

Research report

# CPU Child Poverty Pilots

## Interim synthesis report

by Martin Evans and Karen Gardiner

Department for Work and Pensions

Research Report No 730

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Martin Evans and Karen Gardiner

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# Glossary of terms

The various Child Poverty Pilot evaluations vary in approach, from randomised ‘impact evaluations’ to more descriptive ‘before and after’ studies. There is a resulting difference in terminology used in reports that is both inconsistent and potentially confusing. In line with the approaches laid out for economic evaluation of policy (HM Treasury Greenbook), we adopt the following set of definitions of terms:

<b>Generalisability</b>	The ability to draw conclusions from the outcome evidence (primarily impacts) so that the findings would apply in other circumstances other than the pilot. For instance, in other locations and points in time, or with different economic circumstances and population characteristics, or where change of wider policy environment may mean that the impact is likely to be different.
<b>Impact</b>	An ‘outcome’ that has been established as caused by the intervention (usually identified against a counterfactual where no intervention is in place or through the use of statistical controls for other confounding factors). Impacts can also be called, ‘additionality’. Examples of impacts: the difference between the treatment group and control in programme outcomes, ‘difference in differences’ – a statistically estimated treatment effect. An example of an outcome that is not an ‘impact’: increased level of job entry at pilot location that results from changes in local economic demand rather than intervention itself.
<b>Inputs</b>	The resources allocated to the pilot (staff time, budget allocation, buildings and premises, promotion).
<b>Outcome</b>	A measured effect associated with a pilot intervention (which may or may not be causally related to intervention), e.g. increased use of childcare.
<b>Outputs</b>	What the pilot produces that is not an effect: number of treatments, caseload, staff ratios.
<b>Process evaluation</b>	The evaluation of changes in delivery and working practices rather than the evaluation of effects of policy change on participants’ behaviour.
<b>Replicability</b>	A finding that implementation of the intervention would be feasible, a requirement for wider roll-out of programme. For instance, the underlying assumptions on ‘mandation’ and public service provision, substitution for local funding for third sector organisations.
<b>Treatment</b>	The policy change (or rule change) provided in the pilot that is expected to change participants’ behaviour.

# Summary

## Introduction

A suite of nine Child Poverty Pilots have been operating across England since 2008, with over a third of local authorities (LAs) involved with at least one of the initiatives<sup>1</sup>. The pilots represent a large and varied set of policy interventions, with each pilot testing a range of different approaches to reducing child poverty. There is also diversity in terms of the client group the pilots engage with, for example, some have a whole community focus, whilst others target families and/or specific vulnerable groups or individuals. The diverse nature of the pilots reflects the complex, cross-cutting and multi-faceted nature of child poverty as well as the different ways in which services are shaped in local areas to meet the needs of their populations.

The aim of this report is to bring together information from each of the pilots, to maximise comparisons across the evaluation evidence base, and to draw out key findings relevant for policy makers and practitioners at national and local level. Additional analysis has been conducted to strengthen the evidence base.

This interim report mainly focuses on implementation and pilot delivery evidence, and explores the following cross-cutting pilot themes:

- pilot participants;
- developing tailored, innovative and localised solutions;
- early indications of outcomes, experiences and perceptions of pilot services.

It is hoped that the evidence base from the Child Poverty Pilots in conjunction with other relevant poverty related reviews and reports, e.g. Review on Poverty and Life Chances led by Frank Field MP, the Early Intervention Review led by Graham Allen MP and the work conducted by the Centre for Excellence and Outcomes (C4EO) and Local Government Improvement and Development (LGID) can help shape Child Poverty strategies at both national and local level. The Child Poverty Act, which received Royal Assent on 25 March 2010, creates the framework to address child poverty at national and local level. The Act requires local areas and named partners to work together to undertake a Child Poverty Needs Assessment and to produce a Child Poverty Strategy.

## Pilot context

The nine pilots are testing a range of key challenges across adult skills, employment, childcare, family intervention, the take up of services and local delivery. They reflect a good geographical mix, covering inner city, rural, urban and suburban areas. They are also testing a range of delivery mechanisms that includes the use of the Voluntary and Community Sector. Although established under the previous administration, the pilots provide valuable evidence and learning for the priorities of the Coalition Government. Links have been made in this report to demonstrate where this is the case. Of the nine pilots funded, Coalition Ministers decided that six should continue without changes to pilot delivery or evaluation design.

The three pilots subject to changes were: the Child Development Grant, as the conditional cash transfer element was not considered relevant for the planned Coalition reforms to Sure Start,

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<sup>1</sup> School Gates also operates in Scotland and Wales.

particularly in the current fiscal climate; HM Revenue & Customs' (HMRC) Childcare Affordability pilot, two strands of which were terminated early but evidence from all the strands will inform future welfare reform and Universal Credit proposals. Evaluation evidence will still be available for these pilots, albeit in reduced format. The HMRC outreach pilot was completed, but the evaluation was terminated early after a review by HMRC deemed that the project was not good value for money in May 2010.

## Overview of the Child Poverty Pilot programme

- The Childcare Affordability Pilot 2009 tests whether changes in childcare subsidies make childcare more affordable and improve employment rates.
- The Child Development Grant provides cash payments as incentives to encourage attendance and active participation at Children's Centre services. Emphasis is on developmental and parenting services to families with children aged 0-3 years.
- The Child Poverty Family Intervention Project provides intensive family interventions to families with significant barriers to work including mental health problems, drug and alcohol issues, domestic violence and family functioning issues, to ensure their issues are addressed and that they are 'work ready'. These family interventions operate alongside pre-existing Anti-Social Behaviour and Youth Offending Family Intervention Projects
- The Co-ordinated Local Support for Separating Parents assesses local development of integrated services to support separating and separated parents, with the aim of improving access to help, minimising parental conflict and negative impact on children's outcomes.
- HMRC Outreach Initiative explores the benefits of placing tax credit advisers in Children's Centres to improve tax credit delivery and customer experience and help with reducing fraud and error.
- The Local Authority Innovation Pilots look at a wide range of innovative activity designed by local areas to tackle child poverty. They often consist of multiple intervention components.
- The School Gates Employment Support Initiative provides employment support to parents of primary school children through school-based information and support services to help prepare them for going back to work.
- The Teenage Parent Supported Housing tests locally designed approaches to enhancing the housing support available to teenage parents to improve outcomes for them and their children.
- The Work-focused Services in Children's Centres Pilot explores the benefits of integrating full-time Jobcentre Plus advisers in Children's Centres to help prepare parents for going back to work.

## Interim findings of the Child Poverty Pilots

The evaluation evidence base from the Child Poverty Pilots is incomplete as final evaluation reports are still in preparation. At this interim stage the reports available mostly concern baseline studies and evidence of implementation, and early qualitative experience of providers and participants. However, emerging findings are:

## Pilot participants

- The pilots work with low-income families at different stages throughout their lives and with a wide range of (underlying) issues. One key difference in the balance of objectives across the suite of pilots is how far they emphasise developmental services to improve life chances – to children and their parents – or services to reduce monetary poverty and material deprivation.
- Such a difference in approach is crucial to understanding routes out of poverty that can be immediate (say, through a step-change in moving into work and increasing family income) or could be preparatory and developmental (improving child development and parenting behaviour, improving maternal education and training in preparation for later work).
- Pilots that concentrate on the former are likely to show results in terms of monetary poverty within the lifetime of the pilot itself, while others that are building capacity in children and their families are more likely not to result in children ‘crossing the poverty line’ during the lifetime of the pilot but to impact on later life chances.
- One important theme in the emerging evidence base is whether the pilots are reaching out to new and previously under-served groups of parents and families. The early indications are very encouraging.

## Developing tailored, innovative and localised solutions

- The Child Poverty Pilots can be seen as developing new services alongside new delivery methods. Most of the pilots are trying out new delivery methods to find better ways of working with families at risk of child poverty. These new ways of operation often involve partnerships between agencies that have previously never worked together. Some pilots are both developing new services and new delivery approaches. Overall, the pilots reflect an appreciation that improved co-ordination of services provide a more client-focused, integrated and holistic approach to service provision.
- Implementation problems around the set-up of the pilots have caused delays in many cases. These often involved practical constraints in terms of building size, setting up monitoring and information systems, delayed announcements of successful bids, but also conflicting wider LA developments around recruitment, restructuring and redeployment.
- Most pilots show that they have recruited their anticipated target groups, and often above anticipated numbers, for example, the Teenage Parent Supported Housing and Coordinated Support for Separating Parents Pilots. However, some experienced delays and slower than expected recruitment, for example, in some of the Local Authority Innovation pilots.
- New locally-led partnerships in the Teenage Parent Supporting Housing and the Coordinated Support for Separating Parents Pilots show varied experiences that are both illustrative of obstacles and of the positive leaps forward when such obstacles are overcome: for instance in data sharing, from overcoming differences in checking and accreditation (e.g. for working with children) and in investing up-front time to reconcile differences in working practices. Some partnerships – particularly the Separating Parents pilot – provide a very wide ranging mix of services.
- Differences in organisational cultures are a common obstacle but there are early signs of real gains from integrating employment and benefits services in Children’s Centres.
- Pilots that are exploring new ways of integrating services at the local level demonstrate some of the inherent overlapping challenges to setting up pilot programmes that use innovative practices and partnership working.

## **Early Indications of Outcomes, Experiences and Perceptions of pilot services**

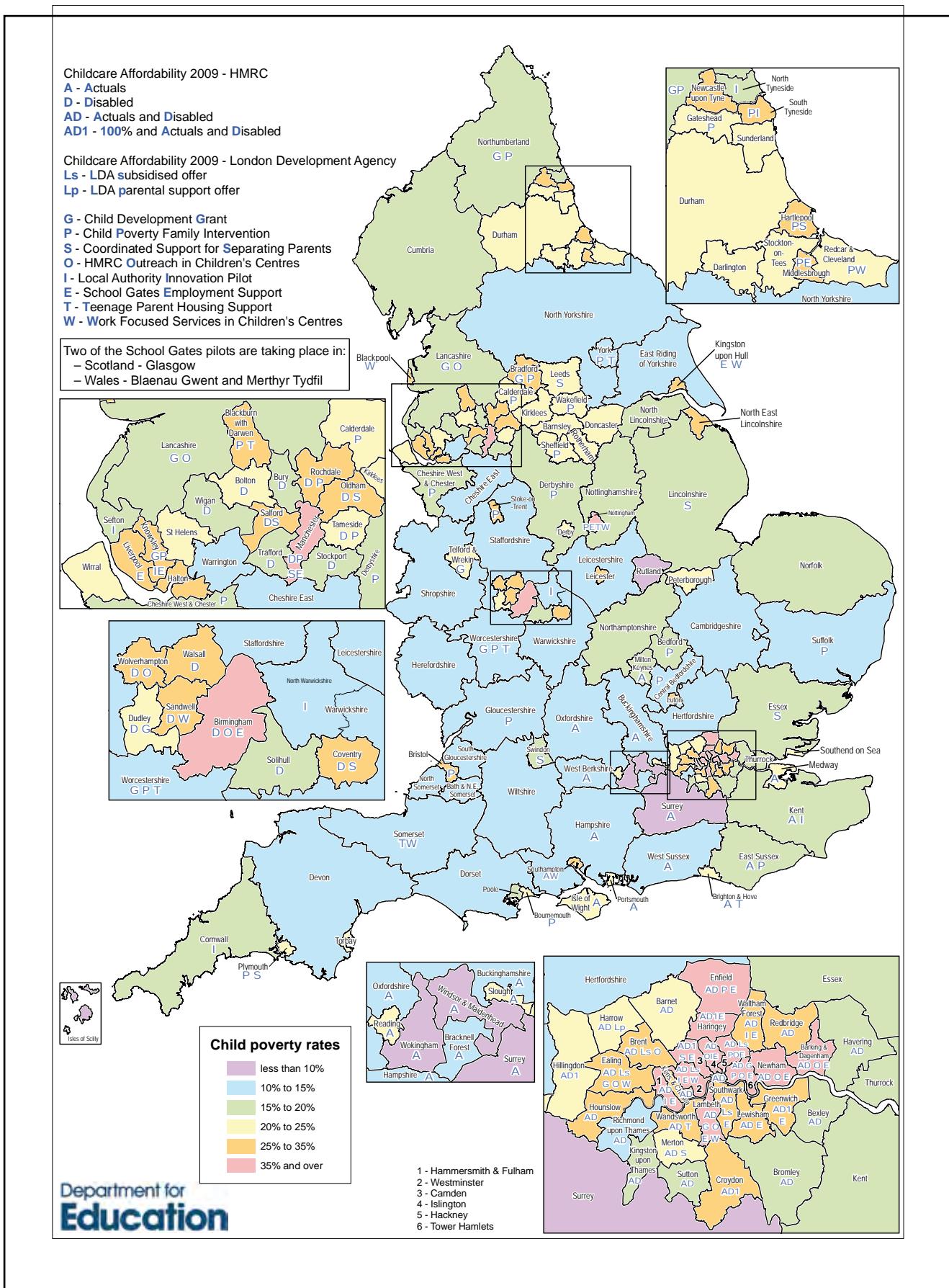
- The emerging evidence base demonstrates that the pilot services are well received by participants. Improved co-ordination of services and the more flexible and personalised approach of pilot services offered has helped engage low-income parents previously not engaged. For example, eight out of ten teenage parents participating in the Teenage Parent Supported Housing Pilot expect the pilot to make a big, or some, difference to the lives of themselves and their children.
- Overall, low-income parents have responded positively to the opportunities provided by the pilots for locally delivered integrated services. Interviews with Local Authority Innovation Pilot stakeholders demonstrate that families can face a range of barriers in accessing provision and that, to address these barriers, family-based interventions are required.
- Services offered through Children's Centres are well-received by Centre users. However, 2008 Sure Start Children's Centre Survey data shows that not everyone eligible is aware of its existence. Modelling shows that eligible parents who are unaware of the local Children's Centre are more likely to be: male, from an ethnic minority background, expecting their first child or live in a household where no-one works. These parents are also less likely to be educated to degree level, live in a rural area, be poor, or have three or more children.
- Some parents are aware of the local Children's Centre but do not use their services. It is not clear whether this is because they do not like or require the services offered. However, modelling does show that this group of parents is less likely to live in a working household, less likely to be highly educated, less likely to live in a rural area and less likely to be poor compared with users of Children's Centres services.
- Across the interim evidence base, soft outcomes are reported as being most prevalent for participants: greater confidence; increased awareness of opportunities and options; access to job preparation skills and support. Although encouraging evidence, the route out of poverty depends heavily on finding and keeping a job. Crucially, crossing the poverty line depends on job quality, i.e. on pay and hours, as well as just getting a job. The final evaluation reports of the individual pilots will provide more information.
- Note that the evaluation evidence of smaller-scale, locally-led initiatives may not be as robust as that from more centrally-led initiatives. The smaller number of people involved and the lack of suitable comparison groups often means the findings cannot be replicated or generalised to the same extent. However, qualitative and administrative evaluation evidence bases are explored to extract as much relevant learning as possible.

## Next steps

The aim of the synthesis is to share cross-cutting evaluation evidence, disseminate promising practice and encourage local areas to take up and/or shape locally suitable initiatives to tackle child poverty. The final synthesis report due in late summer 2011 will continue to build on the interim evidence discussed here, but in addition will focus on pilot outcomes, cost effectiveness and new analysis on poverty gaps and distance travelled toward employability, i.e. capturing people's progress (towards the labour market), even if it hasn't resulted in employment in the short term. The final report will be structured around the Child Poverty Building Blocks.<sup>2</sup>

- 
- <sup>2</sup> **1 Localism and place** – Freeing up local organisations and communities to target resources more effectively at tackling child poverty, and promote stable, safe and thriving communities for children to grow up in;
  - 2 Employment and skills** – Removing barriers to work and supporting families to achieve financial independence;
  - 3 Life chances and families** – Intervening early to support every child in fulfilling their potential and through our education, health and family policies, facilitating true social mobility;
  - 4 Financial support** – Reforming the benefits system to ensure that work pays and the most vulnerable families receive the support they need.

**Figure 1 The Child Poverty Pilots Programme**



# Chapter 1 Introduction

The Child Poverty Unit (CPU) was established in 2007 to integrate work across the Department for Work and Pensions (DWP), the Department for Education (formerly Children, Schools and Families (DCSF)) and HM Treasury (HMT), to focus on taking forward the Government's strategy to eradicate child poverty, which had been announced in 1999 and consolidated in the Child Poverty Review in 2004.

Since 2008, the CPU has led on a programme of nine pilots delivered in more than one in three local authorities (LAs) to test a range of innovative approaches in tackling child poverty. To maximise learning from the suite of pilots CPU also commissioned the production of a synthesis report to draw together the evaluation evidence from these pilots and identify key messages for national and local policy makers and practitioners. This is the interim synthesis report. The second and final report will be published in late summer of 2011.

