Where this was the case the Children's Fund had been influential in developing a strong strategic commitment to planning and delivering integrated preventative services for children. In one of the case studies the Children's Fund was perceived by those on the board as having great potential to influence the current development of integrated services by ensuring the high profile of prevention. In one of the developmental workshops in which key stakeholders contributed their thinking about prevention, a board member said that the Children's Fund had been identified as a 'test-bed':

'we've used Children's Fund much more I think strategically than as a service delivery programme. It's been about trying out ideas and a lot of that has been about trying out processes. Trying out the commissioning is at least as important, in my view, as any of the specific things we've commissioned'

In another partnership the Children's Fund was regarded as an important catalyst for developing innovative approaches to the provision of preventative services:

'What the Children's Fund has done quite effectively has changed or bent the culture particularly of our statutory partners to be more inclusive, less bureaucratic, more responsive to local need'

Here the partnership board was confident that collaborative work between agencies, and across sectors, was more clearly in place in the local authority as a result of the Children's Fund initiative.

5.2 Challenging current practice and perceptions at operational level

There was evidence that service providers were acting as catalysts for change by challenging practice and perceptions among other agencies. For example, an educational support programme for newly arrived children influenced local schools in

the way they responded to this target group. The service developed new skills and knowledge amongst the teachers with whom they worked. The project staff encouraged each school to 'develop its own approaches and atmosphere, ethos, its own skill base within the school', and thus to build capacity within the schools. The service said that this was already showing signs of success: 'I have different discussions with heads of schools now than I would have had a year ago.' This was reflected in the comments of the head teacher of one school which collaborated with the educational support programme, who described the service as 'fantastic', meeting a need that the school could not otherwise have met, and allowing them to better incorporate increasing numbers of refugee and asylum seeker children into the classroom.

Another service which explicitly sought to challenge professional perceptions and practice was a bereavement service. This service sought to work with children and their carers, carrying out "pre-bereavement work, preparation work for families that are experiencing terminal or chronic illness, life-threatening conditions." This service was premised in a consultation exercise that found that "most families will not want counselling" but that "there isn't anything in the middle; it's either nothing or counselling". As well as offering one to one support the service also provides a training programme for professionals employed within the statutory and voluntary sectors, and in particular from schools, social services and health. In doing so the service seeks "to improve the standards of and access to information for families, so it's not hit and miss as to who is on duty but it's actually part of the protocols that the information is available."

5.3 Migrating the learning to local integrated children's services

In most of the case study partnerships, the board had begun to engage with strategies to facilitate the translation of learning from the Children's Fund to future preventative services in the authority. In Example 4, from one of the case study reports, the Children's Fund was already clearly influencing the Children's Trust agenda, in the 'co-production of a prevention strategy' with other agencies.

Example 4 Promoting approaches to prevention

There was a range of understandings and levels of engagement with the development of the Children's Trust at strategic and operational levels. The Children's Fund was seen by some stakeholders as having an important role in developing the Children's Trust pathfinder bid. The Fund was described as positioning itself as promoting the prevention/early intervention agenda for the 5-13 years age range as well as promoting holistic, innovative and child-focused approaches to prevention. It was also suggested that the Fund had been instrumental in driving the youth crime and antisocial behaviour agenda forward within the Trust. Links between the Children's Fund and the Children's Trust were described as enabling the Trust to take forward lessons learnt from the Fund. The Children's Fund was also seen as having demonstrated success through innovative project-based work supported by the Fund. Some Partnership Board members saw the Children's Fund as a key player in the development of the Children's Trust and felt that good practice and learning could be built on within the emerging structure of the Trust: 'The Children's Fund is inextricably linked to the Children's Trust. I see them complementing each other so

much so that it means that we can embed the practices of the Children's Fund and also use the Trust banner to move things even further forward.' The Children's Trust was also depicted as building on Children's Fund practices and infrastructure. Several Board members saw the Children's Trust as a way to sustain the Children's Fund prevention agenda: 'I think the Children's Fund has sort of volunteered itself and has been accepted as being, you know, a focal point for... the development of the preventative side of the Children's Trusts now. So I think it's relocated itself pretty well within that new structure'. Indeed, an interviewee indicated that the Children's Fund was engaged in the 'co-production of a prevention strategy' with Connexions, Sure Start, the Education Department and the Trust.

