



**NATIONAL  
LOTTERY FUNDED**

# Evaluation of the Big Lottery Fund Improving Futures Programme

## End of Year 4 Report



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# Executive Summary

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## Overarching conclusion

The Improving Futures programme was funded to test whether partnerships led by Voluntary, Community and Social Enterprise (VCSE) organisations could improve outcomes for children in families with multiple and complex needs, by developing tailored and joined-up support to families and sharing best practice with public services. The evidence from the evaluation is that the programme was largely successful in meeting these objectives, albeit with a large degree of variation in what was tested and rolled out across the 26 local projects. The programme was an effective showcase for VCSE capabilities in service design and delivery, rather than playing an ancillary role to public services. It also provided numerous case studies of effective local problem-solving, and demonstrated the importance of schools and family services working together in partnership.

The Improving Futures programme was launched by the Big Lottery Fund ('the Fund') in March 2011. The programme provided funding to 26 pilot projects across the UK, to test different approaches to improve outcomes for children living in families with multiple and complex needs. The programme was originally £26m, though the Fund extended the programme in March 2015, bringing the total value of the programme to £30.5m, providing each project with a total grant of on average £1.07m<sup>1</sup>. The programme had three aims:

- Aim 1: New approaches to local delivery that demonstrate replicable models which lead to more effective, tailored and joined-up support to families with multiple and complex needs
- Aim 2: Improve outcomes for children in families with multiple and complex needs
- Aim 3: Improve learning and sharing of best practice between public services and VCSEs

In October 2011, the Fund awarded an evaluation and learning contract to a consortium led by Ecorys UK with Ipsos MORI, Professor Kate Morris and Family Lives. The evaluation was funded over a six-year period. The aim of the evaluation was to provide a robust and independent evaluation of the effectiveness and impact of the programme. It included continuous learning and dissemination activities.

This report covers the final year of the evaluation. The report provides an assessment of the programme's achievements against its three aims. It includes a full analysis of all the quantitative and qualitative data, and brings together the findings from the previous interim reports.

A synthesis report, providing an overview of the main evaluation findings, and the previous evaluation interim reports, can be found at: [www.improvingfutures.org](http://www.improvingfutures.org).

This summary is outlined as follows:

- Programme design and implementation
- Outcomes from the programme
- Improved learning and sharing of best practice
- Estimating the return on investment
- Conclusions and recommendations

<sup>1</sup> Exact figure £1,065,839.92.

## Programme design and implementation

Broadly speaking, the Improving Futures programme achieved its first aim of establishing ‘New approaches to local delivery, demonstrating replicable models which lead to more effective, tailored and joined-up support for families with multiple and complex needs’. Although the 26 projects were quite varied in their specific focus and delivery models, they were broadly offering one-to-one and group family support, which had a therapeutic focus that was often regarded as offering an alternative to other types of family provision in the local areas. In this regard the projects filled a gap in local provision.

Overall project workers, families, and local stakeholders reported that the projects were developing approaches that were leading to effective, tailored and joined-up support. The Improving Futures principles summarise the approaches (see **Table 1**); central to this was the relationship between the families and their key workers, which was dependent on the personal qualities of the key workers, particularly in being respectful, approachable and personable.

**Table 1: Improving Futures Principles**

1. **Relationship-based:** Having a single key worker building relationships and trust over time, adopting a respectful approach
2. **Participative:** Active participation by families in assessment and service planning
3. **Whole family:** Working with the whole family to identify and address needs
4. **Working at the families’ pace:** Flexible and variable support, working alongside the family and responding to their changing circumstances
5. **Strength-based:** Building families’ self-belief, resilience and capabilities to manage their own lives
6. **Supported referrals:** Supporting families to engage with other services, including acting as an advocate
7. **Support networks:** Building links with other peers and the community

In some areas the projects did struggle, however. To a certain degree there was a mismatch between the project design and the families they were referred; project workers in particular described how families’ needs were more complex than they envisaged, and projects struggled with providing families with enough support to meet their needs whilst meeting their projected figures and the needs of other families waiting for support. Coupled with this, projects did not always provide completely holistic support, and some would have benefitted from recruiting key workers more experienced in providing intensive whole family support, and focusing on adults (particularly fathers) as much as they focused on children. Finally, the projects had mixed success in sustaining beyond the period of grant funding, and replicating the model. Despite generally being well regarded by other local services, the evaluation evidence suggests that comparatively few of the projects were sustained or replicated within the funding period. The rarer exceptions of this included where projects had secured follow-on funding from local authorities (LAs), clinical commissioning groups (CCGs) and schools.

## Outcomes from the programme

Overall, the outcomes achieved by the Improving Futures projects were positive, and the programme broadly achieved its aim of improving outcomes for children in families with multiple and complex needs. The projects supported a vulnerable cohort of families with almost two thirds (61%) headed up by lone parent, and facing a range of risk factors, mainly related to:

- parenting difficulties (a risk for 64% of families on entry);
- stress and anxiety (almost half of adults (46%) and one third of children (33%);
- child behavioural problems (e.g. over a third (38%) of families had children with low-level behavioural difficulties and a quarter had children with persistent disruptive behaviour);
- domestic abuse (19%); and
- educational underachievement (19%).

In the short term, the projects achieved a good level of progress in reducing the risks that were the most prevalent when families first entered the programme; eight out of 10 of the most prevalent risks saw reductions for families. For example:

- parenting difficulties reduced by a third (from 63% to 43%); and
- families with children with persistent disruptive behaviour fell by two fifths (from 25% to 15%).

Moreover, families' strengths increased in a wide range of areas, including:

- the percentage of children who were regularly participating in sports and leisure activities increased by over two thirds (from 23% to 39%);
- the percentage of children who had active and regular supportive contact with friends or community members increased by over half (from 29% to 45%); and
- the percentage of families with a family budget in place that was being actively managed increased by over half (from 33% to 50%).

Our analysis allowed us to explore the factors affecting positive outcomes, and we found a positive relationship between the time that families spent on the programme and the average level of reduction in risk and increases in strengths. Outcomes were also greatest for children qualifying for Free School Meals (FSM), when compared with the non-FSM group.

Despite these positive outcomes, the projects experienced less success with adult outcomes in general, specifically gains in employment and mental health.

For the families completing the beneficiary survey, outcomes were generally sustained in the longer term, particularly those related to children. However, for a substantial minority of families some outcomes deteriorated, such as financial problems, housing problems and stress and anxiety.

## Improved learning and sharing of best practice

The Improving Futures programme largely achieved its third aim of improving learning and the sharing of best practice between public services and VCSEs. The programme provided opportunities for the delivery partners to collaborate with other VCSEs and public services. Although not explicitly pursued by most projects, this collaboration led to the sharing of learning between the partners, other VCSEs and public services. The main services to have benefited from the knowledge transfer seem to have been schools; they learnt more about how to support children with behavioural difficulties and how to engage with the whole family. Local authorities also learnt a lot from comparing their family support with the approaches adopted by the Improving Futures projects.

In most cases this knowledge transfer was tacit and intangible; it led to a greater understanding about how to support the whole family at an early intervention level. However, it did not necessarily change specific delivery models or approaches.

## Estimating the return on investment

The Cost Benefit Analysis (CBA) for the Improving Futures programme found that the programme expenditure when the CBA was undertaken was £24.7m. This led to quantified benefits over two years of £13m. Overall, therefore, the programme generated a quantified benefit of 53 pence for every £1 spent by the Big Lottery Fund.

This is likely to be an underestimate of the true savings from the programme. Although the approach also underestimates the true cost of running the programme too (because not all indirect costs were captured), overall we believe the CBA underreports on the programme savings (as the monetary benefits of some outcomes have not been included, the model does not include long-term sustained outcomes and because the CBA included the savings from reduced risks, but not avoided risks).

Therefore, on balance, it is the view of the evaluators that, although the Improving Futures programme did not appear to lead to a net benefit in terms of short-term cost savings, the potential for it to have contributed to future longer-term savings means that it was a worthwhile investment.

## Conclusions and recommendations

The Improving Futures programme was funded to test whether VCSE-led partnerships could improve outcomes for children in families with multiple and complex needs, by developing tailored and joined-up support to families and sharing best practice with public services. The evidence from the evaluation is that the programme was largely successful in meeting these objectives, albeit with a large degree of variation in what was tested across the 26 local projects. The programme was an effective showcase for VCSE capabilities in service design and delivery, rather than playing an ancillary role to public services. It also provided numerous case studies of effective local problem-solving, and demonstrated the importance of schools and family services working together in partnership. The effectiveness of this type of intervention might be improved by strengthening the involvement of adult services, to rebalance the emphasis of Improving Futures on the child within the family, particularly in supporting adults into employment.

## Recommendations

In looking ahead, the evaluation offers a number of recommendations for future policy and practice development in this area. These are as follows:

Recommendations for funding:

- Recommendation 1: Build bridges between schools and family services
- Recommendation 2: Create space for innovation and reflective practice

Recommendations for service delivery:

- Recommendation 3: Invest in the early intervention workforce
- Recommendation 4: Track and compare outcomes to understand change for families
- Recommendation 5: Develop a stronger role for adult services
- Recommendation 6: Engage local commissioners to ensure sustainability
- Recommendation 7: Increase focus on support for adults, particularly fathers

# 1.0 Introduction

The Improving Futures programme was launched by the Big Lottery Fund ('the Fund') in March 2011. The programme provided funding to 26 pilot projects across the UK, to test different approaches to improve outcomes for children living in families with multiple and complex needs. The programme was originally £26m, though the Fund extended the programme in March 2015, bringing the total value of the programme to £30.5m, providing each project with a total grant of on average £1.07m<sup>2</sup>.

In October 2011, the Fund awarded an evaluation and learning contract to a consortium led by Ecorys UK with Ipsos MORI, Professor Kate Morris and Family Lives. The evaluation was funded over a six-year period. The aim of the evaluation was to provide a robust and independent evaluation of the effectiveness and impact of the programme. It included continuous learning and dissemination activities.

This report covers the fourth and final year of the evaluation. The report provides an assessment of the programme's achievements against its three aims. It includes a full analysis of all the quantitative and qualitative data, and brings together the findings from the previous interim reports.

A synthesis report, providing an overview of the main evaluation findings, and the previous evaluation interim reports, can be found at: [www.improvingfutures.org](http://www.improvingfutures.org).

Throughout this report, the term 'parents' is used as shorthand for the diverse range of caring roles and responsibilities encountered within the programme. Adult caring roles included birth parents, adoptive or foster parents, grandparents and other extended family members with legal guardianship of children who were supported by the projects.

A detailed overview of the methodology, the indicator set, and a summary of all the projects is provided in the annexes. Given the length of the annexes, these are available in a separate document – the Technical Report - which can be found at: [www.improvingfutures.org](http://www.improvingfutures.org).

## 1.1 The Improving Futures programme

Following a period of consultation, the Fund chose to target the Improving Futures programme at improving the wellbeing and life chances for children growing up in difficult circumstances – a policy area where the Fund felt there was considerable scope for further innovation and testing to establish 'what works' in bringing about sustainable change. The programme was particularly focussed on families where there were multiple and complex problems relating, for example, to unemployment, debt, poor housing conditions and health problems.

<sup>2</sup> Exact figure £1,065,839.92.

The overall aims were to achieve the following:

**Aim 1:** New approaches to local delivery that demonstrate replicable models which lead to more effective, tailored and joined-up support to families with multiple and complex needs

**Aim 2:** Improved outcomes for children in families with multiple and complex needs

**Aim 3:** Improved learning and sharing of best practice between public services and voluntary and community sector organisations (VCSEs)

The Fund also required that the grant funded projects were:

- ambitious and impactful;
- led by the third sector but supported by statutory services;
- offering a broad range of services;
- adopting a joined-up approach; and
- including mechanisms to engage the 'hardest to reach' children and families.

Two criteria in particular influenced the approaches taken by the projects to identify families and assess their eligibility for support:

- **A discretionary approach towards assessing needs:** The Fund allowed grant holders to identify those families most in need of support. This meant that, although the projects supported families with broadly similar challenges (see [Table 3.3](#)), some focused on specific sub-sets of families; this included families suffering from or escaping domestic abuse; or from specific minority ethnic communities. In the main, projects supported families whose needs were beginning to escalate and could not be met by universal services. A small number of projects focused on families whose needs were becoming more acute but who did not meet thresholds for statutory provision.
- **An age-based criterion for eligibility:** An age range of between five and ten years was initially placed on the oldest child at the entry stage. The rationale was to focus the programme on those children who fell between the gap for 'early years' and 'youth' provision. It was also to ensure a strong focus on partnership working between family-focused organisations and primary schools. This resulted in less involvement of youth sector organisations and providers with a focus on older age groups. In March 2015 the Fund removed this age restriction, following feedback from projects about the limitations this placed on the families they could support; this has been reported in the previous evaluation reports.

The age limit, coupled with the possibility of engaging at a lower level of need, combined to give the programme an 'early intervention' feel.

### 1.1.1 The Improving Futures projects

A total of 26 projects were funded within the programme,. The projects were diverse in their structure, target groups and models of support and intervention, within the broad programme. They ranged from 'whole family' assessment, planning and support, to classroom-based provision for pupils, mentoring activities, and capacity building actions such as the provision of training for families as community practitioners and 'asset' or resource mapping at a local level. A summary of the individual projects is provided in [Annex XII](#).

**Table 1.1** outlines the geographical spread of the projects. In the majority of cases, the projects operated within clearly defined geographical areas, such as school and community clusters or localities / wards with a high level of socio-economic disadvantage.

**Table 1.1: Geographical coverage of Improving Futures projects**

England	Camden, Croydon, Cheshire, Enfield, Hackney, Haringey, Hertfordshire, Lewisham, Portsmouth, Manchester, Sunderland, Southend, Tyneside, Wandsworth, Wolverhampton, Worcestershire
Wales	Bridgend, Cardiff, Carmarthenshire, Denbighshire, Gwynedd
Scotland	Dundee, Fife, Inverclyde, Midlothian
Northern Ireland	Belfast

The projects operated for on average five years and seven months, though had different durations. **Table 1.2** details the start and end dates of each of the Improving Futures projects, as well as the amount of funding they each received. At the time of writing (February 2017), the majority of projects had either ended, or we due to end in the preceding month.

**Table 1.2 Project funding amounts and timeline**

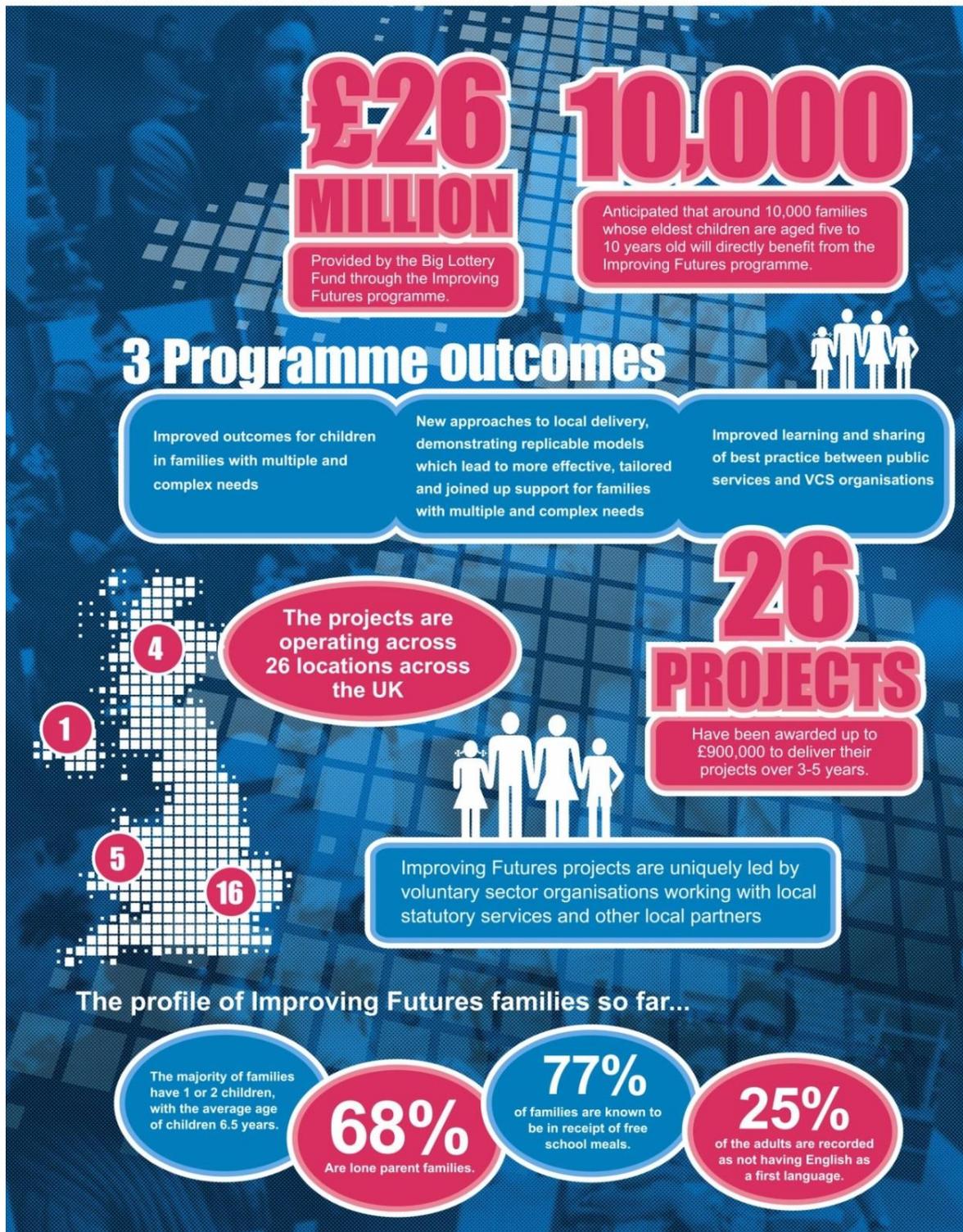
Project Name	Funding Amount	2012/13				2013/14				2014/15				2015/16				2016/17				2017	
		Q1	Q2	Q3	Q4	Q1	Q2																
Camden Futures	£1.08m																						
Families First, Hackney	£1.076m																						
Wolverhampton Improving Futures	£1.068m																						
Empowering Families, Midlothian	£1.078m																						
Enfield Family Turnaround Project	£1.08m																						
LIFT, Cheshire	£1.035m																						
Dundee Early Intervention Team	£1.08m																						
Croydon Family Power	£1.08m																						
Securing Futures, Carmarthenshire	£1.071m																						
One Herts-One Family, Hertfordshire	£1.073m																						
Tyne Gateway	£1.08m																						
Eleri, Cardiff	£1.078m																						
Nurturing Inverclyde	£1.079m																						
Tackling Domestic Violence, Belfast	£1.077m																						
The Neighbourhood Alliance, Sunderland	£1.069m																						
Brighter Futures, Wandsworth	£900k																						
Teulu Ni, Gwynedd	£1.037m																						
Bridging the Gap, Denbighshire	£1.08m																						
Building Bridges, Haringey	£1.08m																						
Family Pathways, Lewisham	£1.08m																						
Stronger Families, Future Communities, Southend	£1.072m																						
BIG Manchester	£1.08m																						
Gateway, Fife	£1.076m																						
Families Moving Forwards, Portsmouth	£1.079m																						
Worcestershire Family Budgets	£1.08m																						
Connecting Families, Bridgend	£1.078m																						

■ = original duration      ■ = extension period

Note: Funding amounts have been rounded to the nearest £1,000.

A visual overview of the main features of the Improving Futures programme is presented below, which featured in the End of Year 1 report<sup>3</sup>.

## Improving Futures Programme Key Information



<sup>3</sup> Data on profile of families out-of-date. See chapter 3 for most up-to-date data.

### 1.1.2 Number of families supported

As at 7th March 2016, we estimate the Improving Futures projects had collectively supported 9,279 families.<sup>4</sup> On average each project had supported 357 families, ranging from 147 to 725. This variation reflected the projects' varied levels of funding, support models and support intensity.

## 1.2 Evaluations aims and methodology

The primary aim of the evaluation was to rigorously assess the effectiveness, impact and outcomes of the 26 Improving Futures projects and the programme as a whole. The evaluation supported the projects with identifying outcomes and measuring progress over time. It also focused on capturing and sharing learning across the programme, and disseminating to policymakers and practitioners across the UK.

The evaluation was divided into three distinct work streams to achieve these aims, as follows:

1. 26 bespoke **project-level evaluations**, including case study visits to all 26 projects. The nature of the case study visits were tailored to reflect the delivery of each project, but generally included:
  - interviews with project manager and director;
  - interviews or focus group with core project staff;
  - interviews or focus groups with partner organisations; and
  - interviews with families.

Further information on the case studies can be found in **Annex X**
2. An overall **programme evaluation**, drawing on the project-level evaluations and other data sources, including:
  - **Longitudinal survey of beneficiaries:** A total of 368 families were interviewed face to face on a rolling basis during the first four months of their support (baseline), with telephone and paper-based surveys scheduled at an interval of 12 months (310 interviewed) and 24 months (156). The baseline survey explored satisfaction with referral arrangements, support and key worker relationships. The follow-up survey points sought to establish the extent to which outcomes were sustained over time. Further information can be found in **Annex V**
  - **Monitoring data:** Analysis of outcomes data on families inputted by projects to the Improving Futures Monitoring Information System (IFMIS). This was a bespoke database developed for the evaluation to record the characteristics of families alongside risk factors and strengths recorded by practitioners. IFMIS data were held for a total of 5,035 families at the time when the analysis took place for this report, including 3,630 who had exited from the support. The IFMIS and indicator set is further described in **Annexes I and II**.
  - **Project Survey:** A survey with the projects to gather information on their delivery models, and which aspects of their models they perceived were contributing the most to family outcomes. 21 out of 26 projects responded.

<sup>4</sup> In early 2016 the Big Lottery Fund asked all projects to report the number of families they had supported. 15 of the 26 projects responded and provided data. In total, these projects had supported 5,353 families. To estimate the total number of families that were supported, we assumed each of the 11 projects for which data were missing supported the average number of families per project (357).

- **Stakeholder survey:** A two-wave self-completion survey with a sample of 20 local partner organisations and other local stakeholders for each of the Improving Futures projects (achieved sample in 2013: 102 respondents; sample in 2015: 57), The survey aimed to gauge satisfaction with the programme, and to capture views on the impact it achieved at a local level. Further information can be found in **Annex XI**.
  - **Family Panel:** This brought together a sample of families receiving support from the Improving Futures projects to provide an overarching view of the programme. The panel met annually and included families from a range of the projects.
3. The evaluation consortium also oversaw a programme of **learning activities** for projects to exchange good practice within the programme, and to learn from and share best practice with other stakeholders. This included:
- annual learning events for all the projects;
  - a series of webinars;
  - a series of learning papers;
  - conference to disseminate the findings to an external audience; and
  - annual policy roundtables to disseminate and discuss the findings with policymakers.

Outputs from some of these activities can be found on the Improving Futures website: <https://www.improvingfutures.org/>.

The following caveats and clarifications apply to the analysis presented within this report:

- All IFMIS data were based on the professional judgement of the project case workers. This included the prevalence of risks and strengths present in a given family, child or adult. The data therefore inevitably carried some risk of bias, although all risk and strength indicators corresponded with the assessment tools and frameworks adopted by the individual projects for their work with families.
- The analysis was based on a sample of 3,685 families for whom entry and exit data was available at the time of writing. While these families were *broadly* similar to the overall set of families who were signed up to the Improving Futures programme some differences remain. Results may be biased, as these families may not have been representative of all Improving Futures families. A comparison of families included in this analysis and the full cohort of families can be found in **Annex III**.
- When interpreting the quantitative data, one must be clear that what is reported is the ‘distance-travelled’ of families, which should not be confused with the ‘impact’ of the programme. While the evidence suggests that many families experienced improved outcomes during the period in which they were supported by an Improving Futures project, one cannot infer that these changes were due to the interventions received and may have been due to other factors.
- The qualitative interviews with families were based on voluntary and informed participation in the evaluation. A degree of response bias should therefore be anticipated, as those families with a more negative experience of the programme would also be less likely to respond to requests to participate in the research.

In sum, the data collected provide important insights into the perceived outcome improvements of families, including up to 24 months after they first joined the intervention. However, the findings should be read with some caution; the limitations above mean the outcomes achieved may be overstated.

A more detailed outline of the methodologies being used in the evaluation is provided in **Annex I**.

### 1.3 Report structure

The report structure is devised so that the individual chapters map to each of the aims of the programme, as follows:

- In [Chapter 2: Programme design and implementation](#) we review the extent to which the programme's first aim was achieved: 'New Approaches to local delivery, demonstrating replicable models which lead to more effective, tailored and joined-up support for families with multiple and complex needs'. The chapter details some of the main approaches the projects adopted to support families, including the principles they worked towards, the types of support they provided, and some of the main delivery models. The chapter also summarises the main successes and challenges the projects faced during delivery.
- In [Chapter 3: Outcomes from the programme](#) we review the extent to which the programme's second aim was achieved: 'Improved outcomes for children in families with multiple and complex needs'. This chapter includes a detailed analysis of the outcomes drawn from IFMIS, case study visits and Family Panels, and sustained outcomes reported in the longitudinal survey of beneficiaries.
- In [Chapter 4: Improved learning and sharing of best practice](#) we review the extent to which the programme's third aim was achieved: 'Improved learning and sharing of best practice between public services and voluntary and community sector organisations'. We firstly assess whether the Improving Futures programme fostered opportunities for public services and VCSEs to work together, before exploring the impact from this partnership working, including an analysis of what public services and VCSEs learnt as a consequence of being involved in the programme and what changed as a result.
- In [Chapter 5: Estimating the return on investment](#) we report on our CBA of the programme, examining whether the programme generated cost savings in the short term.
- Finally, in [Chapter 6: Conclusions and recommendations](#) we bring together the preceding chapters to conclude on the overall success of the programme, and suggest recommendations for future early intervention programmes.