## 1.1 Background to the Child Poverty Pilots Programme

The original idea of pilots was '*to draw on new ideas and approaches to ensure sustainable progress is made, improving children's life chances for the longer term, pilots will look at new approaches to increasing parental employment and raising incomes, to tackling deprivation in communities and to improving poor children's life chances.*' (HMT, 2008, p.63).

The contemporary CPU strategy paper, *Ending Child Poverty: everybody's business*, set out an approach that encouraged the development of more localised initiatives and responsibilities for ending child poverty to accompany the national programmes based on tax credits, employment programmes, skills and other mainstream programme activity. Child Poverty Pilots were seen as part of this widening and deepening of action on child poverty: '*The Government needs to begin now, working with stakeholders, to develop a strategy for the next decade to reach the 2020 goal. In preparation for the strategy, the Government will undertake further research and establish new pilots and approaches that will inform and shape future policy.*' (CPU, 2008, p.61).

Accompanying the pilots was the development of strategic legislation and approaches to tackling child poverty that were heralded in 2009 by *Ending Child Poverty: Making It Happen*. The Child Poverty Act, which received Royal assent on 25 March 2010 enshrines the pledge to eradicate child poverty by 2020 in legislation and commits future Governments to this pledge.

The pilots are being delivered and managed by a range of pilot and project leads from central government, local government and third sector organisations. Each pilot has commissioned an independent evaluation.

## 1.2 Aims

This interim report sets out each of the Child Poverty Pilots and assesses the emerging evidence from the early and interim evaluation reports. The aim is to identify relevant messages for policy makers and practitioners from across the pilot evidence base and conduct additional analysis to strengthen the findings from the pilots. This will assist the development of the national Child Poverty Strategy and support LAs and delivery partners in developing their needs assessments and local child poverty strategies required under the 2010 Child Poverty Act.

The suite of Child Poverty Pilots can be placed against the Building Block structure often used for policy development by the CPU. A group of pilots, for instance, focuses on improving life chances, i.e. ensuring poverty in childhood does not translate into poor outcomes; some focus on improving employment and skills, i.e. getting more parents into work that pays; some focus on providing financial support; and some focus on tailoring support to the needs of a particular area. The table demonstrates under which Building Block each of the pilots fits. Note that the pilots are not necessarily mutually exclusive to one Building Block.

**Table 1.1    Child Poverty Building Blocks and Pilots**

Improving life chances	
Providing better services to parents	<ul style="list-style-type: none"> <li>• Child Poverty Family Intervention Projects</li> <li>• Coordinating Support for Separating Parent Pilot</li> <li>• Teenage Parent Supported Housing Pilot</li> <li>• Work-focused Services Pilot</li> </ul>
Improving family capacity	<ul style="list-style-type: none"> <li>• Child Poverty Family Intervention Projects</li> <li>• Child Development Grant Pilot</li> </ul>
Increasing educational opportunities and Improving child wellbeing	<ul style="list-style-type: none"> <li>• Child Poverty Family Intervention Projects</li> <li>• Teenage Parent Supported Housing Pilot</li> <li>• Child Development Grant Pilot</li> </ul>
Tailoring delivery of support to needs of area	
Addressing housing barriers to employment and wellbeing	<ul style="list-style-type: none"> <li>• Teenage Parent Supported Housing Pilot</li> <li>• Local Authority Innovation Pilots<sup>1</sup></li> </ul>
Increasing employment and skills	
Parental employment profile	<ul style="list-style-type: none"> <li>• Work-focused Services in Children's Centres</li> <li>• London Development Agency (LDA) and HMRC Childcare Affordability</li> <li>• School Gates</li> </ul>
Reducing childcare barriers	<ul style="list-style-type: none"> <li>• LDA and HMRC Childcare Affordability</li> </ul>
Providing financial support	
Access to additional support (extended delivery models and more support)	<ul style="list-style-type: none"> <li>• HMRC outreach</li> <li>• HMRC Childcare Affordability</li> </ul>

<sup>1</sup> This is a suite of ten locally driven Child Poverty Pilots that explore a range of innovative ways of tackling area-based poverty. Each pilot consists of various strands and fits under more than one of the Building Blocks. For more information see Appendix B.

Where relevant, this synthesis report also includes references to the Local Authority Innovation pilots. This is a suite of ten locally driven Child Poverty Pilots that explore a range of innovative ways of tackling area-based poverty. However, as a separate synthesis evaluation report has been commissioned by the Department for Education to capture the learning from those pilots this report does not give a detailed account of what each of the LA pilots are about. For more information, please refer to their evaluation reports, which can be found in Appendix B.

This interim synthesis report has the following objectives:

- to provide an overview of the Child Poverty Pilots Programme and signpost where more detailed information on the individual evaluations can be found;
- to analytically assess the evaluation evidence to ensure accurate interpretation of the findings;

- to draw out relevant findings for policy makers and practitioners from across the evaluation evidence base;
- to discuss the emerging evidence and how they are relevant to the priorities of the Coalition government;
- to outline the content of the final synthesis report due in summer 2011;
- to aim at a wide audience, including national and local policy makers and practitioner reflecting the mix of centrally and locally initiated Child Poverty Pilots.

### 1.3 Policy context

Although set up under the previous administration, the pilots and the evaluation evidence base of the suite of Child Poverty Pilots continue to be relevant to the current administration's approach to child poverty. The Coalition Government has expressed commitment to finding the right long-term solutions through prioritising opportunity, fairness and social mobility across society. With a particular emphasis on improving parental support, and improving the skills that parents need to create a better life for themselves and for their children, i.e. tackling the causes of poverty and enabling people to participate in work.

After taking office in May 2010, Coalition Ministers agreed that most pilots should continue unchanged on their original timetable until March 2011. The exceptions were: HMRC Outreach in Children's Centres, the Child Development Grant and some strands of the Childcare Affordability pilots, where closure of the pilots occurred and evaluation was brought forward. Table 1.2 provides more details on the revised timetable and operation of these pilots.

**Table 1.2 Revisions to pilots**

Childcare Affordability Pilot HMRC	<ul style="list-style-type: none"> <li>• Closure date of the pilot was brought forward, except for the Disability Strand.</li> <li>• Originally, pilot participants were to take part in the pilot for 12 months, however, this was shortened for some participants.</li> <li>• Findings from the evaluation are used to inform the design of the childcare element of Universal Credit.</li> </ul>
Child Development Grant	<ul style="list-style-type: none"> <li>• Conditional Cash Transfers will not form part of the Government's on-going policy agenda, as the fiscal climate does not allow for this pilot to be sustained on a larger scale.</li> </ul>
HMRC outreach in Children's Centres	<ul style="list-style-type: none"> <li>• The evaluation continued to inform refocusing Sure Start Children's Centres on the neediest families and to support the roll-out of 15 hours of free childcare for the most disadvantaged two year olds.</li> </ul>

The Coalition Government remains committed to the targets set out in the Child Poverty Act, ‘*We will maintain the goal of ending child poverty in the UK by 2020*’ (HM Government, 2010, p.19), but devolve power at the same time, freeing up LAs, partners and voluntary communities to target resources more effectively. However, changes in government priorities together with cuts in public spending will significantly influence the environment into which the findings of the pilots and their evaluations are discussed. Thereby many of the underlying assumptions held in 2008, at the beginning of the Child Poverty Pilots, have changed.

The final report will discuss interpretation of the pilot findings in the light of a fuller appreciation of policy reform under the Coalition Government.

### **1.4      Content**

Six of the pilots have produced early and/or interim evidence available for interim synthesis, see Appendix B. These early and interim evaluation reports provide information on the implementation and start up of the pilots and provide information about the ‘baseline’ position from quantitative and qualitative surveys. There is little that can be considered as early evidence on outcomes or results, but there is emerging evidence of the new policy treatments provided to participants and of the new ‘processes’ involved.

We have prioritised the evidence to identify issues of potential importance to the national and local Child Poverty Strategies. These form three cross-cutting themes:

#### **Pilot participants**

- Who do the pilots help?
  - Who does each pilot aim to support?
  - What evidence is there on actual participation?
  - What expectations do we have in terms of reduced poverty risk from the pilot interventions for these groups?
- How do the characteristics of pilot participants influence interpretation of the evaluation findings?

#### **Developing tailored, innovative and localised solutions**

- What is the early evidence from pilots on developing tailored, innovative and localised solutions?
- What innovative delivery models are being adopted and how do pilot approaches differ from pre-pilot practices?
- What emerging evidence is there from providers on implementing new services?

#### **Early Indications of Outcomes, Experiences and Perceptions of pilot services**

- What evidence is there of how participants have taken up and experienced the pilots?
- What are the early indications of outcomes from interim evidence?

## 1.5 Structure

This report has six further chapters:

**Chapter 2** introduces each of the Child Poverty pilots and summarises what the pilot is about. Each overview sets out the aims and rationale of the pilots and provides an overview of how the pilot is expected to work in practice, i.e. what the inputs and expected outputs and outcomes are.

**Chapter 3 to 5** discuss the emerging findings from early and interim evaluation around the three key themes discussed above. In the light of the variations in evaluation approaches and evidence across the pilot programme a lot of the information presented will be descriptive, i.e. capturing what the pilots aim to do to, how to engage clients and how to adapt practices with vulnerable families and as such can inform practice even if the underlying pilot evaluation of which they are a part is not set up to satisfy economic evaluation conditions.

**Chapter 6** sets out the analytical challenges of synthesising the evaluation evidence across the Child Poverty Pilots programme. This chapter will explore the extent to which findings from the evaluations can be generalised, i.e. whether they have a wider relevance beyond the specific pilot evidence, and replicated, i.e. whether if repeated by others using the same procedures the results would be the same.

**Chapter 7** specifies the content of the final report due in summer 2011.

## **2      Overviews of the Child Poverty Pilots**

### **2.1      Introduction**

This chapter provides an overview of each of the Child Poverty Pilots. The summaries provide the background and aim of each of the pilots and describe what the expected policy learning and outcomes of the pilots are.

More information on the evaluation methodology of each of the pilots and where the pilots are taking place can be found in Appendices A to C.

## 2.2 Childcare Affordability Pilot: HMRC operated

This pilot tests three changes to Working Tax Credit (WTC) subsidies for childcare. The pilot looks at the effect of changes to the amount paid and the way it is administered to lower income families. Pilots are being held primarily in London and the South East. Changing WTC rules for childcare subsidy aims to encourage job entry and retention alongside improved uptake of formal childcare. For details on pilot background and evaluation aims and methodology see Appendix A.

AIMS	TARGET GROUPS	INPUTS	ACTIVITIES	POLICY LEARNING	EXPECTED OUTCOMES
<p>1. Whether increasing subsidies for childcare costs for low income families improves take-up of childcare and increases the number of parents entering sustainable employment.</p> <p>100% Pilot tests this through paying 100% rather than an 80% subsidy (and up to higher limits), i.e. paying up to £215 a week for one child compared to the usual £175 and up to £350 for two or more children from £300;</p>	<ul style="list-style-type: none"> <li>100% Pilot (09/10)           <ul style="list-style-type: none"> <li>Out-of-work lone parents and couples</li> <li>Single earner couples</li> <li>Not claiming the childcare element</li> <li>2008/09 income of up to £16,000</li> <li>Living in London</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li><b>DFE helpline for participants</b> <ul style="list-style-type: none"> <li>15.5 HMRC Tax Credit staff</li> </ul> </li> </ul>	<p>Sample sizes (rounded):</p> <p><b>100% Pilot</b></p> <ul style="list-style-type: none"> <li>- 36,000 mailed (control and treatment group)</li> <li>- 1,698 registered an interest</li> <li>- 200 moved on to the pilot, i.e. found a job working 16+ hours and are claiming childcare (100% or 80% depending on whether part of the control or treatment group)</li> </ul> <p><b>Disabled Child Pilot (09/10)</b></p> <p>Same as above but:</p> <ul style="list-style-type: none"> <li>with a disabled child</li> <li>includes a control group in Birmingham and Manchester</li> </ul>	<p><b>Increased understanding of the following will inform future policy options:</b></p> <ul style="list-style-type: none"> <li>the barriers to take-up and sustainability of work and childcare</li> <li>work incentives</li> <li>parental use of and attitudes to formal and informal childcare</li> <li>ways of improving the tax credit process so as to reduce error and fraud</li> </ul>	<p><b>For those families opting to take up the pilot, expected outcomes are:</b></p> <ul style="list-style-type: none"> <li>Employment related</li> <li>Improved disposable income, which should:               <ul style="list-style-type: none"> <li>Narrow poverty gaps</li> <li>Directly decrease poverty incidence</li> </ul> </li> </ul>
<p>Disabled Child Pilot tests this through paying 80% of childcare costs of a higher amount for disabled children than the current system;</p> <p>2. Whether a different system of reporting and payment has an impact on the ability of parents to meet fluctuations in childcare costs and reduces error, fraud and overpayment of benefits.</p>	<p><b>Actual Cost Pilot (10/11)</b></p> <p>Same as 100% Pilot but also in-work lone parents and dual earner couples not claiming the childcare element</p>	<p><b>Actual Cost Pilots</b></p> <p>90,000 mailed</p> <p>6,829 registered an interest</p> <p>20 recruited</p>	<p><b>Actual Cost Pilot (10/11)</b></p> <p>In-work lone parents and dual earner couples, already in-work and claiming the childcare element.</p> <p>2009-10 income of up to £21,000 for lone parents, and £23,000 for couples.</p> <p>Living in London &amp; the South East</p>	<p><b>RELEVANCE FOR FUTURE POLICY MAKING</b></p> <p>Findings from the pilot will help inform changes to the benefits systems and support the design of the childcare element of Universal Credit.</p> <p>Cost benefit analysis of Actual Costs pilot</p>	<p>Provision of information about childcare provision and support mechanisms including quality, accessibility, availability and cost.</p>
					<p><b>MORE INFORMATION</b></p> <p>Note that pilot operates primarily in London and the South East where childcare costs are highest in England and patterns of formal childcare provision may be specific to the area. As such, wider (UK-wide) inferences cannot easily be made. Other evidence reviewed suggests that the cost of childcare is an important barrier to employment but that lack of suitable job opportunities, parents' preference to care for their own children or to use informal care, health problems, lack of qualifications or skills, and low confidence and other 'soft' skill barriers also play a role (see D'Souza, J. et al., 2008).</p>

## 2.3 Childcare Affordability Pilot: London Development Agency

The two London Development Agency (LDA) pilots of the Childcare Affordability Programme 2009 (CAP09) programme seek through the process of delivery to help remove some of the strategic barriers to achieving sustained employment outcomes for the economically inactive families. The pilots aim to address the following barriers: constrained LA funding mechanisms; supply-side inflexibilities in offering a suitable choice and range of childcare provision, and a lack of accessibility, clarity and flexibility in the available support options available to low income parents. The pilots aim to add to existing jobs brokerage and childcare information services and not act as a substitute for resources already outlaid by Government, the boroughs, or their core delivery partners.

AIMS	TARGET GROUPS	INPUTS	ACTIVITIES	POLICY LEARNING	EXPECTED OUTCOMES
<p>The LDA pilots are aimed at testing two different approaches for supporting low income parents into sustainable employment. The two models are:</p> <p><b>Parental support offer</b> Tests whether a new model of support to where 500 families across 5 London boroughs will be provided with up to 12 months of hand-holding support in the form of advice and guidance on Working Tax credits to encourage parents to move into work.</p> <p><b>Subsidised offer</b> Tests effectiveness of a supply side outcome-based funding model for childcare providers to give employment services to out of work families.</p>	<ul style="list-style-type: none"> <li>Parents; over 16 years of age and under 65</li> <li>Economically inactive for the past 12 months</li> <li>Annual household income of less than £20,000; and Reside within the 10 London boroughs taking part in the pilot</li> </ul>	<p>£250k advance payment and outcome-related payments at three trigger stages: Job Entry (£312.50 per output); 6-month Sustained Employment (£625 per outcome) and 12-month Sustained Employment (£1,250 per outcome).</p> <p>Bonus payment upon achievement of all contracted outputs.</p>	<ul style="list-style-type: none"> <li>Referral to the pilot when 'work ready' and job offer made</li> <li>Suitable childcare place brokered</li> <li>Supply-side subsidy of up to £215 p/w</li> <li>Tracking over 12 months</li> <li>SAV Activities</li> <li>LDA engages cross-departmental support to place a stronger emphasis on childcare affordability within the child poverty agenda</li> <li>Between 3 and 7 dedicated staff per borough, 1 LDA staff across the pilot.</li> </ul>	<ul style="list-style-type: none"> <li>Low-income parents to find employment</li> <li>Parents to sustain employment</li> <li>Improving access to affordable childcare</li> </ul>	<p><b>Joint outcomes</b></p> <ul style="list-style-type: none"> <li>Improved childcare take-up amongst low-income groups</li> <li>Sustained employment (and associated soft outcomes)</li> </ul> <p><b>Parental support offer</b></p> <ul style="list-style-type: none"> <li>Increased job search activity</li> <li>Improved tax credit take-up</li> </ul> <p><b>Subsidised offer</b></p> <ul style="list-style-type: none"> <li>Increase in supply of flexible childcare provision</li> </ul>

### RELEVANCE FOR FUTURE POLICY MAKING

Pilots designed to test the effectiveness of two distinct delivery models in moving low-income, unemployed or economically-inactive parents into sustained employment, which will inform future approaches to addressing access to affordable childcare as a barrier to entering employment.