In another of the case study partnerships, despite some scepticism about the capacity of the Children's Fund to influence practice and principles in the wider authority, there was evidence of change. Children's Fund services had been successfully mainstreamed, including a service for children newly arrived in the area being taken on by the local authority. Also, an area-based commissioning and appraisal process was held up as an example, with the model likely to be used in future development of initiatives beyond the Children's Fund. Through the Children's Fund it was possible to test a model of commissioning, and to extend this learning at an authority-wide level:

I firmly believe that the re-commissioning process adopted by the Children's Fund has changed the way that we will do business...my mindset is altered by the experience of doing that commissioning

We were collecting data at an early point in the development of Children's Trusts. For this reason not all of the partnerships believed that the Children's Fund had yet been influential in this process. At the time of our fieldwork, strategies to migrate the learning from the Children's Fund to the emerging integrated children's services were not yet fully in place.

5.4 Using evidence in migrating preventative services

In the six case studies it was clear that the Children's Fund was driving the development of a culture of monitoring and evaluation, to develop preventative services on the basis of evidence and learning 'what works'. That is, even where monitoring and evaluation was at a developmental stage, partnership members at strategic level believed that it was important to migrate learning from the Children's Fund on the basis of good evidence of what works in practice. In the excerpt from a case study report in Example 5 there is evidence of a partnership engaging thoroughly with the process of measuring the impact of Children's Fund preventative services. This was a key focus for this partnership, which had commissioned consultants to support the development and implementation of mechanisms to evaluate impact.

Example 5 Measuring the impact of preventative services

The partnership board are aware of conflicting cultures of measuring impacts between statutory and voluntary organisations, at both strategic and operational levels. In particular, there are competing perceptions of what can and should be measured, and the status of different outcome measures. For example, the voluntary sector favours qualitative indicators of whether a user 'feels better' having accessed the service, as opposed to the statutory sector's focus on 'hard targets'. The consultants were therefore briefed to provide a "re-education of people around outputs, outcomes, targets, impacts, helping people to understand the differences", and to develop a "common awareness of what those things mean". Subsequently, through a series of group discussions, services with similar aims or target groups developed a range of collective outcomes. These were then converted into a list of sample targets by the consultants and programme manager that could be used by the service providers if they so wished. Given the lack of experience in developing such measures it was felt that it would be "easier for people to start with something than a blank piece of paper". Through this process each service signed up to between three and five targets, as part of their service level agreement, through which they could now be evaluated. This represents an attempt to reconcile the work of the Children's Fund to the objectives and hard target measures that they are tied to. It was a concern amongst some members of the partnership board that the evidencing of the good work being carried out by the projects might not be easily measured against the broad objectives outlined by the Children's Fund Guidance. With the focus of work being on the nonoccurrence of negative outcomes there are obvious problems in measuring prevention, especially in the short lifetime of the Children's Fund, and in attribution, with the work of individual services impossible to separate from external factors. Instead therefore we can see a shift in focus towards what is measurable in terms of outcomes, through the development of indicators with a basis in resilience and well-being.

The case study report notes the complexity of attempting to measure 'the non-occurrence of negative outcomes'. That is, the partnership engaged with the question of how to measure the success of its preventative strategy. Also, even where clearly measurable outcomes could be identified, the question of attribution was not straightforward. A Board member in another partnership suggested that:

'it is difficult because I can't separate out Children's Fund from Sure Start, On-Track, you know, all the other initiatives I'm involved in. So it's a cumulative effect for us, it's very difficult to single out Children's Fund and say it is Children's Fund that had this effect...it's a cumulative effect from all of the initiatives that are ensuring that we do look at the families and that we do look at the communities'.

Where learning accrued from a process of developing indicators relating to vulnerability, resilience and well-being, this learning was already informing the planning of preventative integrated children's services.

In another partnership which was focusing on measuring the outcomes of Children's Fund preventative services, there were concerns about the practicalities of measuring the effects of the Children's Fund in the long-term:

'it's a highly complex initiative with diverse outcomes, what are the outcomes of the Children's Fund? How do you go about measuring them?'

There was perceived to be a need to be able to measure impact against objectives, not simply by defining targets and measuring against them but also asking more

sophisticated questions. The development of 'hard targets' was said to be insufficiently nuanced to capture the relative success of preventative services.