## 2.0 Programme Design and Implementation

*“They engage with these communities like nobody else can. They bridge between the communities and statutory services.” (Project manager)*

This chapter reviews the extent to which the programme’s first aim was achieved: ‘New Approaches to local delivery, demonstrating replicable models which lead to more effective, tailored and joined-up support for families with multiple and complex needs’. The chapter details some of the main approaches the projects adopted to support families, including the types of support they provided, and some of the main delivery models. The chapter also describes the seven ‘principles’ that projects and families consistently reported as being key when supporting families at an early intervention level. The chapter also summarises the main successes and challenges the projects faced during delivery. Finally, it covers the extent to which the approaches were replicated or mainstreamed. Specifically, the chapter provides information on:

- Type of support
- Duration of support
- Delivery models
- The Improving Futures principles
- Extent to which Improving Futures approaches were replicated and mainstreamed
- Successes and challenges in delivery

The chapter predominantly draws on the evidence from the case study visits to each of the 26 projects, consultations with the project managers, Family Panels, stakeholder surveys, and discussion groups with projects at the evaluation learning events. An earlier, more detailed, version of this chapter was provided in the [Year 2 Evaluation Report](#).

### 2.1 Type of support

The majority of projects provided families with bespoke support, tailored to their individual needs, often coupled with more structured programmes. They provided a broad range of practical help, advice and advocacy. This often, but not always, included support in relation to parenting difficulties and children’s behaviour, which were the most widespread issues reported via the IFMIS data. Projects predominantly supported families in the home, in schools and community settings. Many of the projects took a strong therapeutic approach, offering individual and group therapy and emotional support. Some projects focused on supporting specific subsets of families; these included families facing particular issues (such as the Tackling Domestic Violence, Belfast project, which supported families fleeing domestic abuse); or particular ethnic groups, such as the Families First, Hackney project, which focused strongly on supporting families from Turkish communities.

**Table 2.1** details the type of support projects provided to families, self-reported by projects in the Project Survey.

**Table 2.1: Type of Support provided to families**

	No. of projects providing this support				
	Individual support for adults	Individual support for children	Group work with adults	Group work with children	Working with the 'whole family' as part of an integrated plan
Always	13	10	3	3	14
Often	8	9	6	4	3
Occasionally	0	2	7	9	4
Never	0	0	5	5	0
Total	21	21	21	21	21

Source: Project Survey, October 2013. Number of projects responding: 21 out of 26.

**Box 1** below provides more detail on the type of support provided across the 26 projects.

**Box 1: Support provided across the 26 projects**

**Parenting support** (e.g. one-to-one support, parenting groups, evidence-based parenting programmes (e.g. Incredible Years, Triple P))

**Therapy and counselling** (e.g. Brief Solution Focused Therapy, Cognitive Behavioural Therapy, play therapy, arts therapy). This was delivered to groups and on a one-to-one basis, and for adults and children

**Finance inclusion and welfare support** (e.g. budgeting, managing debt)

**Employment and education support** (e.g. skills development)

**Behaviour support** (e.g. behavioural management techniques, supporting families to work with schools around Special Educational Needs (SEN) and behavioural issues)

**One-to-one mentoring**

**Support to improve 'soft' outcomes** (such as self-esteem and social skills)

**Positive activities** (for whole families or children)

**Peer support** (e.g. setting up peer support groups)

**Support to improve healthy lifestyles** (e.g. cookery classes, advice on healthy eating and exercise)

**Support for children's cognitive development and learning support needs**

**Supporting adults to volunteer**

**Support to engage families within the wider community** (e.g. by setting up community groups, such as community allotments or reading clubs, or mapping community assets and signposting families to the relevant community support)

**Supporting school-based outcomes** (e.g. school attendance, support for children in transition from primary to secondary school, building home-school links)

**Supporting family functioning** (e.g. relationships, communication, advice for separated or separating couples)

**Housing support**

**Family Group Conferencing**

**Emotional support**

**Practical support** (e.g. cleaning the house)

**Support accessing household items** (e.g. furniture, clothing exchange, specialist equipment for people with disabilities)

**Support programmes focused on specific issues** (e.g. domestic violence and bereavement)

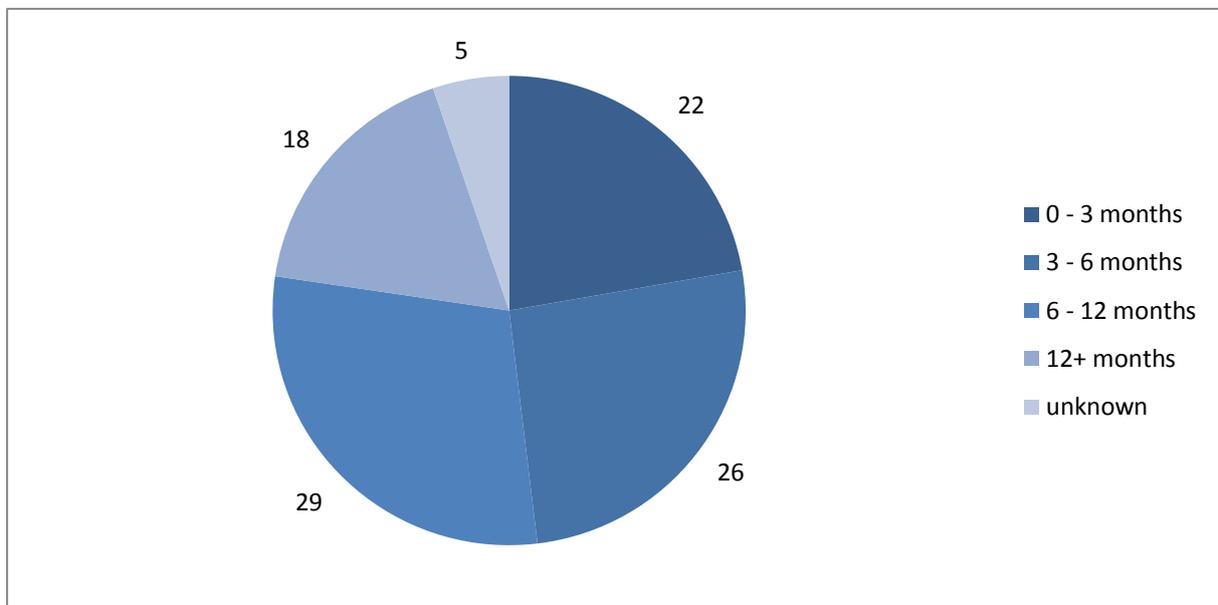
## 2.2 Duration of support

The projects could determine the duration of support for families. Most projects did not set themselves specific targets, but rather supported families for as long as it took before they were in a better position.

Among families that had exited by 23 January 2017, the average length of time for a family to participate in the programme was just over seven months.

**Figure 2.1** shows that, among families that had exited the programme by 23 January 2017, more than three in four families had participated in the programme for less than 12 months (77%). Similar shares had participated in the programme for up to three months (22%), between three and six months (26%) and between six and twelve months (29%). Only 18% of families had participated in Improving Futures for over a year. However, this is likely to be an underestimate of all families in the programme as this figure does not include families that were still engaged in Improving Futures in January 2017; indeed, the average duration of support increased during the programme, as families that were supported for longer were exited.

**Figure 2.1: Length of time in the project, % of families**



Source: IFMIS analysis, data extracted 23.01.2017, based on 3,685 families, data missing for 192 families

## 2.3 Delivery models

Based on the responses in the Project Survey, the Improving Futures projects can be divided into three broad delivery models (see [Table 2.2](#)). All projects offered families a wide range of services, packaged together in different ways to provide families with tailored support. The main differentiating factor between the projects was who provided and oversaw the support packages. In the vast majority of projects that responded to the Project Survey (18 out of 21), the support was overseen by a core team of key workers. In one of these projects all support was provided by a core team of key workers; in the other 17 it was provided by the core team and a wider network of services and partners. In the three remaining projects who responded to the Project Survey, the project's core team did not provide the work directly: instead they coordinated multi-agency inputs from a range of local providers.

**Table 2.2: Delivery models adopted by Improving Futures projects**

Delivery Model	Number of Projects	Projects
Core team of key workers, plus wider network of services and partners (some of which are sub-contracted to deliver specific services)	17	Tackling Domestic Violence, Belfast; The Bridge Project, Denbighshire; Connecting Families, Bridgend; Dundee Early Intervention Team; Enfield Family Turnaround Project; Gateway, Fife; Haringey Building Bridges; One Herts One Family; BIG Manchester; Teulu Ni, Gwynedd; Families Moving Forward, Portsmouth; Stronger Families, Future Communities, Southend; Tyne Gateway, Tyneside; Brighter Futures, Wandsworth; Wolverhampton Improving Futures; Improving Futures Worcestershire; Camden Futures
No core team: The project coordinates multi-agency inputs according to identified needs	3	LIFT, Cheshire; The Neighbourhood Alliance, Sunderland; Croydon Family Power
Core team of key workers employed and managed directly by the project	1	Securing Futures, Carmarthenshire

Source: Project Survey, October 2013. Number of projects responding: 21 out of 26.

In addition to the broad delivery models described above, some projects established very specific models for delivering support. These are detailed below.

### 2.3.1 Community volunteers

Of particular note is that almost half (ten) of the projects who responded to the Project Survey had trained community volunteers to support families<sup>5</sup>. Community volunteers were being used by the Improving Futures projects in different capacities, such as to undertake outreach work (e.g. BIG Manchester), deliver support programmes (e.g. parenting programmes, BIG Manchester), provide one-to-one mentoring (e.g. The Neighbourhood Alliance, Sunderland) or to run peer-led groups and social networks (e.g. Camden Futures and Family Pathways, Lewisham). **Box 2** provides more detailed examples.

#### **Box 2: Examples of utilising community volunteers**

##### **Family entrepreneurs, Tyne Gateway, Tyneside**

In the Tyne Gateway project community volunteers were at the core of their approach. The project recruited Family Entrepreneurs, also known as 'barefoot professionals', who led in overseeing support packages for families. The idea was that Family Entrepreneurs come from the community, understood what the families had been through and, as they shared similar experiences, could also be more honest with the families.

*"They engage with these communities like nobody else can. They bridge between the communities and statutory services."* (Project manager)

Family Entrepreneurs received an 8 week training course and monthly peer supervision.

##### **SEN parent support group, Families Moving Forwards, Portsmouth**

The Portsmouth project trained up a group of parents to run a parenting support groups for parents with children with SEN. They had five parents who had been through the programme themselves and were running the parent group.

##### **Male volunteers, Enfield Family Turnaround Project**

The Enfield project used male volunteers alongside a male key worker to engage fathers in the programme. They found this to be effective, particularly in a culturally diverse area where projects such as this may traditionally have been seen to be more relevant to female family members.

The use of community volunteers was seen by projects and families to be a success. Projects commonly found that volunteers were able to relate to families where they came from the same communities and had experienced similar situations. However, projects often cited that recruiting and retaining volunteers was challenging.

<sup>5</sup> The ten projects were: Dundee Early Intervention Team; Enfield Turnaround Project; Gateway, Fife; One Herts One Family; BIG Manchester; Stronger Families, Future Communities, Southend; Tyne Gateway, Tyneside; Wolverhampton Improving Futures; and Croydon Family Power.

### 2.3.2 Co-located multi-agency teams

Several projects had co-located practitioners with specialist expertise from different services into a central team. **Box 3** provides examples of this.

#### **Box 3: Examples of co-located multi-agency teams**

##### **Co-locating specialists in mental health, substance misuse and domestic violence, BIG Manchester**

The BIG Manchester project consisted of a multi-agency team aimed at working together to tackle substance misuse, mental health problems and domestic violence. The rationale for the project stemmed from analysis of recent serious case reviews, which highlighted the prevalence of the 'toxic trio' of substance misuse, domestic violence and mental health problems. The project supported families who were not in crisis to improve resilience to cope better with their issues - resolving the underlying issues causing the substance misuse, mental health problems and domestic violence and building family functioning and relationships. The team consisted of three practitioners seconded in from agencies with specialist expertise in each of the three aspects of the 'toxic trio': MIND (mental health), Eclipse (substance misuse) and Women's Aid (domestic violence). The team also consisted of a practitioner seconded from Barnardo's (to provide specialist support for children) and Home-Start (who provided voluntary support when families exited the project).

##### **Co-locating domestic violence workers in Health and Social Care Trust teams: Tackling Domestic Violence, Belfast**

This project involved co-locating Women's Aid workers with Health and Social Care Trust professionals at a range of locations to encourage stronger partnership working and identification of domestic abuse amongst families open to statutory services. The team also included health visitors. The project felt this had aided the working relationship between the statutory and voluntary sector when dealing with domestic abuse, and had led to a greater understanding across services about the complexities of domestic abuse.

Projects identified that the key benefit of co-locating specialist agencies was creating a *"merged expertise"* (Project Manager); team members were able to draw on each other for specialist knowledge and support. It could, however, be difficult to agree clear processes on how practitioners from different organisations would work together. Practitioners also needed continued contact with their seconding organisation in order to avoid a loss of their specialist skills.

### 2.3.3 Basing projects in universal settings

Over half of the projects were based in universal settings, either permanently or part-time. In some instances, the project was receiving referrals exclusively from the setting in which it was based. Specific universal settings included:

- **Primary schools:** Building relationships with primary schools was a key focus of the Improving Futures projects, and for many projects schools were a key referral route. Around half of the Improving Futures projects also operated out of schools in some form, either having practitioners based in schools, having a room in schools where they ran sessions for children, or running drop-in sessions in schools (see **Box 4** for examples). Many of the projects used their school base as a hub to access and engage with parents and children, and to bring in other services for families to access. They also supported families to increase their engagement with schools and overcome school-based difficulties such as behavioural difficulties.
- **GP practices:** Camden Futures had a team of five Family Support Workers based in GP practices.
- **Children's centres:** Empowering Families, Midlothian was based in local children's centres.
- **Community centres:** Connecting Families, Bridgend hosted groups in community centres.

#### Box 4: Examples of Improving Futures projects co-located in schools

##### Camden Futures

Camden Futures had two Parent Support Advisors that were based in a different primary school each day of the week. They offered information and guidance, one-to-one support, family work and mediation sessions. The project also had Creative Therapists based within primary schools.

##### Denbighshire 'Bridge Project'

The Denbighshire 'Bridge Project' held weekly drop-in sessions at six schools. In some schools they had a dedicated room, where they could meet with other agencies. They also used this time to catch up with children they had been working with. Other services also attended these drop-ins, such as Citizens Advice Bureau (CAB) and Children and Adolescent Mental Health Services (CAMHS).

##### The Neighbourhood Alliance, Sunderland

The Neighbourhood Alliance, Sunderland trained school staff to become 'Neighbourhood Friends', who acted as an advocate for families and helped them identify and access support from a wide range of community organisations.

Projects found that being based in a universal setting led to services referring families earlier than they would otherwise, enabling projects to intervene earlier. It also increased family engagement, because the projects were more visible and so felt more familiar to families. Additionally, it increased partnership working between the projects and universal settings. However, becoming too dependent on a specific agency for referrals did cause some problems; it could exclude families who had a negative relationship with that referring agency, and some projects struggled when a change in circumstances meant that the agency reduced its referrals to the project.

### 2.3.4 Spot purchasing / personalised family budgets

Over half the projects responding to the Project Survey (11 out of 21) reported they implemented spotpurchasing/personalised family budgets. In the main, this approach was used to purchase additional support beyond the project's core service offer and focused more on purchasing goods for families (e.g. furniture, clothes). In rarer examples this was a core aspect of the delivery model and all support was commissioned through a spot purchasing model. **Box 5** provides examples of projects using this approach.

#### **Box 5: Examples of spot purchasing / personalised family budgets**

##### **Spot purchasing: LIFT, Cheshire**

The project consisted of a wide range of service providers (50 in total); each service provider had a set of lead professionals that provided services to families. Each family had a family budget of £2,500, which was used to buy in services from the service providers. The cost of each intervention ranged from £350 to £1,000.

##### **Personalised family budgets: Teulu Ni, Gwynedd**

'Family buddies' held a budget for each family (of around £2,000 depending how many service users were engaged), which could be spent on anything the family needed, from material purchases (e.g. paint and furniture), to days out, to professional services. The services provided ranged from family conferencing and mediation through to services specifically designed for fathers.

The majority of projects implementing the approach were very positive of the benefits of spot purchasing and personalised family budgets, with almost half (5 out of 11) identifying it in the Project Survey as one of the most important factors in achieving outcomes. Projects felt it enabled their support to be flexible and responsive to families' needs. They also felt it empowered families by giving them a choice in what type of support they accessed, and from which services. Additionally, it could be used to pay for support from services that would be difficult to access unpaid, such as counselling. However, this process was new and it took a while for services to become used to the approach. Aspects projects had to grapple with included how services were able to manage capacity; and how to avoid conflicts of interest where key workers overseeing the personalised family budget, were based in the service providers where the personalised budget could be spent.

## 2.4 The Improving Futures principles

Although the Improving Futures projects adopted different delivery models and types of support, when analysing what was working particularly well, and what was leading to the outcomes being achieved, seven 'principles' emerged from the interviews with projects, local stakeholders and beneficiaries. The principles were then refined and agreed with the projects during a learning event. These principles were just as important as, if not more than, the type of support provided by the projects in determining whether the support was a success. At the centre of the principles was the relationship between the frontline practitioner and the family members. Almost half (10 out of 21) of projects responding to the Project Survey identified practitioner relationships with families as one of most important factors in achieving outcomes. These principles suggest that the Improving Futures projects were rooted in 'relationship-based practice'<sup>6</sup>, in which relationships are at the core of the support approach.

<sup>6</sup> Wilson, K; Ruch, G; Lymbery, M; Cooper, A (2008) Social Work: An Introduction to Contemporary Practice. Harlow. Pearson.

The Improving Futures principles are listed in **Table 2.3** and detailed below. Whilst these principles were commonly cited during case study visits and within the Project Survey, not all projects were necessarily exhibiting all of these features and they were implemented to varying degrees of quality.

**Table 2.3: Improving Futures Principles**

1. **Relationship-based:** Having a single key worker building relationships and trust over time, adopting a respectful approach
2. **Participative:** Active participation by families in assessment and service planning
3. **Whole family:** Working with the whole family to identify and address needs
4. **Working at the families’ pace:** Flexible and variable support, working alongside the family and responding to their changing circumstances
5. **Strength-based:** Building families’ self-belief, resilience and capabilities to manage their own lives
6. **Supported referrals:** Supporting families to engage with other services, including acting as an advocate
7. **Support networks:** Building links with other peers and the community

**2.4.1 Relationship-based**

All of the projects operated a ‘key worker’ approach, where a single project worker was assigned to oversee the support package provided to an individual family. They acted as a single point of contact for a family and could provide support, resources and information tailored to meet their individual needs. The ‘key worker’ model has a precedent within the Family Intervention Projects (FIPs) and Troubled Families programmes.

*“A key part of the approach is that the support is based on one to one support, which means that staff and children can really build a rapport, and build up trust, in order to start making progress in some of the difficult areas of the child’s life.”* (Project manager)

The qualitative interviews underlined the importance of key workers as part of the programme. In many cases, families reported that their relationship with the key worker, and the trust they placed in them, was the most important factor in determining the success of the support. During a Family Panel, the families felt the strength of the relationship they had with the project key worker set the project apart from other similar support.

*“[The key worker] is good at listening, goes the extra mile and is always positive. She has never not met any need.”* (Parent)

The personal qualities of project workers were key to achieving this strong relationship. In particular, project workers who had succeeded in engaging families were frequently described as being ‘non-judgemental’, as well as respectful, approachable and personable. **Figure 2.2** provides a list of further adjectives used by families and local organisations to describe the key workers.

*“The personal help I got was amazing... the key worker was there for anything I needed... they’re really compassionate with what they do... it’s not just a thing – they really listen to you and your family. They listen to you personally and put you on to what will help you best.”* (Parent)

*“They’re all so lovely and compassionate and you need that. The most important thing is to have a heart and that really helps because it gains trust, and once you’ve got that you feel a lot more comfortable.”* (Parent)



## 2.4.2 Participative

Family participation was central to most Improving Futures projects, as they found that enabling families to have a say in the type of support they received empowered them and further engaged them in the support. In particular, this included families participating in the following:

- **Assessing family needs:** Many projects focused on ensuring the family were able to play a key part in assessing their own needs. Many of the projects used the Family Outcomes Star, as they saw this as an effective way to include families in the assessment process:

*"It puts families at the heart of the process so it does empower families and probably has more of a lasting impact."* (Project manager)

Empowering Families, Midlothian developed a reflective approach to allow families a stronger say in their assessment (see **Box 6**). Additionally, a small number of projects developed tools that ensured children's views were heard during the assessment process. Project workers typically characterised the child-focused tools as interactive and visual tools responding to best practice in involving children (see **Box 6**).

- **Planning support:** Projects developed a number of different approaches to include families in planning their own support. In particular, projects regarded personalised family budgets (see above) as an effective way to achieving this. In Eleri, Cardiff children were also able to select their own lead professional. The Dundee Early Intervention Team ensured families were fully aware of the action plan through creating family support booklets. The booklet was held and controlled by the family. It detailed steps to be taken for each outcome, breaking down otherwise daunting tasks.

Local authority representatives interviewed during the case study visits were very impressed with the participative approaches adopted by the projects. In particular they were impressed with their ability to capture the voice of the child during the support.

### Box 6: Examples of participative assessments

#### Reflective practice, Empowering Families Midlothian

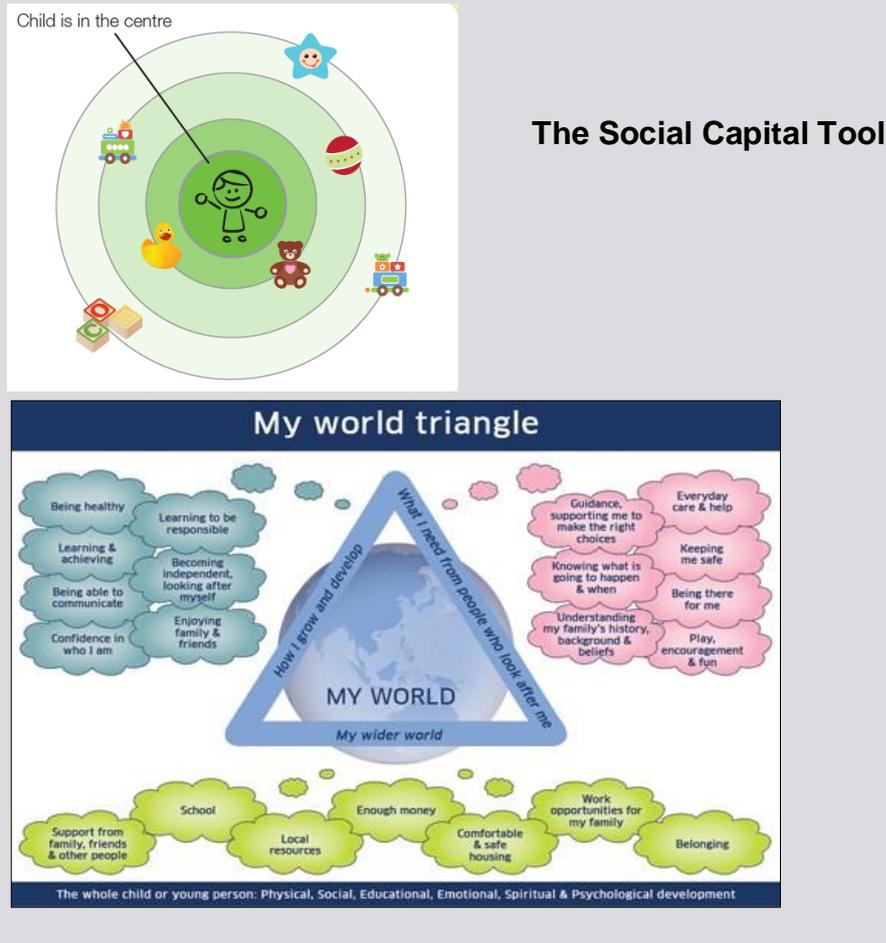
The Empowering Families project developed a 'reflective practice' approach to their family assessments. This comprised of a family session facilitated by an interviewer, who asked the family questions about their functioning and what needs they had. The session was 'observed' by two other practitioners. Part way through, the session switched over to the two observing practitioners, who talked to each other, reflecting on what they had seen in the family. They suggested what different family members were feeling and what the family could do to overcome some of their challenges. The family watched this interaction, and they then responded to the observations. This continued throughout the session.