- Childcare providers supported to offer more affordable and flexible provision in response to the demand generated by the investment
- Collaborative working with Jobcentre Plus, FIS and other local partners

## 2.4 Child Development Grant

This pilot aims to encourage economically deprived and disengaged parents to use their local Sure Start Children's Centres (SSCCs) by giving (cash) incentives to participate. Particular emphasis is placed on services that promote children's development and family functioning. The cash incentive is provided to those complete a programme of activity at Children's Centres based on an agreed parental action plan. On completion of the action plan, a payment of £50 for a 4-week action plan and £200 for a 12-week action plan is made (the maximum one family can receive is thus £250 for a combined 16 week action plan). Note that one of the pilot areas did not use cash incentives as part of its approach.

AIMS	TARGET GROUPS	INPUTS	ACTIVITIES	POLICY LEARNING	EXPECTED OUTCOMES
Investigates how to best identify, target and engage the most deprived families in the UK with Sure Start Children's Centre (SSCC) services and assesses the correlating impact of offering these families Conditional Cash Transfers in relation to their sustained engagement with services.	Families who are: <ul style="list-style-type: none"> <li>Economically deprived</li> <li>Have at least one child under the age of three.</li> <li>Who have not previously registered with Sure Start Children's Centres and/or engaged with services.</li> </ul>	<b>Project Management</b> LAs are responsible for identifying the SSCCs and families who are eligible to take part and distributing funding according to local need.  <b>Data Analysis</b> LAs have used a range of approaches and resources to identify SSCCs and families in their area including: IDACI, housing and employment benefit data, SSCC registration details and health data.  <b>Outreach</b> Workers to identify and directly engage and support families.	A variety of outreach models are in operation in the pilot areas.  Outreach workers are responsible for using local data to identify and engage eligible families, either by locality or theme.  In most cases outreach workers also agree and sign parents up to Action Plans and then continue as 'case workers' while the families engage with new services, providing on-going support around attendance, planning and completion of agreed activities.	<b>For LAs</b> Increased understanding of effective practice in terms of targeting, outreach and needs-led planning re disadvantaged families accessing SSCCs.  <b>For DfE</b> Increased understanding of the impact the grant has had on influencing parental behaviour.	<b>For parents</b> Raised awareness & sustained uptake of a range of services and support beneficial to the family.  <b>For children</b> Families more involved in activities which positively impact on the home environment and increased access to positive social and developmental activities for the child.

### RELEVANCE FOR FUTURE POLICY MAKING

- Ministers took the decision to bring forward the close of the CDG pilot as Conditional Cash Transfers will not form part of the Government's on-going policy agenda. The evaluation was continued so that learning from the pilots could help inform the Coalition Priority of refocusing SSCCs on the neediest families and, more latterly, to support the roll-out of 15hrs of free childcare for the most disadvantaged 2 year olds.

- The evaluation provides examples of best practice regarding:
  - Information sharing, data use and targeting tools to identify families;
  - Innovative, community-led, approaches to outreach from SSCCs;
  - Models for delivering needs led multi-agency support programmes.

### MORE INFORMATION

- Conditional Cash Transfers operating in developing countries (see Fiszbein and Schady 2009) that reward school attendance and up-take of primary healthcare.
- New York City's 'Opportunity NYC' programme, a full-scale experimental pilot of a range of incentives for poor families to improve school-based education participation, healthcare up-take and parental employment (Miller, Ricci and Smith, 2009).
- British evidence shows lower up-take of childcare for young children among multiply disadvantaged families, "the more disadvantage children experienced the less likely they were to receive childcare. (Speight, et al., 2010 p1).
- The 2008 Parents Survey (TNS Social, 2009) showed differential up-take of non-childcare services at Children's Centres for services aimed at younger infants.

## 2.5 Child Poverty Family Intervention

This pilot builds on the existing Family Intervention Projects developed for families with complex needs facing anti-social behaviour or youth justice interventions. The Family Intervention model integrates service delivery around intensive family level provision based on a key worker. The Child Poverty FIP reflects the appreciation that a minority of families in poverty have particularly complex needs and also face barriers in accessing the services they need. The types of problems highlighted include mental health or drug and alcohol dependency associated and intergenerational worklessness. Such families will likely have low employment prospects, with long durations in deep poverty, indebtedness, a higher likelihood of benefit sanctions and other complex needs.

AIMS	TARGET GROUPS	INPUTS	ACTIVITIES	POLICY LEARNING	EXPECTED OUTCOMES
To help Children's and Adults Services to establish new and effective practice for a Child Poverty Family Intervention that delivers 'sustained outcomes for the poorest families who experience multiple problems that make it more difficult for them to work.'	Those furthest below the poverty line who are likely to have multiple problems preventing them from working e.g. drug and alcohol abuse, poor mental health, learning difficulties, anti-social behaviour etc.	Long-term intensive casework intervention from key workers who have relatively low caseloads of around five families and who co-ordinate the work of other agencies.	This happens on a contractual basis, offering support in return for certain commitments from parents, e.g. commitments around employability or improved parenting.  Key worker provides support and the assertive working style necessary to motivate the family to meet these commitments	The Child Poverty FIP can be seen as more preventative than the anti-social behaviour and youth offending strands as it allows key workers to intervene at an earlier stage.  Therefore this pilot will give policymakers an increased understanding whether Family Intervention is suitable and cost-effective for the most disadvantaged families.	<ul style="list-style-type: none"> <li>Improved access and uptake of services leading to improved health outcomes including reduced drug&amp; alcohol misuse.</li> <li>Improved parenting and family functioning.</li> <li>Increased levels of independent living, i.e. less needs for support services.</li> <li>Better cared for children, improving their life chances.</li> <li>Parents becoming work ready and some helped into work.</li> </ul>

### RELEVANCE FOR FUTURE POLICY MAKING

The 2011 Spending Review announced a new national campaign to support and help turn around the lives of families with multiple problems, improving outcomes and reducing costs to welfare and public services. The campaign will be underpinned by Community Budgets focused on family intervention – enabling a more flexible and integrated approach to delivering the help these families need. Community budgets will be established in 16 local areas to pool department budgets for families with complex needs, and rolled out to all local areas over the Spending Review period. Learning from this pilot can inform implementation of Community Budgets.

### MORE INFORMATION

Evaluation of the earlier forms of Family Intervention saw cost effectiveness in changed outcomes for families involving reduced criminal and housing sanctions, which are very high cost and fairly immediate cost savings from mainstream programme spending. These outcomes, as well as "intangible benefits to the families - such as *keeping families together and improving their quality of life and their prospects – and to society*" (Department for Communities and Local Government, 2006, p.172). The latest family intervention evaluation was published in November 2010 and shows information on referrals and caseload of child poverty family interventions.

## 2.6 Coordinated Support for Separating Parents

This pilot provides local partnerships with the opportunity to develop co-ordinated services for low income parents who are threatened with separation. The Government's paper Families in Britain, published in December 2008, sets out substantial evidence that strong family relationships are fundamental to the well-being of children, adults, and wider society. Adults in stable relationships benefit not only emotionally but also socially and financially. Positive adult couple relationships are also important for children's well-being and growing up in a family with stable relationships has a positive impact on child outcomes.

AIMS	TARGET GROUPS	INPUTS	ACTIVITIES	POLICY LEARNING	EXPECTED OUTCOMES
<p><b>This aims to test how best to co-ordinate local services for separating and separated parents and their children in order to:</b></p> <ul style="list-style-type: none"> <li>improve and speed up access to financial, practical, legal and emotional help;</li> <li>reduce parental conflict ; and</li> <li>minimise the negative impact of separation on children's outcomes.</li> </ul>	<ul style="list-style-type: none"> <li>Low-income families.</li> <li>Socially excluded families, i.e. hard-to-reach families .</li> <li>Parents that have separated.</li> <li>Parents that are separating.</li> </ul> <p>All parents meeting the above criteria were offered services. Those that did not meet the criteria were referred to other means of support.</p>	<ul style="list-style-type: none"> <li>Pilot set up;</li> <li>Recruitment, Partnership coordination</li> <li>Project manager and project lead for each of the pilots</li> <li>Additional experts, e.g. counsellor.</li> <li>Running costs, rent, telephones, IT equipment</li> <li>Salaries</li> </ul>	<ul style="list-style-type: none"> <li>Offering support around: Legal issues, finance and debt, benefits and tax credits</li> <li>Childcare &amp; Shared parenting/child contact</li> <li>Employment, housing</li> <li>Health, e.g. family counselling,</li> <li>Specific 'crisis' services around the 'event' of separation</li> <li>Family courts</li> <li>Child protection,</li> <li>Tackling domestic abuse</li> </ul>	<p><b>Improve understanding of:</b></p> <ul style="list-style-type: none"> <li>Couple relationships under stress</li> <li>The needs of couples in difficult relationships</li> <li>How best to help parents support their child through and post separation</li> <li>How to ensure that separating parents:</li> </ul>	<p><b>For separating parents:</b></p> <ul style="list-style-type: none"> <li>Reduced short-term stress and less long term emotional distress</li> <li>Less opportunity for problems to escalate that negatively affect parent or child</li> <li>More stable child maintenance and contact arrangements, and stronger family relationships</li> </ul> <p><b>For their children:</b></p> <ul style="list-style-type: none"> <li>A reduction in negative impact on their educational outcomes, their health and their general well-being;</li> <li>Reducing the number of children who get into serious problems such as involvement in crime, and increasing in the number of children making successful transition to adulthood and going on to have positive relationships.</li> </ul>

### MORE INFORMATION

Around a quarter (some 3 million) of the UK's 12 million children experience separation of their parents during childhood and estimates suggest that 200,000 - 250,000 couples separate each year, affecting around 350,000 children. It is known that children who are exposed to protracted conflict between their parents following separation are particularly at risk of negative outcomes in the medium to longer term. There is also a reported need for improvements in service provision around separation, with over 90% of parents responding that 'more should be done to support adults going through separation' in the 'Kids in the Middle' campaign.

### RELEVANCE TO FUTURE POLICY MAKING

The pilot fits in with Coalition commitments on relationship support - to improve access and early take up of support - and putting relationship support funding on a secure footing.

Evidence from the pilot will also inform the Family Justice Review.

## 2.7 HMRC Outreach in Children's Centres

### 18 Overviews of the Child Poverty Pilots

This initiative originated as one of HMRC 'Service Improvement Modules' that were administered to improve tax credits delivery, in particular, to improve customer experience and help with reducing error and fraud. The pilot was designed to provide additional support to those with children who might be at risk of child poverty through improving customers' knowledge and awareness of the tax credits system thereby reducing levels of customer error and the likelihood of receiving overpayments, and through increasing take-up. Additionally, the pilot could be seen to assist promotion of the childcare element of Working Tax Credit when participants are considering employment and thus improve indicators for the number of low income families taking up formal childcare (national indicator N118). The 12-month pilot began in April 2009 and was based in 101 Children's Centres in areas of London, West Midlands and Lancashire.

AIMS	TARGET GROUPS	INPUTS	ACTIVITIES	POLICY LEARNING	EXPECTED OUTCOMES
<ul style="list-style-type: none"> <li>To improve customers' knowledge and awareness of the tax credits system thus reducing customer error in their claims</li> <li>To reduce the likelihood of overpayment; and</li> <li>To increase "take-up" of tax credits" - both among eligible customers who are not yet claiming and to increase awareness of potential additional tax credit entitlements to those that were already claimants</li> </ul>	Parents attending Children's Centres.	HMRC Tax Credit advisors provide advice in Children's Centres on a limited but regular basis, which builds up relations and allows for post intervention support.	Two advisors per centre attend for half a day each (net $\frac{3}{4}$ day, with travel) per centre to build up a level of knowledge amongst the staff who run the centres and the parents who frequent them.	The pilot was designed to investigate and improve operational delivery, however indirectly could be seen to contribute to the "Financial Support" building block of the Child Poverty Act as a financial situation of a family can improve through improvements made in the delivery model.	<ul style="list-style-type: none"> <li>Improved experience and understanding of the system for families in receipt of tax credits.</li> <li>Contribution to lowered rates of error and fraud among target audience.</li> </ul>

#### RELEVANCE FOR FUTURE POLICY MAKING

The initiative was not rolled out after its 12-month pilot as a result of alterations to HMRC plans when the project was reviewed in terms of value-for-money in May 2010. Details on how the pilot worked may be of interest to the development of Universal Credit (UC) in considerations of potential Outreach programmes for UC.

For more information on Universal Credit – Welfare that Works White Paper see  
<http://www.dwp.gov.uk/docs/universal-credit-full-document.pdf>

**MORE INFORMATION**  
The role of tax credits in child poverty reduction (both in terms of direct income supplementation and in terms of their effectiveness as an employment incentive) is clear from research (see for instance, Brewer, et al., 2003 and Harker 2006 – Chapter 7).

An earlier HMRC outreach initiative in Birmingham operated across a range of outreach sites in supermarkets, two children's centres and a neighbourhood office and with posters and leaflets distributed to GP surgeries, health centres and schools, was found to have very positive results in terms of take-up. 'There were a total of 54 new claims, which exceeded expectations and over 1,300 existing or potential customers requested information. To date, the pilot has resulted in awards of £12,580 in Child Tax Credits, £2,410 in Working Tax Credits and £11,379 in joint Tax Credits – a total of £26,369.' (HMRC, 2009, p.5).

Targeting the pilot to areas known to have high levels of ethnic minority populations increases the potential to deal with barriers to take up that result from language problems and lower levels of information and awareness. Improving 'take-up' levels also means assisting those already claiming tax credits to receive their full entitlement. Most recent estimates give an average 92% 'expenditure take-up' - the amount of monetary tax credit entitlement taken up by those that claim (HMRC 2010).<sup>1</sup>

## 2.8 Local Authority Innovation

This pilot consists of ten locally designed and implemented programmes. The pilots were selected for their innovative approach and ability to reduce local child poverty levels. They aim to accurately capture and reflect important local context – such as particular neighbourhood patterns of deprivation, population characteristics and local organisational capacity. The promotion of local level action on child poverty is a key element of the Child Poverty Strategy and local authorities have duties to promote lower levels of child poverty under the 2010 Child Poverty Act.

AIMS	TARGET GROUPS	INPUTS	ACTIVITIES	POLICY LEARNING	EXPECTED OUTCOMES
The ten pilots were established to trial locally designed and innovative approaches to address child poverty.  All pilots aim to reduce child poverty in the longer term primarily through increases in employment and employability (distance travelled towards employment rather than employment itself).  A number of pilots seek shorter-term improvements through increases in income (such as take-up of benefits) and through measures to provide direct financial and other support to alleviate material disadvantage.	Each pilot focuses, in particular, on supporting low-income families, although there are differences between the pilots on how this is exactly defined.  Some focus on parents who have multiple problems and are considered to be further away from employment, whilst others focus on parents who are closer to the labour market.  Some pilots include working directly with employers, communities and children.	Differs for each of the pilots. More information can be found in the Local Authority Innovation Pilots evaluation reports, see 'more information section' below.	Includes: <ul style="list-style-type: none"><li>• Information, Advice and Guidance</li><li>• Employment support</li><li>• Childcare support</li><li>• Housing support</li><li>• Support for families with multiple problems</li><li>• Training and Workforce development</li><li>• Providing discretionary funding for low-income families</li><li>• Mentoring and family learning</li><li>• Supporting employers to adopt family friendly practices</li><li>• Developing community projects that tackle child poverty</li></ul>	Get a better understanding of innovative ways local areas are interested in trialling to tackle child poverty.  Identify which pilots have been more and less successful and could be promoted more widely.  Promote what has been learnt to support areas developing their local strategies.	<ul style="list-style-type: none"><li>• Increased parental employment, employability and wellbeing.</li><li>• Increased family and children's wellbeing.</li><li>• Improved economic regeneration focused on families and tackling deprivation at a community wide level.</li><li>• Increased capacity of communities to tackle poverty.</li><li>• Employers adopting family friendly policies.</li><li>• Narrowed outcome gap between children in low income families and their peers.</li></ul>

### RELEVANCE TO FUTURE POLICY MAKING

The Local Authority Innovation pilots fit with the Coalition's drive towards a more localised approach, i.e. moving away from centrally implemented initiatives. Some focus in particular on incentivising communities to come together and take an active role in addressing local issues through locally designed service provision.