5.5 Implementing monitoring and evaluation at operational level

One of the challenges faced by partnership boards was in persuading service providers that learning from monitoring and evaluation was a key feature of successful preventative services. Whereas partnership board members at strategic level were convinced of the necessity for effective monitoring and evaluation, they also told us that there was not a strong culture of evaluation at the operational level of children's services. There was often a fear of evaluation on the part of service providers from both voluntary and statutory sectors, especially where existing work had been refunded by the Children's Fund. Although there were pockets of good practice, there was little confidence among service providers about processes of evaluation: 'If you do actually record what you do and what the outcome is, you're very accountable for them'. However, where the local Children's Fund team and the partnership board had invested in building the capacity of service providers to develop monitoring and evaluation systems, this had led them to put in place a mechanism for learning. This process had led to the development of an emergent culture at operational level which accepted the need for monitoring and evaluation.

5.6 Areas for development in establishing the preventative agenda

Some members of partnership boards were not confident that their innovative work in the provision of preventative children's services was influencing the mainstream agenda. In one of the partnerships the Children's Fund was described as 'more influenced than influencing', and 'part of the rich tapestry of children's services', rather than a catalyst for change. However, the Children's Fund was perceived as an agent for change in developing a culture towards prevention. In one of the partnerships a shift in thinking was described to us by a senior strategic stakeholder: 'the talk now really is about Children's Trust learning from good practice and development of the Children's Fund'. Individual service providers, in particular those placed within schools, also perceived themselves as effecting cultural change. In other partnerships, on the other hand, there was scepticism about the influence of the Children's Fund in changing long-established ways of working and thinking about children's services. One board member asked: 'how do you persuade Social Services...to not spend money on child protection and move some to preventative services?' Elsewhere agencies found it difficult to reconcile Children's Fund objectives with their own agenda. Although progress had been made in influencing the broader agenda of preventative children's services, in some of the partnerships there was still much to be done in winning the hearts and minds of long-established services.

In one of the partnerships we were told that for many projects, especially those that have a lower profile than some of the more established initiatives, it was currently not clear where alternative funding would be secured or whether any of the low end preventative work would be picked up by mainstream services or through the Children's Trust. A key strategic stakeholder said: 'the reality is we are not going to

mainstream Children's Fund. Perhaps the exception might be the Police in Schools'. Whilst the Children's Trust was described as a potential vehicle for picking up funding for some of the more successful projects, there was a tension in terms of funding: 'there's no new money, so it's going to be very difficult from the statutory sector's point of view to suddenly say there's none spare, so what do you do, not fund these projects?'.

5.7 Summary

In summary, although we investigated the case study sites at an early stage of the development of local integrated services, the following key learning points emerged:

- the Children's Fund had been a major player in initiating cultural change in the development of preventative services in some areas, developing more responsive practice and extending collaborative working
- in some cases service providers were acting as catalysts for change by challenging practice and perceptions among other agencies
- while in some cases there were clear strategies to enable learning from the Children's Fund to inform future preventative services, this was still at an early stage
- there was a clearly developing culture of monitoring and evaluation, which was most successful where partnerships had developed the capacity of service providers in this area
- there was some scepticism among board members about the capacity of the Children's Fund to influence preventative strategy, as it was being asked to 'punch above its weight', and was only one part of the wider picture of children's services.
- it was difficult to change long-established practices and attitudes towards priorities in children's services.

CHAPTER SIX

Summary

The Children's Fund was developed as a bold and ambitious initiative which set out to put in place preventative services which provide support for young people and their families before they reach crisis, while reducing the future probability of poor outcomes, and maximising life chances. To achieve this across 149 local authorities in England necessitated a shift in the culture and practice of children's services. refocusing provision towards prevention. In the six local authorities in which we conducted case studies, we heard a range of understandings of the notion of prevention, and this multiplicity of understandings at strategic level was reflected in the subsequent funding of a wide variety of preventative children's services. This diversity of provision was a strength of the initiative, as some of the partnerships were able to use the Children's Fund as a test-bed for innovative preventative services. Several of the Children's Fund services we visited adopted a model of prevention based on resilience as the set of within-child, relational and environmental factors that reduce the child's vulnerability. In order to put in place a model of prevention based on the resilience of the child, many of the agencies we visited in the six partnerships were creating opportunities for collaborative engagement with other services. This is based on an understanding of multi-agency working as a necessary element in the development of responsive child-centred preventative services. In order to prevent negative outcomes, services are seen to need to work in combination to address the various needs of an individual child (NECF, 2004b). In each of the case study partnerships we found that new services had been put in place which had been unavailable prior to the Children's Fund.