During the case study visit project workers, family members and partner organisations were all positive about the approach. One school was considering using the approach themselves with families with children with challenging behaviour. They all felt that the approach put the family in control, ensured everyone in the family had an equal voice, and was a less confrontational way of feeding back more sensitive concerns to families.

## Participative assessment tools for children, Dundee Early Intervention Team and One Herts – One Family

The Dundee Early Intervention Team used a combination of the Getting it Right for Every Child (GIRFEC) Integrated Children's Assessment as well as the 'My World' triangle (see [Figure 2.3](#)). The latter provided a more visual tool to gather information on a child and their families' needs. The One Herts - One Family project developed their own Social Capital Tool for use with children (see [Figure 2.3](#)). Children were asked to draw pictures or place toys at certain distances from the middle of the circle. The centre represented the child and the images/toys were the people that were most important to them.

**Figure 2.3: Assessment tools for children**



### 2.4.3 Whole family

According to the Project Survey, two thirds (14 out of 21) of projects adopted a 'whole family approach' with all families they supported. This included both working with the whole family simultaneously (for example, through family therapy) and working with family members individually, but bringing the support together through an integrated plan. For example, in one family interviewed the key worker would work with the two children both on their own and together, and would also work with the mum and partner without the children – an approach described by the parent as being really good.

*"[Other] support I have is about me, but Teulu Ni is really about all of us."* (Parent)

Most projects felt that their holistic whole family approach was very effective: half (7 out of 14) of the projects who adopted this approach all the time and responded to the Project Survey identified this as one of the most important factors in achieving outcomes.

Projects identified two key benefits of the approach:

- **Building family members' trust to engage with the project:** For example, project staff from BIG Manchester observed that parents were more receptive to addressing their own needs when the project worker had built up relationships with all their children, as parents felt the project worker really understood the family.
- **Making clear the connection between different issues:** Projects widely recognised that a challenge being faced by one member of the family may be having adverse effects on another family member. By adopting a whole family approach, projects reported being able to tackle an issue from multiple angles and raise each family members' awareness of how their own circumstances were affecting other family members. Both BIG Manchester and Brighter Futures, Wandsworth found this approach was effective when addressing issues amongst adults (such as substance misuse, mental health and domestic violence) and considering how this was impacting on children in the household.

*"We get the parents to look at how it's impacting on the children. We look at adult issues, but bring in the children's focus too."* (Project Manager)

However, this approach was not adopted consistently. A minority of projects focussed primarily on the main carer – typically the mother - whilst others focused primarily on supporting the children. Additionally, during the case study visits we identified a small number of projects who had recruited professionals with very limited experience in working with the whole family. As identified in previous research<sup>7</sup>, adopting a whole family approach requires practitioners to have appropriate skills and knowledge of working with both children and adults. Where this relationship-based approach was not taken, or where practitioners lacked skills and experience in this area, they generally struggled to achieve meaningful change with families; in these circumstances projects reported that they were often 'firefighting' and making limited progress with families' action plans:

*"[Families are] treating you like social workers, when I've never experienced that...Some families are so complex, it's hard to set goals and stick to it."* (Project worker)

#### 2.4.4 Working at the families' pace

Project staff emphasised the importance of tailoring action plans and ensuring they reflected the needs of the families. This involved adopting a flexible action plan that evolved as different issues became more pressing, or as the project workers' understanding of the family increased. Projects felt that this flexibility was a key strength of their approach; they contrasted it with other services that had more specific funding streams and/or aims; they felt this made other projects more 'task-oriented', focused on achieving a specific set of tasks upfront.

*"It's truly holistic in a sense that we can target the intervention wherever it's needed at that time, so it's flexible, it's fluid."* (Project Manager)

<sup>7</sup> For example see: Department for Education *Turning around the lives of families with multiple problems – an evaluation of the Family and Young Carer Pathfinders Programme*, Research Report DFE-RR154

Linked to this, project staff felt that the timing of support also needed to be flexible. They argued that support needed to be gradual and sequential, taking the family slowly through the action plan. They also reported that project workers needed to build a relationship with the family first before undertaking any intense work.

*"We're going to get to know you first - it's done slowly. It's not task focused, but sequential, taking one step at a time...We don't want to get too fixed, we add in things to the action plan and take away." (Project worker)*

*"Sometimes you get given the help but then it's too short, so like five weeks. Those five weeks help, but it might not be enough, and there is no room to do it again or extend...So [you need] longstanding places, which allow them to be flexible and to keep it consistent and coherent. As they just stop-start all the time." (Member of Family Panel)*

This also involved being for families when they needed support – providing support in evenings, weekends and during the holidays, not just 9 to 5.

#### 2.4.5 Strength-based

Many projects believed that families needed to become more resilient and empowered to make and embed the changes themselves. Consequently, many projects focused on empowering families and building their emotional wellbeing. This included helping parents and children build their self-esteem and confidence.

*"[The project] gives the support so that families come out much more independent...and confident, so it doesn't encourage dependency, which is something that can happen with local authority support is that they keep on coming back. They are more informed about what services are available to them should they need them, before the issue escalates." (Representative from LA).*

The projects reported that key to this approach was talking about the families' strengths, and avoiding a deficit language. The type of assessment used was also important in reinforcing a strength-based approach, and the Family Star was seen as an effective tool to promote family strengths.

*"Telling you how good you are actually doing is amazing...The way they make you feel, they boost you right up." (Parent)*

Finally, projects felt that a crucial aspect to empowering families was changing their beliefs and how they saw themselves, to enable them to see that they had the ability to change.

*"They started supporting me as a parent, but now they are empowering us." (Member of Family Panel)*

**Box 7** provides some examples of projects focusing on empowering families and building their resilience and self-esteem.

#### **Box 7: Examples of strength-based approaches**

##### **Stress and Resiliency Model, Securing Futures, Carmarthenshire**

The Securing Futures, Carmarthenshire project developed an in-house 'Stress and Resiliency Model', in consultation with a therapist. The model was based around support for children's health, cognitive and social skills, and learning support needs. This was achieved through interventions including mentoring, play, therapy, and in- and extra-school support. The support focused on promoting well-being, increasing resilience and promoting confidence.

##### **Creative writing, Fife Gingerbread**

Fife Gingerbread ran a creative writing course to help families express their feelings and build their confidence. They compiled the short stories and poems into an anthology. Two adults read out their short stories at Gingerbread's Annual General Meeting. During the Family Panel the adults described the positive impact this had on their self-confidence.

##### **Skills training, Hackney 'Families First' Project**

Families First assessed that many families needed access to skills training to boost their self-esteem and employability. The project found that helping an adult sign up to a free computer class at the local library, or perhaps signposting them to an online course they could do at home, was a good first step to empowering families through education.

### 2.4.6 Supported referrals

A key theme reported by most projects, and also identified by families, was the success of the projects in 'bridging the gap' and supporting families to engage with other services. This included schools, local community support, specialist services and statutory services. During the family interviews families often described how they would find accessing services difficult and confusing, and the project workers were effective at helping them 'navigate the system'. The strength of relationships with specific services or agencies varied between projects according to their relative focus and the strength of these relationships prior to the project. For example, Eleri Cardiff found they were particularly effective in increasing families' engagement with the police and schools:

*"We've got great relationships with the police. Many people here...have a really negative perspective of the police. Bringing dad in who's recently come out of custody for commercial burglaries, and saying to him, 'Look, your little one is getting into trouble, he's hanging round with the wrong kids, there's some anti-social behaviour stuff going on, it would be really great if you could come along with your girlfriend and the little one and we can, you know, have a chat'. That would never have happened...we're widening their own reach for them to actually contact other services that they mightn't have contacted before."* (Project Manager)

Projects and families felt a key element to helping families access other services was the project taking an active role in referrals. This included providing transport, attending appointments, and acting as an advocate and neutral mediator. This often included making other services aware of the family's situation, so they could place certain actions in context. It also included ensuring the family understood the position and messages being given by other services. This was particularly helpful when the family was wary of, or had a poor relationship with, other services, such as social services or schools. During the interviews with families, parents reported finding the advocacy extremely helpful; they reported that it gave them a voice and helped them access support and services they felt they would not be able to access on their own.

*"I had a problem that I was not able to access housing, they said no. But when I went to [the project worker], she called them up to ask why I was refused, they said that the words that I used, they turn the words around, they told [the project worker] to send me back to their office and then they told me that I'm going to be housed."* (Member of Family Panel)

*"It's the approach and representation; it's a very positive process. The key worker has been acting as an intermediary. The mother on a number of occasions has been in a meeting and the key worker has interjected and rephrased and clarified things for her."* (Headteacher)

## 2.4.7 Support networks

Many of the families supported by the Improving Futures projects were socially isolated, with limited family and friends to call on for support. Projects and families both reported that a key element to improving outcomes for families was building their social networks with peers and the local community.

*"One of the key things through delivering our service is that we do not take families out of the community to work with them, we basically build upon community assets and strengths... So work is done in the family home, in the community and it's about fine processing, building networks... because we're just a short term intervention, so there's no point going in and coming out."* (Project Manager)

Many of the projects focused on 'social network approaches', creating opportunities for families to meet and support each other and reduce their social isolation. **Box 8** provides examples of social network approaches adopted by the Improving Futures projects.

### **Box 8: Social network approaches adopted by Improving Futures projects**

#### **Community group, BIG Manchester**

To combat social isolation the BIG Manchester project set up a weekly community group, where the parents and children met to do different activities - such as trips to parks, museums and places of interest (e.g. Media City). This included activities such as doing a community radio show. At the time of the case study visit the project was looking to see if families could run this voluntarily.

#### **Parenting support group, Enfield Family Turnaround Project**

The project ran targeted family workshops every half term. The aim of the sessions was to give families quality time and encourage families to mix to reduce isolation. Families did arts and craft activities with the core theme of communication - to help parents communicate informally with their children through play, and also to help parents mix. They had about 35-40 people attend each half term.

A large number of the projects also focused on linking families in with their local community. In some instances this involved ‘mapping’ local services, and making families aware of what services and groups were available in their community (see **Box 9**). In other instances, where local community assets were sparse, projects focused on developing community assets (see **Box 10**).

#### **Box 9: Examples of Improving Futures projects supporting access to community resources**

##### **Information on activities Bridging the Gap, Denbighshire**

The Bridging the Gap, Denbighshire project worked with the Family Information Service funded by Denbighshire LA to give information on affordable child-minding, sports during the holidays and discount cards.

##### **VCSE referral networks, Neighbourhood Alliance, Sunderland, LIFT, Cheshire and Camden Futures**

All three of these projects formed partnerships with ‘micro-community organisations’ that they referred families into. In Sunderland they called this the ‘neighbourhood menu’, and families were shown the menu at the beginning of their support and were able to choose what support they wanted to access. Camden Futures had 68 local organisations signed up to their network.

#### **Box 10: Asset-based approaches adopted by Improving Futures projects**

##### **Asset Based Community Development (ABCD), Croydon Family Power**

The Croydon ‘Family Power’ project utilised the ABCD model and implemented numerous initiatives to make the community they worked in a more connected and safer space. The project trained local volunteers to be ‘Community Connectors’, who went to local ‘bumping-into’ spaces, such as supermarkets and GP surgeries, where they were likely to meet members of the community. They would engage these members of the community, discuss local issues and devise solutions to tackle the issues. At the time of the case study visit (Autumn 2014) the project had trained 49 Community Connectors from the local community and they had established 43 community projects. Some of these were about re-claiming community land and putting it to use.

## **2.5 Extent to which Improving Futures approaches were continued and replicated**

### **2.5.1 Extent to which projects continued beyond the Improving Futures grant period**

Almost all the projects had some success in receiving funding to continue following the end of the Improving Futures grant. All but three (18 out of 21) delivery partners involved in the Improving Futures projects responding to the Stakeholder Survey acquired new contracts as a consequence of being involved in the project. However, in most cases the funds accessed by projects were piecemeal and most projects had not secured substantial additional funding.

*‘Everyone has said how successful the programme has been but no one has actually been able to take it up.’* (Improving Futures Project manager, comment during project consultations)

Projects mainly attributed this limited sustainability to the budget cuts public service faced in recent years. Indeed, during the period that Improving Futures projects broadly operated (2010-11 to 2015-16) The Children's Society calculates that spending on children's centres, young people's and family support services reduced by 31%.<sup>8</sup> However, during the programme period there were early intervention programmes with specific funding attached to them – most notably phase 2 of the Troubled Families programme in England (which had an early intervention focus) and Families First in Wales. It is surprising that, despite the shared learning and high regard public services seemed to have for the Improving Futures projects, very little of this funding was used to sustain the project approaches. Indeed, in one area statutory provision displaced, rather than worked alongside, the Improving Futures provision; the project had to relocate its service because referrals to the statutory provision in their area had increased and they no longer received as many referrals.

## 2.5.2 Extent to which projects were replicated

An element of the first aim of the Improving Futures programme was for projects to 'demonstrate replicable models'. Almost all Improving Futures projects felt that their delivery model had the potential to be replicated or mainstreamed by other services. However, there were very few examples where this had taken place. Whilst almost one in five respondents to the Stakeholder Survey (11 out of 57) were aware of aspects of the Improving Futures project delivery model being considered for replication in areas that have not received Improving Futures funding, most of these examples were where lessons were being shared or models were being considered - there were no tangible examples where the delivery model had been replicated.

*"I am aware that the learning from the model and intervention is being shared widely throughout the country and approaches from other areas have been made to learn more about it. I am not clear whether any of these areas are going to take the discussions further and attempt to replicate."* (Non-partner, comment made in Stakeholder Survey)

*"Other local authority areas...[are] interested in [the] model but not yet committed to taking it forward."* (Non-partner, comment made in Stakeholder Survey)

Examples where models had been replicated or mainstreamed included:

- In four projects schools had used their own funding to pay for school-based interventions to be replicated in their schools.
- Wolverhampton Improving Futures had replicated the delivery model for their Talent Match project for the Fund<sup>9</sup>. They also replicated their solution-focused techniques in a pilot of the city's Head Start stage 2 work for the Fund<sup>10</sup>.
- Croydon Family Power has a Building Better Opportunities<sup>11</sup> development grant from the Fund to deliver Asset Based Community Development activities and to have community connectors based in GP surgeries.

<sup>8</sup> See: <http://www.childrenssociety.org.uk/news-and-blogs/our-blog/early-intervention-funding-faces-70-cut>.

<sup>9</sup> Talent Match is a £108m investment to tackle youth unemployment in 21 areas of England, funded by The Big Lottery Fund. For more information see: <https://www.biglotteryfund.org.uk/talentmatch>.

<sup>10</sup> Head Start aims to give young people support and skills to cope with adversity, do well at school and in life and prevent them from experiencing mental health problems. For more information see: <https://www.biglotteryfund.org.uk/headstart>.

<sup>11</sup> Building Better Opportunities is a Big Lottery Fund-ESF match-funded programme to invest in local projects tackling the root causes of poverty, promoting social inclusion and driving local jobs and growth. For more information see: <https://www.biglotteryfund.org.uk/esf>.

## 2.6 Successes and challenges in delivery

The section below summarises the main successes and challenges faced by the projects during the five-year project delivery. More specific successes and challenges related to the different delivery models are available in the [Year 2 Evaluation Report](#). Successes and challenges relating to working with schools, building community assets and building emotional and social wellbeing are available in the [Year 3 Evaluation Report](#).

### 2.6.1 Successes

#### 2.6.1.1 *Building the relationship with the family*

The research found that, on the whole, the projects were very effective at engaging families. In some areas this had been recognised by LAs, who referred families onto the projects that they were struggling to engage through their own support.

For the most part, parents interviewed had positive initial impressions about the project. They believed the offer to be potentially helpful to them and their circumstances. This was the case despite families sometimes having negative previous experiences of dealing with services.

As mentioned in the previous section, the personal qualities of the project workers, and their ability to build relationships with families, was key in ensuring families engaged with the support. Equally important was stressing the demarcation from social services and creating an informal, relaxed first impression. For example, one family was offered a range of options where they could access support, a list which included counselling, mental health support and the Improving Futures project; they chose the Improving Futures project:

*“It sounded the least scary option... It didn’t seem as formal as the other things... I’ve done the psychiatry routes and they don’t seem to work for me.”* (Parent)

*“I thought it was social services so I said ‘no, you can’t help, there’s nothing wrong here’...but we got involved with them and realised they could help.”* (Parent)

*“Until I met the lady, I wasn’t really excited to join. I thought it was another one of those courses... at first I was doing it to cooperate, but then I got interested.”* (Parent)

Motivations for engaging generally focused on gaining outcomes for the children of the family rather than for the parents themselves. When beneficiary survey respondents were asked about what they hoped to achieve from taking part in the project, more than half (56%) wanted to improve their children’s home life, with 48% also wanting to improve their children’s wellbeing. In comparison, only just over one quarter (29%) engaged with the project primarily to improve their own wellbeing, as they initially perceived a greater need for their children.

#### 2.6.1.2 *Establishing the project*

The projects did well to establish themselves within their local area and be regarded as a key element to the areas’ family offer in a relatively short period of time. For example, in the latest wave of the Stakeholder Survey three quarters (25 out of 33) of non-partners responding either agreed or strongly agreed that over the last 12 months the Improving Futures project had been regarded locally as a key project in supporting families with complex needs.

In particular, the majority of projects developed strong relationships with sets of schools. During the case study visits many teachers and headteachers remarked on the value they placed on the support the projects provided to their pupils and parents:

*"The success of having the project was before it was just teachers, school nurse, and we would try to think, 'What can we put in place for these families?', and with [Improving Futures], often they can say to us, 'Oh, that's something the... project can do', so straightaway we've got something."* (Teacher)

It should be noted, however, that many projects were run by organisations that already had strong local profiles.

A small number of projects described early challenges in working with partners. In particular, as the projects began during the beginning of reduced budgets for public and voluntary services, some partners perceived the project to be a replacement, and threat, to their service. However, the projects worked hard to establish strong links and build these relationships.

[Chapter 4: Improved learning and Sharing of Best Practice](#) provides more information on the relationships the projects developed with local stakeholders.

## 2.6.2 Challenges

### 2.6.2.1 Supporting target number of families

Despite the projects' success in engaging families, over one third of the projects (11 out of 26) supported fewer families than they originally intended, based on the latest figures provided by projects in the biannual Project Monitoring Reports. Projects attributed this to three main factors, listed below broadly in order of prevalence:

- **Needs of families more complex than envisaged:** Projects cited that they were frequently referred families that appeared to be facing only parenting difficulties; however, when the support began it became apparent there was a large set of underlying and unmet challenges. There was a general view amongst the projects that the needs of the families had increased over the projects' duration. This was partly attributed to the increased reputation of the projects, and reduced budgets and capacity in the statutory sector, resulting in families who previously would have been supported by these agencies being 'referred down' to Improving Futures projects.

*"It's meant to be early intervention, but in reality the families have more complex needs."* (Project manager)

As a result of this, it was taking longer than expected to support some families. For example, one project planned to mentor young people for six months, but found that it was taking around nine months to make meaningful progress.

During the case study visits projects often described the dilemma of supporting families for long enough to meet their needs, whilst being conscious of the high demand and long waiting list of other families requiring support.

*“There is huge demand for the project, and we have waiting lists. We manage the demand through the waiting lists, but we also have to ensure that the programme of mentoring sessions keeps to the agreed duration in order that we can get on and support other children and families. This is quite challenging as where children have complex issues that affect their confidence, engagement with school, behaviour etc., you can make a difference within six months, but you obviously have to manage this process very carefully as many of these children will experience issues in development bonds of trust. So six months is actually not a very long period in which to build up a rapport between the child and mentor and begin to work through some of the issues that they are presenting with.”* (Project manager)

Consequently, some project workers and family members interviewed felt that the support was not long enough to address all the challenges the families faced. This could suggest some of the areas of limited progress (see [Chapter 3: Outcomes from the Programme](#)).

- **Staff turnover:** For many of the projects at some point either the project manager or one or more practitioners left the project. This meant the project was operating below capacity for a period of time, affecting the number of families they could support. As the projects neared their end filling posts became more difficult.
- **Challenges in engaging some families:** A small number of projects attributed their challenge with engagement to the fact that families were either overwhelmed with other services, or had decided that the project was not for them. Other families disengaged after support began, including where projects were implementing programmes with set timescales that were deemed by families to be too long for children; for example one project ran a child mentoring programme for 12 months.

### 2.6.2.2 *Providing holistic support*

Earlier in this chapter we described how providing holistic and whole family support was critical in achieving family outcomes. However, the projects did not always provide completely holistic support. In some instances this was outside of the control of the projects, as it was due to gaps in local service provision. Projects also reported that the availability of other services generally declined during the lifetime of the projects, as areas faced reduced budgets. In particular, projects and families consistently reported that they struggled to find suitable:

- **Affordable childcare:** Families attending the Family Panel identified affordable childcare as a barrier to returning to work. Families also reported that accessing support provided by the Improving Futures projects would have been easier had the project provided childcare. A small number of projects reported finding this a challenge: one project could not find appropriate childcare facilities whilst running groups in schools.
- **Mental health provision:** Projects found there to be a long waiting list for services providing mental health support, particularly for adults. This hindered the projects’ ability to move the family forwards. Projects also highlighted gaps in access to affordable counselling and therapeutic support; in particular bereavement was a major issue affecting many children and there was limited available support for this.
- **Support for kinship carers:** Nurturing Inverclyde identified that a high number of children they were supporting were living with kinship carers, mainly grandmothers. This was an emerging issue and they felt support needed to be developed to meet their specific needs.
- **Support for children with additional needs.**

At times these gaps placed some families in 'limbo'; they had completed their support from the project, but were still waiting to receive more specialist support from other services. In response Stronger Families, Future Communities Southend was considering devising a light-touch support group whilst families waited for the other support to become available.

However, in addition to this projects did not always provide holistic support simply because they did not always focus on, or succeed in, engaging all members of the family. Some members of the Family Panel felt that the support often focused on addressing the children's needs at the expense of the adults' needs, as reported on earlier. This may explain why the projects generally had more success in achieving children outcomes rather than adult outcomes (see Chapter 3).

*"Best thing for me, what people look at is children, children, children, but they don't take care of the foundation, that if they want better children, the mother needs help. Sometimes we are just covering up, as you don't want people to see, but people are crying inside. Sometimes we need the help, as we don't have anyone to talk to. They have to empower women."* (Member of Family Panel)

Moreover, projects and families reported that the projects tended to focus more on supporting the mothers than the fathers. To a certain degree this reflected the demographics of the families, many of whom consisted of single-parent families with absent fathers. However, where fathers were present, projects generally reported that they struggled to engage them. Equally, parents interviewed felt that the services were not always fully geared up to support fathers. For example, one parent noted that it would be useful if activities for fathers were able to be planned on a weekend so they could attend.

*"We try to offer support and engage [fathers], but it is often mums that we end up directly supporting".* (Project manager)

Nonetheless, the evaluation found some examples of good practice in this area, with a small number of projects proactively seeking ways to engage fathers and boys in more innovative ways. For example, Securing Futures, Carmarthenshire developed an online counselling programme to engage males, who were often reluctant to access face-to-face counselling. Families Moving Forward, Portsmouth set up a 'working dad's event' so fathers could attend at times when they were not working. More information on the projects' support for fathers can be found in the Improving Futures learning paper: [Fathers and Families](#).

### 2.6.2.3 Sustainability

As referenced in the previous section, securing follow-on funding was much more challenging than many of the projects had envisaged at the outset.

## 2.7 Conclusion

Broadly speaking the Improving Futures programme achieved its first aim of establishing ‘New approaches to local delivery, demonstrating replicable models which lead to more effective, tailored and joined-up support for families with multiple and complex needs’. Although the 26 projects were quite varied in their specific focus and delivery models, they were broadly offering one-to-one and group family support, which had a therapeutic focus. It was often regarded as offering an alternative to other types of family provision in the local areas. In this regard the projects filled a gap in local provision.

Overall project workers, families, and local stakeholders reported that the projects were developing approaches that were leading to effective, tailored and joined-up support. The Improving Futures principles summarise the approaches; central to this was the relationship between the families and their key workers. This was dependent on the personal qualities of the key workers, particularly in being respectful, approachable and personable.

In some areas the projects did struggle, however. To a certain degree there was a mismatch between the project design and the families they were referred. Project workers in particular described how families’ needs were more complex than they envisaged; projects struggled with providing families with enough support to meet their needs whilst meeting their projected figures and the needs of other families waiting for support. Coupled with this, projects did not always provide completely holistic support. Some would have benefitted from recruiting key workers more experienced in providing intensive whole family support, and focusing on adults (particularly fathers) as much as they focused on children.

These aspects – an ability to engage and build strong relationships with families; and a strong focus on children (sometimes at the expense of adults) - most likely explain why the projects made good progress against some families outcomes, and less progress in others, as we explore further in the following chapter.

## 3.0 Outcomes from the Programme

*“Everything has fallen into place and I’m able to get on with day to day things. She has really built my confidence back up.” (Parent)*

This chapter provides evidence on the characteristics of families supported through the Improving Futures programme and how these compare to other family interventions. It further discusses the extent to which families experienced short and longer-term outcomes following their participation in Improving Futures, and in how far these can be attributed to their participation in Improving Futures.