### MORE INFORMATION

Three interim evaluation reports have been published since the start of the pilots in 2008. They can be found on the Child Poverty website. Separate Logic models for each of the pilots have been provided in the third interim evaluation report.

## 2.9 School Gates Employment Support

### 20 Overviews of the Child Poverty Pilots

This initiative is part of the government's efforts to accelerate progress in tackling and reducing child poverty in the UK and to support families through the economic downturn. It aims to increase the amount of employment and enterprise support that parents receive in and around their children's schools. Half of all poor children are in couple families where one parent already works. However, a child's risk of poverty decreases substantially when they have a parent in work. Expectations are that the pilot will reach out to the non-working parents, who may not engage with traditional employment services.

AIMS	TARGET GROUPS	INPUTS	ACTIVITIES	POLICY LEARNING	EXPECTED OUTCOMES
To increase the amount of employment and enterprise support that parents receive in and around their children's school.	Non-working parents with a child/children in schools where the initiative is taking place.	<ul style="list-style-type: none"> <li>➤ Funding for the initiative</li> <li>➤ School premises made available.</li> <li>➤ Staff from organisations such as Jobcentre Plus, Regional Development Agencies.</li> <li>➤ Expert advice from staff.</li> <li>➤ Co-ordination of the initiative by ContinYou.</li> <li>➤ Office Equipment, IT.</li> <li>➤ Access to previous research for learning lessons.</li> </ul>	<ul style="list-style-type: none"> <li>➤ Promotional activities, e.g. coffee mornings, Internet site.</li> <li>➤ Increasing awareness of local services, e.g. training opportunities, workshops</li> <li>➤ Outreach and recruitment by advisors and practitioners.</li> <li>➤ Adviser tailored to the individual.</li> <li>➤ Peer support from other non-employed parents.</li> </ul>	<p><b>For LAS</b></p> <p>Increased understanding of partnership working between schools, employment services and enterprise support.</p> <p>How schools can be used to target workless parents and improve local employment outcomes.</p> <p>How to deliver successfully a co-ordinated and tailored package of information in and around their child's school.</p>	<p><b>For parents</b></p> <p>Greater awareness of the support available to them in the local area.</p> <p>Increased desire to move into work, and with a clear understanding of how to pursue this goal.</p> <p>Increased engagement of parents with existing employment and enterprise.</p> <p><b>For children</b></p> <p>Improvements in aspirations due to rising parental aspirations.</p> <p>Improvements in educational attainment as household income increases.</p>

#### MORE INFORMATION

The initiative runs from October 2009 to the end of March 2011 in 25 areas of across England, Wales and Scotland. It is hoped that, during this time, the initiative can generate sustainable changes in the approach of mainstream employment and business support services to assisting long-term unemployed parents back into the workforce. The initiative will take a different form in Scotland and Wales, and the devolved administrations in those countries will communicate separately to local partners in their jurisdictions. DWP have undertaken similar outreach programmes before that have either concentrated on at risk groups such as ethnic minorities (POEM) or areas (City Strategy). However, these have not concentrated on schools as a point of access to difficult to reach groups. It is this that constitutes the novel aspect of the initiative.

#### RELEVANCE TO FUTURE POLICY MAKING

The School Gates initiative is a good example of how national government can work within local communities to improve outcomes. While this is an employment programme the same approach could be taken with other government priorities. School Gates exemplifies how schools can be a central resource in areas, especially deprived areas, and there is scope to utilise schools better to support educational outcomes. It is also a good example of local partnership working with a number of successful partnerships being established. This will become more important as the localisation process gathers pace and examples of successful partnerships will be needed. The evaluation will therefore be able to provide valuable evidence and lessons on partnership working.

## 2.10 Supported Housing for Teenage Parents

Teenage parents and their children experience considerable disadvantage including disproportionately poor child health outcomes, poor maternal emotional health and wellbeing, and poor economic wellbeing. Currently there is little robust evidence on how housing-related support impacts on outcomes for teenage parents and we know that a large proportion of teenage parents retain poor experiences of education and often lack formal qualifications. The pilot, therefore, provides LAs with an opportunity to develop and test 'enhanced' support packages for teenage parents in residential units and their own homes. This includes support to develop a range of life skills.

AIMS	TARGET GROUPS	INPUTS	ACTIVITIES	POLICY LEARNING	EXPECTED OUTCOMES
To develop 'enhanced' housing support packages for teenage parents in 7 pilot LAs.  Left to LAs to define what 'enhanced' looks like but suggested outcomes to include improved tenancy sustainability or readiness for a tenancy, higher levels of engagement of teenage parents in education, employment and training, better health outcomes for mothers and children and reduction in subsequent pregnancies.	Teenage parents and expectant parents, primarily living outside the parental home.  Exact nature of target group varies across areas. Mainly mothers (and expectant mothers) 16-19 and their partners up to 25.  One area provides services for all teenage parents. Six out of seven areas targeted support at teenage parents most in need of assistance focusing on most vulnerable, e.g. those with more than one child, care leavers and/or those who have not been in employment, education or training (NEET) for prolonged periods.	Funding: In most cases between £300K-£500K per LA over whole pilot period.  Staff: Project co-ordinator Up to 6 support workers.  One LA has employed ten peer mentors both young mothers and young fathers.  One LA has engaged over 80 volunteers.	Vary across LAs, but include: Help in accessing formal and informal education  One to one support through: - floating support in their tenancies and teenage parent support workers - Peer mentoring - Volunteer buddyding - Relationship counselling, Life coaching  Provision of bonds to improve access to private rented accommodation	Increased understanding on how housing-related support impacts on outcomes for teenage parents  How we can better support teenage parents and their children to achieve successful outcomes.	Improved housing suitability and stability. Better health and well-being.  Wider education and training opportunities leading to increased numbers in employment. Better access to learning and childcare.  Improved support networks.

### RELEVANCE FOR FUTURE POLICY MAKING

Tests new approaches for improving education and employment outcomes for a very vulnerable group, teenage parents whose outcomes the Coalition Government wishes to improve. In line with the Coalition Government's focus on 'localism', this pilot allows LAs to develop and test their own innovative approaches to supporting teenage parents.

### MORE INFORMATION:

Integrated housing support was a recommendation of the original Social Exclusion Unit report on Teenage Pregnancy (1999).

## 2.11 Work-Focused Services in Children's Centres

This pilot aims to address poverty among parents with young children, by engaging them in employment related support and moving them closer to the labour market, through the co-location of Jobcentre Plus Personal Advisers full-time into children's centres. The pilot has been designed following previous research by Dench et al. (2008) which found that the greatest impact on parents' engagement and take-up of employment-related services in children's centres was observed where there was a Jobcentre Plus adviser available.

AIMS	TARGET GROUPS	INPUTS	ACTIVITIES	POLICY LEARNING	EXPECTED OUTCOMES
The primary aim of the pilot is to test whether children's centres can offer an effective means of engaging parents in labour market activity, moving them closer to work and ultimately into employment. The pilot is not explicitly linked to the achievement of employment outcomes or targets (i.e. x number of parents in work) and Personal Advisers are exempt from the standard Adviser Achievement Tool. However, the aim is to increase engagement with a variety of services and activities which have this as their eventual goal.	The pilot is focused on parents with a youngest child below age five, who are either not in work or are in low income households. Both Jobcentre Plus customers (such as lone parents and partners of benefit claimants) and those outside of the traditional Jobcentre Plus, such as potential second earners, are targeted. As well as parents already accessing the children's centre, Personal Advisers are expected to undertake outreach work with those not currently using the centre.	A dedicated Jobcentre Plus Personal Adviser in each of three children's centres in ten local authority areas (30 Personal Advisers in total). Their post in the local Jobcentre Plus office has been backfilled, and they are co-located full-time in their children's centre. Each pilot area has received £100,000 discretionary funding per year, to provide additional work-focused activities which meet local parents' needs. Together for Children provide delivery support to each pilot area.	Delivery of packages of employment support and bespoke services to flexibly plug gaps in provision or meet needs not met by mainstream services. Partnership working with the children's centre and other agencies in its network to refer customers to relevant provision. Integrating the Personal Adviser into the children's centre. Identifying and engaging customers by both formally and informally providing outreach.	Whether delivering work-focused services through Children's Centres is an effective way to encourage parents to start thinking about work, so that in the longer-term they are likely to move into employment more quickly Effectively embed work-focused services into children centres' culture, through staff communicating the Government's child poverty messages, and through joint partnership working.	Increased number of parents of children in poverty who are actively engaged in preparing for work. Increased engagement with work-focused services offered in children centres, particularly among parents not normally accessing Jobcentre Plus services.

### MORE INFORMATION

The third cohort of Sure Start Children's Centres (SSCCs) introduced employment aims into the provision model (Meadows and Garbers 2004). Over the same period, Jobcentre Plus developed Childcare Partnership Managers in offices to assist in developing local childcare provision and access for parents on benefit. When Children's Centres were rolled out nationally after the original Surestart phase, different models of providing Children's Centre-based Jobcentre Plus services were researched (Dench, Aston, James and Foster, 2008), which demonstrated that parents favoured regular adviser contact in the Centres rather than at Jobcentre Plus sites for a range of reasons: proximity, ease of access and 'family friendliness' and that this form of joint working between Centres and Jobcentre Plus was viewed as important and desirable by the stakeholders (*ibid*).

**RELEVANCE FOR FUTURE POLICY MAKING**  
This pilot demonstrates benefits of integrated working in Children's Centres in preparing parents for the labour market, including increased engagement of parents with employment-related services and activities and breaking down assumptions about the role of Jobcentre Plus.

# 3 Pilot participants

## 3.1 Introduction

Chapter 1 provided an overview of the pilots' aims, the groups they were designed to engage/support, and of expected outcomes and potential policy learning. This chapter looks in more detail at the characteristics of pilot participants, and the potential routes out of poverty that arise from engaging in the pilots.

We focus on two main questions:

- Who do the pilots help?
  - Who do the pilots aim to support?
  - What evidence is there on actual participation?
  - What expectations do we have in terms of reduced poverty risk from the pilot interventions for these groups?
- How do the characteristics of pilot participants influence interpretation of the evaluation findings?

## 3.2 Pilot focus

The target measures for child poverty reduction under the Child Poverty Act are primarily monetary. One key element of Coalition Government policy development has been the emphasis on non-monetary aspects of disadvantage and reduced life chances for children alongside a continued commitment to the Act's target measures.

Both the *Review on Poverty and Life Chances* (2010) led by Frank Field MP and the *Early Intervention Review* (2011) led by Graham Allen reflect this wider view.

But distinguishing between the pilots by their primary orientation – to employment or other forms of income maximisation or to improving life-chances – also leads to a profile that distinguishes pilot participants by their demographic characteristics. For families with pre-school children, the emphasis is rarely on short-term employment goals. This reflects a recognition of the predominant importance of parenting, health, home learning, and resulting cognitive and emotional development of children in the 0-3 age group (and, indeed during pregnancy) alongside income and material needs.

While employment-focused pilots targeted parents with both younger and primary school aged children, there was a difference in approach: pilots that particularly emphasised employment in the short-term did so to parents with children of primary school age and above, while pilots that targeted parents with younger children focused support on developing skills and confidence in order to improve employment prospects over the longer term. This distinction reflects the underlying approach of the out-of-work benefit system that has gradually increased the employment obligations of parents according to the age of their child, and which have culminated with the changes announced in the Budget in June 2010 to treat lone parents with children aged five and over as available for employment.

This insight onto the overlapping characteristics of pilots and their participants allows us to discuss and distinguish the pilots by their design according to employment focus and the age of the child.

### 3.2.1 Pilots by employment focus and age of child

There are four pilots supporting low-income parents with children of pre-school age (aged 0-4).

These are:

- the Teenage Parent Supported Housing pilot helps teenage parents and expectant parents through an enhanced package of housing support. There is greater emphasis on training and education in the short to medium term but longer-term employment outcomes are likely to improve;
- three pilots linked to Children's Centres: Child Development Grant, Work-focused Services and HMRC outreach, and therefore support parents with children of pre-school age. While employment is the major emphasis of Work-focused Services, the services provided are more of an investment in preparation for work, training and improving employability. Direct expectations on job readiness and job entry are secondary. The HMRC Outreach pilot has no direct emphasis on employment per se, but improving parents' understanding and uptake of tax credit can be expected to improve work incentives alongside improving tax credit take-up and thus family income. The least employment focused of these pilots is the Child Development Grant that emphasises support services to parents with infants (aged 0 to 3) with little or no emphasis on employment. In general, these three pilots seek to improve life chances of both parents and children, increasing human capital and maximising incomes.

On the other hand, School Gates Employment Support helps families with primary school-aged children by providing employment and enterprise support by targeting and engaging parents when they are at the school site. In contrast to the services provided through Children's Centres there is a strong focus on entering employment.

There are three pilots that are unrelated to the age of the child:

- the Childcare Affordability pilots are the most work-focused of these and explore variations in and barriers to childcare costs and provision;
- Child Poverty Family Intervention on the other hand, focuses on multiple and seriously deprived families that require high levels of intensive support. Employment support is one potential element of support that can be provided, but is not in itself the main objective;
- Coordinated Support for Separating Parents focuses on helping parents going through a separation in order to lower the risk of negative outcomes to the children. Employment support may play a role, but the emphasis is on increasing family wellbeing.

Local Authority Innovation Pilots vary across locations but many initiatives within pilots will prioritise parental employment.

### 3.2.2 Who is participating in the pilots?

While each pilot has its own target group there are shared characteristics across the pilots in terms of participants' demographic characteristics, family situation, ages of themselves and their children, and in their economic situations. The individual pilot evaluations have not been specifically set up to identify a core set of characteristics to facilitate cross-pilot comparisons. Nevertheless, we know a great deal about the detailed characteristics of some pilot participants from the early evaluation reports (where available). Here we will outline some simple profiles. A more comprehensive profiling of participants will take place in the final synthesis report once a fuller set of monitoring and evaluation information is available.

Interim evidence shows that the pilots that focus on pre-school aged children have primarily engaged mothers. For example, 96 per cent of participants in the Teenage Parent Supported Housing pilots are young women. Although the target group for these pilots is both male and female teenage parents/parents to be, the high concentration of female participants reflects the fact that partners of teenage mothers are often older young men. It is worth noting that several of the pilot areas have made concerted efforts to involve fathers (including those up to the age of 25) and work with couples (Johnsen and Quilgars 2010b). Similarly, the majority of participants of the pilots situated in Children's Centres are mothers. For example, 87 per cent of Work-focused Services respondents to the evaluation baseline survey were female (Marangozov, 2009).

A wider age group of children in families is found in more family orientated services. Forty six per cent of participants of the Coordinated Services for Separating Parents pilot have children between the ages of 0 to 5 (Bryson Purdon Research and Tavistock Institute, 2010b, p. 24). And older children also characterise the Family Intervention Pilots, where just 33 per cent are aged 0 to 4 (Dixon et al., 2010 p. 25) but care must be exercised with this figure as it represents all intervention types and the profile of Child Poverty Family Interventions may well show a larger proportion of younger children when final monitoring information is available. Similar concerns surround the finding that larger families are over-represented in the Family Interventions – with 60 per cent of children in families with three or more children. The particular issue of large family size in such interventions is demonstrable when compared to the Co-ordinated Services for Separating Families, where just 24 per cent of children are in similar sized families.

Other pilots more explicitly target families rather than parents (with their children) and participation is more difficult to attribute to gender. The early data from Coordinated Services to Separating Parents suggests (telephone survey) that only 18 per cent of cases involve both parents and the majority are mother only (61 per cent) with a further 22 per cent being fathers only (Bryson Purdon Research and Tavistock Institute, 2010). More detailed analysis and overview of the gender of parents and family types participating in the pilots will be considered in the final synthesis report when a more complete and consistent evaluation evidence base is available.

One important theme in the emerging evidence base is whether the pilots are reaching out to new and previously under-served groups of parents and families. The early indications are very encouraging. The Child Development Grant is specifically designed to encourage participation by those who would not previously have engaged with Children's Centres and the pilots have identified a range of priority sub-groups of parents. Parents with new-born babies, workless and work-poor households, and certain ethnic minority groups – such as Roma Gypsies and Travellers of Irish heritage and Bangladeshi parents were identified by pilots as priorities. Early evidence suggests that teenage and young parents who were perceived as under-represented at Centres seem to respond well to financial incentives.