Another strategy for implementing a shift towards prevention was structural change within partnerships. Steering groups reorganised their structures to reflect emerging national agendas, for example engaging with the five outcomes outlined in *Every Child Matters*. Partnerships were generally reflexive, learning organisations, which streamlined and refined their criteria for targeting services, enabling them to refocus their services towards prevention. Partnership boards characteristically developed sub-groups to facilitate a focused distribution of decision-making roles, and locality and theme-based groups were set up to enable effective horizontal (between services) and vertical (between strategic and operational levels) linking. Collaborative forums enabled services to work together effectively, and where necessary partnerships offered structured support to preventative services, e.g. to develop their capacity in relation to monitoring and evaluation

We found that in some areas the Children's Fund had been a major player in initiating cultural change in the development of preventative services, developing more responsive practice and extending collaborative working. In some cases service providers were acting as catalysts for change by challenging practice and perceptions among other agencies. We identified clear strategies for learning from the Children's Fund to inform future preventative services, although during the period in which we were collecting data this was still at an early stage. There was a clearly developing culture of monitoring and evaluation, which was most successful where partnerships had developed the capacity of service providers in this area. Although there were

recognisable cultural shifts towards a preventative agenda, there was some scepticism among board members about the capacity of the Children's Fund to significantly influence preventative strategy, as it was being asked to 'punch above its weight', and was only one part of the wider picture of children's services. In some cases it was difficult for the Children's Fund initiative to change long-established practices and attitudes towards priorities in children's services.

Our evidence demonstrates that in some partnerships the Children's Fund has been an opportunity to develop innovative practice in the provision of preventative children's services. At its best it has been a catalyst for change, influencing policy and practice for prevention and early intervention beyond the parameters of the initiative. Elsewhere, while the Children's Fund developed a preventative approach within partnerships, there was still a road to travel in influencing the wider preventative agenda in the local authority.

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Appendix 1

Using Activity Theory in NECF

What is Activity Theory?

We need to start with Vygotsky who was working in Russia in the 1920s and early 1930s, he developed a methodology which enables us to access how people are making sense of their worlds. Through his exploration of how tools, both conceptual and material and particularly language, are used when we act on features of our environments he found a way of revealing how minds engage with the world (see Figure A).

But more than that, his work recognised that the use of these tools is shaped in and by the cultures in which they are used: i.e. they are historically constructed. Furthermore, the activities in which we engage, whether they are commissioning a service, or setting up an after school club, call for the use of particular tools. In other words, the contexts in which we operate afford us particular repertoires of ways of thinking and being. Using service level agreements in the commissioning process would be an example of using a tools which have been culturally created.

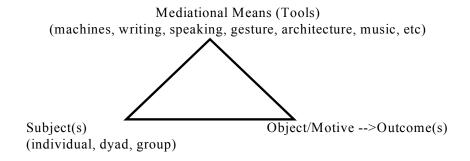


Figure A: Vygotsky's Mediational Triangle

1

Vygotsky died in 1934 before he could develop analyses of how different activities, might lead the shaping of mind, for example, how play as an activity differs from school work in the using of tools. However, one of his former colleagues, A.N.Leont'ev, did elaborate these ideas along with members of his own research team and did so with a focus on how activity can lead the formation of mind and action. That is, the emphasis in Leont'ev's group began to shift towards acts and action in activity as the key to understanding consciousness. Complex differences between Vygotsky's emphasis on language as the route to understanding how we make sense and that of the activity theorists on the primacy of practical activity cannot be dealt with here (see Kozulin, 1986 for one account). Instead we focus on an important legacy of that early work summarised by Leont'ev as follows.

The main thing which distinguishes one activity from another, however, is the difference of their objects. It is exactly the object of an activity that gives it a determined direction. According to the terminology I have proposed, the object of the activity is its true motive.

(Leont'ev, 1978, p. 62)

Here Leont'ev was signalling that the object (i.e. that which is worked on, revealed and understood better) is the key to also understanding the activity, what interpretations of the object are possible and how participants in the activity might act on it. The object, located within a system of activity elicits particular responses which are sustained by the practices of the activity. For Leont'ev the object in the activity is a given: once we have identified it, our function is to explore and understand it better. As we shall see later, Engeström's version of the object in activity theory is slightly different (Engeström, 1999a). To illustrate Leont'ev's ideas by reference to the Children's Fund, we might take commissioning preventative services as an activity of a strategic Partnership Board and the object that is being worked on at one point in time might be early intervention or it might be local identification of needs. Identifying what the Board sees as the object(s) will provide a way into understanding the motives, processes and outcomes of the Board.