### 3.1 Data, methods and caveats of the analysis

The analysis presented in this chapter is based on three different datasets:

- The **Improving Futures Monitoring Information System (IFMIS)**: A centralised and secure online monitoring system of strengths and risks factors for families in which data was collected by project case workers. In this chapter, the IFMIS data is used to describe the background characteristics of families supported through Improving Futures and the short-term outcomes achieved by families upon exit from the programme ('distance-travelled').
- A **longitudinal panel survey of families supported by Improving Futures**: This collected data on satisfaction with the processes of the programme, a number of relevant outcomes and self-reported 'distance-travelled' measures. Data were collected at baseline and at two follow-up stages (+12/+18 and 24 months). Survey data were used to analyse the long-term or sustained outcomes experienced by Improving Futures families.
- **Qualitative interviews with families**: Including one-to-one interviews held with families during the case study visits, and discussions with families as part of the Family Panels. During the Family Panels we presented the headline findings from the quantitative analysis, and asked the families to offer their interpretations of the data based on their own experiences.

As described in the Introduction, all data comes with a number of caveats which should be kept in mind when interpreting the findings. These relate to the extent to which the data may be biased and can be generalised to the full cohort of Improving Future families. For a description of the data and associated caveats, please see [Annex I](#).

## 3.2 Characteristics of families supported

This section provides an overview of the profile of the families supported by Improving Futures with regards to socio-economic background characteristics and the extent to which they were facing risks and displaying strengths when joining the programme. Results presented below refer to those 3,685 families for whom entry and exit data were available via IFMIS.

### 3.2.1 Family structure

The majority of families supported by Improving Futures projects were lone parent families (61%). This was much higher than the share of lone parent families among all families in the UK (15%)<sup>12</sup>, and in similar programmes, such as the Troubled Family programme (48%)<sup>13</sup>, or the most disadvantaged families registered with the Children Centres in England (53%)<sup>14</sup>. In line with the fact that most lone parent families were led by a female adult, the share of Improving Futures supported families with no male adult in the household was 66%. In a small number of cases (3%) no female adult was present in the household. A relatively small number of teenage parent families were supported by the Improving Futures programme (5%). The relatively low share of teenage parents supported may be due to the fact that the initial eligibility criteria included the condition that the oldest child had to be between five and ten years of age; teenage parent families would typically not meet this criterion.

**Table 3.1: Family structure of Improving Futures families, % of families supported**

Characteristic	Yes		No		Unknown	
	number	percentage	number	percentage	number	percentage
Lone parent family	2,236	61%	1,364	37%	85	2%
At least one female adult in household	3,425	93%	125	3%	135	4%
At least one male adult in household	1,121	30%	2,429	66%	135	4%
Teenage parent family	192	5%	3409	93%	84	2%

Source: IFMIS data, extracted 23.01.2017, based on 3,685 families for which entry and exit data were available

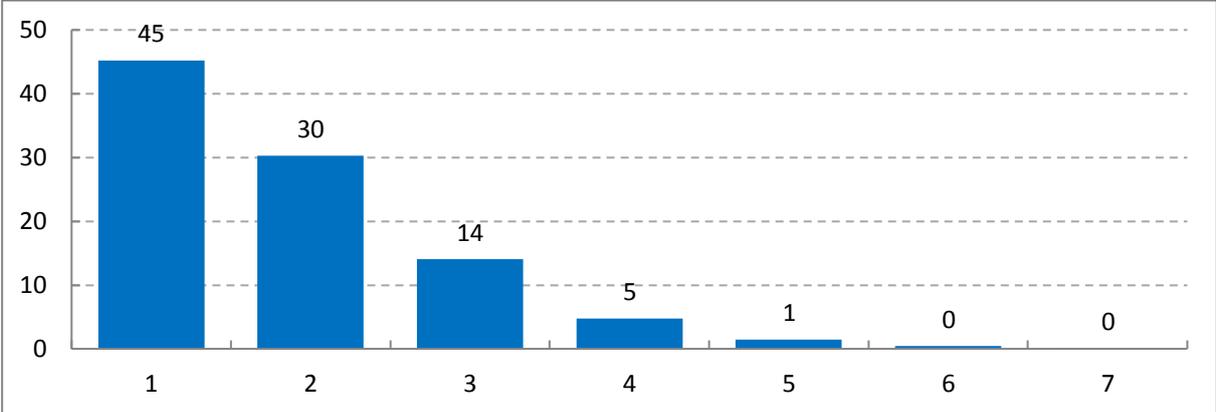
<sup>12</sup> ONS (2016), Statistical bulletin: Families and households in the UK: 2016, 4 November 2016, [report here](#), accessed 25.01.2017

<sup>13</sup> Whitley, J. (2016), National Evaluation of the Troubled Families Programme, Final Report on the Family Monitoring Data p. 48; please note that this is based on a sample of the monitoring data collected by local authorities. A survey conducted in the context of the same evaluation found that 67% of families who participated in Troubled Families were lone parents.

<sup>14</sup> Sammons, P. et al (2015), The impact of children's centres: studying the effects of children's centres in promoting better outcomes for young children and their families, DfE Research Report, December 2015: p. 103.

Three in four families (75%) supported by the Improving Futures programme had one or two children. Smaller shares of families had three children (14%), four children (5%) and five or more (2%). This was broadly in line with the number of dependent children in families in the UK overall, in particular lone parent families<sup>15</sup>, but different from the family composition of Troubled Families participants of which over one third of families had three or more children<sup>16</sup>; this is most likely due to the limit on the age of the eldest child in the Improving Futures programme (10). **Figure 3.1** presents these results graphically.

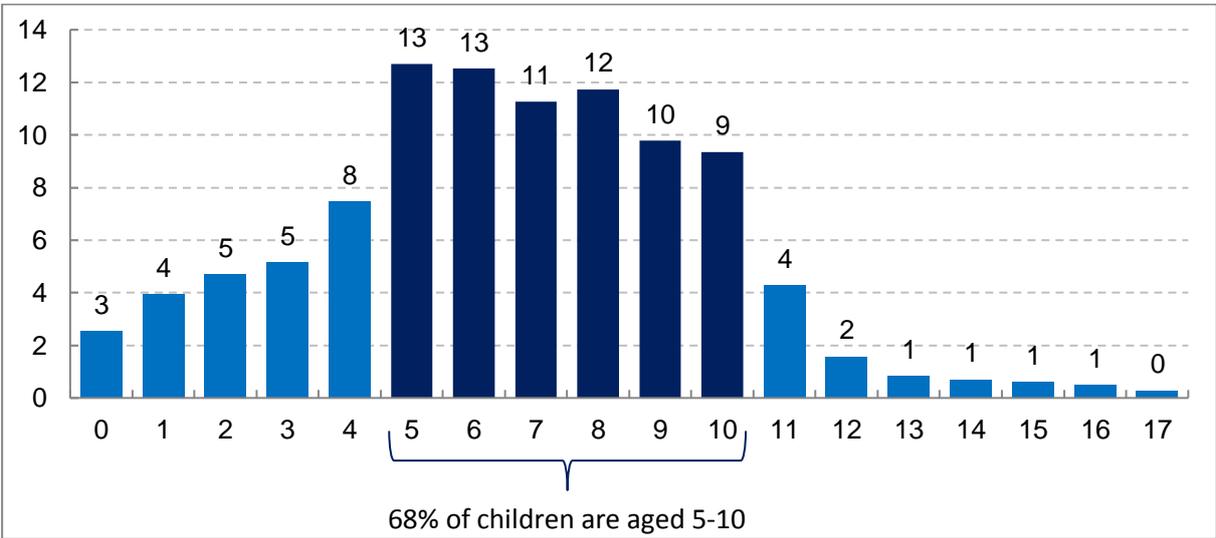
**Figure 3.1: Improving Futures families by number of children, % of families supported**



Source: IFMIS data, extracted 23.01.2017, based on 3,685 families for which entry and exit data were available. Please note that the analysed IFMIS data contained 142 families with no children recorded.

The majority of children supported by the Improving Futures programme were between five and ten years of age (68%). This reflects the initial eligibility criteria, which specified that the oldest child should be in this age group. One in four children in Improving Futures families were under the age of five (25%), while only 10% were over the age of 10. This indicates that the loosening of the eligibility criteria was only relevant for a limited number of families for whom data was available.

**Figure 3.2: Age of children in Improving Futures families, % of children in specified age group**



Source: IFMIS data, extracted 23.01.2017, based on 6,518 children for which entry and exit data were available. %s may not total 100% due to rounding.

<sup>15</sup> ONS (2016)

<sup>16</sup> Day, L. et al (2016), National Evaluation of the Troubled Families Programme, Final Synthesis Report, October 2016: p. 34

With regards to the gender of children involved in the provision, 42% of families involved in Improving Futures had male children / boys only, while only 23% had female children / girls only.

### 3.2.2 Ethnicity and socio-economic background

Families supported by Improving Futures displayed a range of characteristics that can be associated with socio-economic disadvantage. The majority of families supported by Improving Futures were eligible for free school meals (FSM, 57%). Additionally, FSM status was unknown for 27% of families. This was higher than school-meal eligibility in all four nations: 14% of pupils were eligible for and claiming FSM in England in 2016<sup>17</sup>, 18% of pupils aged 5-16 were eligible for FSM in Wales in 2015/2016<sup>18</sup>, 38% of pupils were eligible for FSM in Scotland in 2016<sup>19</sup> and 31% of pupils were eligible for FSM in Northern Ireland in 2015/2016.<sup>20</sup>

Slightly more than one in four (26%) Improving Futures families had at least one family member who was from a minority ethnic group<sup>21</sup>. This was broadly in line with similar programmes such as Troubled Families, where 20% of primary carers were from ethnic minority background<sup>22</sup>, and in Children Centre's, where approximately 26% of children were from a minority ethnic group<sup>23</sup>.

**Table 3.2: Ethnic and socio-economic background of Improving Futures families, % of families supported**

Characteristic	Yes		No		Unknown	
	number	percentage	number	percentage	number	percentage
Any family member from ethnic minority	960	26%	2725	74%	n/a	n/a
Eligibility for Free-school meals	2,112	57%	593	16%	980	26.6%

Source: IFMIS data, extracted 23.01.2017, based on 3,685 families for which entry and exit data were available

<sup>17</sup> DfE (2016), Schools, pupils and their characteristics, January 2016, SFR 20/2016

<sup>18</sup> Stats Wales (2016), Pupils aged 5-15 eligible for free school meals by local authority, region and year

<sup>19</sup> Scottish Government (2016), School meals and PE supplementary data, healthy living survey 2016

<sup>20</sup> DoE Northern Ireland (2016), Statistical Bulletin 4/2016, School Meals in Northern Ireland 2015/2016, 14.04.2016

<sup>21</sup> Minority ethnic group is here defined as any non-white ethnic group, i.e. does not include Irish or other white ethnic minorities.

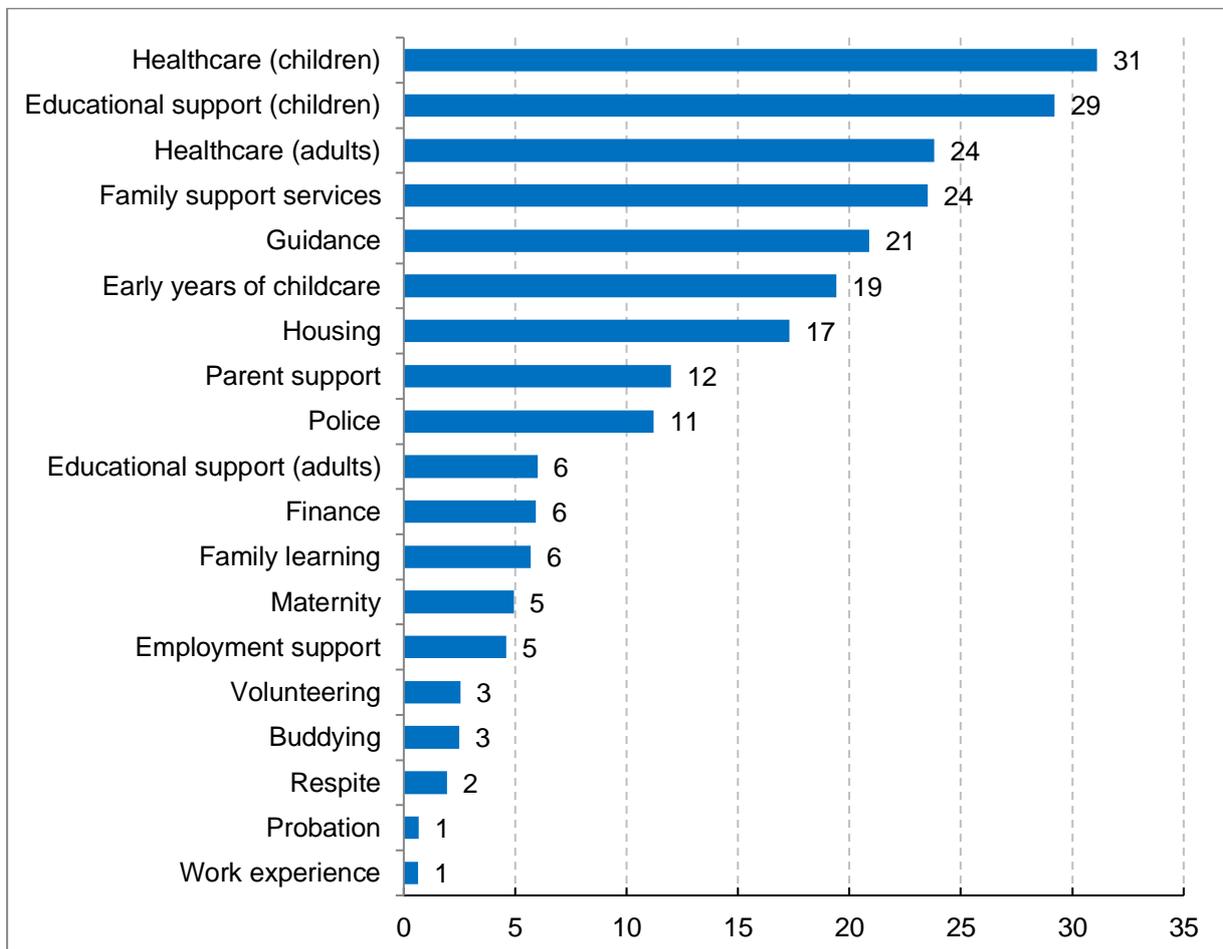
<sup>22</sup> Whitley, J. (2016), National Evaluation of the Troubled Families Programme, Final Report on the Family Monitoring Data p. 50

<sup>23</sup> Sammons, P. et al (2015), The impact of children's centres: studying the effects of children's centres in promoting better outcomes for young children and their families, DfE Research Report, December 2015: p. 24

### 3.2.3 Use of support services previously

73% of families had accessed at least one other support service in the 12 months prior to joining the Improving Futures programme, most frequently healthcare for children (31%) and adults (24%), educational support for children (29%) and other family support services (24%) (see **Figure 3.3**).

**Figure 3.3: Received support 12 month prior to joining, % of families supported**



Source: IFMIS data, extracted 23.01.2017, based on 3,685 families for which entry and exit data were available

This illustrates that for the majority of families involved Improving Futures was not the first time they received support in the previous 12 months, although the nature of the support previously accessed was likely to have been very different from the 'wrap-around support' provided by many Improving Futures projects.

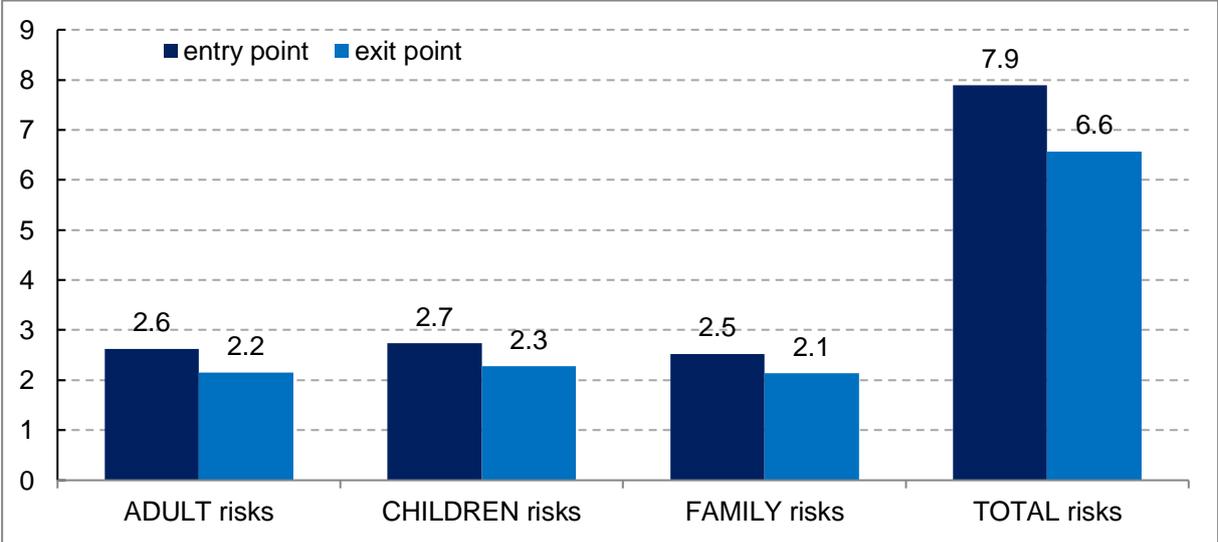
### 3.3 Short-term outcomes achieved during the programme

This section analyses the short-term outcomes, or ‘distance-travelled’, by Improving Futures families during their participation in the programme. It compares the prevalence of risks and strength factors prior to their participation in the programme to the prevalence of these factors at exit stage. It then provides insights on how outcome improvements vary by families’ socio-economic background characteristics. As in the section above, results presented below refer to those 3,685 families for whom entry and exit data were available.

#### 3.3.1 Risks

Families experienced 7.9 risks on average when joining the Improving Futures programme. This number decreased to a total of 6.6 risks when families exited the intervention. **Figure 3.4** below shows that all types of risks, i.e. adult, children and family-related risks, decreased between the family joining and leaving the intervention.

**Figure 3.4: Average number of risks factors per family**



Source: IFMIS data, extracted 23.01.2017, based on 3,685 families for which entry and exit data were available

Taking a closer look at the types of risks faced by families at baseline, the most common risks related to parenting difficulties, in particular parenting anxiety or frustration (64% of all families at baseline) and problems with discipline and boundary setting (49%) (see **Table 3.3**). Other frequently observed risks at baseline were suspected or reported stress or anxiety of the adult (46%) and the child (33%), different levels of child behavioural and educational problems such as low-level behavioural difficulties (38%), persistent disruptive behaviour (25%), persistent disruptive and violent behaviour (18%) and educational underachievement (19%). Further issues observed at family level were relationship dissolution (38%), historic (22%) or ongoing domestic abuse (19%) and worklessness (18%).

Where comparisons can be drawn, the risk profile of Improving Futures families was similar to those supported through Troubled Families. 67% of Troubled Families participants entering the intervention experienced parenting difficulties. 43% of main carers in Troubled Families had experienced family break-up since becoming an adult and 38% had experienced domestic abuse or violence.<sup>24</sup> It should be noted, however, that no comprehensive comparisons between both programmes can be made due to differences in recording risk factors. Also, during the case study visits, stakeholders reported that the needs of families supported by the Improving Futures projects were generally perceived or understood to have been lower than those supported by the Troubled Families programme; indeed a number of projects were a 'step down' from the first phase of the Troubled Families programme.

**Table 3.3** shows that on average families saw **improvements** across 8 of the 10 most frequent risks at baseline. Largest percentage decreases in risks were seen for children's persistent disruptive behaviours (-40%) and parental problems with discipline and boundary setting (-39%). Below we draw on the qualitative research to provide examples of where some of these risks reduced.

**Table 3.3: 10 most prevalent risks at baseline, exit and percentage change**

		% of families at entry	% of families at exit	% change
Parenting difficulties	Parenting anxiety or frustration	64	43	-32%
	Problems with discipline and boundary setting	49	30	-39%
Mental health problems	Suspected or reported stress or anxiety (adult)	46	37	-20%
	Suspected or reported stress or anxiety (child)	33	24	-27%
Behavioural problems	Low-level behavioural difficulties	38	36	-7%
	Persistent disruptive behaviour	25	15	-40%
Family breakdown	Relationship dissolution	38	39	+3%
Domestic abuse	Historic incidence of domestic abuse/separated	22	23	+4%
	Domestic abuse (adult harm)	19	13	-33%
Educational problems	Achieving below expected levels for age (no known special educational needs)	19	15	-20%

Source: IFMIS data, extracted 23.01.2017, based on 3,685 families for which entry and exit data were available

### 3.3.1.1 Parenting difficulties

As referenced above, parenting difficulties was one of the main risks facing the Improving Futures families, with almost two thirds (64%) of families facing parenting anxiety or frustration when the support began. This was also one of the areas where families made the most progress, with the number of families facing parenting anxiety or frustration showing a 32% decrease from entry to exit by the end of the support.

These findings can be further explained and contextualised with reference to the qualitative evaluation data. There was significant emphasis on parenting support across the Improving Futures projects, be it formally through the provision of courses, or informally through advice and practical support to develop strategies for managing behaviour or communicating more effectively. Whatever the nature of the support, many of the parents who were interviewed felt that they had been able to make significant and positive changes to their households, improving their confidence in their own abilities as parents.

<sup>24</sup> All Troubled Families data, please see Day, L. et al (2016), National Evaluation of the Troubled Families Programme, Final Synthesis Report, October 2016

*"It has given me more confidence as a single dad to think things through. Before I was on auto pilot, but now I am able to think a little further ahead."* (Parent)

During a Family Panel the family members identified this as one of the key areas where the project had supported them. They described how the biggest help from the projects was in increasing their self-belief as a parent, which helped give them the strength to change their parenting strategies and behaviour.

*"I went to all the courses - strengthening families, and communities, empowerment for parenting - but I couldn't express myself. Then I started to tap into my self properly and realised that I had lost my confidence, I had met everything I was meant to but I wasn't myself. So I went to another one which was about self-esteem, which has made such difference."* (Member of Family Panel)

*"I didn't think I was good enough to parent me bairns, now I do."* (Member of Family Panel)

Parents talked about how the parenting courses they attended had improved their communication with their children, resulting in both improved behaviour and family relationships.

*"I'm talking to my children better now, not just nagging them. I'm finding different ways of approaching them, asking them to do things."* (Parent)

*"The project has helped a lot as I was quite shouty, didn't really spend a lot of time with them. It shows you another way of dealing with them, wording things differently, and the difference is amazing."* (Parent)

**Family case study 1** provides a case study of a family whose parenting difficulties reduced during the support.

#### **Family case study 1: Example of reduced parenting difficulties**

In one family the grandmother was caring for her two grandchildren. One of the grandchildren had hyperactivity and found it difficult to concentrate. The grandmother outlined that she found it difficult to deal with the stress. The one-to-one and family support the grandmother received helped her to deal with the child's challenging behaviour, as she had the opportunity to talk about what might work to encourage him. As a result, the grandmother felt she had been able to put some changes in place in the way she structured the home life.

*"After speaking to [the project worker], I thought I'd try a reward chart for [my grandson] and set challenges and goals for him to achieve. Because he responds well to structure, this has really worked to help him."*

### **3.3.1.2 Mental health problems**

Levels of suspected or reported stress or anxiety were high amongst the Improving Futures families. Almost half of families had at least one adult with suspected or reported stress or anxiety; and one in three with a child with suspected or reported stress or anxiety. Isolation, loneliness and anxiety all presented as key issues for parents participating in the qualitative interviews.

The percentage of adults with suspected or reported stress or anxiety fell by 20% and for children this fell by 27%. Again, these reductions were also apparent from the qualitative evidence. For many of the families interviewed, this came from tackling the other challenges in the families' lives, most notably the family relationships and children's behaviour. It was also achieved by boosting the families' emotional wellbeing. A number of parents talked about how support from their key workers had improved their confidence. One parent had previously been in an abusive relationship which had damaged her confidence; in the interview, she talked about how her key worker had been an inspiration and rebuilt her confidence, not only around parenting but also on other issues:

*“Everything has fallen into place and I’m able to get on with day-to-day things. She has really built my confidence back up.” (Parent)*

Another described how she had been taking anti-depressants before her engagement with the project, but with their support had felt able to stop taking them. The improvement in her confidence and in her ability to cope with the family’s problems because of the key worker’s help had led to this.

*“[The project worker] was like my mum, she really supported me emotionally which was the most important thing... she changed me completely emotionally, she was working with me 24-7.” (Parent)*

The case study below provides an example of how one project successfully reduced a child’s anxiety levels.

### **Family case study 2: Reduced anxiety in children**

A single parent and her six year old son were referred to an Improving Futures project by the son’s headteacher as a result of his anxiety over attending school (stemming from separation anxiety), with the aim of improving his confidence. The key worker took a holistic approach and worked with the whole family, including the grandmother as it was thought some of her anxious behaviours were impacting and influencing her grandson. However, she also focused attention on the son, coming to the house and playing with him up to twice a week, building trust and rapport.