Other evidence of the involvement of new groups of parents with a high poverty risk comes from the Work-focused Services pilot where employment services are provided to groups who previously would not have accessed them. This is because many of the new participants are not 'traditional Jobcentre Plus clients' (i.e. they do not claim out-of-work benefits) but are low waged workers or, particularly noticeable in the early evaluation evidence, potential second earners whose partner was in low-waged employment (both men and women) (Marangozov and Stevens, 2010).

Even so, Work-focused Services pilot also reported groups who were not participating. These fell into two broad groups: those seen as 'closest to the labour market' and the 'hard to reach'. The former group was small and consisted of those with adequate employment already – for instance, those on maternity leave, those who felt able to serve themselves in job search and those who felt adequately served already by Jobcentre Plus directly. By definition, those who are 'hard to reach'

and not participating have characteristics that are not observed in the evaluation directly, but pilot staff reported that further outreach and community involvement would identify and engage with these groups. The evidence on outreach and community involvement with ‘hard to reach groups’ will be a potentially important finding, and the cumulative outcomes for those pilot sites that also have Child Development Grant pilots in place alongside Work-focused Services in some Children’s Centres will be of particular interest for comparison with the remainder of the pilots.

### **3.2.3 Interim evidence on employment profiles and expectations of outcomes**

With improving parent employment opportunities a key element of many of the pilots, the employment profiles of participants is of particular interest. Evidence from the baseline survey of the Work-focused Services Interim Report (Marangozov and Stevens, 2010) gives clear indications of the employment patterns and employability of parents attending Children’s Centres. The survey shows only seven per cent of responding parents were looking for work (65 per cent of respondents were not working). The baseline survey additionally considers provision of education and training services, crucial elements of pilot provision and drivers of key measurable outcomes from the pilot. Six per cent of users reported their primary use of Children’s Centres to ‘attend a course or class’ (other than parenting or related classes) at the outset of the pilot.

Many users in Children’s Centres with pre-school children are not considering work in the short-term. These non-working parents primarily define themselves as full-time carers and foresee this economically inactive role remaining until their children are primary school age or older: *‘the demographics, labour market profiles, childcare responsibilities and personal circumstances of Children’s Centre users indicate that for many, employment is a longer-term reality’* (Marangozov and Stevens, 2010, p. xii) This means that ‘outcomes’ from the Work-focused Services pilot will be mainly ones from improving parental human capital and employability prior to employment and that ‘hard’ employment gains in terms of job entry will mostly be seen after the end of the pilot for the majority of the participants.

Interim evidence across a wide range of pilots suggests evidence of ‘soft’ outcomes, such as improved confidence, of attendance at and completion of training courses. Such evidence is present in interim reports from the Local Authority Innovation, Teenage Parents Supported Housing, as well as from Work-focused Services pilots.

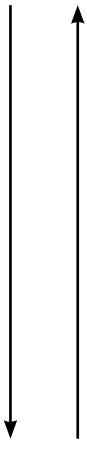
We have already noted that many of the participants in these pilots are mothers who are ‘inactive’ in terms of their economic labour market status – they define themselves as primarily looking after their children. The results from pilot intervention will thus vary according to how they change their subjective views and their soft and hard skills and whether they become ‘active’ job seekers or indeed enter work. For instance, evidence from Teenage Parents Supported Housing shows that two in five participants (43 per cent) said their current main activity was caring for children, only one in ten (nine per cent) said they wanted to be looking after their child(ren) full-time in 12 months’ time. The remainder wanted to be in work or training, at least part-time.

Other evidence from these and other pilots will affect those already jobseeking and already in work. There is, thus, a very wide spectrum of evidence that will come from the pilots on employment outcomes that range from purely subjective orientations to employment to harder outcomes in jobseeking and in work outcomes. At this interim stage we have little evidence available from those pilots such as Child Affordability and School Gates that seek to influence jobseeking and work-related outcomes but it is worth laying out an early framework for expectations of evidence that will arise according to the status of the participants.

Table 3.1 outlines the potential outcomes that can be expected across all the pilots according to the status of the participant: inactive, jobseeking or in work. This status in the labour market is from an economic point of view rather than reflecting status in the benefit system – so that, for instance, a lone parent claiming Income Support may be either ‘inactive’ or looking for work, whereas all those claiming Jobseeker’s Allowance will be deemed as economically active and thus ‘jobseekers’.

The first point to make is that change of status can be an expected outcome: some inactive parents will become jobseekers and jobseekers will enter work. These changes in status are not linear – each change of status is a qualitative jump rather than an incremental change<sup>3</sup>. These changes in status are potential ‘outcomes’ in themselves – so that the number of inactive parents who started looking for jobs and shortened durations of inactivity are both valid outcomes from a pilot that serves inactive populations. Similarly, the number of jobseekers entering work and shortened durations of jobseeking are potential outcomes.

**Table 3.1 Expected employment outcomes**

Status in the labour market	Possible directions of change of status	Expected outcomes from pilot services
Inactive		Improvements in soft skills, attitudes towards work and confidence
Active jobseekers		Planning to return to work
In work		Take-up of training and education
		Improvements in soft skills and attitudes towards work and confidence
		Improved job search
		Job offers and interviews
		Entering work
		Improved experience and in-work skills
		Improved confidence and skills
		Sustaining work
		Changes to hours and work and wages
		Job advancement

A second point to make is that this primary expected direction of travel (i.e. the direction from top to bottom in Table 3.1, from ‘inactive’ to ‘jobseeking’ to ‘in work’) is potentially reversible. The major expectation is that pilots will shorten the distance from the labour market but there is the potential for movements in the opposite direction. For instance, a jobseeker faced with little or no success may disengage and become a ‘discouraged worker’ and move into inactivity.

A third point to make is that change can happen at the individual or at the household level of employment – so that, for instance, hours of work may reduce for one person if their partner enters work, or changes in financial incentives across household patterns of work may cause one parent to leave work or shorten hours.

<sup>3</sup> For instance, the probability of finding work if you are inactive and not looking for work is theoretically zero but as soon as you start looking for work it is greater than zero. Similarly, looking for another job while in work is more likely to succeed than looking for a job when out of work.

A fourth point is that changes can occur within a labour market status; not all outcomes will involve changing status (what can be termed as transitions – for instance moving from inactive to active and moving from jobseeking to being in-work). For example, outcomes from measures shown in the right hand column of Table 3.1, such as numbers attending and completing training courses, can be significant in themselves even when there is no change of status. This can be important for capturing improved employability. For instance, the number of those who were seeking work who improved their probability of being short-listed or interviewed (short of employment) would be a strong suggestion of improved employability. Alternatively, when looking at ‘in-work’ outcomes and at the potential for changes that can be both positive and negative, then there is the potential of outcomes based on a reduction of work hours as well as any increase when faced with the low returns from additional earnings in work that occur when entitled to tax credits<sup>4</sup>.

The final point is that Table 3.1 shows a simplified overview that can be interpreted as occurring at a single point in time. In reality, participants may change status or have a range of outcomes during the pilot and afterwards as a result of the pilot intervention: for example, those entering work may leave again and return to being out of work (so called ‘churning’ or the ‘low-pay no-pay cycle').

Clearly, pilots will seek both inactive and jobseeking parents to improve their employability and a route out of poverty depends heavily on finding and keeping a job. But crucially, crossing the poverty line depends on job quality, i.e. on pay and hours, as well as just getting a job, as we know that in 2008/09, 55 per cent of poor children were in working families (DWP, 2010; HBAI, Table 4.3).

Early indications of employment outcomes are discussed in Chapter 5. In Chapter 7 we return to discuss the approach outlined in Table 3.1 as part of a synthesis theme on employment outcomes and ‘distance travelled’.

### 3.3 Pilot populations and participants

The interim evidence provides many insights into how the pilots have recruited participants. This can be by direct recruitment, with outreach or other approaches to try and reach new populations, or through referral by other agencies. Many pilots are operating with local cross-agency strategies to improve access so that new and different patterns of recruitment and referral are important features across many of the pilots. This raises a more general point for synthesising the evaluation evidence from the pilots: how do the characteristics of pilot participants influence interpretation of the evaluation findings?

Pilots, by their nature, do not treat the whole population. They operate in selective areas and situations. People who participate in them are not necessarily representative of the local population itself or with people who live in other areas or in different situations. The final synthesis report will bring together all the descriptive profiles of participation across the pilots and show what types of families in a variety of circumstances experience pilot interventions.

We already know that teenage and young parents have been seen to participate in pilots other than the Teenage Parent Supported Housing pilot that is specifically designed for that group (e.g. Work-focused Services pilot). Similarly, all pilots will have participation profiles that have direct or indirect reflections of their intended target groups. These profiles will be important to compare to similar national profiles of sub-groups of child poverty and other profiles of disadvantage and reduced life chances. This will enable us to more clearly show the potential anti-poverty impact of pilots in

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<sup>4</sup> See Blundell and Walker (2001) and the reviews of evidence the feature ‘In-work benefit reform in a cross-national perspective’ issue 593 of Vol 119 of the *Economic Journal* 2009 with an overview by Brewer, Francesconi, Gregg and Grogger.

relation to sub-group profiles of child poverty and disadvantage. We return to discuss this point in Chapter 6 to establish clearer potential policy learning from the pilots in the final synthesis report.

At this stage, both the nature of early participation profiles and the lack of comprehensive sets of participant data across the pilots on a consistent basis makes a detailed description of little evidential benefit (and could potentially be misleading prior to reporting a full and final set of data). But it is also important to forewarn, at this interim stage, that descriptive profiles are not in themselves sufficient to interpret pilot outcomes. Outcomes will reflect the selective nature of pilot areas and participation profiles. We discuss these points in greater depth as part of a more specialised analytical approach to synthesis of evidence in Chapter 6. At this point we provide some introductory observations for readers who do not want to explore the full analytical approach later.

An example of how ‘selection’ in participation can affect outcomes is to consider users of Children’s Centres. Participation is open to all and thus ‘universal’, but we know that characteristics of those who use Children’s Centre services and those that do not differ. We provide a detailed analysis of these differences in Chapter 6. Differences in the characteristics of users and non-users mean two things:

- first, that the services and outcomes from Children’s Centres reflect the characteristics of participants.
- second, that if current non-users become users the same services will probably have different aggregate outcomes<sup>5</sup>.

To accurately measure the outcomes and interpret the evidence differences in participation characteristics need to be controlled for. Some evaluation approaches ensure that these problems are minimised as part of the design of the evaluation.

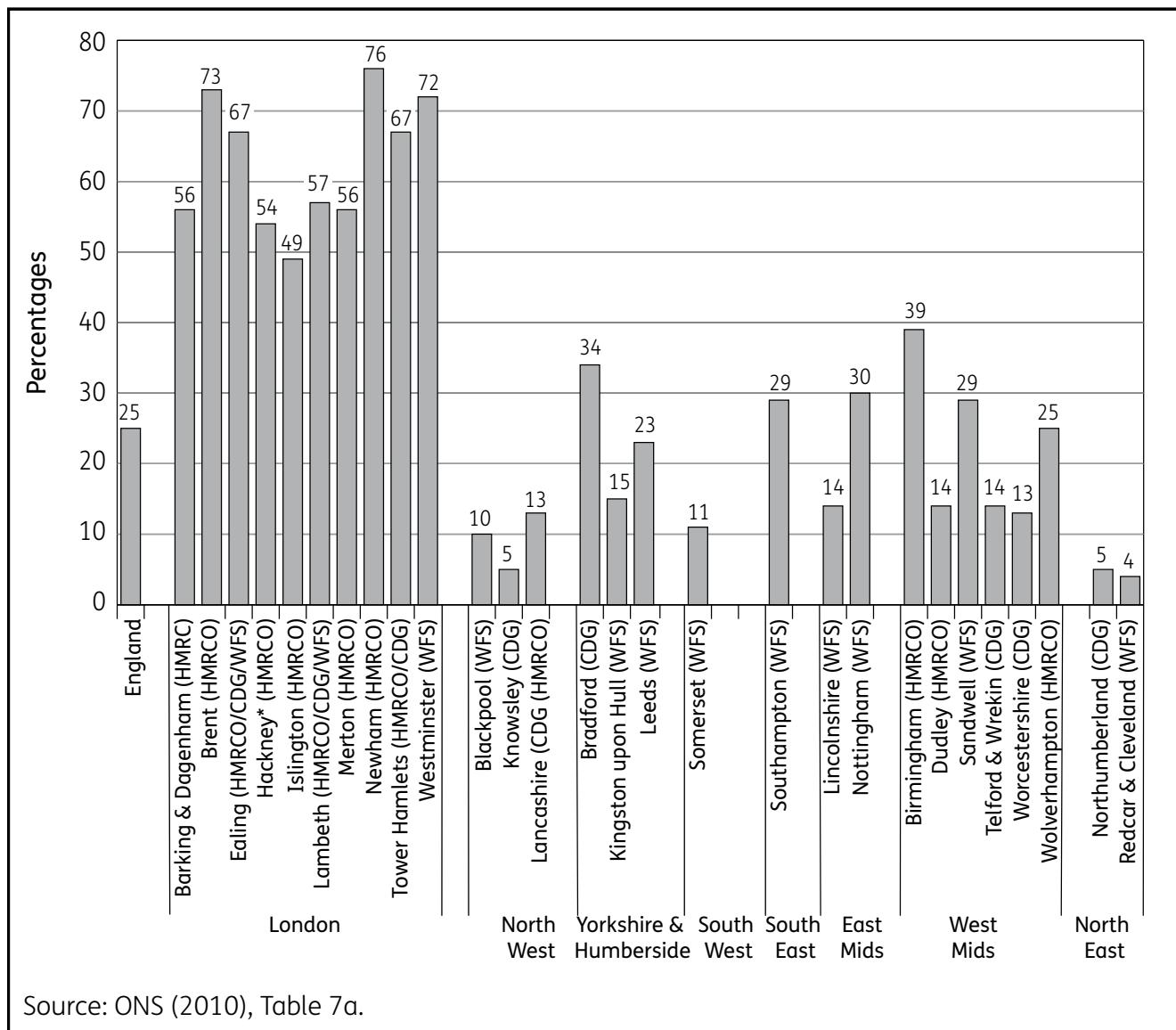
The representativeness of pilot evidence is important because lessons are best drawn when findings can be generalised from the pilot situation to the general population. Different Child Poverty Pilot locations have been chosen to reflect different policy contexts. Some pilots have been targeted at areas with high levels of multiple deprivation, whilst others have been chosen from a bidding process on the strengths of their proposal or to reflect different administrative or regional coverage. Findings from pilot areas thus run the risk of not being representative and thus, to have limits to their generalisability.

For example, Figure 3.1 shows the proportion of births in 2009 to mothers who were not born in the UK in each local authority (LA) where a Child Poverty Pilot is delivered through Children’s Centres. Similar levels of deprivation in LAs in the North East and in London show huge differences, with the former having 5 per cent or less and the latter 70 per cent or more of children born to non-UK born mothers. These differences can alter our interpretation of the findings between the pilot areas as well as the representativeness of the pilots to all deprived areas in England.

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<sup>5</sup> Additionally, in any pilot where the profile of services changes to adapt to the new and different users, then comparison to earlier evidence of outcomes from Centres is difficult because users, services provided and outcomes will have changed.

**Figure 3.1 Proportion of Births in 2009 to Mothers born outside UK in Authorities in which Children's Centre-based Child Poverty Pilots are in place**



Source: ONS (2010), Table 7a.

### 3.4 Summary

The pilots work with low-income families at different stages throughout their lives and with a wide range of (underlying) issues. One key difference in the balance of objectives across the suite of pilots is how far they emphasise developmental services to improve life chances – to children and their parents – or services to reduce monetary poverty and material deprivation.

Such a difference in approach is crucial to understanding routes out of poverty that can be immediate (say, through a step-change in moving into work and increasing family income) or could be preparatory and developmental (improving child development and parenting behaviour, improving maternal education and training in preparation for later work).

Pilots that concentrate on the former are likely to show results in terms of monetary poverty within the lifetime of the pilot itself, while others that are building capacity in children and their families are more likely not to result in children ‘crossing the poverty line’ during the lifetime of the pilot.

One important theme in the emerging evidence base is whether the pilots are reaching out to new and previously under-served groups of parents and families. The early indications are very encouraging.

# 4 Developing tailored, innovative and localised solutions

This chapter looks at the range of ways the Child Poverty Pilots are adopting innovation in delivery and operational models, and looks at the emerging evidence on the setting up and working of these new operational and delivery models. Particular focus will be on:

- What is the early evidence from pilots on developing tailored, innovative and localised solutions?
- What innovative delivery models are being adopted and how do pilot approaches differ from pre-pilot practices?
- What emerging evidence is there from providers on implementing new services?

## 4.1 Pilot delivery models

While innovation in delivery and operational models is sought by most pilots, there are several instances where pilots are purely testing new approaches to services or programmes with unchanged delivery. The HM Revenue & Customs (HMRC)-run Childcare Affordability pilots fit this description and were mainly testing changing principles of programme design rather than piloting a projected change in policy that would be implemented.