Leont'ev's work has been developed to include the idea of an activity system (see Figure B) and applied in analyses of public sector and commercial organisations by Engeström and his group in Helsinki (www.edu.helsinki.fi/activity/). It is now widely used by other teams in Northern Europe and North America. Engeström's contribution can be summarised as a focus on systemic learning through exploring the potential for change or learning within activity systems. This approach is most clearly evident in Developmental Work Research (DWR) (Engeström, 1999b). Here we see how he has developed activity theory through his attention to the transformation of the object. For Leont'ev the object and the motives it elicited were the way into an understanding of activity and of mind. Whereas for Engeström, both the object and the activity system are not simply givens to be explored by psychologists, but are systems which are open to change and constant reinterpretation by participants within them. Engeström has therefore used the conceptual tools of activity theory as a way of both understanding and promoting systemic learning.

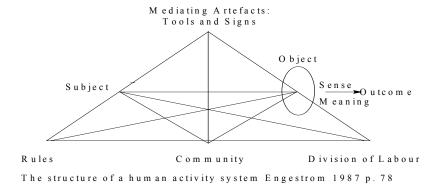


Figure B: Engeström's Model of a Single Activity System

Developmental Work Research

DWR is a structured intervention over time in an activity system. It involves a cycle of ethnographic investigation and organised feedback through a series of what Engeström terms 'change laboratories' with participants in the activity system. The labs are set up to use the ethnographic evidence as the basis of informed reflection on, for example, interpretations of the object of the activity system and the historical construction of the rules which shape these interpretations. They also enable an exploration of contradictions between, for example, the tools or strategies in use and the interpretations of the object. In these sessions the activity system is examined, understandings of the object expanded, objects are transformed and, sometimes, new objects are revealed. Over a series of labs, participants are taken from explorations of the past, to analyses of the present and the contradictions within it, then on to building models of future practices and interactions.

Activity Theory in NECF

In NECF it is possible to see the influence of both Leont'ev and Engeström. Following Leont'ev we have taken the analysis of activity as a way of gaining some common purchase on the interpretations of the object in quite different activities in different partnerships. Working back from interpretations of the object we have been able to build up a picture of relationships between local histories of partnership working and, for example, particular ways of developing the Children's Fund initiative. This work was started during our mapping of provision in the first year of the evaluation and is being continued in our present in-depth case study work.

However, we have also drawn heavily on Engeström's development of activity theory. Firstly, because of our commitment to participatory research and to careful management of the knowledge generated by NECF into the initiative we have turned

to his model of interventionist and transformatory research and have employed some features of DWR in the case study work. In addition, we have pursued his attention to systems as learning zones (Engeström, 1987). We are interested in how the systems we are examining generate and use knowledge, how knowledge use is regulated and how they are learning. This element of Engeström's analyses of expansive learning has informed both the early mapping of provision and the construction of the case studies.

We have therefore employed the conceptual resources offered by activity theory to shape the evaluation and to address the challenges outlined earlier. In doing so we have evaluated the tools themselves. We now turn to a more detailed examination of how these resources have been used.

How NECF has Used Activity Theory

The first year of the evaluation focused on a mapping of provision and one element of the second and third years of the Birmingham based work will consist of eighteen case studies of partnerships across the nine regions that comprise England. We have drawn on activity theory in both phases of the evaluation.

Here we shall discuss how it has helped us to deal with the following issues which are key to the valuation.

- Analysing Diverse Arrangements
- Ensuring Participation
- Reflecting Complexity

Analysing Diverse Arrangements

NECF intends to build conceptual models of what makes for good multi-agency working to deliver preventative services for children. This aim requires us to capture the inter-relationships that exist in each Children's Fund Partnership and to relate them to priorities for the Partnership and to outcomes for children and young people. In activity theory terms we want to access how Partnerships as systems are producing particular ways of working with and for children and young people.

We have turned to activity theory because, by examining the object of the activity in each Partnership, we are able to reveal both the purposes of each Partnership as an activity and how those purposes have been produced. Here we are drawing most closely on Leont'ev's initial working of activity theory as a way of understanding the interplay between the object and the possible interpretations of it and actions on it within particular activities. We are building up descriptions of Partnerships which are based on the interactions of, for example, their previous history of collaborative working, the expectations of stakeholders, the sharing of responsibility and the strategies in place to achieve multi-agency, participatory (i.e. co-constructed) preventative services.