The relationship developed to the point where the key worker was able to pick up the son from school and take him to the park alone. The mum explained how the key worker had shown her strategies to deal with her son’s behaviour and that the mum had learnt from the way the key worker would give the son choices and involve him in decisions. She saw a significant change in her son: his confidence improved and he was more settled at school, attending breakfast club without any problems. His speech also improved as well as bedtime routines, with her son even asking to go to bed sometimes. She felt this was because he had been able to make choices during the day.

*“[The key worker] has made him feel so much better and his confidence is up... she’s patient, fun, very understanding and shows him respect... it’s a great project. I would recommend it – it’s certainly helped me and my son.”*

Projects were not always successful in reducing stress and anxiety, however, and outcomes were sometimes more disappointing for families with longer term or more entrenched problems. For example, during a Family Panel, one parent described how their son’s mental health had improved, but theirs had not.

*“When I go to my GP, they said that my children are looking ok, but you don’t look after yourself and you are getting depressed. But I didn’t know that, but I can’t know myself and I didn’t see how I was before.” (Member of Family Panel)*

*“Stress levels are having a really bad impact, t’s accumulated stress and it can start becoming an illness.” (Member of Family Panel)*

When the limited progress in adult wellbeing (relative to the other outcome areas) was discussed with projects, many reported that they felt adult mental health issues could not be tackled in the limited periods of time they had with families. Additionally, during a Family Panel one family member described how some families’ stress levels were increasing due to reductions in available welfare, offsetting any reductions that might have been achieved by the project:

*“...other families have seen cuts in their benefits or squeezes on their finances which cause stress and anxiety about how parents can look after their children.” (Member of Family Panel)*

### 3.3.1.3 Behavioural problems

A large proportion of Improving Futures families included children with behavioural problems, spanning from over a third with low-level behavioural problems, to almost one in five having persistent, disruptive and violent behaviour. The qualitative interviews showed a number of examples of children refusing to go to school or behaving badly while in attendance.

Amongst the most prevalent risk factors, families made the most progress in reducing behavioural problems. In particular, the number of families with at least one child with persistent, disruptive and violent behaviour halved (from 18% to 9%). A number of parents talked about how their child's behaviour had improved as a result of participating in the project. Parents talked about their children being happier and more settled at school, receiving good feedback from teachers. One parent remarked during a Family Panel:

*"I've got a different kid."* (Member of Family Panel)

**Family case study 3** provides an example of a project supporting a family to improve the child's behaviour.

#### Family case study 3: Example of reduced behavioural problems

One project supported a single mum with her five year old son's behavioural issues. He did not like attending school and looked for excuses not to go, and he had difficulty managing his temper, often lashing out at his mum. The family was referred to the project after working with HomeStart and CAMHS, and after completing the Family Star with their practitioner, behavioural issues were identified as the most pressing need.

To address this, the practitioner set up an action plan, which the mum explained helped her to feel more in control. The practitioner met with the mum one morning per week and both the son and mum together one afternoon a week. Together, they set up a 'treat box' and pocket money system to encourage the son to adapt his behaviour. The practitioner also asked them to take pictures to show how well he had done to earn his treats. Although they had only been working with the project for around six weeks, the mother saw their engagement as beneficial already:

*"It makes a difference to have someone else explaining the treat box to him, he will work harder for other people... the work she's done so far has really benefitted us."* (Mother)

### 3.3.1.4 Worklessness

Only a fairly small minority of families (15%) had at least one member of the family in full time employment. This figure marginally increased upon exit, to 17%.

The qualitative interviews provided examples where adult family members were supported into employment, although these examples were relatively dispersed. For example, four adults volunteering for the Tyne Gateway, Tyneside project were employed by the local authority's Troubled Families programme. However, there were also examples where employment support did not lead to employment: one family had support to set up their own business, including courses on self-employment; a father attended an employment course which involved visiting and speaking to a range of employers, updating his CV and doing a range of qualifications; and one father was referred to a local employment programme. However, none of these resulted in new employment being found. Additionally, some families were supported into volunteering. However, there were very few examples within the family research of volunteering being used as a route to employment or with the main aim of building new skills.

Several reasons were provided by projects and families to explain why there had not been significant increases in employment rates:

- **Families needs too complex:** Even upon exit, families were still very far from the labour market, and so entering employment remained a challenge.
- **A perceived lack of availability of secure, well-paid jobs:** During a Family Panel families described how the only employment opportunities available were short-term, unsecured contracts. These families found it difficult to accept these jobs, because they had to pay rent and the work was too insecure. Some, however, felt like they had no choice.

*“If I got a job, I’ve got a private let, I need a full time job – but if a part-time or temporary job comes up it’s too much risk. But then if I turn it down, I get sanctions. I feel forced into it.”* (Member of Family Panel)

- **Lack of affordable childcare:** As we mentioned previously, projects and families reported a lack of affordable childcare, which prevented them from finding suitable jobs. In a Family Panel, those that were in work relied on their spouses or grandparents to care for the children. However, as many of the families supported by the Improving Futures projects were isolated single families, they did not have family links they could turn to for unpaid childcare. **Family case study 4** provides an example of affordable childcare acting as a barrier to employment for one family.

*“They keep saying get a job, there’s no-one that doesn’t want to work, you have kids, you have to look after your kids.”* (Member of Family Panel)

#### Family case study 4: Example of affordable childcare being a barrier to employment

One family consisted of a single father and three children. The mother left the family when the youngest child was six months old. The father had to leave his job, as he could not afford the childcare. The project supported the family, particularly around finding new housing and sorting out paying the bills. However, at the end of the support he was still not able to return to work, as he was still unable to find any affordable childcare.

Some projects interviewed were of the view that employment was beyond the scope of the project, particularly as the families’ needs were too complex to support families into employment in the time period they had with the family. These projects felt that their support needed to be seen as *“just one piece of the jigsaw”* (Project Manager). Interestingly, families too did not necessarily see the project support as a route into employment: only 11% of those responding to the beneficiary survey identified employment as one of the main things they hoped to achieve for them and their family from taking part in the project.

Other projects, however, recognised that they had not made as much progress with employment outcomes as they had hoped, and had underestimated how challenging it would be to support families into employment. During learning event one project reflected on whether the Improving Futures projects had *“missed a trick”* by not focusing enough on supporting adults into employment.

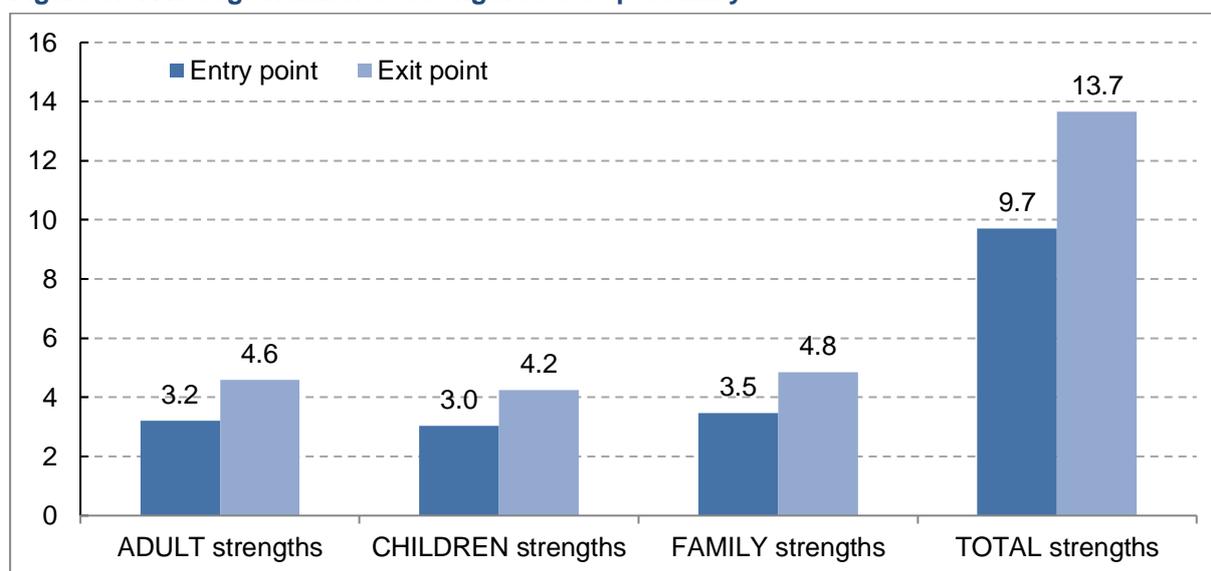
### 3.3.1.5 Risks where limited progress was made

While improvements could be seen across a wide range of indicators, the IFMIS data also suggests that some risks increased during programme participation. This included, for example, increases in diagnosed mental health problems in adults and children (including ADHD/ASD or conduct disorders) and increases in instances of relationship counselling and relationship dissolution (including due to instances of domestic abuse). For some issues, particularly related to the ADHD/ASD diagnoses, the qualitative research suggests this was due to projects identifying unmet needs. Additionally, while these issues showed up as increased risk for the family when exiting the programme, these may have actually led to more favourable adult, child and family outcomes in the medium to long-term. A full analysis of the distance-travelled on all indicators can be found in [Annex VI](#).

### 3.3.2 Strengths

Families displayed 9.7 strengths upon entry to the programme on average, which they were able to increase to 13.7 strengths at the point of exit. Families increased strengths across the different factors including amongst adults, children and the family as a whole (see [Figure 3.5](#) below). Projects made more progress in increasing strengths than decreasing risks, likely reflecting the strength-based approach adopted by most projects.

**Figure 3.5: Average number of strength factors per family**



Source: IFMIS data, extracted 23.01.2017, based on 3,685 families for which entry and exit data were available

Largest increases in strengths factors related to parenting skills, such as establishing regular bedtimes, mealtimes and a school routine (+48%), appropriate boundary-setting for children (+56%) and an increased moderation of TV watching and computer use (+56%) (see [Table 3.4](#)). On average, children in Improving Futures families benefitted most through increased supportive peer friendships and participation in positive out-of-school activities. In many cases Improving Futures contributed to improvements in family finances through supporting families in putting a family budget in place and managing this (+15%) as well as helping them access the appropriate benefit entitlements (+15%). Below we draw on the qualitative research to provide examples of where some of these strengths increased.

**Table 3.4: 10 strengths with the biggest percentage point increase between baseline and exit**

		% of families at entry	% of families at exit	% change
Parenting skills	Regular bedtimes, mealtimes and school routine	40	60	+48%
	Appropriate boundary setting for children	34	53	+56%
	Moderation of TV watching and computer use	29	45	+56%
Supportive peer friendships	Active and regular supportive contact with friends or community members	29	46	+58%
	Supportive peer friendships at school	46	62	+34%
	Regular contact with friends outside of school	31	46	+49%
Participation in positive out-of-school activities	Regular participation in sports or leisure activities	23	39	+68%
	Regular participation in play opportunities	36	51	+41%
Finances	Family budget in place, and being actively managed	33	50	+53%
	Adult family members accessing appropriate benefit entitlements	46	61	+33%

Source: IFMIS data, extracted 23.01.2017, based on 3,685 families for which entry and exit data were available

### 3.3.2.1 Supportive peer friendships

As mentioned in the previous section, many of the projects focused on linking families in with peers and their communities. The IFMIS data showed that projects make good progress in this area; the percentage of families who had active and regular supportive contact with friends or community members increased by 58% (from 29% to 46%). These gains were also apparent in the qualitative research. Members of Family Panels described the benefits they gained from their enhanced social networks; they found it cathartic and reassuring to know there were other people in the same situation. It also helped for them to get a sense of whether they were doing the right thing by discussing things with other people. They also described how their children had made more friends, both in school and through meeting other children during activities organised by the projects. **Family case study 5** provides an example of where a project reduced a family's social isolation.

*"It does help you to know there are others in the same group."* (Family Panel member)

*"Sometimes being a parent can be very lonely, some of these parents, the people they communicate with in the service are probably the only place that they come into contact with and they go back to their private and lonely living, but they have actually taken away some energy with them from the group and make a better quality of whatever you are doing there. It helps them to go back and to be able to deal with children and do proper parenting. A happy parent makes a happy child. And you look forward to coming back."* (Family Panel member)

### Family case study 5: Reducing social isolation

**Background:** The family comprised of a mother and two children, aged six and three. The mother had recently left an abusive relationship with significant domestic violence. Due to an accusation from her husband, of which she was cleared, the children had spent four months in care and had recently been reunited with the mother. Prior to the referral the mother had moved to new accommodation, lost her job and essentially having to restart her life. She lived in a new unfamiliar area and had lost a lot of support networks because they were linked to the husband. She felt very isolated.

**Support:** During the support the project worker pointed out to the mother her, and in particular the children's, social isolation. The mother found this very helpful – she had been “*bogged down*” with issues surrounding her past and had not thought about this. The project worker linked the family into local services and networks, and provided practical help for the mother to take her children out (e.g. supporting with swimming).

**Outcomes:** The mother had a positive experience of her support with the project. In particular, she found it useful that the project had been able to root them into the community.

#### 3.3.2.2 *Child participation in positive out-of-school activities*

At the end of support half of children were regularly participating in play opportunities, and over a third were regularly participating in sports or leisure opportunities.

The case studies showed that the provision of positive activities had a significant impact on participants in Improving Futures, with both adults and children alike experiencing positive outcomes from the range of activities offered across the programme. Parents described their children as being more confident after socialising more and attending activities, and the impact was similar on parents.

*"They're around other children rather than being stuck in the house. They seem happier, a lot happier, because they can see me and dad are happier."* (Parent)

### Family case study 6: The impact of positive activities

One Improving Futures project provided support to a family with four children, whose father suffered from depression and agoraphobia. After hearing about the project from the children's school, they approached them specifically for help with finding after school clubs or somewhere for the children to socialise outside of school, not only for the children but also to give the mother opportunities to meet other parents – *"I wanted to feel I was part of a support group and not by myself."* They participated in a number of trips which were organised with other families and the mother found this to be a great way of finding something to do with the kids. The children also attended a holiday club organised by the project.

As a result of their participation, the mother felt that her children were much more outgoing as they were very shy before. She also felt that she had benefited from the trips and the groups enormously – it helped her to know that there are other families in the same situation and she felt much less lonely.

#### 3.3.2.3 *Finances*

At the end of the support the percentage of families with a family budget in place and being actively managed increased from 33% to 50%.

Debt and finances were a significant issue for the families interviewed. Key workers employed a range of approaches to supporting parents to deal with debt and finance issues. This often involved acting as an intermediary to other organisations or helping the parent in practical terms: one parent was helped to apply for government funding to move house, and her key worker also helped her fill in a range of other forms. Many families spoke of being supported to access the Citizens Advice Bureau to find help to deal with debt problems.

In other cases, financial help was more direct. Some participants received help with travel costs to attend days out or other activities, which was of particular importance for those living in rural areas where public transport was infrequent and expensive. Other families were supported through financial help from the project to make purchases: some projects had budgets to buy larger items for families such as beds and furniture, and one parent received some funds to buy Christmas presents.

#### 3.3.2.4 *Strengths where limited progress was made*

On the other side of the spectrum, families made limited progress with regards to 'harder outcomes' such as gaining qualifications and employment, as well as formal volunteering and other forms of civic engagement. A full analysis of the distance-travelled on all indicators can be found in [Annex VI](#).

### 3.3.3 Variation in outcomes achieved for different background characteristics

Beyond the changes in risk and strength factors experienced by Improving Future families, we were interested in understanding if short-term outcomes ('distance travelled') varied by families' socio-demographic background characteristics or the intensity of support received through Improving Futures.

To this end, we created a set of composite indicators, which indicated if Improving Future families had seen a positive change with regards to adult, child or family risks and strengths. We then ran regression analyses to see how family background characteristics and the length of involvement with Improving Futures were related to experiencing positive change. To read about the detailed methodology and results, please see [Annex IV](#).

**Table 3.5** shows how family composition, family socio-economic background, prior service use and time spent in the Improving Futures programme relate to **decreased risks** for adults, children and family after participation in the programme. This table and those following should be read as follows:

- The '+' sign indicates that a specific family background variable, e.g. being a lone parent family, correlates positively with decreased risks. This means that a lone parent family is more likely to have experienced a decrease in risk when exiting the Improving Futures programme than a two-parent family or any other family constellation.
- The '-' sign indicates that a background variable, e.g. any family member from an ethnic minority, correlates negatively with a decrease in risk. This implies that a family where any member is from an ethnic minority background is less likely to have experienced a decrease in risk upon exiting the Improving Futures programme than a family where all members are from ethnic minority background.
- It should be noted that only the direction of the effect is indicated in the table (positive or negative) and not the size of the effect. This is due to the fact that the robustness checks conducted led to variation with regards to effect sizes. We only display results that were conclusive in both methodologies applied.

In sum, **Table 3.5** shows that, with regards to **family composition**, lone parent families were more likely to experience a decrease in adult and family risks upon exiting the programme, compared to two-parent families or other types of family composition. Families with at least one female adult in the household were also more likely to experience a decrease in risks than families without a female adult member. Other factors relating to family composition, such as being a teenage parent family or having children under the age of three, did not have any relationship with a decrease in risks.

With regards to **socio-economic background**, it showed that families with free-school meal eligibility were more likely to see decreased risks for children and the whole family, albeit not for adults. Families with ethnic minority or mixed background were less likely to see a decrease in risks for adults and children.

Having accessed **other support services** prior to joining Improving Futures and **spending longer time** in the Improving Futures programme were both positively correlated to a decreased risk of adults and the family as a whole.

**Table 3.5: Relationship between family background variables and decreased risk when exiting Improving Futures**

Family background variable	Decreased risk		
	Adults	Children	Family
Lone parent family	+		+
Teenage parent family			
At least one female adult in household	+		
At least one male adult in household			
At least one child under 3			
At least one girl child			
At least one boy child			
Any family member from ethnic minority (non-white)	-	-	
Eligible for FSM		+	+
Accessed any support service prior to joining	+		+
Time spent in Improving Futures programme	+		+

Source: IFMIS data, extracted 23.01.2017, based on 3,435 families, outcome variable is a composite 'risk' indicator, results from regression analysis

**Table 3.6** shows how **increases in strengths** varied by family characteristics. This shows a different pattern to the reduction in risks. In the case of families with ethnic minority and mixed background for example, we saw that they were less likely to experience a decrease in risks for adults and children. However, these families seemed to be more likely to experience an increase in strengths upon exit from the programme. This suggests that both processes may be driven by different mechanisms.

Lone parent families were also more likely to see an increase in children’s strengths upon exit of the Improving Futures programme, while families with at least one male adult member in the household were more likely to see an increase in adult, child and family strengths. Further, families with very young children (below three years of age) were seen to have a higher likelihood of increasing adult and children strengths after support through Improving Futures.

As highlighted above, families with ethnic minority and mixed background were more likely to see increased strengths in adults and children, while those families eligible for FSM were more likely to experience increases in children’s strength factors. As before, the time spent in the Improving Futures programme is positively related to increased strengths across the board at the end of participation.

**Table 3.6 - Relationship between family background variables and increased strengths when exiting Improving Futures**

Family background variable	Increased strength		
	Adults	Children	Family
Lone parent family		+	
Teenage parent family			
At least one female adult in household			
At least one male adult in household	+	+	+
At least one child under 3	+	+	
At least one girl child			
At least one boy child			
Any family member from ethnic minority (non-white)	+	+	
Eligible for FSM		+	
Accessed any support service prior to joining			
Time spent in Improving Futures programme	+	+	+

Source: IFMIS data, extracted 23.01.2017, based on 3,435 families, outcome variable is a composite 'strengths' indicator, results from regression analysis

### 3.3.4 Comparison of short-term outcomes achieved by similar programmes

The IFMIS system recorded outcomes in the form of specific strengths and weaknesses present in adults, children and the whole family and it is difficult to compare the short-term outcomes achieved to that of similar programmes. Despite this, some broad comparisons between programmes can be made and some patterns discovered. Most generally, evaluations of similar programmes targeting families with multiple challenges show that while improvements in 'softer' outcomes are reportedly achieved, evidencing of 'harder' outcomes related to employment, education or justice proves challenging, as was the case in Improving Futures.

The evaluation of children's centres in England, for example, found that there was a positive effect of service use on family functioning, the home learning environment, parental distress and mother's mental health (in particular for the most disadvantaged families). However, no significant effect on the household economic status was found when the child was older than three years of age.<sup>25</sup> Similarly, the evaluation of the European Social Fund Support for Families with multiple problems found improvements of individual and/or family health/well-being, improved family dynamics and a reduction of social isolation. Yet again, evidence of employment-related outcomes was mixed at best.<sup>26</sup> Finally, the evaluation of the Troubled Families programme showed that the programme had no significant impact on a range of hard outcomes, including benefit receipt, employment, housing situation, adult offending and children's educational outcomes. However, some positive attitudinal and behavioural outcomes could be observed.<sup>27</sup>

<sup>25</sup> Sammons, P. et al (2015), The impact of children's centres: studying the effects of children's centres in promoting better outcomes for young children and their families, DfE Research Report, December 2015

<sup>26</sup> Ian, A. et al (2016), Evaluation of the Department for Work and Pensions European Social Fund Support for Families with Multiple Problems, January 2016

<sup>27</sup> Day, L. et al (2016), National Evaluation of the Troubled Families Programme, Final Synthesis Report, October 2016

Unsurprisingly, some other studies confirmed the importance of service use and contact intensity for experienced outcomes, like Improving Futures. The evaluation of Children’s Centres in England, for example, found a positive effect of earlier and longer use of family services on the structure of the home environment.<sup>28</sup> By contrast, however, the evaluation of the Troubled Families Programme found that there was no statistically significant relationship between intensity of involvement and impacts.<sup>29</sup>

### 3.4 Longer-term outcomes achieved following the programme

Using data from the panel survey of Improving Future families, this section analyses the extent to which outcomes were sustained following participation in the programme. It provides a brief descriptive overview of the situation of families 24 months after joining the programme. We present answers to self-reported outcome improvements and the extent that respondents attributed these changes to their participation in Improving Futures.<sup>30</sup>

The following caveats should be taken into account when interpreting the findings:

- Results presented below refer to those 156 families for whom +24 month follow-up data was available and cannot be generalised to the full cohort of families supported through Improving Futures.
- It should also be noted that only 74% of respondents had exited the Improving Futures provision at the point of the +24 month follow-up survey. The results presented should therefore not strictly be interpreted as sustained outcomes following programme participation, as more than one quarter of families in this analysis were still receiving support through Improving Futures.
- Further, 24% of respondents had received support from other services following their involvement with Improving Futures, which may also have contributed to any outcome changes observed. [Section 3.4.2](#) below discusses in how far respondents themselves attributed any changes experienced to the programme.

<sup>28</sup> Sammons, P. et al (2015): p.94

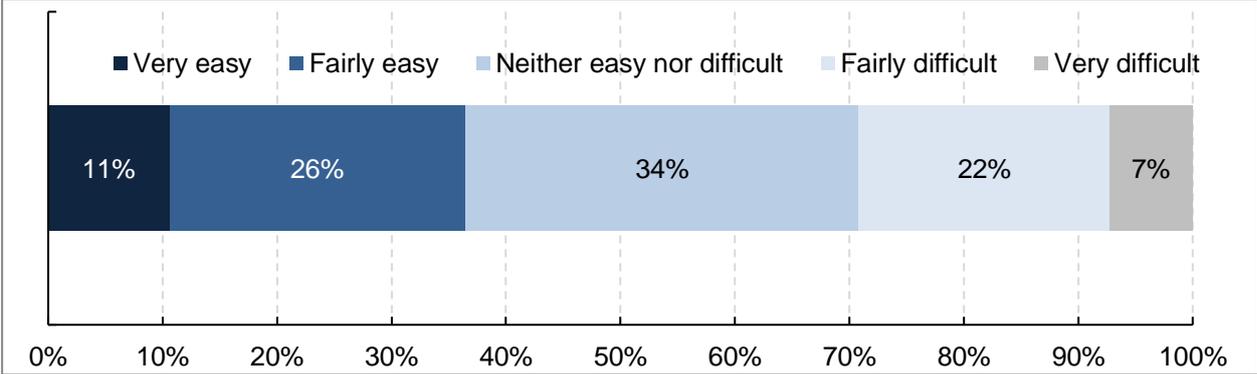
<sup>29</sup> Day, L. et al (2016): p. 80

<sup>30</sup> We conducted some experimental analysis for a number of selected outcomes that are comparably recorded in IFMIS (baseline) and the survey (+24 months), we then investigate the long-term ‘distance travelled’ of families since joining the intervention. Results can be found in Annex VII.

### 3.4.1 Situation of families at +24 months

24 months after first joining Improving Futures high shares of families found it very easy (11%) or easy (26%) to cope with their **children’s behaviour** and 34% stated that they experienced parenting as neither easy nor difficult (Figure 3.6). This suggests that parenting and behaviour outcomes had sustained over time. Nevertheless, some Improving Futures families continued to experience parenting issues, i.e. more than one in four interviewed families still found it fairly difficult (22%) or very difficult (7%) to cope with their children’s behaviour at home.