But the majority of pilots are testing new operational practices and when one looks across the design of the pilots and the available interim evaluation reports there is huge variety in the models of organisation and delivery that have been adopted. The encouragement to innovate and test has been enthusiastically taken up by the pilots.

There are two main ways of thinking about variation across delivery models:

- First, there is a difference between those pilots that are joining up across services run by central government agencies (HMRC and Jobcentre Plus in the main) and locally based agencies and more local level integration of local level providers. We can think of the first of these approaches as ‘vertical integration’ and the second as ‘local horizontal integration’.
- Second, among local integration there are differences in the types of organisation and governance of the pilot. Some pilots are partnerships that are led by local government and others by voluntary sector organisations. Nearly all contain some mix of statutory and voluntary sector providers and thus give potential insights into the role of the ‘Big Society’ themes of Coalition Government policy as well as their emphasis on ‘localism’.

### 4.1.1 Vertical Integration Models

There are two main pilots that attempt to place central government agency services in local service settings. Both HMRC Outreach and Work-focused Services pilots provide staff resources from central government-run agencies to operate in and along staff at Children’s Centres. The HMRC Outreach pilot’s objectives are to improve tax credit administration and efficiency alongside providing better more integrated services to local low-income families. The staffing resources amounted to a half day each month placement of a tax credit adviser in the Children’s Centre. The Work-focused

Services pilot was a more intensive staff intervention that put a full-time Jobcentre Plus Adviser into the local Children's Centres to work with, and alongside, Centre staff and to help Centres have a more consistent employment focus and to help promote parents working as a way of reducing child poverty. Integrating services between central and local agencies in benefits and employment has antecedents in the ONE initiative that immediately preceded Jobcentre Plus' formation (Kelleher et al., 2002). Evidence from the reduced HMRC Outreach evaluation (primarily the baseline survey report) will be included in the final report when it becomes available in 2011. The interim evaluation of the Work-focused Services pilot includes case studies and qualitative interviews of both Jobcentre Plus and Children's Centres managers and staff and the resulting evidence on how the pilot's approach has been implemented is discussed in more detail later in this chapter.

#### **4.1.2 Local Horizontal Integration Models**

The most innovative approaches are best illustrated by pilots that take a 'new' user group and set up and provide new integrated services for them. This is the fundamental approach of the Coordinated Services for Separating Parents pilot that recognises parents going through separation as requiring a co-ordinated service package. But this pilot also reflects a bidding process that resulted in ten winning local sites with a very large range in types of provision and governance across them. This pilot has strong representation from the charitable sector (national level charities – Relate, Citizen's Advice Bureau and Family Mediation – as well as local charities) and six sites are voluntary sector led. Private firms are also involved in a couple of sites through solicitors' practices. The governance models vary greatly across its ten sites. One is led by a GP consortium, and there are statutory voluntary sector partnerships as well as pure voluntary sector partnerships. The partnerships range from 20 in total in one pilot to two in another.

Another feature of the Coordinated Services for Separating Parents pilot is the range and variation of services that are being provided and integrated – with relationship services such as counselling and mediation operating alongside financial and legal assistance and parenting and education support (see Table 4.9 in Tavistock Institute et al., 2010)

Teenage Parent Supported Housing pilot areas were also selected through a bidding process and selection of pilot areas was made in order to reflect both unitary and country-district council locations because local authority (LA) functions on housing allocation are at the district level while housing support for vulnerable groups and children and education services are at the country level in non-unitary authorities. Different approaches to providing different forms of additional supporting services were also chosen across the pilots. This means that each of the seven pilots has a different model for providing new services in an integrated way. All seven pilots are LA-led, and all but one contain partnerships with local voluntary sector organisations. The largest number of partner organisations is five.

The partnerships in the pilots are largely determined by the type of support services that are being offered – so that housing services may be provided by housing association partners, or through LA-based referral and vouchers to private landlords and support services may be provided through 'buddies', peer (or older) mentors, and/or through services such as debt advice, health and education support (Johnsen and Quilgars, 2010a).

The Child Development Grant pilots are all based in and around Children's Centres and this means that the underlying differences in operational approach and governance of the Children's Centre precede and determine some of the different models of pilot provision. All ten pilots are LA-led but the lead agency within the LA differs across the pilots with the majority led by children services/early years service managers. Differences in partnership reflect local integration of health services – particularly health visitors and midwives – but also other services such as Jobcentre Plus, and more local voluntary

and community sector organisations including credit unions and LA neighbourhood services. Particular links with teenage pregnancy services is highlighted and teen parents are identified as potentially benefiting greatly from Child Development Grant payments due to lower benefit levels paid to young parents. Family Nurse Partnerships were another recognised partner for the Child Development Grant pilots. Organisation of different elements of the pilot, such as outreach services demonstrates two main versions – either Centre-based outreach workers or floating workers who operate across a group of Centres (York Consulting, 2010).

The Child Poverty FIP pilots used existing in place teams working to intensive family intervention (formerly known as Family Intervention Programme) models on ‘think family’ initiatives in anti-social behaviour and youth offending. Child Poverty FIPs were implemented in 2009 by adding a new small team and team leader to specialise in working with families with the new focus of Child Poverty that emphasised inter-generational disadvantage and worklessness. Interpretation of this new focus has differed across sites. One of the main characteristics of Child Poverty FIPs is that they have different patterns of referral than referrals for anti-social behaviour and youth offending – with higher proportions coming from health, education and children/social services agencies (Dixon et al., 2010). Underlying reasons for referral to Child Poverty FIP are over-represented by poor parenting, social care referral history and child protection issues, domestic violence, substance and alcohol misuse, mental health, debt and worklessness (*ibid*). However, overall, there is no substantive change in the model to adapt it to deal with Child Poverty based intervention and selection into the programme remains for only those cases where intensive, long-term support is needed and other services are not appropriate.

The Local Authority Innovation Pilots consist of ten examples of locally integrated service delivery. All the pilots are locally led and implemented to serve a particular local need and local context. Links to their respective evaluation reports can be found in Appendix A, which provide more detail on how each pilot is run.

The pilot operational models of HMRC Outreach<sup>6</sup>, School Gates Employment and both HMRC and London Development Agency’s Childcare Affordability pilots will be outlined in the final synthesis report when a final set of evaluation evidence from these pilots is available.

## 4.2 Emerging evidence on set-up and implementation of new pilot services

### 4.2.1 Set-up of pilot services

In local time-limited policy interventions with tight timetables such as the pilots there is a high likelihood of underestimating the up-front costs and resources required to get things going. Evidence so far supports this.

An important question is how far such investments in new service provision are ‘one-offs’ at the beginning and how far they are continuing commitments over the whole project. Given that ‘operational planning’ is mostly provided by strategic salaried staff the funding resource implications are very different if the demand for resources result from an up-front investment or from a continuing long-term commitment.

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<sup>6</sup> Note that limited evidence will be available for HMRC outreach as planned post-intervention stage did not take place.

Operational delays caused by recruitment have been common across pilots. This happened in many of the Local Authority Innovation pilots as well as in the Co-ordinated Services for Separating Parents Pilot (Tavistock Institute et al., 2010). Johnsen and Quilgars also report set-up problems of implementation for the Teenage Parents Housing pilot resulting from the later than anticipated announcement of successful bids, shortening lead in times and requiring spending of the first year's funding allocation in a very short time-frame. Other initial problems arose from concurrent LA restructuring, redeployment, and recruitment freezes that meant recruitment was delayed to the point that '*some LAs began to publicise the pilot and recruit teenage parents before project staff (including managers) were in place*' (Johnsen and Quilgars 2010a p7).

Many pilots faced foreseeable hurdles during set up that should have been planned for, such as Criminal Record Bureau checks and Ofsted registration of childcare provision. For instance, Marangozov and Stevens (2010) report that the Work-focused Services pilot experienced some problems with 'start-up and implementation' that delayed delivery in some pilot areas, including delays in the recruitment of personal advisers, as well as the foreseeable problems of clearance from Criminal Records Bureau (CRB). IT problems are also reported as a source of frustration and a demand on time for personal advisers that also affected the level of service. (op cit, p.13).

The individual pilot evaluations also identify the 'costs' in time and resources of setting up partnership working as a relevant factor in evaluation, '*good communication was an essential element of partnership working, it nevertheless absorbed a considerable amount of workers' time. This was especially the case in the early stages of partnership development when many aspects of joint working had to be resolved, and meetings were held more frequently than they might be at a later stage when misunderstandings had been resolved and procedures were in place.*' (Tavistock Institute et al., 2010, p42)

Early resource intensive problems may arise from differing organisational cultures developing joint working. Organisational differences between partners caused delays, such as differing Human Resources procedures and protocols on staff induction. The Coordinated Support for Separating Parents evaluation showed that time costs were part of an overall experience of adaptation, '*chiefly around their need for tolerance of their partners' styles of working with clients and a willingness to make adjustments in order to serve the greater good*' (Tavistock Institute et al., 2010, p42).

The placement of Jobcentre Plus Personal Advisers into Children's Centres echoed similar problems of differences in culture. Marangozov and Stevens conclude, '*perhaps the most recurrent theme in our analysis of pilot delivery is the ongoing challenge of 'cultural differences' upon the effectiveness of the PA role and overall pilot performance. ...The differences have manifested themselves in two ways, mainly through the target-orientated expectations of the Jobcentre Plus line managers, but also through the difficulties that the personal advisers are having in managing the unstructured nature of the work and the ad hoc demands of parents.*' (op cit, p.xii)

In the long term, mutual flexibility was observed to be a required approach and Marangozov and Stevens highlight three essential elements to get over up-front problems and adapt to integrative working.

- adjust to or explain new ways of working to the other pilot staff;
- invest time in integrating the procedures of two different environments;
- provide ongoing support so that new working practices 'bed in' (ibid p.24).

Once the pilot is running and staff are sharing physical working space and have regular communication, the development of optimal partnership working improved once commonly shared expectations of the personal adviser role and pilot outcomes were in place (ibid).

For example, implementation challenges have delayed and limited interim findings for the Child Development Grant pilot. Recruitment into groups of parents who receive the Child Development Grant payment with an action plan together with recruitment into the control group who solely get an action plan has occurred across the majority of sites. In common with other pilots, there have been recruitment difficulties and other constraints of building size, staffing levels and setting up monitoring and data systems. However, the Child Development Grant's approach of payment and the separation of control and treatment groups within LA areas has led to specific difficulties in the field. Some participating staff at the local level found the principle of 'payment' for participation and the perception that the pilot was moving away from a local 'universal' service unfair. The result is that different pilot sites have different versions of the trial as a wide variation in implementation occurred across the Child Development Grant pilots. For instance, Dudley has no CDG payments in place and has only implemented 'action plans', but Dudley alone is able to compare this to a control group of existing users. All other sites have introduced payments and action plans but controls are patchier. At May 2010, no site had set up a control group of 'normal users'. This variation in implementation adds to the discretionary ability of local sites to vary elements of the action plan and timing of payments. The effect of these variations will be seen in the final evaluation and reported in the synthesis report.

#### **4.2.2 Challenges to partnership working**

While many pilots had challenges when setting themselves up there is also an indication that some issues in partnership working are longer-term and structural. The majority of early evidence on partnership working comes from the pilots that are based in LAs and comes from two sources: The Second Synthesis of Local Authority Innovation pilots (GHK, 2010b) and the individual interim reports on integrating services for particular groups of parents – for Teenage Parents Supported Housing and Coordinated Support for Separating Parents pilots (Johnsen and Quilgars, 2010a, 2010b; and Tavistock Institute *et al.*, 2010, respectively)

##### *Data protection and data sharing*

Concerns regarding data protection and information sharing protocols have been a common obstacle to partnership working. For example, Islington (a Local Authority Innovation pilot) is specifically considering better data based approaches to local initiatives on child poverty, and better use of data is a potential strategic tool in local Child Poverty Strategies. There have also been challenges to partnership working in terms of data sharing in the Child Development Grant pilot, with some Primary Care Trusts not sharing 'live birth' or other data to assist in outreach.

##### *Cultural differences*

Differences in operational compliance (for example, Jobcentre Plus requirements for premises to be Disability Discrimination Act (DDA) compliant, or Children's Centre requirements for Jobcentre Plus advisers to receive training on child safeguarding), and differences in management and performance cultures: where Jobcentre Plus's caseloading, performance measurement and targets culture had to adapt to a more open ended, less mandated workload with Children's Centre users – only some of whom were Jobcentre Plus customers. Difficulties in partnership working where other potential partners are new or innovative or 'pilots' themselves has also been noted, particularly in the early stages of some pilots.

## 4.3 Gains and costs of integrated working

But how does one weigh up of the gains and costs of joint integrated working? Part of any learning must be in the balancing of increased effectiveness with efficiency considerations. The potential for duplication within the process of interagency working has also been identified in the Teenage Parents Supported Housing pilot and this can lead to confusion from service recipients when faced by a range of professionals in contact with them. For instance, Johnsen and Quilgars report the following illustrative quote, '*The difficulty is, it's how many other people do you get involved? ... It's sometimes quite difficult because if you've got a Tenancy Support Worker, you've got a Social Worker, you've got a Health Visitor, you've got a Midwife, you've got an Education Welfare Officer, and you've got myself [Children's Centre Worker]. It's almost as if you're just putting somebody else in for somebody else's sake... [Stakeholder]*' (Johnsen and Quilgars, 2010a, p32).

The perceived ways to lessen potential inefficiency were to ensure roles did not overlap unnecessarily and that new roles were distinguishable from pre-existing roles. Innovative ways of joint working in Local Authority Innovation pilots experienced '*tensions as it challenges established practice*' (GHK, 2010b, p.51). For some areas of joint working, Common Assessment Frameworks were also viewed as a means of clarifying roles in multi-agency working. But the role of protocols is clearly one of potential focus in the final synthesis evaluation as the risks of multiple agencies aiming to offer 'holistic' support to customers without such in-depth operational clarification are considerable – both in terms of costs, challenges to professional practice and public confidence and acceptability to participants. We discuss participant experience and preferences of such joint working practices below.

Johnsen and Quilgars (2010a) describe a self-reported strengthening of cross-departmental links between Housing and Children's Services in the Teenage Parents Supported Housing pilot by providers. For those pilots involving split administration between district and county levels this finding is encouraging for the development of inter-agency working in the future. However, for the majority of participating unitary authorities involved, such a finding highlights more the internal 'silos' that require better management and co-ordination.

In the case of integrating services across LA and Health Service boundaries, the Teenage Parent Supported Housing pilots experienced variable success with integrated operational provision from specialist teenage parent midwives and/or health visitors playing a pivotal role in referral but project managers reporting difficulties in encouraging health representatives to attend steering group meetings (*ibid*). The final synthesis report will return to this issue to try and distinguish improved practice more analytically by types of inter-agency work.

Overall, there is the need for additional information on how inputs of 'time' related to potential efficiencies (saved time) elsewhere. Bringing services together into co-ordinated or 'one-stop' provision for participants obviously reduces the cost experienced by families in the pilots. However, more information about the trade-offs that LAs are faced with in adjusting officer time and other resources to do so, and of the resulting costs and benefits, would be very helpful in taking forward learning from the pilots. We return to discuss this point in Chapter 7.

## 4.4 Engaging clients effectively

From the participants' point of view, 'innovation' in programme design and implementation is less important than the face-to-face experience that results. Evidence from the Local Authority Innovation pilots emphasises the need to build trust over time with potential participants who may not easily come forward and who may be averse to participating after their experience of

mainstream services. There are problems of image as well as information as provision has had to deal with suspicion as well as low awareness of service availability and access (GHK 2010b p.47). The key words and phrases that are repeated across the evaluations to describe what works from the participant view are ‘holistic’, ‘family focused’ (this primarily means parent focused taking into account their children rather than family focused in terms of FIP provision), ‘flexible’ and ‘individually tailored’. These words need careful consideration, and are in potential danger of becoming overused and stripped of analytical precision and rigour. But they do capture the essential point that what is perceived to work is a set of services that are brought together, with some ability to add discretionary ‘extras’, and are made to work to an agenda that is developed with the participant rather than ‘for them’.

What is being described is clearly a lot less rigidity than commonly exists where a single service provision is given from a single access point. However, there is a spectrum of integration and holistic working that rarely extends into completely joined-up, open-ended and discretionary flexibility. The gains are improved engagement and trust from participants who feel appreciated and ‘heard’ rather than slotted in to pre-set, compartmentalised provision that puts the onus on the participants to join up and optimise. Such approaches (and terminology) echo longer-term findings from the welfare-to-work evaluations based on personal adviser services in Britain. Work-focused Services being introduced into and integrated into Children’s Centres is a clear example of less rigid provision of services in a single location that provides discretionary services that suit particular customers’ needs.