So far we have achieved this in two ways. The telephone interviews with the 149 programme managers in phase one of the evaluation were based largely on activity theory. For example, we asked about previous histories of partnership working in children's services in the local authority, we explored strategies in place for achieving multi-agency, co-constructed provision and we elicited differing interpretations of prevention. In the interviews we also looked to Engeström's more systemic analyses and explored the extent to which each partnership could be seen to be a learning zone i.e. a place where knowledge was both generated and used to take forward understandings of prevention.

The evidence we gathered was coded using a system that was based on the theoretical framework, but which was also grounded in the responses made by the programme managers. The analyses of the coded data enabled us to produce a national picture of the impact of the Children's Fund across the three waves of funding at one point in time. More details of the analysis and findings are available in NECF (2004).

The mapping in the first year of the evaluation necessarily produced a snapshot. One use of the snapshot has been to direct the sampling of the case study partnerships that we are exploring in the final two years of the evaluation. To enable the sampling we used cluster analysis on the coded data to categorise partnerships according to their configurations, processes and interpretations of prevention.

The eighteen case studies have been designed to capture specific inter-relationships within partnerships over time. We are able to move on from the analyses of the perceptions of partnership working revealed in the interviews with programme managers to examine strategic multi-agency working over time. Over the period we are in the case studies we are also able to drill down from the strategic level to the work of service providers in specific localities and to capture the experiences of children, young people and families in their communities. Again following Leont'ev, we are exploring the object of activity in each form of Children's Fund service provision in each targeted neighbourhood and how in turn these have been constructed and influenced by the priorities of the Fund and local strategic interpretations of it.

We are therefore able to follow trails of thinking from strategy to operation, examine disjunctions and explore inter-service co-operation. In exploring co-operation between services the evaluation draws on a further elaboration of activity theory undertaken by Engeström. Often referred to as 'third generation activity theory' (Daniels, 2002) it provides a framework for exploring how two or more activity systems, in this case service providers, construct interpretations of a common object, in this case children at risk in a specific community.

In brief, we are able to examine both vertical and horizontal connections between the systems that seek to deliver the Children's Fund in one local authority, to reveal common themes between case study sites and to begin to build models of what makes for partnership working that delivers.

We have handled the qualitative evidence we have gathered though interviews and field notes in the case study sites by coding them using codes derived from activity theory. This work is carried out between monthly visits to the case study sites. We are consequently able to identify material to inform the workshops we shall describe in the next section.

Ensuring Participation

Each case study has been designed so that we make five visits of around one week each to each site at four weekly intervals. Each four-week cycle involves one week of intensive data collection (involving two to three researchers), followed by three weeks of intensive data analysis. In the first week in the case study sites we gather evidence from key strategic players and during the second week in the site we feed our initial analyses back to them and gather evidence about service provision from providers. In the third week of fieldwork we feedback to the service providers and start to explore the experiences of children and young people in the target neighbourhood.

We then work back out from the experiences of the children and young people in a process of progressive focusing in interviews in week four with service providers and week five with some of the strategic players. We start to make contact with children, young people and their families in second week of fieldwork and in the fourth week we work with them to help them prepare to feed back to a mixed group of strategic people and service providers in week five. We then write up individual case study reports and return them to the partnership board or its equivalent in the case study site for discussion. We expect that service providers will also be invited to join in this discussion.

Through the system of regular feedback we are aiming at capacity building and through involving children in the feedback and in shaping our interpretations of the work of the service providers and strategic groups we have built participation into the design of the cases. The processes of progressive focusing in case study work is not unique to activity theory. We will therefore focus on the feedback workshops, how they are structured and how they inform the evaluation.

We are using the structures of DWR sessions but, because we are working with different groups every four weeks, we are not using the sessions to explore the object of the activity system over time and to transform in interaction with participants. Nonetheless our experience is that the developmental workshops that we are running do enable informed reflections on the nature of the object and do surface contradictions which are usefully explored by participants.