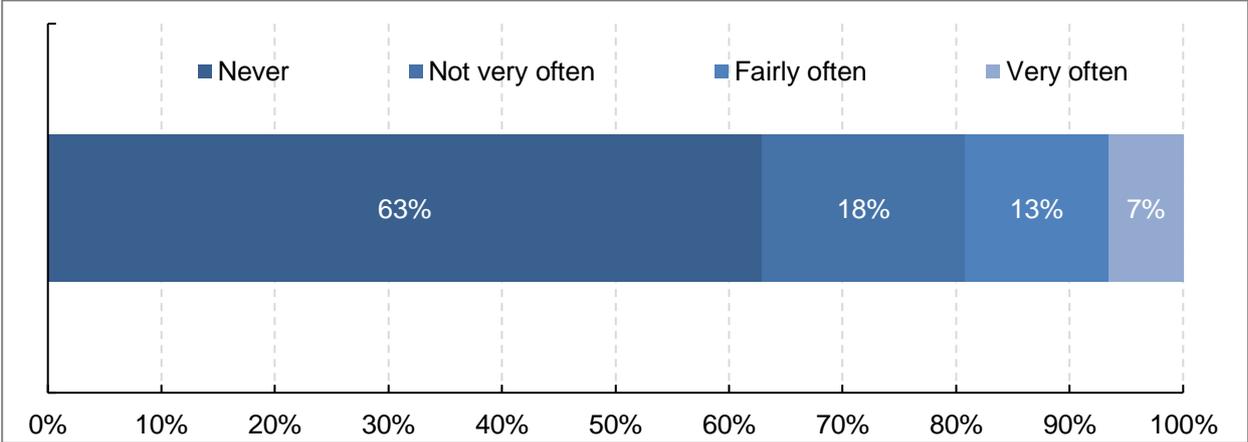
**Figure 3.6: Level of difficulty of coping with child(ren)’s behaviour at home in previous 6 months, % of respondents**



Source: IF panel survey +24 month, based on 151 respondents (5 more selected not applicable)

**Issues at school** however were limited. 24 months after first contact with Improving Futures 7% of families had children with fixed-term or permanent exclusions and 10% of families had children which were frequently absent from school. Families reported that their children had never (63%) or not very often (18%) been in trouble at school in the 6 months prior to the survey (see Figure 3.7 below). Smaller shares of families stated that their children had been in trouble fairly often (13%) or very often (7%).

**Figure 3.7: Amount of child(ren) in trouble at school in previous 6 months, % of respondents**



Source: IF panel survey +24 month, based on 151 respondents (5 more selected not applicable)

With regards to **positive out of school activities** such as sport, leisure activities, volunteering and involvement in community organisations, a high proportion of families interviewed reported that their children took part in such activities at least once a week in the 6 months prior to the survey (72%).

Starting with the **employment situation** of interviewed families at +24 months, a high level of worklessness continued to constitute a risk for families. 41% of main carers were in part-time employment 24 months after their initial contact with Improving Futures and 12% were in full-time employment. Close to half of the main carers interviewed were not in employment at the time of the interview (47%). The majority of respondents did not live with a partner at the time of the 24 month interview (52%), but where partners existed they were often in full-time (25%) or part-time employment (6%) (see **Table 3.7**).

**Table 3.7: Employment status of main carer and partner in household, % of respondents**

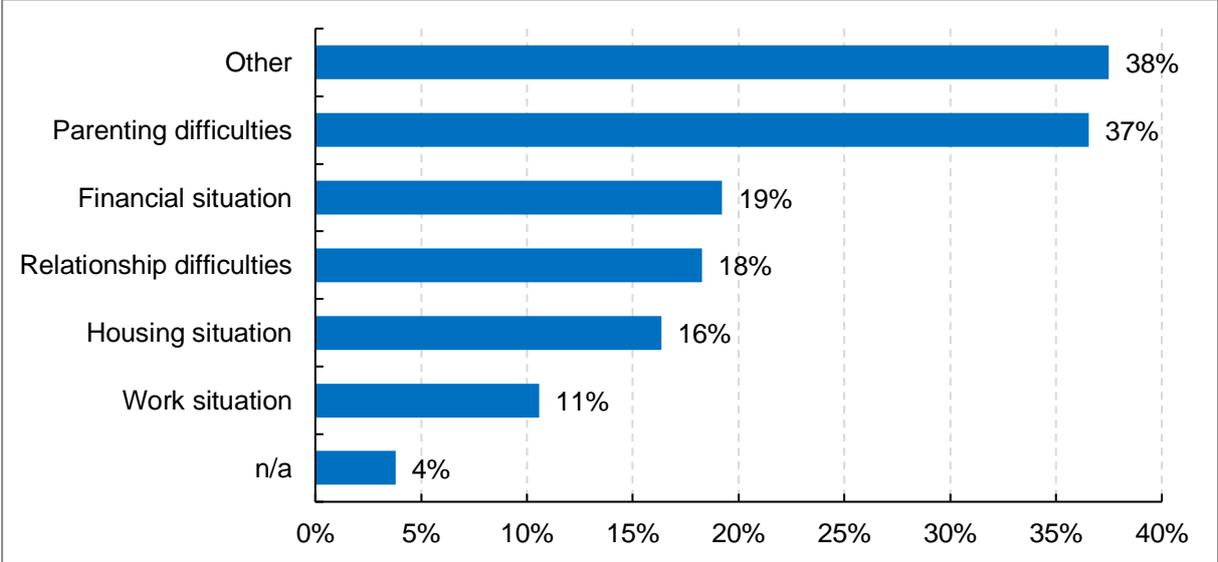
	% of main carers	% of partners in household
In full-time-employment	12	25
In part-time employment	41	6
Not in employment	47	17
No partner in household	/	52
Total	100	100

Source: IF panel survey +24 month, based on 156 respondents

A small share of main carers interviewed were **working towards a qualification** at the time of the interview (15%) and so were a small proportion of the partners living in the household (12%).

Families also continued to experience high levels of **anxiety and stress** 24 months after their first contact with the Improving Futures projects. Two in three main carers had suffered from anxiety or stress-related problems in the 6 months prior to the interview and 36% stated that their partner had experienced similar problems. Key reasons for the anxiety and stress experienced were parenting difficulties (37%) (see **Figure 3.8**). However stressors varied between families as illustrated by the fact that 38% experienced anxiety or stress for other reasons than presented in Figure 3.8. Other reasons most frequently referred to physical and mental health problems experienced by adults and children in the family.

**Figure 3.8: Cause of anxiety or stress, % of respondents**



Source: IF panel survey +24 month, based on 104 respondents

Similar to the adults in Improving Futures families, **children** continued to experience high **levels of stress and anxiety** 24 months after first contact with the programme. 43% of families interviewed stated that their children had suffered from anxiety and stress related problems in the 6 months previous to the survey.

### 3.4.2 Self-reported outcome improvements at +24 months and attribution

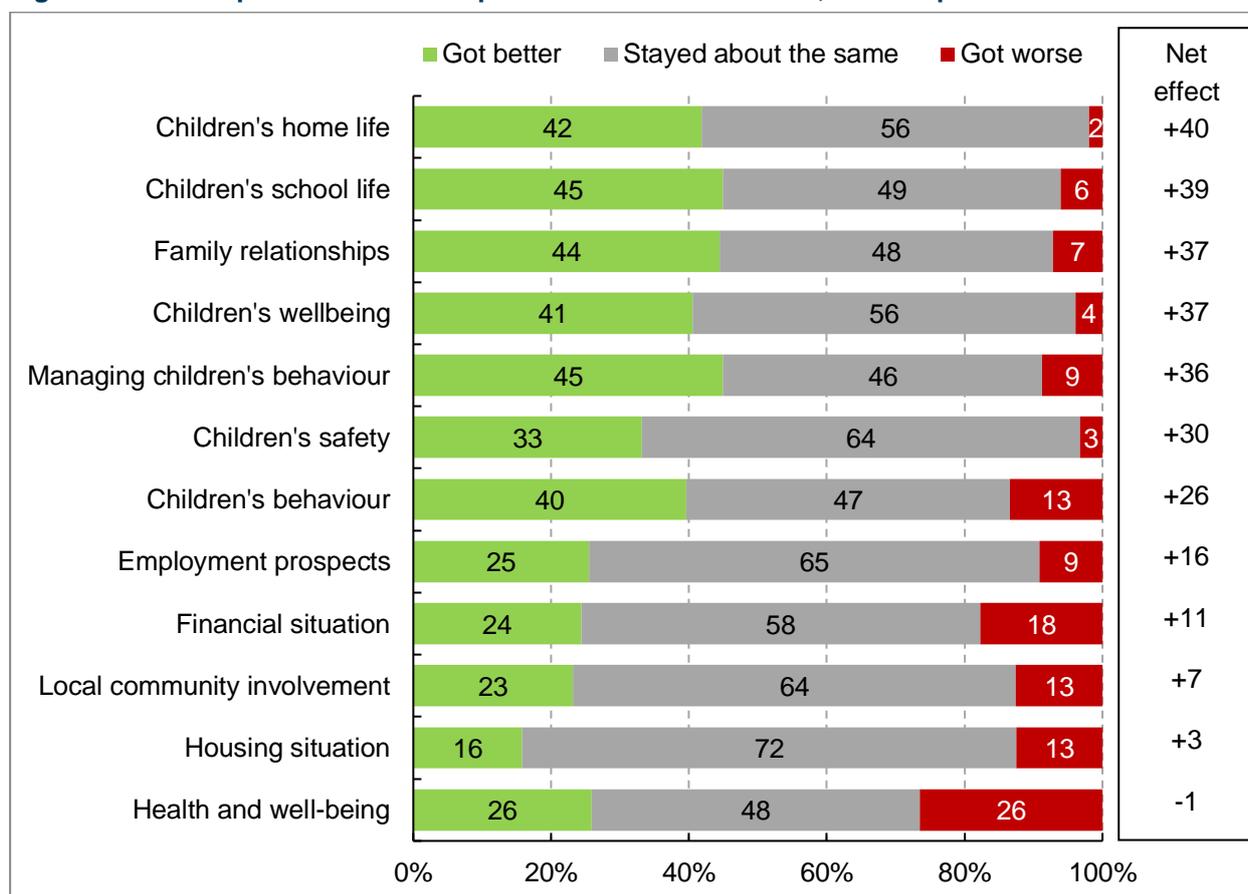
The survey asked families how far their situation had changed in the last 6 months with regards to a number of outcomes, and to what extent they attributed any positive change experienced to participation in the Improving Futures programme.

In general, the situation of families was relatively stable in the 6 months prior to the interview. Depending on the outcome, between 46% and 72% of families reported not to have experienced any change to their situation (**Figure 3.9**). Largest improvements experienced in the 6 months prior were reported in children's school (45%) and home life (42%), the management of children's behaviours (45%) and family relationships (44%).

However, a relatively large proportion of families reported that their health and well-being had deteriorated in the last 6 months (26%). 18% of families stated that their financial situation got worse in this time period, and 13% reported that their children's behaviour had got worse.

Net effects, i.e. the share of families who felt their situation had improved minus the share of families who felt their situation had deteriorated, were highest for children's home life, children's school life and family relationships.

**Figure 3.9: Self-reported outcome improvements at +24 months, % of respondents**

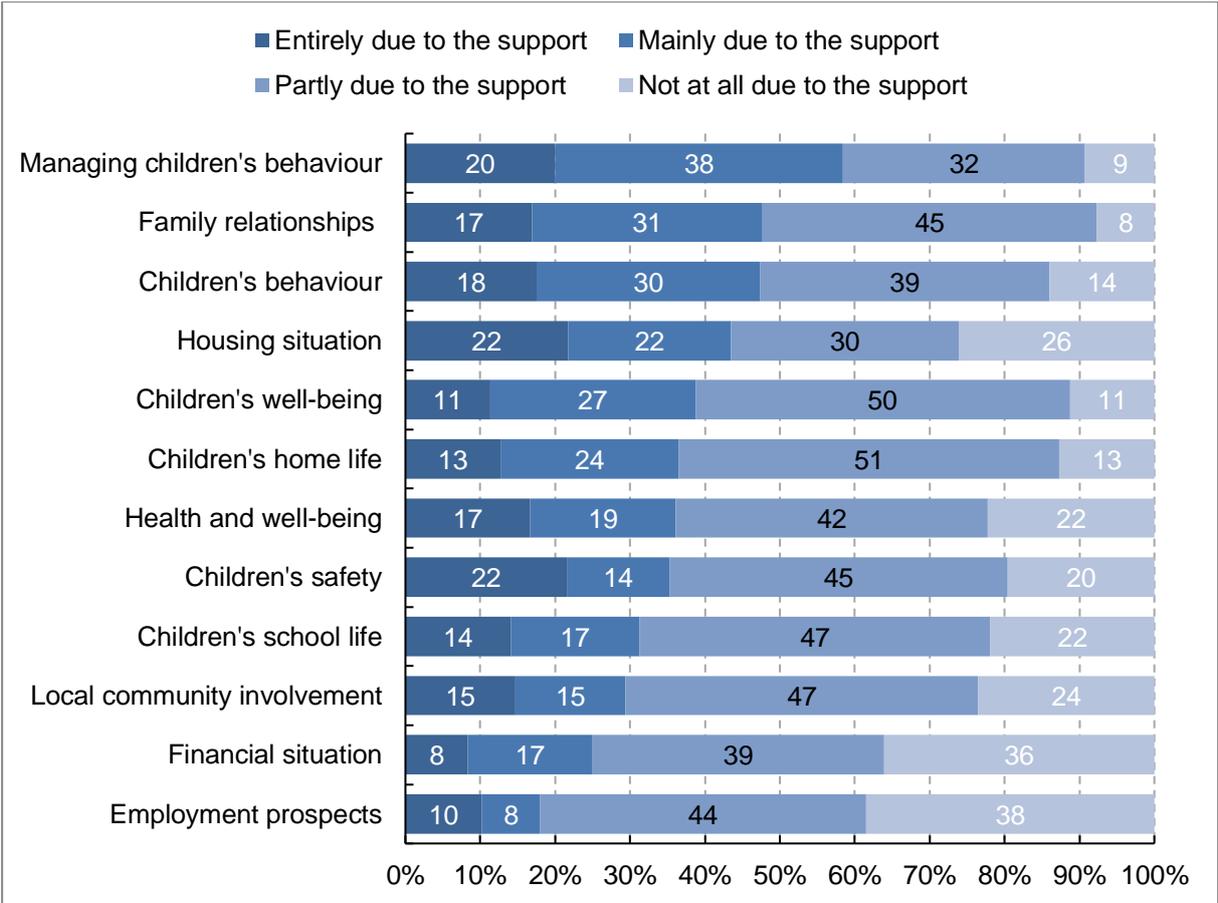


Source: IF panel survey +24 month, based on 149-154 respondents depending on question item, question referred to improvements seen 6 month prior to being surveyed. Numbers do not total due to rounding.

Those who had experienced improvements in outcomes in the previous 6 months were asked how much they attributed these changes to the support they had received from Improving Futures projects. In the majority of cases, families attributed the positive changes experienced at least partly to the support received. Improvements around family relationships and children’s behaviour were most frequently attributed to the support received by the programme: 58% of families stated that improvements in managing their children’s behaviour were entirely or mainly due to the support received; 48% stated that improvements in family relationships were entirely or mainly due to the support received and 48% stated the same was true for children’s actual behaviour (Figure 3.10). Interestingly, the small share of families who experienced improvements in their housing situation (16%) typically attributed this improvement at least to some extent to Improving Futures support. However, these figures should be treated with some caution as only a small number of people responded to these questions (between 23 and 65 depending on the question).

At the other end of the spectrum, of the small share of families who had experienced improvements in their financial situation (24%) or employment prospects (25%) only few families attributed the improvements entirely or mainly due to Improving Futures support (financial situation: 25%; employment prospects: 18%). This confirms the finding that Improving Future projects were often successful in supporting families to manage relationships and their home life, while harder outcomes such as employment, qualifications and financial improvements were achieved less often.

**Figure 3.10: Self-reported attribution of outcome improvements to participation in Improving Futures, % of respondents**



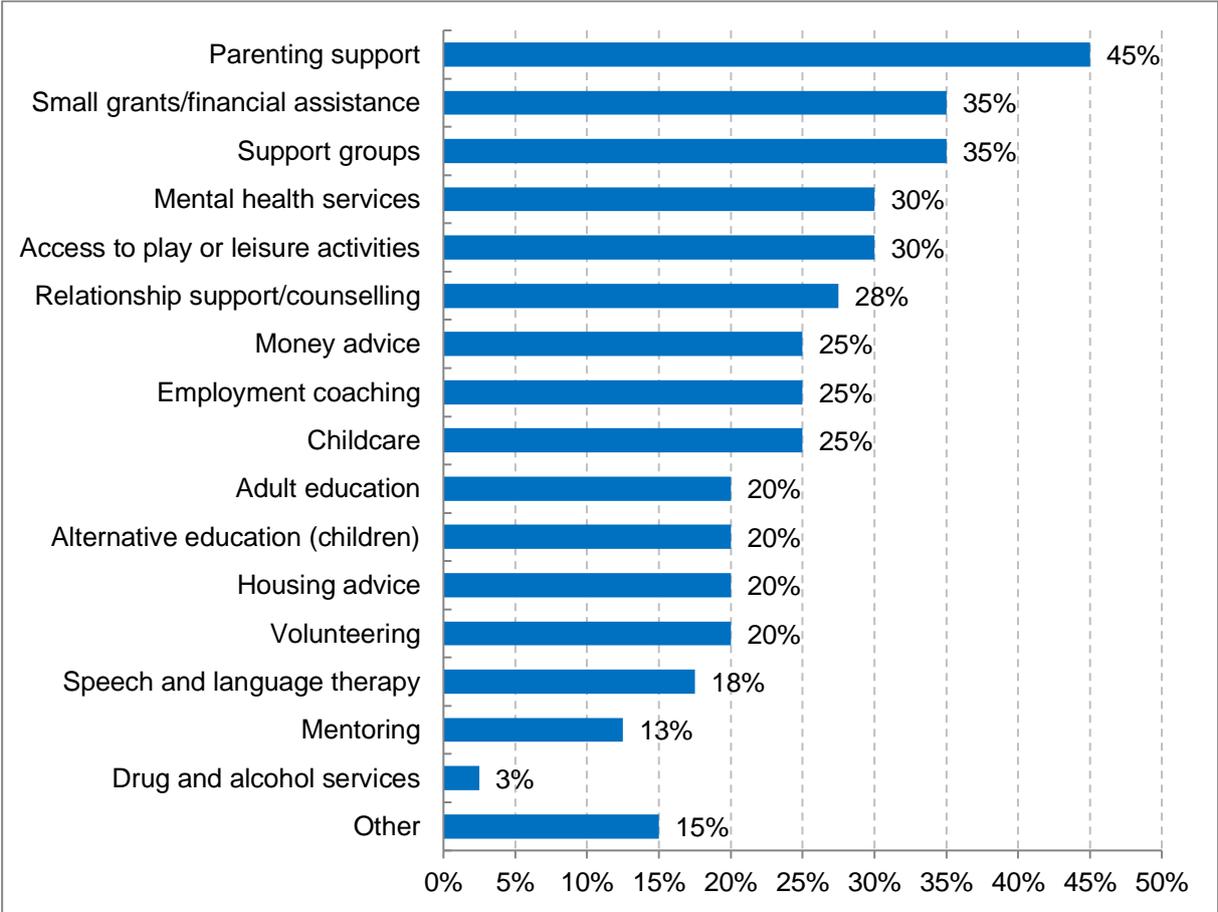
Source: IF panel survey, based on 23-65 respondents depending on question item, question referred to improvements seen 6 months prior

### 3.4.3 Further support needs

Many families saw improvements in their situation through receiving support from Improving Futures. Yet, families continued to experience multiple challenges, and 26% of surveyed families stated that they needed further help and support moving forward (Figure 3.11).

Interestingly, those in need of further support most frequently needed further parenting support (45%), despite the fact that the greatest outcome improvements of families had been seen in this area. Further frequently named support needs were financial assistance (35%), access to support groups (35%) and mental health services (30%).

**Figure 3.11: Type of support needs at +24 months, % of all families with further support needs**



Source: IF panel survey, based on 40 respondents with further support needs

### 3.5 Conclusion

Overall, the outcomes achieved by the Improving Futures projects were positive, and the programme broadly achieved its aim of improving outcomes for children in families with multiple and complex needs. The projects supported a vulnerable cohort of families, typically headed up by lone parents, and facing a range of risk factors; these mainly related to parenting difficulties, child behavioural problems, domestic abuse, educational underachievement, worklessness and stress and anxiety.

In the short term, the projects achieved a good level of progress in reducing the risks that were the most prevalent when families first entered the programme; the percentage of families with 8 out of 10 of the most prevalent risks reduced. Specifically, parenting difficulties reduced on average, children's behaviour improved on average, and most projects reported that families had stronger relationships and improved levels of wellbeing. Moreover, families had developed stronger peer networks and community links, were engaging in more positive activities and were more able to manage their finances. Our analysis allowed us to explore the factors affecting positive outcomes, and we found a positive relationship between the time that families spent on the programme and the average level of reduction in risk and improvement in strengths. Outcomes were also greatest for children qualifying for Free School Meals (FSM), when compared with the non-FSM group.

Despite these positive outcomes, however, levels of employment only increased marginally and the projects experienced more limited success with adult outcomes in general and mental health problems specifically.

For the families completing the beneficiary survey, in the main the outcomes sustained in the longer term, particularly outcomes related to children. However, for a substantial minority of families some outcomes deteriorated, such as financial problems, housing problems and stress and anxiety.

## 4.0 Improved Learning and Sharing of Best Practice

*"There's been a lot of value in the [Improving Futures] experiment...We're working closely and comparing and contrasting approaches....They enhance our understanding." (Local authority representative)*

The final aim of the Improving Futures programme was to 'Improve learning and sharing of best practice between public services and voluntary and community sector organisations'. In this chapter we describe the extent to which this aim was achieved. We firstly assess whether the Improving Futures programme fostered opportunities for public services and VCSEs to work together. We then explore the impact from this partnership working, including an analysis of what public services and VCSEs learnt from being involved in Improving Futures and what changed.

The information in this chapter is predominantly drawn from the Stakeholder Survey of both delivery partners directly involved in Improving Futures and local stakeholders (such as local authorities and schools, referred to as non-partners); consultations with project managers of 25 of the 26 projects; and consultations with the projects and stakeholders during the case study visits.

An earlier, more detailed, version of this chapter was first published in the [Year 3 Evaluation Report](#).

### 4.1 Extent to which Improving Futures facilitated opportunities for partnership working

Public services showed a good level of interest in the Improving Futures programme, and the projects were well regarded. For example, in the latest wave of the Stakeholder Survey three quarters (25 out of 33) of non-partners responding either agreed or strongly agreed that over the last 12 months the Improving Futures project has been regarded locally as a key project in supporting families with complex needs.

Consequently, the projects fostered opportunities for public services and VCSEs to work together. As [Figure 4.1](#) overleaf shows, over three quarters (44 out of 57) of those responding to the Stakeholder Survey agreed that in the last 12 months the Improving Futures project had facilitated collaboration between local statutory and third sector organisations (for example representatives from the projects sitting on multi-agency meetings, such as those run by children's services or MARAC<sup>31</sup> meetings).