It is crucial to realise that participation is not a given outcome and thus, what works is the result of participants choosing to engage with the new pilot services. The Teenage Parents Housing pilot evaluation uses such insight to critically assess what works best (rather than simply describe everything that is perceived to work). *‘...some types of support were more easily understood and readily taken up than other elements of support (for example, floating support compared to life-coaching). A number of potential factors appeared to be at play there.’*

*Firstly, familiarity with some service types may have aided take-up, whilst conversely young people may have been wary about the purpose and approach of newer types of services. Linked to this, sometimes the package of support was not fully understood and take-up may have improved by more clearly specifying the support on offer. Thirdly, take-up of services appeared to be influenced by location of services (with co-location with other services for young parents working best). Fourthly, and crucially, within a clear offer of support, services needed to be flexible enough to respond to the young person’s needs. Finally, the quality of the relationship between the young parent and the worker was central to the effective delivery of any support’ (Johnsen and Quilgars, 2010b, p 51).*

## 4.5 Lessons learnt from different delivery models

### 4.5.1 Outreach

One of the cross-cutting aims of Child Poverty Pilots is to include users who are not currently taking up mainstream services or to reach out to those who have been made averse to participation in such provision. Such approaches mean emphasising both information and trust issues.

The Child Development Grant pilot has clear aims to improve take up of Children’s Centres and at the interim evaluation stage the strongest results show the benefits of such an approach and also potentially indicate ‘what works’ in locally neighbourhood outreach for Children’s Centres and more widely.

Interim assessments by the Child Development Grant evaluation on the promotion and marketing of the grant suggest that word of mouth is the most powerful marketing and is perceived as most

effective where communities are close to Children's Centres. Overall, mail-shots were not seen as effective, however they were adjudged to work better where they appeared more as 'personal' rather than institutional mail using stamps rather than institutional franking and when names and addresses were handwritten.

Leafleting was used often but was subject to language and other problems. It was seen as improving recruitment success of subsequent door knocking that was resource intensive but seemed most effective. However, such approaches worked best when confident/experienced staff were used to engage in direct contact with potential participants. This meant that defining the 'outreach worker' role was important and practice differed across three basic models: outreach only workers, outreach with some caseworker involvement to monitor attendance follow-up and the fuller case worker model where such workers also delivered the action plans. A good 'sales pitch' is regarded as the best way to ensure engagement and this relied on both worker experience as well as 'sales skills'.

Reminders and follow-ups were seen as a crucial part of sustaining participation and postcards as reminders were reported as preferable to SMS texting. Physically placing services outside the Children's Centres was seen as productive in locations that were further away from main Centres or where there were physical barriers such as major roads between communities and Centres. Such approaches ranged from office provision of staff in a people carrier through to hiring a commercial bus with on-board play facilities.

To improve confidence some Centres used parent 'champions' or 'buddies' to provide support to new attendees. Early engagement was seen as 'fragile' and shorter initial sessions were perceived to work best, especially those '*that are fun, informative and non-confrontational*' in the words of one Centre manager (York Consulting 2010 p16). An important aspect of reassurance is reported as being that a familiar member of staff would attend sessions to help instil confidence. However, providing such personalised contact through visits/phone calls is very intensive and would be harder to bring to scale in Centres with larger numbers.

What is observed 'not to work' in the Child Development Grant evaluation? Appreciating high levels of risk aversion is reported as crucial – so that any activity that was seen as threatening benefit entitlement was negatively perceived. More generally, perceptions of participation meant not only a change but also joining a group of unknown people with activities that were potentially not enjoyable. There are also sub-groups of potential participants that are difficult, either because they are members of transient populations or because they avoid or only partially engage. A protocol that limited outreach to three missed visits/attempts to engage or pre-arranged visits was suggested by some Child Development Grant providers (*ibid*).

Moving on from the depth of evidence on outreach from the Child Development Grant evaluation to other pilots, the evidence is similar. Work-focused Services in Children's Centres has tested various ways of marketing and promotion to engage parents more effectively and early indications are that personal advisers have to be clearly accessible and responsive. This has meant adapting work to prioritise outreach over casework in the early months of the pilot and to ensure that a full-time presence at the centre that best reflected parents' schedules (see Marangazov and Stevens, 2010).

Many pilots work on a referral basis for the majority of their participants but even these pilots still see the need to supplement existing referral partners to ensure comprehensive outreach to non-users by either extending referral agencies (e.g. Teenage Parent Supported Housing pilot – see Johnsen and Quigars, 2010b, p.49) or by more targeted outreach for known groups who under-utilise services or who are ignored by mainstream provision. Young fathers is a group that fits such a description and Teenage Parent pilot areas have tried to proactively recruit young fathers and

promote the appreciation of teenage parents as couples in service design and delivery. In this example, outreach can face obstacles as some housing providers are reluctant to offer suitable accommodation for couples or to give joint tenancies<sup>7</sup>.

In general, outreach activity in the Local Authority Innovation pilots has been in expanding referral practice to include both self-referral and ‘mediated referrals’ (where a referral organisation contacts the pilot on behalf of the participant). It is noted that open and flexible referral criteria can create uncertainty and this can hinder referral, particularly where ‘*services working with vulnerable families are reluctant to refer them to other support without having confidence in the potential support offered*’ (GHK, 2010b, p.31). In the more general publicity, the self-perception of potential participants is emphasised as important so as not to turn them away by defining them in non-relevant or insensitive terms. For instance, many parents with young children will not respond to ‘back to work’ labelled activity but are more likely to respond to training, skills promotion and career planning in anticipation of their eventual return to work.

There is one area identified in the Local Authority Innovation practice that suggests a need for clearer and more careful assessment: targeting activity on poor families. Resource tests are often used and these are reported as crude and over-simple income thresholds (such as £20,000 per annum, irrespective of family size). Where more accurate assessment of income to match Child Poverty Act target income measures were attempted the complexity of the assessment became unwieldy. Such approaches also highlighted problems at the margins of poverty – should those with incomes just above the threshold and still with a high probability of being defined as ‘poor’ in the future be excluded? This stream of evidence suggests the need for clearer appreciation at the local level of poverty risk assessment and we return to discuss this issue in Chapter 7.

#### **4.5.2 Co-location**

‘One-stop’ integration, i.e. the provision of single points of contact and advice, is also reported in the Teenage Parent Supported Housing pilot (e.g. drop-in sessions being delivered jointly by Housing Support Workers and Connexions Personal Advisers in York) and/or conducting joint needs assessment (e.g. by Teenage Parent Support Workers and Young Persons’ Housing Team representatives in Blackburn with Darwen). One of the increases in effectiveness that result can also be an increase in ‘reach’ into hard to help groups of people – for instance, the Teenage Parent Supported Housing pilot suggests that key workers operating from a single organisation improved take-up as ten per cent of participants had no previous contact with help in accessing services (Johnsen and Quilgars, 2010b). Similarly, the interim Local Authority Innovation findings also lay great stress on the apparent effectiveness of packages of support ‘when they are co-ordinated by a caseworker and supported with flexible resources’ (GHK, 2010b, p.55).

Co-location is fundamental to the Work-focused Services pilot in Children’s Centres and working practices have adapted to ensure that advisers are both available and seen in the everyday working of the Centres (with their many activities and groups) but that also allow separate working space within such Centres, which has been assessed as a very important factor to allow one-to-one meetings.

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<sup>7</sup> The reasons for this reluctance are not stated but presumably arise from the consequent obligations to rehouse both members of a couple if they are joint tenants.

## 4.6 Summary

The Child Poverty Pilots can be seen as developing new services alongside new delivery methods. Most of the pilots are trying out new delivery methods to find better ways of working with families at risk of child poverty. These new ways of operation often involve partnerships between agencies that have previously never worked together. Some pilots are both developing new services and new delivery approaches. Overall, the pilots reflect an appreciation that improved co-ordination of services provide a more client-focused, joined-up and holistic approach to service provision.

# 5 Early indications of outcomes, experiences and perceptions of pilot services

This chapter addresses two main questions:

- What evidence is there of how participants have taken up and experienced the pilots?
- What are the early indications of outcomes from interim evidence?

The evidence base from interim evaluation reports is by its nature partial. Evaluations are primarily set up to measure outcomes at the end of the pilot. Some pilots have no interim reports available at this stage and evidence from the Childcare Affordability, pilots (both HM Revenue & Customs (HMRC)<sup>8</sup> and London Development Authority run), and School Gates pilots will solely be considered in the final synthesis Report. HMRC Outreach evidence base will be primarily based on baseline survey profiles as the evaluation was curtailed. The other pilots have early and interim reports that mostly provide participant level evidence that described their involvement in and perception of the pilots together with some limited evidence of outputs (for instance, of grants made, training provided) and of participants' and providers' views on early outcomes. Hard outcome evidence is very limited and detailed and comprehensive consideration of outcomes and impacts will be left to the final synthesis report.

## 5.1 Child Development Grants

The majority of interim evidence on outcomes comes from qualitative surveys of staff in and managers of pilot Children's Centres. This evidence is illustrative rather than representative but gives helpful early insights into outcomes. Staff perceptions of success reflect the potential of incentives to increase the quality of participation as well as participation itself, '*the money gets people in and they stay longer than they would have done without it*' (York Consulting 2010 p.24). In general, the outreach-based approach discussed in Chapter 4 has resulted in staff perceptions that the 'hardest to reach' are gaining more focus in Centres. Staff report that these hard to reach groups included dads, who were previously hard to recruit and that outreach and grants overcome resistance to participation from mothers in families where they are under heavy influence of their husbands and/or mothers in law – particularly important for some cultures. There is a perceived increase in reaching those with more complex needs. A staff survey in one pilot area suggested '*there is a feeling the CDG [Child Development Grant] is returning workers to the core of their work*' (*ibid*)

There are indications of Child Development Grants promoting sustained engagement in Centre programmes as newly participating families stay involved after they start the action plan but there is overall some uncertainty about how longer-term engagement will be sustained after the periods of Child Development Grant end. In some Centres there have been unintended effects on non-Child Development Grant families, who in some instances have stopped attending when they know others are getting paid and in others have received a fall in service levels as overall participation levels rise as new Child Development Grant participants join programmes. Overall, the early evidence suggests

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8 Interim evaluation reports for the HMRC Childcare Affordability pilots were planned, but removed when the completion date was brought forward to March 2011.

that the Centres with Child Development Grants have developed a greater focus on ensuring that their services have real impact – for instance ensuring parents actually do stay and in particular play with their children. Evidence of effectiveness across the pilot sites differs, most believe that Child Development Grant can lead to positive results and 80 per cent of the Child Development Grant users are reported as never having previous contact with the Children’s Centre in one case.

What outcomes have resulted from the payments made to families? Early anecdotal evidence based on conversations between staff and families suggests that the CDG grant money has been spent on children’s needs – ranging from bunk beds, toys for a child’s birthday, trips and new clothes – as well as on family needs such as driving lessons and paying bills. While early and tentative, these findings support the wider research evidence that payments to poor families with children gets spent on children (see, for instance, Washbrook, Waldfogel and Gregg, 2005 and the results from the ‘Family Rewards’ Opportunities NYC programme in New York in Riccio et al., 2010, and Riccio J., Dechausay N., Greenberg D., Miller C., Rucks Z. and Verma, N. (2010) *Toward Reduced Poverty Across Generations: Early Findings from New York City’s Conditional Cash Transfer Program*, New York: MDRC).

## 5.2 Child Poverty Family Intervention

There is no separate evaluation of the Child Poverty Family Intervention Pilots (FIPs) but management information from the Family Intervention Information System (FIIS) that operates across all strands provides a rich source of monitoring and evaluation material. However, the majority of evidence of outcomes comes from families who had exited the family intervention up to 31 March 2010 (Dixon et al., 2010), and Child Poverty FIPs have very small numbers of exiting families compared to the longer-standing FIP programmes such as the Antisocial Behaviour family interventions. Results on outcomes for the Child Poverty FIPs can be expected to be available for the final synthesis report.

## 5.3 Co-ordinated Services for Separating Parents

Eight hundred families had been referred to the pilots by mid 2010. Over 500 (513; 91 per cent of those assessed and 64 per cent of referrals) had been offered services. The two evaluation reports currently available give a large amount of detail on referrals, service packages and participation profiles. From these we can say that there will be strong expectations of outcomes relating to family contact, on maintenance, on health and wellbeing, housing stability and employment-related outcomes. However, no participant expectations have been reported in the early evaluation material. Qualitative and quantitative outcomes will be explored by interviews and case studies in early 2011 and findings will be considered in the final synthesis report.

## 5.4 Local Authority Innovation Pilots

The first and second interim evaluation reports (GHK, 2010a; GHK, 2010b) outline some instances of early outputs and outcomes from the pilots. Cash grants provided by Cornwall’s Enabling Fund from 244 applications received between December 2009 and March 2010 have led to average awards of £522 (most often being between £100 and £600), the majority of which were to help to move towards or sustain employment (GHK, 2010b, p.8). Similarly, Kent’s Hardship Fund had made 141 grants with an average value of £216 to 123 families (ibid, p.14) It is not clear from discussion how far such provision is additional to or substitutes for alternative provision from Social Fund or other sources. Hammersmith and Fulham’s Family Solutions programme had by March 2010 engaged over 100 parents in an action plan and six parents had entered employment (ibid p. 10). Islington

had engaged 385 beneficiaries for information, take-up and employment services of whom 129 had received assistance with employability in March 2010 (*ibid* p. 12). The first cohort of 20 of Knowsley's Volunteer Family Mentors were in place by March 2010, others were still in training and over 30 families are in receipt of support (*ibid* p.16). North Warwickshire's CAB outreach bus had seen at least 500 people, of whom 83 per cent were new to CAB (*ibid* p.18). Sefton had 36 low income (majority non employed) parents engaged in Family Coach Support services (*ibid* p.20). Tyne Gateway had put 40 parents through the Awareness Raising Programme to become employed as Community Entrepreneurs (*ibid* p.22). Such employment is likely to have a measurable effect of them moving out of poverty

From a range of qualitative interviews with pilot providers, stakeholders and participants in March 2010 some interim findings on potential policy learning have additionally been put forward. However, these are couched in terms of 'suggested' outcomes in the main and full interpretation should await the final synthesis report when such evidence can be put alongside the other outcome measures in the LAIP evaluation. Interim key findings include a range of findings on working approaches and practices that are discussed more fully below. Overall, the initial two LAIP reports demonstrate that delays in implementation and delivery have a knock-on effect on the collection of monitoring data. This has resulted in a partial and inconsistent set of data on outcomes across pilot sites at this interim stage. A complete set of quantitative outline outcome measures from management information systems in the LAIP sites will hopefully be available in 2011.

## 5.5 Supported Housing for Teenage Parents

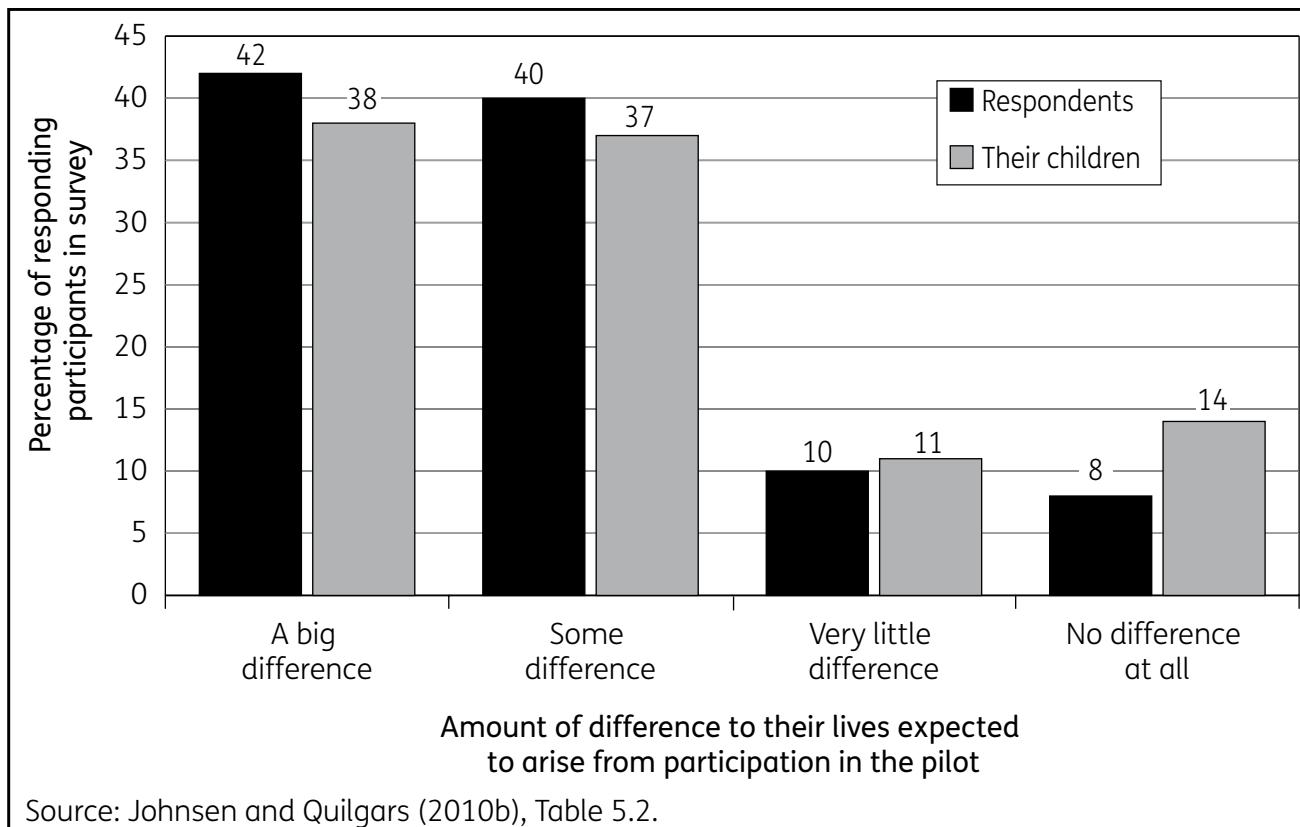
Take-up of the pilot has been good in most of the sites. Johnsen and Quilgars showed a total of 290 referrals were recorded across the seven pilots from project inception to December 2009. This was already a high proportion of estimated total cumulative caseload over the whole duration of the pilot in some pilot areas (for instance 11/18 in Brighton and Hove and 71/175 in Somerset) (Johnsen and Quilgars 2010a). This meant that, by the end of the first year of operation, first year targets for service users were generally above anticipated levels; with 491 referrals in all across the seven pilot areas by March 2010 (Johnsen and Quilgars, 2010b).