Like Engeström, we organise our sessions as two hour events where we draw on the ethnographic evidence we have gathered to explore past and present interpretations of the object(s) of activity. We find that there is rarely time to move towards modelling future possibilities, but intend to make this a feature of the final feedback session when we discuss the case study report. We see the purposes of these sessions as threefold: to give rapid feedback to participants in a way that also enables capacity building, to check our initial analyses and to examine the tensions and contradictions within the activity system that are emerging in our analyses. The workshops are therefore filmed and are themselves analysed.

The sessions are designed so that we offer what Engeström terms mirror data i.e. evidence gathered from the people who are in the workshop which has been organised according to the principles of activity theory. During the sessions we present our interpretations in a way which is structured by Engeström's activity system framework. For example, we may find that several interpretations of the object of the activity are in play and that these are related to different ways of working or earlier expectations of what the Fund might do. We can therefore explore contradictions using the framework as a visual map. We select evidence to present which reveals strong themes and emergent contradictions and move slowly around the framework to allow for maximum involvement of participants. We want to hear how they are making sense of our initial analyses. Their comments are noted throughout the session and if there is time they are used to begin to model possible futures. We focus particularly on the object(s), and examine how particular interpretations are produced within the activity that is the local Children's Fund programme.

We are certainly finding that this form of developmental workshop is a useful way of exploring systems dynamics, while ensuring that we are feeding information rapidly back. We are particularly excited about how we have involved children. We have worked with them, and sometimes their carers to create a range of artefacts. These artefacts become mirror data and allow them to reveal to the adults who are making decisions about services what really matters to them about social exclusion and what might be done to promote the aims of the Children's Fund locally. Materials include illustrated maps of their neighbourhoods, photo collages and short filmed narratives. These are presented to the mixed group of strategic players and service providers that meets in the developmental workshop in week five.

Reflecting Complexity

Doing justice to the responsiveness, or otherwise, of systems to changes in the policy contexts in which they are operating requires a framework that is perhaps less focused on the internal dynamics of an activity system. Activity theory very usefully enables an exploration of historicity, for example how current practices and interpretations are grounded in local histories. However, when we are following the trajectory of a changing system in real time we have found that we need to look beyond the frameworks currently offered by activity theory to capture broader policy influences that are also informing the strategies or tools available and possible interpretations of the object.

By looking out to and examining the networks in which these systems are located in their local authorities, we can pursue how each local programme as a system is accommodating features of the wider policy context. We are then able to follow trails of thinking from outside the system as they work their way into the actions of participants in the system and are both shaped by and shape the system.

We have also described resilience as a complex accumulation of characteristics which are likely to result in a disruption of a trajectory of exclusion. To access the building of resilience we are focusing on the trajectories of a limited number of children or young people in each case study site. We are exploring with them and their carers their resilience, their experiences of Children's Fund services and of other services and the extent to which these are complementary. We are particularly interested in the

extent to which children and their families are experiencing joined up services as a result of multi-agency working and in whether they do engage in the co-construction of the services they are accessing. In activity theory terms we are exploring the object of the activity with the children whose trajectories of exclusion are the objects of the activity of service providers and we are discussing with them the nature of the division of labour within both service provision and at a strategic level.

How Useful is Activity Theory?

We are using activity theory in two ways. True to Leont'ev's earlier work we are using it as way of revealing interpretations and motives, but even here we are drawing heavily on the systemic framework provided by Engeström (Engeström, 1999a) to structure both our survey of provision and the case studies. The design is also clearly informed by Engeström's notions of systemic learning and change. We have found these to be entirely compatible with our intention that knowledge generated in the evaluation should be fed back quickly to participants and that service users should have an important part to play in the development of the evaluation.

We are also finding the framework sensitive to local differences in history, intention, processes, structures and outcomes for children. We remain confident, therefore that by anchoring our case studies in activity theory we are going to be able to identify robust models of effective partnership working which may inform the development of multi-agency working more generally.

Appendix 2

Analysing the Evidence

The Nature of the Evidence

Evidence was gathered in recorded structured interviews with members of Partnership Boards, the central team, sub-committees, other local stakeholders, service providers, children young people and their carers.

In addition, we examined documentary evidence, including plans, minutes and reports. We made field-notes at events, took photographs of activities and worked with children in a variety of ways to elicit their understandings of their worlds and experiences of the Children's Fund and other activities. We filmed the developmental feedback workshops and have been able to analyse transcription of these.

We have also been able to draw on monitoring data for most of the period prior to our work in the six sites and have been given access to other databases by local monitoring staff and or evaluators.

The Analyses of Transcripts: Board Members, Providers and Programme Teams

We dealt with evidence from Partnerships Boards and providers in very similar ways.