<sup>31</sup> A MARAC meeting "is a multi-agency meeting where statutory and voluntary agency representatives share information about high risk victims of domestic abuse in order to produce a coordinated action plan to increase victim safety". (Home Office Violent and Youth Crime Prevention Unit and Research Analysis Unit, 2011). For more information see:

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/116538/horr55-technical-annex.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/116538/horr55-technical-annex.pdf)

Similarly, over half (32 out of 57) reported that improving relationships with other organisations was one of the main benefits from being involved in Improving Futures (see **Figure 4.2**). One organisation described how the project had developed their relationship with the local authority and that they were “*trusted to deliver and do a good job*”. In particular, there were strong links between the projects and the Troubled Families programme in England and Families First in Wales. As one non-partner reported in the Stakeholder Survey:

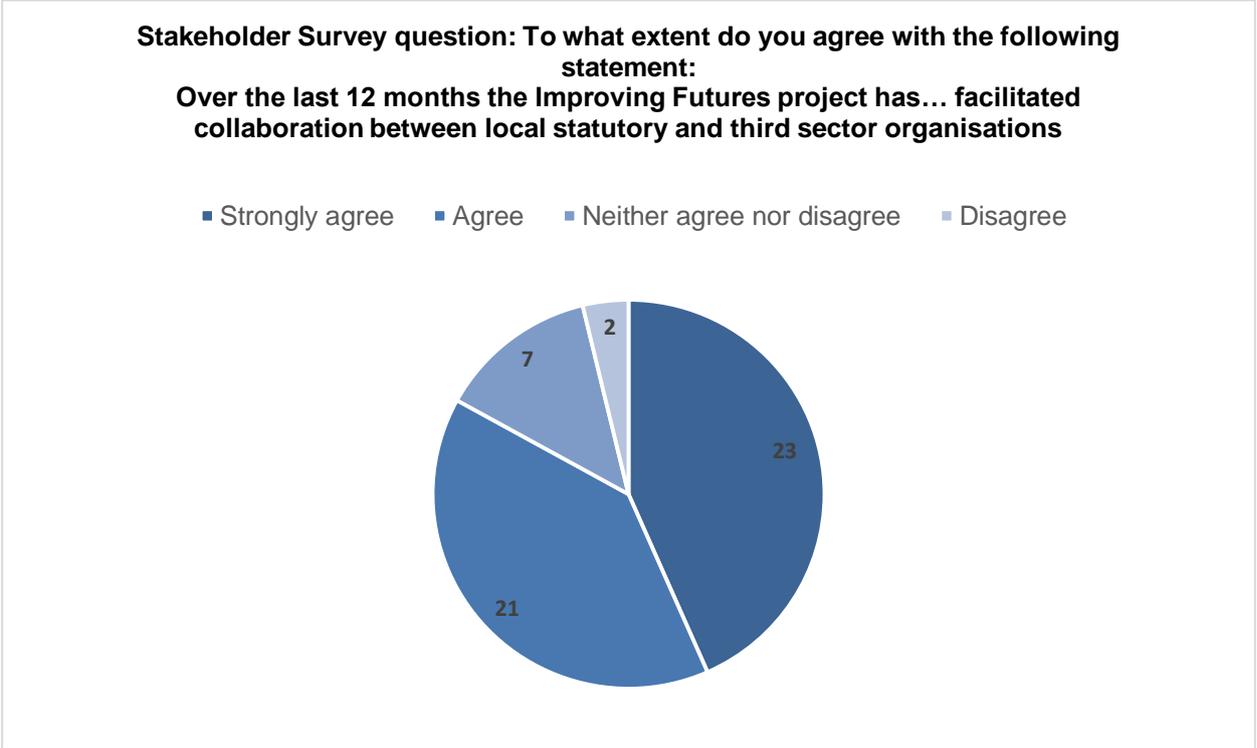
*"[A]s Improving Futures has been in operation before Troubled Families programme... I have been able to report to the working group the successes of certain approaches and courses."* (Non-partner, responding to Stakeholder Survey)

Some VCSEs reported that the project had raised their profile, giving them a platform to work with public services in a way they would not have been able to do before due to their small size. This was particularly the case with smaller VCSEs involved in the delivery of, though not leading, the projects:

*"We've had access to and been introduced to LA contacts and teams that just wouldn't have been on our radar before."* (Delivery partner, comment made during case study visit)

*"It's given us a much more raised profile with schools and the LA."* (Project manager)

**Figure 4.1: Extent to which Improving Futures facilitated collaboration between public services and VCSEs, % of respondents**



Source: Stakeholder Survey wave 2. Number of respondents: 53. 4 others did not respond or did not know.

## 4.2 Extent to which Improving Futures led to the sharing of learning between projects and other agencies

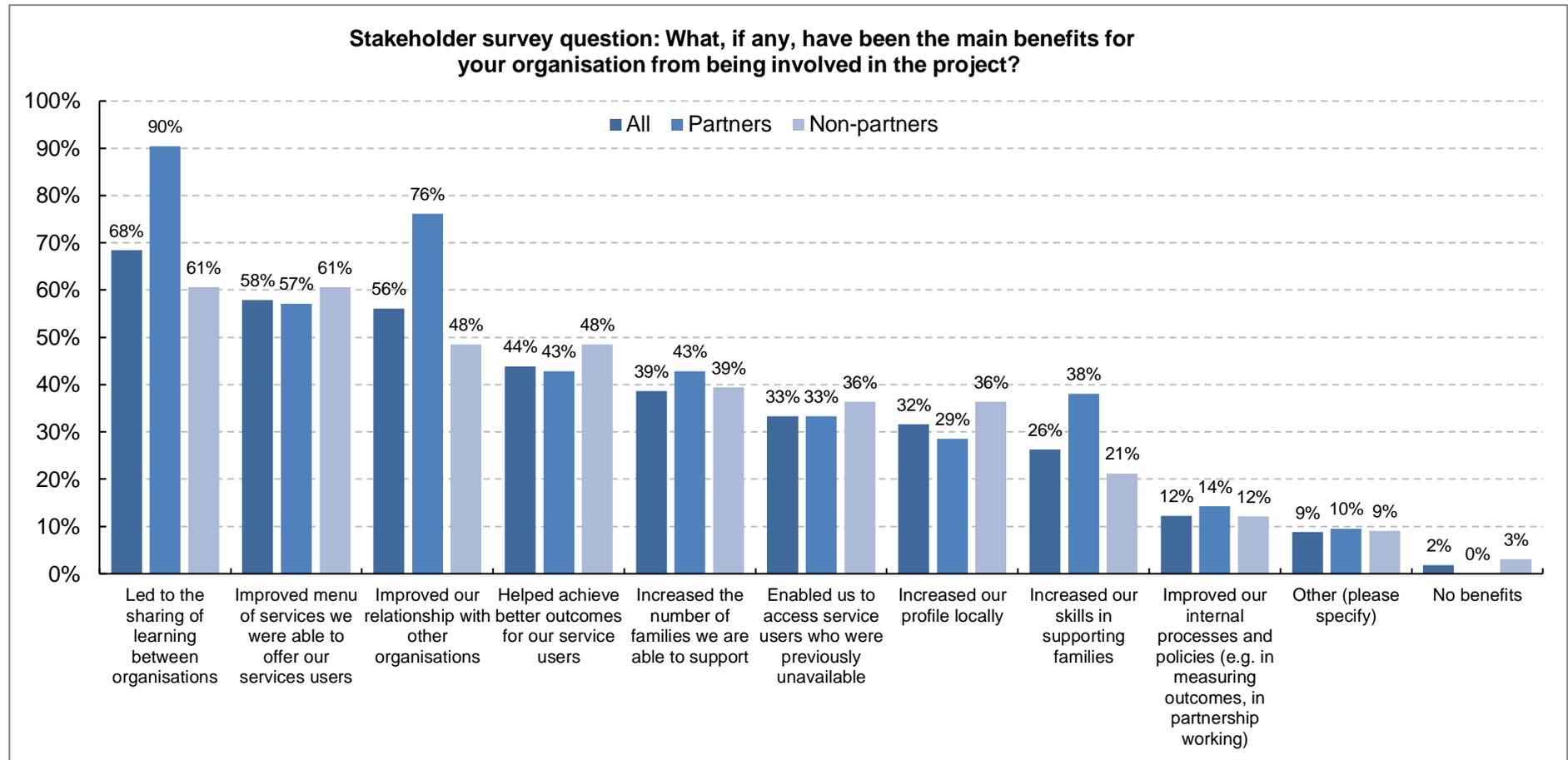
Although projects did not appear to be focusing explicitly on sharing learning at the beginning, many increased their focus as their projects progressed, particularly towards the end. A number of projects hosted learning events to share their learning with local organisations. They also found these to be effective in raising their profile.

The survey findings and comments made during case studies suggest that there was a good level of knowledge transfer between the Improving Futures projects and other VCSEs and public services. As **Figure 4.2** overleaf shows, the sharing of learning between organisations was the most popular benefit selected by stakeholders when asked what the main benefits were from being involved in the programme as part of the Stakeholder Survey; overall over two thirds of respondents identified this as a benefit, with almost all delivery partners selecting it.

*"My organisation is a network of VCFS providers so I have been able to share learning widely and increase my membership."* (Delivery partner, comment in Stakeholder Survey)

*"We have learnt a lot from being involved in this project....It's been a constructive learning curve."* (Delivery partner, comment made during case study visits)

**Figure 4.2: Main benefits for organisations from being involved in Improving Futures, % of respondents**



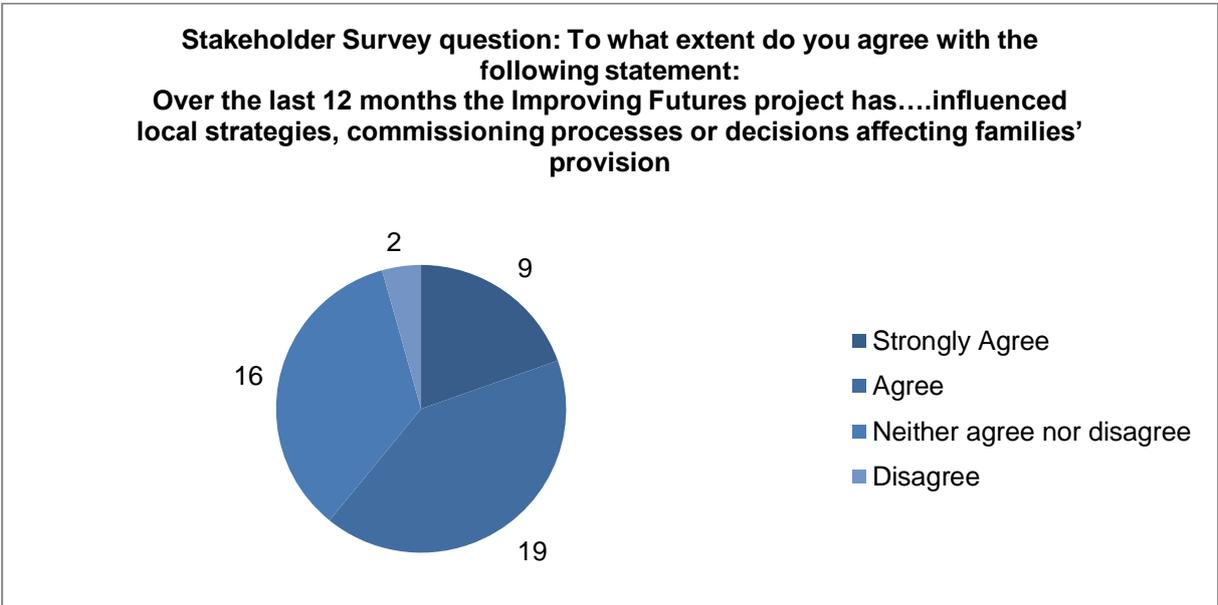
Source: Stakeholder Survey wave 2. Number of 'All' respondents: 57. Number of 'partner' respondents: 21. Number of 'Non-partner' respondents: 33. Respondents could select multiple options. Average number of benefits selected by partners: 5; average chosen by non-partners: 4.

Several local authority representatives interviewed during the case study visits remarked how the Improving Futures projects had been very useful for them to compare and contrast the LA's approaches to family support with that of Improving Futures, and they had learnt from the Improving Futures approach. One LA representative remarked how the Improving Futures project had been influential in developing the LA's thoughts on what holistic support for complex families should look like. This representative reported that the Improving Futures project adopted a very different approach to the LA's family provision, and they were monitoring the project closely to explore what they could apply from the project to their own support.

### 4.3 Extent to which Improving Futures led to changes in family support

Almost half (28 out of 57) of those responding to the Stakeholder Survey agreed that the Improving Futures projects had influenced local strategies, commissioning processes or decisions affecting service provision for families. This was reported to a very similar extent by delivery partners and non-partners (see **Figure 4.3**).

**Figure 4.3: Extent to which Improving Futures has influenced local strategies, commissioning processes or decisions affecting families' provision, % of respondents**



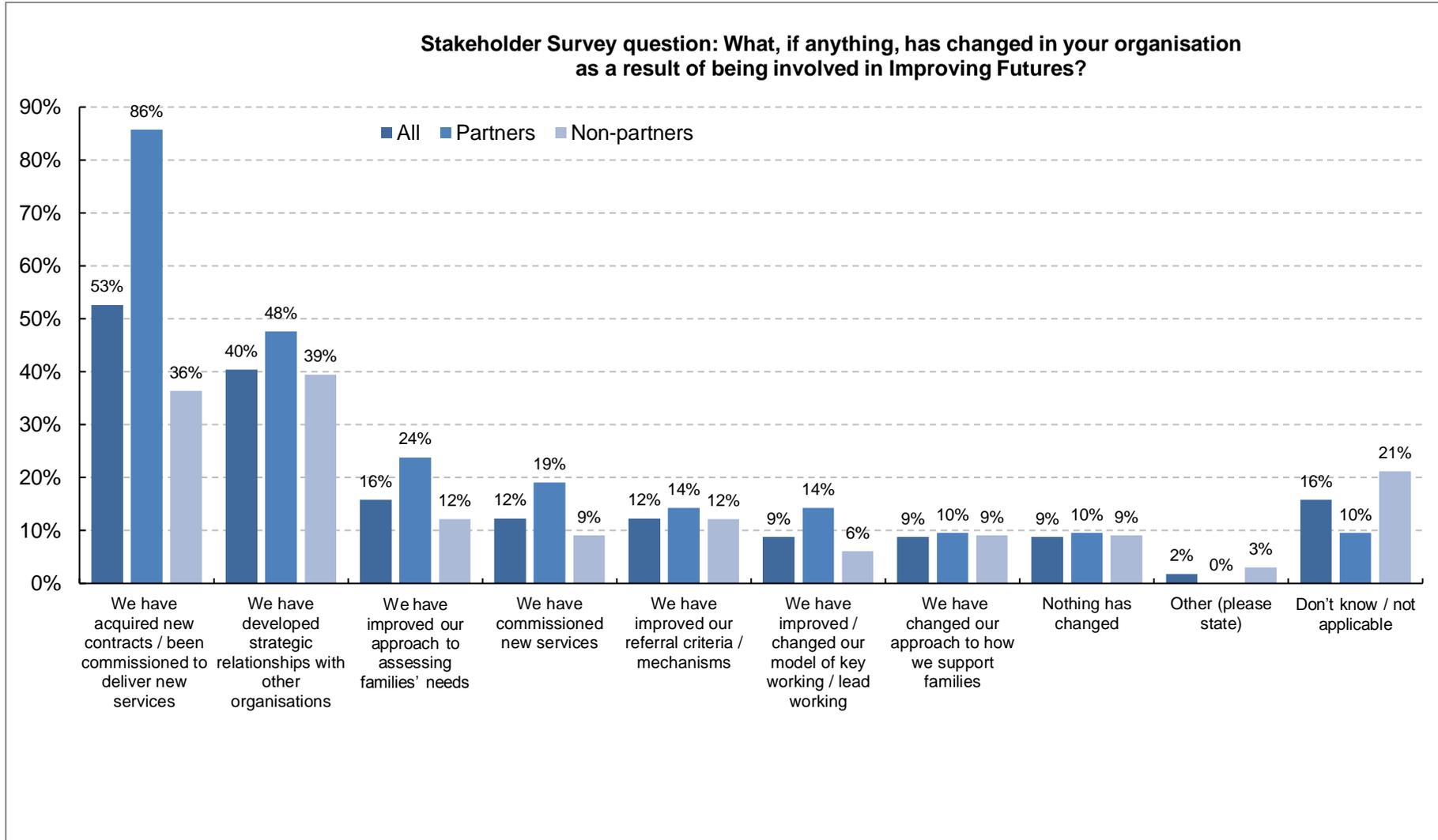
Source: Stakeholder Survey wave 2. Number of respondents: 57

Although many projects and local stakeholders interviewed felt that the projects were influencing local practice, most struggled to provide specific examples where this had led to tangible changes. One project manager explained that this was because most of their influencing had been around promoting their approach to working with families, which was leading to 'soft' and intangible changes. Where changes had been made, these were usually piecemeal rather than substantial. **Figure 4.4** provides details of changes, as reported in the Stakeholder Survey. This included:

- **Acquiring new contracts:** All but three (18 out of 21) delivery partners involved in the Improving Futures projects responding to the Stakeholder Survey acquired new contracts as a consequence of being involved in the project. However, in most cases these were small pieces of work (for example one project was commissioned by some schools to continue their school therapy support). A number of delivery partners felt that their involvement in the project had raised their profile and increased their likelihood of being commissioned.
- **Developed strategic relationships:** Improving Futures fostered new partnerships and relationships with other VCSEs and public services. The VCSEs reported learning a lot in relation to partnership working. Many recognised that there would be a need for more partnership working between VCSEs in the future to respond to restricted budgets; they felt they were in a stronger position to operate in this environment as a consequence of Improving Futures. In some instances these partnerships continued to work together to deliver other projects.
- **Changed approaches to how to support families:** A small number of organisations described how they were embedding some of the approaches they developed during the project across their organisations, such as assessments, referral criteria, models of working and approaches to support. This was particularly the case for smaller delivery partners less experienced in providing this type of support or working with the Fund on this scale.

*"Because we are a smaller organisation we hadn't done that sort of evaluation work before and we will take that forward, and it's made training more accessible."* (Delivery partner, comment made during case study visits)

**Figure 4.4 Changes within organisations as a result of being involved in Improving Futures**



Source: Stakeholder Survey wave 2. Number of 'All' respondents: 57. Number of 'partner' respondents: 21. Number of 'Non-partner' respondents: 33. Respondents could select multiple options.

## 4.4 Conclusion

The Improving Futures programme mostly achieved its third aim of improving learning and the sharing of best practice between public services and VCSEs. The programme provided opportunities for the Improving Futures delivery partners to collaborate with other VCSEs and public services and, although not explicitly pursued by most projects, this led to the sharing of learning between the partners and other VCSEs and public services. The main services to have benefited from the knowledge transfer seem to have been schools (who learnt more about how to support children with behavioural difficulties and how to engage with the whole family) and LAs (who learnt a lot from comparing their own family support with the approaches adopted by the Improving Futures projects).

In most cases this knowledge transfer was tacit and intangible – leading to a greater understanding about how to support the whole family at an early intervention level but not necessarily changing specific delivery models or approaches.

## 5.0 Estimating the Return on Investment

In this chapter we describe the approach adopted for the Cost Benefit Analysis, including the costs and benefits of the programme and the assumptions included in the analysis.

### 5.1 Analytical framework

Cost Benefit Analysis is a systematic approach to assessing the value of an intervention and how that compares to the costs involved, expressed in the form of a cost benefit ratio. The direct costs are generally already expressed in financial terms and in the case of Improving Futures can be measured with reference to the amount of grant funding from the Big Lottery Fund which was spent, as well as any other funding which contributed to project costs. Indirect or wider costs are more difficult to estimate as they would require detailed investigation of the costs incurred by stakeholders as a result of the programme, although it is still important to acknowledge the type of indirect cost which are likely to result.

By their nature, benefits are more difficult to monetise, and sometimes even to quantify. This is a particular issue for preventative or early intervention activity where there is a possibility of preventing negative outcomes before they emerge. However, feasibility work concluded that it was not possible to include a formal assessment of this counterfactual within the evaluation design, nor was it practical to include an assessment of the likely trajectories of participants in the absence of the intervention. As a result, the assessment of benefits has focused on looking at the change in the (observed) distance travelled by participants (risks and strengths) and valuing this on the basis of the associated change in demand for other services or support (i.e. the notional cost savings to other service providers such as health and social care or fiscal savings)<sup>32</sup>. Economic and social benefits to individual families are also considered where possible.

<sup>32</sup> Valuations of fiscal savings (and any economic or social benefits) have been taken from the unit cost database compiled by New Economy. See <http://www.neweconomymanchester.com/our-work/research-evaluation-cost-benefit-analysis/cost-benefit-analysis/unit-cost-database>.

The framework for the cost benefit analysis is set out below.

**Table 5.1: Cost Benefit Analysis framework**

<b>Costs</b>
<p><b>Direct costs of project delivery</b></p> <p>The financial costs of delivery include: staff costs, overheads, materials/resources, expenditure on family budgets or spot purchases (i.e. money earmarked for additional services/activities) and other expenses (e.g. partner inputs, training, travel costs).</p>
<p><b>Costs to participants</b></p> <p>It was assumed that there are no significant costs to participants as a result of their involvement in the project (other than any travel/other expenses paid for by the project, which would be captured above as a direct cost of delivery).</p>
<p><b>Indirect costs associated with the project</b></p> <p>Costs to providers associated with the take up of other support/services as a result of signposting by the project (such as referrals to CAMHS or social services).</p>
<p><b>Costs to wider society/non-participants</b></p> <p>It was assumed that there were no significant costs to non-participants, as delivery of the project did not affect the availability of any other services or forms of support (i.e. the existence of the project did not mean that there was less support for families and children available from other sources).</p>
<b>Benefits</b>
<p><b>Benefits to participants</b></p> <p>Benefits to the families that receive support from the project as a result of the positive outcomes they achieved (relevant outcome areas included education, behaviour and relationships, mental and physical health, employment, housing). Such outcomes can result in economic benefits (such as increased income resulting from a move into employment) as well as less tangible effects (such as increased life satisfaction or feelings of wellbeing), although such benefits can be difficult to monetise.</p>
<p><b>Benefits to the state</b></p> <p>Benefits resulting from a reduced demand for other services/support (e.g. social services, healthcare) from participants as a result of the positive outcomes they achieve.</p>
<p><b>Benefits to wider society</b></p> <p>It is important to recognise the potential for social benefits associated with the achievement of positive outcomes by participants (the spill-over effects of outcomes such as improved parenting skills, improved health, increased volunteering, etc.) although it is generally not possible to quantify or value these effects due to a lack of research evidence.</p>

Information on direct costs was sourced from project-level reporting to the Big Lottery Fund. Information on the presence or absence of risk factors and strengths was sourced from the IFMIS database, although only a sub-set of these indicators were included in the analysis due to the need to match them to credible estimates of fiscal savings or other monetised benefits. The data presented considers the distance travelled between the baseline (entry to the programme) and follow-up (six months after exit) stages and was based on records for 1,276 families. Follow up data was used rather than exit in order to provide an indication of where changes had been sustained beyond the life of the intervention. The analysis also includes an adjustment for deadweight and the likelihood of effects enduring beyond the IFMIS reporting period based on survey evidence.

## 5.2 Programme costs

This section presents an overview of the costs associated with the Improving Futures programme.

### 5.2.1 Grant funding

The table below shows that the projects spent a total of approaching **£23.8 million** of grant funding provided by the Big Lottery Fund<sup>33</sup>. This averages to around £950,000 per project, although this actual spend varied from £711,000 to £1,080,000.

**Table 5.2: Project expenditure**

Project/area	Total expenditure of grant funding	Total actual project costs
Dundee	£1,080,000	£1,110,747
Manchester	£1,064,935	£1,064,935
Croydon	£1,080,055	£1,080,055
Hertfordshire	£967,255	£967,255
Wandsworth	£899,920	£899,920
Camden	£1,080,099	£1,266,641
Bridgend	£967,799	£967,799
Denbighshire	£989,860	£1,001,519
Cardiff	£957,114	£957,114
Inverclyde	£964,920	£1,878,351
Carmarthenshire	£872,780	£886,114
Haringey	£854,452	£854,452
Southend	£863,025	£863,025
Lewisham	£990,539	£1,218,914
Wolverhampton	£846,281	£1,176,286
Worcestershire	£1,080,000	£1,172,390
Sunderland	£814,685	£914,076
Fife	£896,722	£1,377,815
Hackney	£1,008,178	£1,008,577
Midlothian	£711,155	£768,614
Tyne Gateway	£1,035,218	£1,071,302
Belfast	£804,564	£804,564
Portsmouth	£871,830	£871,830
Enfield	£1,022,523	£1,022,523
<b>Total</b>	<b>£23,758,749</b>	<b>£26,239,632</b>

Source: Big Lottery Fund. Note this is based on data for 25 of the 26 projects.

Information on expenditure was derived from Section 3.2 of the grant monitoring form using data from the end of year 4 reporting cycle (or project completion reports where available).

<sup>33</sup> This is based on data for 25 out of 26 projects. Applying the average expenditure figure of £950,000 to the 26<sup>th</sup> project results in an adjusted total of £24.7 million.

As expenditure data was only derived from project monitoring records, any internal costs for grant management and administration incurred by the Big Lottery Fund were included, which is likely to result in an underestimate of the total direct programme costs to the Fund (although such costs are assumed to be relatively small in comparison to the grant funding amount).

### 5.2.2 Other funding

At application stage, many of the projects reported that other sources of funding would be used to support delivery. As part of the project monitoring, it was intended that projects would report total project costs as well as expenditure of grant funding. However, closer examination of the submitted data suggests that reporting of other funding sources may be incomplete, with 10 of the projects reporting total cost figures which were the same as the total grant spent. For the remainder, the amount of other funding spent ranged from just under £400 to over £900,000, showing considerable variation in the extent to which money from other sources contributed to the projects, and also the total cost (above and beyond the grant funding). In all but two cases, the reported actual total project cost was less than the planned figure (although in some cases this is because the work was still in progress).

Given this apparently incomplete reporting of total project costs (i.e. the expenditure of other funding), our assessment of return on investment has been calculated to show the return on the Big Lottery Fund's investment only.

### 5.2.3 Other costs

Across the programme there is likely to have been some degree of non-financial, or in-kind, support, such as time inputs from existing staff which were not costed to the project or the use of community venues for delivery of activity at no charge.

There may also have been wider costs associated with the programme. This can include any costs incurred by participants (for example, paying to attend, travel expenses, taking time off work to attend) or costs incurred by other agencies, where participants were referred on to their services resulting in increased demand.

Such inputs (and the associated costs) were not systematically recorded across the programme. Consequently, they have not been included in the analysis, which, as a result, is likely to **underestimate the true costs of the programme**. However, our contact with projects suggests that anecdotally such costs are likely to have been relatively small, particularly as participants tended to be compensated financially for any costs incurred from the overall project budget. Similarly, partner organisations tended to receive payment for staff time which supported delivery. However, it is recognised that referrals into other services outside of the Improving Futures project was likely to be a source of additional demand and therefore costs to service providers.

### 5.3 Programme benefits

This section discusses the potential benefits arising from the activity undertaken by the projects in terms of changes in the prevalence of risk factors and strengths amongst participating families. It is based on data for 1,276 families which was taken from the IFMIS database and considers the change or distance travelled between baseline (entry) and follow-up (6 months after exit).

The data generally shows positive change in respect of increasing strengths/protective factors as well as a decrease in some negative risk factors, although the prevalence of some risk factors has increased over time. In these cases, the short-term fiscal cost of responding to these issues could be expected to be offset by a reduced need for intervention in the longer term (and, as result, the potential benefits of the programme in the longer-term may be underestimated).

Analysis of the short-term (i.e. up to one year) effects of the outcomes achieved for individuals within participating families suggests a positive picture, with benefits estimated to result from improvements in parenting skills, child protection and employment. Overall, the analysis suggests total (gross) benefits of around £3.1 million across the sample (£2,450 per family).

Some examples of the fiscal savings, based on the reduction in (adult or child) risk factors or increase in strengths, are shown in the table below.

**Table 5.3: Risk factors reduced**

Risk factor reduced	Reduction (number of families)	Fiscal saving <sup>34</sup>
Parenting anxiety or frustration	-314	£343,202
Problems with discipline or boundary setting	-283	£309,319
Persistent disruptive behaviour	-170	£125,460
Persistent disruptive and violent behaviour	-165	£121,770
Persistent unauthorised school absence	-50	£93,900
Strength increased	Increase	Fiscal saving
Full-time employment	+37	£381,877
Part time employment (more than 16 hours per week)	+38	£392,198

The IFMIS data showed that the most frequent change between the entry and follow up stage was a reduction in parenting anxiety or frustration, which had reportedly reduced for 314 parents (individuals) at follow-up. This was valued on the basis of the cost of providing alternative support which could be expected to achieve a similar outcome<sup>35</sup>. However, it is important to acknowledge that achievement of this outcome may, in some cases, mean that potentially more costly scenarios do not emerge<sup>36</sup>, leading to greater long-term savings.

However, the data also showed that the number of children placed in local authority care increased by 5, creating substantial costs to the state (estimated at £263,380) which have been subtracted from the total savings along with any other estimated cost increases. Despite this short-term cost, it is important to recognise that this step would be expected to yield positive outcomes in the longer-term for the individuals concerned.

<sup>34</sup> Fiscal savings reflect the assumed costs avoided. Monetary values for benefits are taken from New Economy's unit cost database.

<sup>35</sup> Median cost of a group-based parenting programme, per participant.

<sup>36</sup> For example, a diagnosable medical condition such as acute anxiety or depression.

As Improving Futures was an early intervention programme designed to prevent the occurrence of negative outcomes (particularly in the longer-term), this creates a challenge for the analysis, as these avoided outcomes cannot be observed. IFMIS was designed to record changes in strengths or protective factors as well as risks. Changes in risk factors can be more easily related to a need (or avoided need) for other interventions in the short-term, along with the associated costs or cost-savings which we have attempted to represent in the analysis above. However, research suggests that increases in protective factors could be expected to lead to significant benefits in the longer-term. For example:

- Supporting children through play and learning – research by the then Department for Children, Schools and Families showed that greater frequency of parents reading with their children is associated with higher scores for 'pre-reading', 'language' and 'early number' attainment on national tests.
- Home-school links – research has shown that the combined influence of fathers and mothers in their children's schooling is important with regard to achievement, motivation and self-esteem.
- Participation in positive out of school activities – participation in positive activities, such as sports, can help prevent children and young people becoming socially excluded and/or ending up in criminal environments.
- Established family routine – there is evidence that children benefit from positive family routines at home. Having regular mealtimes and school routines contribute towards children's sense of security, trust and self-confidence. Routines can also be used to reinforce healthy behaviours such as maintaining personal hygiene.
- Supportive peer relationships - the Cabinet Office's Families at Risk Review showed strong links between socialisation and disadvantage, highlighting that children who had not seen their friends for the past week and never attended organised social gatherings were at a greater risk of negative outcomes, highlighting the potential positive influence of strong and supportive peer group relationships.
- Healthy lifestyles – to maintain a basic level of health, the NHS recommends that children and young people aged 5-18 need to participate in at least 60 minutes of physical activity every day. Other lifestyle choices undertaken by children, or by parents on behalf of their children, are also important to achieve good health outcomes.
- Employment – there is a strong association drawn in the literature between workless households and the chance of children growing up in poverty and with lower aspirations. Worklessness related child poverty is also seen as having intergenerational effects, with poor children being more likely to become poor adults. Unemployment is also associated with poorer health relative to individuals in employment.
- Take up of learning opportunities - there is evidence that gaining skills in adulthood has a positive effect on earnings and employment, while participation in adult literacy and numeracy courses has a positive personal and social impact on individuals and communities. These impacts include improved self-confidence and self-esteem, better physical and mental health and improved ability to undertake everyday tasks. Parents who participate in adult literacy and numeracy courses feel better able to help children with their homework, including reading with their children, and have a greater ability to contribute to family life.
- Family relationships – are a source of practical and emotional support for children with complex needs, as well as providing a source of risk where they break down. Research has demonstrated the benefits of supportive couple relationships for maintaining children's and adult's wellbeing. The involvement of wider family members including grandparents in children's lives is also beneficial.

- Support from informal networks – access to support from friends and community members is a well-documented factor in preventing or overcoming social isolation. There is a strong association between parents' participation in childcare, parenting programmes and other family support services, and wider benefits in terms of socialising with other families, developing support networks and gaining in self-confidence.

The data collected via IFMIS shows that positive change was achieved to some extent in all of the above areas, which suggests that the programme has resulted in a high level of unquantifiable social benefits and potential longer-term savings.

## 5.4 Deadweight

The above analysis is based on reported outcomes. However, it is important to consider the extent to which these changes would have happened anyway due to factors unrelated to Improving Futures. The proportion of outcomes which would have occurred anyway is often termed 'deadweight'.

Data from the follow up survey of participating families provides an estimate of the extent to which the outcomes achieved occurred as a result of the support provided (see [Figure 3.10](#), though as we mention in section 3.1, the survey is not representative of all families supported through Improving Futures and so the findings need to be treated with some caution). This suggests that families felt that the support was particularly effective in terms of managing children's behaviour, where over half (58%) of respondents felt that the changes experienced were either entirely or mainly due to the support received. In addition, over one-fifth (22%) of those surveyed felt that the support received was entirely responsible for improvements in their housing situation and children's safety.

The support was perceived to have been less important in achieving improvements to employment prospects (18% felt that changes were entirely or mainly due to the Improving Futures support) and financial situation (25% reported it being entirely or mainly due to the support), perhaps reflecting the fact that changes in these variables can take longer to emerge (or require other things to improve first) and also that referrals may have been made to more specialist forms of support which may then be viewed as the primary influence.

The proportion of families who said that outcomes were either partly or not at all due to the support provided has been used as an estimate of deadweight, by mapping the categories covered by the survey to the relevant outcome indicators, and the analysis of benefits was then adjusted on this basis. This results in an adjusted benefits figure of £0.95 million across the sample (£748 per family).

## 5.5 Sustainability of outcomes

The analysis of benefits presented above considers only a one-year time horizon. However, it is important to acknowledge that some of the changes which have taken place may generate a stream of benefits (or savings) over a much longer period. Although it has not been possible to undertake extensive longitudinal research beyond the period over which IFMIS data was collected, a survey of a sample of families was undertaken at around two years after the support began, which provided an indication of how far benefits had been sustained for the different outcome areas. Overall, 34% of respondents said that their outcomes had got better, 56% that they were sustained and 10% felt that things had got worse at the two year point, which is a positive result.

The proportion of respondents who said that their outcomes had got worse has been used to estimate the potential for drop-off in the second year<sup>37</sup>. This analysis suggests that a further benefit of around £0.83 million could be expected in the second year (including the same deadweight assumptions). Added to the estimated benefits for the first year gives a total of £1.78 million (or around £1,400 per family). It is likely that a proportion of these benefits would persist beyond two years, although there is no indication of the level of drop-off past this point so no estimate has been made.

### 5.6 Cost benefit ratio

The estimated benefits and costs associated with the programme are presented below.

**Table 55.4: Cost benefit ratio**

<b>Overall summary</b>	
Cost to the Big Lottery Fund	£24,710,00 <sup>38</sup>
Benefits	£12,980,000 <sup>39</sup>
<b>Ratio of benefits to costs</b>	<b>£0.53:£1</b>

The analysis suggests a quantified benefit of 53 pence for every £1 spent by the Big Lottery Fund on the programme.

It could be said that the benefit cost ratio resulting from this analysis is a conservative figure because it is based on only a sub-set of outcomes and does not take full account of the extent to which the work has prevented negative outcomes, including over the longer-term, due to the absence of a robust counterfactual. However, in-kind costs and internal costs for grant management and administration are not accounted for in the total costs, therefore total costs may also be underestimated. Caveats around the assumed extent to which any changes are sustained should also be noted.

### 5.7 Conclusion

The cost benefit analysis for the Improving Futures programme found that the programme generated a quantified benefit of 53 pence for every £1 spent by the Big Lottery Fund. However, this is likely to be an underestimate of the true savings from the programme. Although the approach also underestimates the true cost of running the programme too (because not all indirect costs were captured), overall we believe the CBA under-reports on the programme savings (as the monetary benefits of some outcomes have not been included; the model does not include long-term sustained outcomes; and because the CBA included the savings from reduced risks, but not avoided risks). Therefore, on balance, it is the view of the evaluators that, although the Improving Futures programme did not appear to lead to a net benefit in terms of short-term cost savings, the potential for it to have contributed to future longer-term savings means that it was a worthwhile investment.

<sup>37</sup> A sense-check of the outcomes included in the analysis was undertaken to confirm that they had the potential to be sustained (i.e. that they weren't likely to be one-off events). This assumes that participants remained in the age range over which outcomes were applicable (i.e. that where improvements in school attendance were reported the child in question was still of school age in the following year) which appears reasonable given the focus of the programme and the relatively short-term timeframe.

<sup>38</sup> This is an estimate of the costs to the Big Lottery Fund of all 26 projects (see programme costs sub-section).

<sup>39</sup> This is based on the benefits estimated per family (adjusted for deadweight and the likelihood of effects being sustained into a second year) which have then been grossed up the total number of families estimated to have been supported by the programme (9,279).

## 6.0 Conclusions and Recommendations

This report has presented the summative findings from the evaluation of the Big Lottery Fund Improving Futures programme, based on a mixed methods evaluation carried out by Ecorys between October 2011 and March 2017. In the previous chapters, we gave an overview of the aims and structure of the programme and the 26 funded projects, and explained the approach taken for the evaluation. The previous four chapters examined the lessons learned from the design and implementation of the programme; the outcomes and how these were achieved; the extent to which the projects undertook the intended sharing of learning and best practice at a local level; and the extent to which these outcomes led to cost savings.

In this final chapter, we reflect upon the overall achievements and lessons learned from Improving Futures, and we present a set of recommendations for how the evaluation learning might be used to inform the design of future programmes, and the key messages for policy and practice.

### 6.1 Reaching and engaging families with complex needs

The programme originally targeted children in families with complex needs where the oldest child was aged between 5 and 10 years upon first receiving support from Improving Futures. The rationale was to focus on those children who fell between the gap for 'early years' and 'youth' provision, and to ensure a strong focus on partnership working between family-focused organisations and primary schools. The evaluation found that this partnership was developed with considerable success, and that the targeting of the programme helped to focus on developing VCSE and school partnerships in real depth.

The learning from the projects was that the strict application of age-based criteria could be too inflexible at times, however, and risked excluding families where the oldest child fell beyond this limit. The requirement was subsequently relaxed to provide greater flexibility. This change was generally welcomed, and working with older children allowed the projects to bridge the gap in support upon transition from primary to secondary at 11+, as well as boosting the numbers of families falling within scope for support. There are parallels with the Troubled Families programme in this respect, where the original criteria had the effect of making it difficult for local teams to work with families who fell just 'out of range'<sup>40</sup>. These experiences underline the importance of maintaining a degree of local discretion when designing programmes that include multiple local stakeholders and operating with different target groups.

Over half of the projects had a base in universal settings such as schools and children's centres. These settings provided an important hub for referrals, and enabled the projects to build strong relationships with universal services and families alike. The interviews also underlined the importance of a multi-faceted approach to engaging and working with families. Over-dependency on a single referral route tended to mean that referrals could dry up if there was a change in leadership or staffing, while it was also found that different families would engage better with different settings. Schools allowed for the direct observation of children, for example, whereas community centres or faith groups might provide a point of engagement for parents who would not routinely attend their child's school and were inaccessible to school-based staff. This pointed towards the importance of a 'no wrong door'<sup>41</sup> approach to engagement.

<sup>40</sup> In this instance, it was the focus on youth offending and school absence that made it difficult for local teams to work with families who had younger children. Greater flexibility was introduced in the Expanded Programme, with more discretion for local teams to develop their criteria from the 'bottom-up' where these were based on local needs.

## 6.2 Lessons learned from implementation

As illustrated in this report, and within the previous annual evaluation reports, the Improving Futures projects varied considerably in their design, configuration of partner organisations, and the type and intensity of support that was provided to families. The programme incorporated a number of projects that were focussed to a much greater extent on target groups as defined by types of need (e.g. Manchester and Belfast with their focus on domestic violence), and those where the target groups were defined geographically first and foremost – particular local communities characterised by high levels of socio-economic disadvantage and gaps in locally available statutory support. This variation had both advantages and disadvantages. It certainly allowed for greater flexibility to test and learn, but at the same time it meant that the learning from the 26 projects was highly diffuse, and examples of good practice were often more challenging to capture and quantify within the scope of a programme-wide evaluation.

Setting aside this high degree of variation, there were some common threads to the projects that reflected both the influence of the programme criteria and the ethos of the organisations that were successful in applying for funding. A common success factor for many of the projects was the voluntary basis of engagement, and the discretion to work with families on their terms, without being constrained by a pre-determined model or statutory targets. Many of the VCSEs overseeing the projects were already well respected for their expertise in engaging families and making referrals, but Improving Futures showcased the capabilities of VCSEs ‘in the lead’ - overseeing service delivery, and coordinating other agencies, including statutory organisations. This resulted in quite a different dynamic and helped to ensure that VCSEs carried greater weight in local decision-making, albeit for a limited period of time in some cases.

Most, though not all, projects adopted some kind of key working or lead professional model, with an individual worker assigned to each family to build a relationship, understand their needs, and coordinate inputs from other services. This approach closely mirrored other ‘whole family’ programmes such as the Family Pathfinders and Troubled Families programmes, and built on a well established evidence base for relationship-based practice. There were some subtle differences in the remit of the Improving Futures practitioners, however, with a greater relative emphasis on support than sanction. This was a key distinction from the Troubled Families programme, where practitioners were often supporting families in the context of an impending eviction, education or YOS orders, where there was a need for compliance.

Beyond the key worker role, the projects often took a ‘blended’ approach to supporting families – combining an array of different types of professional support and expertise, from parenting support, to family budgeting, legal advice, advocacy, mentoring, and therapeutic services. Although this flexibility inevitably resulted in wide variations in practice, the evaluation suggests that this blended model, underpinned by a broad-ranging multiagency partnership, was necessary to provide the flexibility needed to address the range and complexity of the needs of the families supported through the programme.

Many of the projects recognised a need to combine support at the level of the individual family with efforts to strengthen or establish local support networks. The qualitative evidence suggests that this was often a potent combination that put resources at the disposal of the projects beyond the reach of mainstream services, and which justified the investment of time in mapping community resources at the outset of the programme. This was a common theme for many of the Improving Futures projects, ranging from the ABCD model in Croydon, to the 'community menu' approach in Sunderland. These projects, along with others, were able to demonstrate impressive networks of local partner organisations, including self-employed professionals or volunteers running local support groups on issues ranging from bereavement, to autism and domestic violence, which often resonated with the issues that were experienced by families who were supported through the Improving Futures programme.

The evaluators aimed to identify a common set of practice 'principles' for Improving Futures, to help understand the features of the support provided by the projects most valued by families and practitioners. The seven principles proposed in the year three evaluation were tested with project staff and families who received support, and met with a good degree of consensus. They are as follows:

1. Relationship-based: Having a single key worker building relationships and trust over time, adopting a respectful approach
2. Participative: Active participation by families in assessment and service planning
3. Whole family: Working with the whole family to identify and address needs
4. Working at the families' pace: Flexible and variable support, working alongside the family and responding to their changing circumstances
5. Strength-based: Building families' self-belief, resilience and capabilities to manage their own lives
6. Supported referrals: Supporting families to engage with other services, including acting as an advocate
7. Support networks: Building links with other peers and the community

### **6.3 Outcomes and cost savings from the programme**

The programme set out to improve outcomes for children in families with complex needs, and there is convincing evidence from the evaluation that it did so across a wide range of measures, during the period when families were supported (i.e. typically 6-12 months). The projects consistently recorded improvements to children's behaviour and adjustment at school, their emotional wellbeing, and engagement in positive activities, using the IFMIS tool. Outcomes were also evident for adult family members, although the projects generally had a main focus on the child within the family, and the data reflected this. The positive effects from the programme were often cumulative, with an overall reduction in the average number of risks per family, and an overall increase in the average number of strengths.

The IFMIS data further allow us to conclude that the outcomes were greatest for children qualifying for Free School Meals (FSM), when compared with the non-FSM group. This is significant in that it shows the programme achieved the intended effects on socially disadvantaged children, and because FSM is a measure that holds currency among schools – a principal partner for the projects throughout the programme. The IFMIS also shows a positive correlation between the length of time supported and outcomes achieved for families. This is also significant, in that project workers who were interviewed for the evaluation regularly spoke of the need to have sufficient time to gain families' trust and to understand the relationships and dynamics within the family. At a time when services are under increasing pressure to increase caseload sizes and improve efficiencies, the data helps to validate a longer-term approach.

The IFMIS data was supported by the qualitative evidence, which showed that the projects regularly played a significant role in helping families to overcome isolation, strengthened family relationships, improved their financial capability, and gave them greater control over their lives. Indeed, the evaluation underlined the extent to which families' lives were made more difficult by inaccuracies or inconsistencies in professional judgements – whether these related to how entitlements had been (mis)calculated (e.g. to housing, benefits, or entitlement to an SEN assessment or CAMHS referral), or in dealings with utilities companies (e.g. bill repayments, heating or lighting). One of the roles of the Improving Futures project workers was often to build families' competence in navigating the sometimes challenging world of dealing with professionals – something they would need to learn to do independently following their exit from the programme.

As Improving Futures was intended to provide early intervention, families' progress was measured using relatively 'soft' measures when compared with programmes such as the FIPs and Troubled Families. It was not a main aim of Improving Futures to prevent entry to the criminal justice system, homelessness, or other 'high cost' measures associated with families at a higher level of need. Even so, the economic analysis shows that the estimated cost savings were promising in the short term (i.e. up to two years). These were mainly achieved through improvements in parenting skills, child protection and employment.

Despite these achievements, the evaluation sounds a note of caution with regard to the durability of the outcomes. At one year and two years after exiting the programme, the families who were tracked through the survey had generally sustained their improvements, as far as it was possible to measure change using two different types of data recording. There was some evidence that child outcomes were the most durable, with families self-reporting greater confidence in the lasting contribution of Improving Futures towards improvements to their child(ren)'s home and school life, and their child(ren)'s wellbeing. However, more than one quarter of families had reported deterioration in their circumstances at the two year point after exiting, especially with regard to housing and health issues. A similar proportion of parents reported a continuing need for professional support in relation to parenting.

These findings provide a reality check for the extent to which time limited intervention can be expected to transform families' lives. Given that the IFMIS data shows that many of the families were experiencing the effects of poverty and disadvantage, such as poor housing conditions, unemployment, long-term physical and mental health problems, it is perhaps unsurprising that Improving Futures was not able to entirely counteract these effects within an average period of seven months. Indeed, a consistent message from the projects was that the profile of families supported through Improving Futures was 'more complex' overall than anticipated at the start of the programme. Projects attributed this to a number of factors, including the impact of public sector funding cuts and local authority restructuring during the period corresponding with the programme, and increased thresholds for specialist services resulting in families with higher levels of need falling short of qualifying for statutory support. Issues such as domestic abuse, drug and alcohol misuse, and mental health problems were more prevalent across the programme than might have been expected, and this meant that outcomes sometimes took longer to achieve.

The findings suggest that the effectiveness of this type of intervention might be improved by strengthening the involvement of adult services, in order to rebalance the emphasis of Improving Futures on the child within the family. This is not to say that there weren't many examples of good practice of projects supporting parents with a range of their own issues, but the range of options available to them for adults' needs (e.g. adult social care, adult mental health) was not always at the required level. But perhaps the main difference from the Troubled Families programme in this respect is the employment dimension of Improving Futures. The projects never set out to explicitly tackle employment and employability to anything like the same level as Troubled Families, and nor were they resourced or incentivised to do so in quite the same way. Nevertheless, this emerged as a potential missing element of the support provided – especially given the work of the projects in improving families' economic wellbeing through financial capability support and brokering access to money advice.

Finally, the lower level of outcomes on average for BME families must be considered. This is consistent with the findings from similar evaluations of family programmes, but suggests a need for greater targeting as part of future grants. The qualitative research shows that the projects had varying success with engaging and supporting BME families in different local contexts, and further exploration of the critical success factors would be beneficial. In particular, further work is needed to understand why the support improved strengths for BME families, but made less progress in reducing risks.

## **6.4 Influencing and sharing learning**

The Improving Futures programme mostly achieved its third aim of improving learning and the sharing of best practice between public services and VCSEs. The programme provided opportunities for the Improving Futures delivery partners to collaborate with other VCSEs and public services and, although not explicitly pursued by most projects, this led to the sharing of learning between the partners and other VCSEs and public services. The main services to have benefited from the knowledge transfer seem to have been schools, who learnt more about how to support children with behavioural difficulties and how to engage with the whole family, and LAs, who learnt a lot from comparing their own family support with the approaches adopted by the Improving Futures projects.

In most cases this knowledge transfer was tacit and intangible – leading to a greater understanding about how to support the whole family at an early intervention level but not necessarily changing specific delivery models or approaches.

## **6.5 Concluding thoughts and recommendations**

In conclusion, the Improving Futures programme was funded to test whether VCSE-led partnerships could improve outcomes for children in families with multiple and complex needs, by developing tailored and joined-up support to families and sharing best practice with public services. The evidence from the evaluation is that the programme was largely successful in meeting these objectives, albeit with a notable degree of variation in what was tested across the 26 local projects. The programme was an effective showcase for VCSE capabilities in service design and delivery, rather than playing an ancillary role to public services. It also provided numerous case studies of effective local problem-solving, and demonstrated the importance of schools and family services working together in partnership. The effectiveness of this type of intervention might be improved by strengthening of the involvement of adult services, to rebalance the emphasis of Improving Futures on the child within the family, particularly in supporting adults into employment.

In looking ahead, the evaluation offers a number of recommendations for future policy and practice development in this area. These are as follows:

#### **Recommendations for funding:**

- **Recommendation 1: Build bridges between schools and family services:** The evaluation supports the case for intervening early for families with complex needs, where the oldest child is aged 5-10 years. Opportunities should be identified for schools and family services to work closely in partnership to secure positive outcomes for these children and their families. The potential use of Pupil Premium funding might be considered, given the success of the projects in achieving outcomes for socio-economically disadvantaged children.
- **Recommendation 2: Create space for innovation and reflective practice:** The Fund should consider how best to balance 'innovation' with a need to maximise the longer-term return on investment from grant-funded projects. This might entail a clearer distinction between an initial testing and experimentation phase, and a subsequent consolidation phase where grant funds are channelled into those models showing the greatest merit.

#### **Recommendations for service delivery:**

- **Recommendation 3: Invest in the early intervention workforce:** Early intervention projects should recruit and train practitioners to adopt a strengths-based approach for engaging and working with families. This should begin with: a trusting and open approach to engage and build relationships with all family members, including both adults and children; a thorough understanding of different issues that may affect families with complex needs, and support for families to actively participate in shaping their intervention.
- **Recommendation 4: Track and compare outcomes to understand change for families:** These data might be used to determine the optimum length and scaling of interventions. Services should be mindful that the Improving Futures evaluation found a correlation between the duration of support and positive outcomes for children, and that more sustained engagement may be required, even at an 'early intervention' stage.
- **Recommendation 5: Develop a stronger role for adult services:** Organisations and partnerships working with vulnerable families might wish to take into account the development areas highlighted by the evaluation. These include the need to strengthen the involvement of adult services; developing a stronger labour market dimension through closer links with appropriate partners such as Jobcentre Plus, and prioritising work with fathers. A stronger place-based dimension is also warranted, building on local networks and resources.
- **Recommendation 6: Engage local commissioners to ensure sustainability:** Future funding programmes should have a stronger focus on sustainability, identifying potential longer-term investors and developing outcomes frameworks with their needs in mind. The Fund might experiment with different funding approaches that could lead to greater sustainability, such as involving local commissioners in distributing the grants to achieve buy-in.
- **Recommendation 7: Increase focus on support for adults, particularly fathers** – this Improving Futures projects made more sustained progress towards children outcomes than adult outcomes. Although this was the focus of the programme, it is likely more longer-term, sustained impact would be achieved if families' housing, finances and well-being also improved. In particular, VCSEs would benefit from focusing more on how they can engage fathers.