Evidence from the partnerships We wanted to understand how partnerships were operating as systems, how they interpreted the object of their activities, what they used to work on them and transform them, who was involved, who did what and how history and expectations shaped actions.

Evidence from the service providers We wanted to understand how projects operated as systems but we attempted to reveal whether or not and how they worked with other providers to give support to children, young people and their families.

In order to carry out the systemic analyses we undertook 14 stages of analysis.

- (i) We used Nvivo software to enable us to tag sections of the transcribed interviews using a coding system derived from key concepts in activity theory (Appendix 1). For example, section of talk may be labelled 'tool' if it contained a discussion of a commissioning strategy used to achieve a participative approach to service provision, where participation was the object that was being worked on.
- (ii) We then read across the coded sections in each interview to build up a picture of the tensions and contradictions revealed within the interview. As a result of that reading we produced a summary of the key points from the interview.
- (iii) This task was followed by reading across the summaries to build up a view of tensions, contradictions, interpretations and so on across the interviews from, for example, all Board members. We could explore themes and differences in more depth by returning to the tagged interviews to select, for example all references to tools or objects across the interviews.

- (iv) These analyses were undertaken within each case study by field teams, who then constructed sets of mirror data from the evidence they had gathered to feedback to interviewees in developmental feedback workshops during the subsequent site visit.
- (v) The feedback workshops provided additional evidence and also allowed the research teams to check with participants their interpretations and the pictures they were building.
- (vi) Stages (i) (v) were repeated with the evidence from the service providers.
- (vii) Prior to the final feedback workshop, research teams looked across the analyses from Boards and providers to examine differences and tensions. These were taken into the workshops as mirror data for further discussion along with evidence from children and families.
- (viii) The analysis became increasingly systemic as evidence was gathered from more layers of action in each case study. Particularly, evidence from children young people and their families was used to give focus to examinations of joined-up and responsive service provision.
- (ix) Once site visits had ended we looked across the six cases to examine common themes and patterns as well as differences.
- (x) These themes were then shared with programme managers from the six cases and in a separate workshop with the NECF programme manager reference group. These meetings were used to check the broader relevance of the themes and to invite alternative interpretations.
- (xi) A fully systemic analysis was brought together for each case study, drawing on activity theory concepts and cross case comparisons, in reports which were fed-back to the programme managers and the Boards in each case study site.
- (xii) These reports have formed the basis of the present report, however, because of the specific focus of this report we have also returned to initial summaries and codings to provide evidence of themes that are emerging.
- (xiii) Themes in the present report were emailed to targeted programme managers, in similar localities, in order to check their broader resonance and to ensure that NECF continues to be informed by the broad experiences of the programme.
- (xiv) Finally readers of this report are invited to respond to questions about the broader relevance of our analysis which are located at www.ne-cf.org

Analysis of Transcripts: Children, Young People and Families

We did not apply a systemic activity theory analysis to the evidence that we gathered from service users. (n = at least 10 in each case study site.) Nonetheless we were keen to discover what they saw to be the most relevant object for service providers, for what outcomes and how those outcomes might be achieved. Our main focus, however, was to examine their trajectories in relation to the opportunities to engage that were available to them. We therefore aimed at revealing their capacity for what we termed 'deliberative agency' i.e. being able to take control over their own trajectories, knowing how they might draw on available resources to support them and their ability to assess where they were.

In line with the theoretical framework driving the systemic analyses we examined their ability to recognise and use the 'affordances' for action available to them and their 'dispositions' to engage with them. When we looked at both affordances for action and disposition to engage we saw disposition as a socially supported pathway of participation in sets of practices. We were therefore interested in the sets of practices made available to children and young people by Children's Fund services and how they were supported as they engaged in them.

Evidence was gathered in recorded discussions with children during a range of activities including photo collages of their neighbourhoods, using a structured self-report book, story telling activities and so on over three of the visits to each case study site. Carers were also interviewed and these interviews were also transcribed.

Researchers were at pains to build constructive relationships with children and their families over time. They used a broad range of evidence to write up the children's trajectories as case reports which connected children and their families to the resources available to them in their communities in order to identify the particular contribution of Children's Fund services.

In addition the research teams worked with children and young people to elicit specific messages for providers and Partnership Boards. These messages were then presented as video clips, collages, and sometimes in person, as mirror data at the final developmental feedback workshops.

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