The baseline survey collected material on participants' expectations of the pilot. Figure 5.1 shows the expected 'difference to the lives' of themselves and their children that participants reported in that survey. Forty-two per cent expected that the pilot would make a 'big difference' and a further 40 per cent 'some difference'. Similar levels of expected change were reported for their children, 38 per cent and 37 per cent respectively. Those saying that they thought the pilot would make a difference though that this would be as a result of help with things like information (18 per cent), housing (15 per cent), access to helpful staff/someone to talk to (10 per cent), and accessing education and employment opportunities (10 per cent). These expectations of impact were based on the contemporary and short to medium-term assistance over a year from the pilot in supporting services (information, help with housing, help with training, education and employment and peer support from responsive and understanding service providers (Johnsen and Quilgars, 2010b, p.43). When asked a more specific question about what would make 'life better', then 55 per cent of respondents said more money ('better financial position'), 33 per cent said better housing and 14 per cent said employment (*ibid* p. 47).

In terms of actual help received to date, the most commonly mentioned forms of help were getting the correct welfare benefits (mentioned by 53 per cent), followed by assistance with parenting (50 per cent), advice about contraception/family planning (48 per cent) and looking after their health (44 per cent). Just over a quarter (27 per cent) reported that the pilot had helped them find somewhere to live and two in five (40 per cent) had received help with participation in education and training. No respondents claimed that they were not getting any help from the pilots

Early indications of the components of the pilots that were seen as most helpful by participants suggest strong appreciation for support worker services and housing services (such as accommodation bonds and provision of accommodation). Other service components vary so much between the pilot sites and are subject to small samples making interpretation difficult at this stage (*ibid* p.41).

**Figure 5.1 Expected Difference that Teenage Parent Supported Housing will make in the lives of participants and their children**



## 5.6 Work-focused Services in Children's Centres

There is clear evidence of parents preferring to have employment services at Children's Centres. The pilot's baseline survey found 66 per cent preferred to access Jobcentre Plus services in their local Children's Centre and this preference was based on location (being nearer to home or more convenient for travel routes), on accessibility (in terms of times of opening and access issues such as being 'buggy friendly' and having a child orientation) and on being more comfortable and friendly (18 per cent) (Marangozov 2009). Additional qualitative evidence confirms this, suggesting that participants welcomed the holistic and person-centred approach of personal advisers in Children's Centres and in particular the accessibility and convenience of helpful, sympathetic and trust-building advice and support services that some participants felt were in contrast to mainstream Jobcentre Plus provision (Marangozov and Stevens 2010). '*Yes, she's really good. She goes on the Internet looking for jobs with me as well. She got me an interview as well, for a job. She's really helpful.'* (Children's Centre user, discussion group talking about her personal adviser) (*ibid* p.24).

In general the interim findings from the Work-focused Services pilot reflect the fact that many participants are mothers with young children who are ‘inactive’ and not immediately wanting to look for work. The majority of outcomes are perceived as ‘soft’ rather than hard outcomes.

Hard outcomes mostly included attendance on non-certified, short courses such as first aid, basic skills, or childcare – usually held at the Centres or in the locality. There has also been a smaller minority of vocational and educational courses, such as National Vocational Qualifications, run at local colleges. A further hard outcome is a small proportion of participants who had also secured volunteering placements (often in the Children’s Centre itself for those who were interested in future work in childcare or teaching). Many of these outcomes resulted from Personal Advisers removing practical barriers to work and training (costs of travel and clothing, childcare and information about funding/grant assistance for education and training courses). There was much less evidence of hard employment outcomes.

Three soft outcomes are reported as being most prevalent for participants: greater confidence; increased awareness of opportunities and options; access to job preparation skills and support. These are presented as being results that establish ‘distance travelled’ in moving towards employment. We discuss how such evidence on soft outcomes and distance travelled can be consistently integrated in a synthesis of the pilots’ employment outcomes in Chapter 7 and these findings reflect back on our earlier discussion of changing status out of work and employment outcomes in Chapter 3 (see Table 3.1).

Personal Advisers working in the pilots reported originally underestimating the difficult nature of participants’ employment needs and the level of inputs (time, resources and effort) that would be required to address their multiple barriers to work. Initial contacts with participants were often lengthy and complex and required improving referral skills to specialist support. One perceived successful outcome from early pilot evidence is the organisational and working practices that have developed to promote a more holistic intervention with a larger package of support.

Such developments had, in a few cases, helped to change negative stereotypes of Jobcentre Plus and of the stigma of receiving such services. This change in the perception of employment assistance is part of a wider raising of levels of awareness among Children’s Centre users of employment services more generally. Even those Centre users who had not taken up Personal Adviser provision were aware that it was there and were more willing to consider future engagement.

### **5.7 Summary**

The emerging evidence base demonstrates that the pilot services are well received by participants. Improved co-ordination of services and the more flexible and personalised approach of pilot services offered has helped engage low-income parents previously not engaged. In addition, services offered through Children’s Centres are well-received.

Across the interim evidence base soft outcomes are reported as being most prevalent for participants: greater confidence; increased awareness of opportunities and options; access to job preparation skills and support.

# 6 Synthesising evaluation evidence

This chapter explores some of the inherent analytical challenges to synthesising the evaluation evidence base of such a diverse set of policy interventions set out in Chapter 2. It sets out the differences in evaluation designs across the programme and the extent to which the evaluations will provide generalisable and replicable findings. For a summary of the evaluation methodology for each of the pilots, please go to Appendix A. Appendix B also provides links to the evaluation reports published so far, and Appendix C provides an overview of where the pilots are taking place.

## 6.1 Synthesising evaluation evidence across the Child Poverty Pilot Programme

The suite of Child Poverty Pilots is very diverse, in both intervention, design and evaluation. Pilot evaluations, such as the HM Revenue & Customs (HMRC)-run Childcare Affordability Pilots and Child Development Grant, have been set up with randomised control groups as part of quantitative evaluation. Others have evaluations that use comparison groups to act as controls for comparison with the treated groups in the pilots, such as the Work-focused Services pilots. The HMRC Outreach evidence will be primarily based on baseline survey profiles, as the evaluation was curtailed. Another group of pilots have evaluations that are based on capturing descriptive summaries of what has been put in place alongside quantitative measures of outcomes and qualitative evidence of participants' and providers' experiences. This group of pilots includes the Teenage Parent Housing Support and the Coordinated Services for Separating Parents pilots. The Local Authority Innovation Pilots have site specific evaluations that are being brought together in a synthesis report. Two pilots, Child Poverty Family Intervention Pilots and School Gates Employment, have no formal evaluation in place but will provide profiles based on management information and qualitative surveys of providers and participants. Evaluation is often a mix of quantitative and qualitative studies and an example of this is the HMRC-run Childcare Affordability Pilots, where considerable emphasis is placed on qualitative evidence alongside quantitative evaluation approaches.

This variation in evaluation approach reflects the fact that many pilots are exploratory in nature in order to sponsor local level innovation in approach to, and practice in, anti-child poverty programmes as part of local strategic development. A substantial proportion of the pilots are, thus, more like 'feasibility' projects rather than being policy pilots set up to rigorously evaluate a well-defined model of policy intervention. In some instances, such as the HMRC Childcare Affordability Pilots, they are testing a principle rather than piloting a proposed policy intervention. One of the resulting challenges of synthesis is to draw together a range of evaluation evidence in a rigorous way. Those pilot evaluations that we have identified as more like 'feasibility studies' will not provide evidence of impacts that meet the expectations of formal economic evaluation. However, the pilots with comparison controlled evaluations will potentially provide not just descriptive outcomes from the pilots but may also provide some estimates of an 'impact' (the net effect of the pilot programme against the comparison position of the programme not being in place). We adopt a systematic and rigorous approach to the evidence and apply the highest standards of economic evaluation and best practice where appropriate (for instance as outlined in Cabinet Office and HM Treasury approaches to programme evaluation (Cabinet Office, 2003 and HMT Green Book)).

There is no inherent problem to having a wide range in the quality of evidence when approaching meta-evaluation in a systematic way, and qualitative evidence alongside RCTs is increasingly considered in the practice of high quality systematic reviews, especially when considering ‘mixed methods’ research (Thomas, et al., 2004; Harden and Thomas, 2005) . However, it is important to be clear about how far evaluation evidence from the Child Poverty Pilots supports findings that are causative outcomes (effects) from some pilots and distinguish such evidence from more descriptive evidence on what other pilots find and report as outcomes. The final synthesis report will cover a wide range of all types of evidence and qualitative descriptive evidence will have a place in appreciation of the pilots alongside more quantitatively evaluated pilots.

The most important question in policy makers’ minds, is to find out ‘What works?’ To do so it is crucial to be able to place the evaluation evidence into consistent levels of findings that are both extremely useful, because they illustrate new programme approaches and give indications of its likely outcomes, and provide evaluation evidence where careful evaluation design has isolated the net effects that can be attributed to the pilot and that allow generalisation from such findings to be made.

Our approach is firstly to adopt a consistent set of terms in order to avoid confusion in the reporting of results. We use the term ‘results’ to include all forms of evaluation evidence that comes from a pilot. We use the term, ‘outcomes’ to mean an effect that is reported as resulting from a pilot. However, we only use the term ‘impact’ where such an outcome has been causally established as an effect of the programme (through comparison of treated and control groups – either randomly assigned or otherwise). We recognise that this terminology will differ from that of individual evaluation reports but require consistency when synthesising evidence. A consistent set of definitions is set out in the Glossary.

This approach means that the crucial overall question of what works from the Child Poverty Pilots can be set out to allow clear interpretation of various aspects of findings: to illustrate consistent differences in what works, to allow for assessment of what works best where it is possible, and to provide an evidence base that can support optimal investment of scarce public resources in the most efficient and effective way. Our aim is to optimise ‘evidence-based’ decisions on future programme design.

At this point it is crucial to caution readers that there are obstacles to consistent synthesis even across high quality pilot evaluations in similar institutions using similar methods. For instance, the baseline surveys undertaken in Children’s Centres as part of the Work-focused Services and HMRC Outreach pilots both look at participants at pilot and control Children’s Centres in matched areas within local authorities (LAs) (the same LAs in some instances), but have different sampling and methodological approaches.

Other potential problems with the evidence base concern both coverage and uncertainty. Interim evaluation reports are not comprehensively available across all pilots at this stage. Final coverage and quality of outcome information is still uncertain in the Local Authority Innovation pilots where evidence will be synthesised across very different LAs doing very different forms of activity. There is also uncertainty in how far overlapping pilots in the same local area will have cumulative or interacting effects, and this mainly affects pilots in Children’s Centres.

What is clear, however, is that two main streams of evidence will fall into the synthesising themes outlined in Chapter 7.

- **Analytical evidence** that uses a consistent approach to both quantitative and qualitative outcome and impact evidence to assess what can be generalised and replicated from the pilots.

- More descriptive evidence on innovative practice that can influence delivery of anti-child poverty programmes within or outside future replication of the pilots themselves.

Key to successful discussion of ‘what works’ will be careful and robust interpretation of both kinds of evidence. Even where net impacts are established in evaluations that have control and treatment groups, there will be the need for careful consideration of potential factors that influence results in unforeseen ways and of how results can be generalised to the wider population of parents and children.

At this interim stage, there is one cross-cutting area of evidence that benefits from some early work to assist in interpretation: the evaluation evidence from two of the pilots operating in Children’s Centres (Work-focused Services and Child Development Grants)<sup>9</sup>.

## 6.2 Interim consideration of evaluation issues for pilots based in Children’s Centres

There are three potential areas where we can anticipate the need for additional material to aid the interpretation of, and generalising from, pilots operating in Children’s Centres.

- How do existing profiles of users of Children’s Centres inform our interpretation of outcomes on users in the Pilot Centres?
- What particular characteristics in the early evidence suggest potential problems to applying findings from the pilot sites to the more general population of low income families with children?
- How can findings be interpreted and programmes replicated in the future as policy shifts to focus Sure Start Centres on the most disadvantaged families, when current findings are based on a more ‘universal’ profile?

### 6.2.1 What is the difference between users and non-users of Children’s Centres?

One key task in interpreting the evidence from services provided by Children’s Centres is that they reflect the circumstances of those who attend the Centre (see our earlier brief discussion in Chapter 3). Evidence from the Sure Start Children’s Centres Survey of Parents 2008 give an indication of overall differences in characteristics between users and non-users (TNS Social, 2009), but only report such characteristics through a simple cross-tabulation. This means that interpretation of these results is difficult as it is not possible to control for confounding factors when looking at the reasons why, for example, parents in rural areas or parents with higher education appear more likely to participate.

To prepare material to assist in the final synthesis report, we undertook an original piece of new analysis of the Children’s Centres Survey of Parents 2008 to explore the question of why take-up of Children’s Centre services differs across families. The analysis clarifies issues around what kinds of people use Children’s Centre services and thus identifies those who will be able to readily benefit from the pilots operating in them and how representative they are of the wider population who are eligible to use Children’s Centres.

Another way to say the same thing is to stress non-take up of services (a particular focus of the Child Development Grant) and to examine what kinds of people do not take-up the services of Children’s Centres, even though they are eligible to do so.

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<sup>9</sup> Other pilots have sites that operate in Children’s Centres, such as Worcester Teenage Parent Supported Housing Pilot and in some Local Authority Innovation Pilots.

We used multivariate regression modelling of participation in children centre activity reported in data from the Sure Start Children's Centres Survey of Parents 2008 (TNS Social 2009), and divided non-users of Children's Centres into two conceptually distinct groups:

- those who are not even aware of the presence of a Children's Centre in their area; and
- those who are aware of the Children's Centre but choose not to use its services.

Analysis of the survey data<sup>10</sup> clearly shows that this is an important distinction in practice, with the two groups of non-users exhibiting different characteristics. Hence, we analyse them separately.

### *Awareness of Children's Centres and uptake*

Our first piece of analysis was to compare the characteristics of the two groups of non-users of Children's Centres with those of the users. The results for the **non-users who are not aware of the presence of a Children's Centre in their area** are presented in Table 6. 1 with statistically significant coefficients shown in bold. We find that those respondents who are not aware of their local Children's Centre are significantly more likely (compared with users) to be: male; those expecting their first child, from an ethnic minority group; living in a workless household; and for their local Children's Centre to be located on a school site. The results also show that, compared with users of Children's Centres, those who are unaware of the Children's Centre in their area are significantly less likely to: be educated to degree level; live in a rural area; be poor; have three or more children; and for their local Children's Centre to have been developed from a Sure Start LP.

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<sup>10</sup> The dataset consists of interviews with 1,496 parents and carers eligible to use their local Children's Centres; these interviews took place between August and October 2008. The eligible population was defined as all those parents and carers with children under five years old, as well as parents expecting a baby, within the catchment areas of 120 selected Children's Centres. We have taken the raw data from this survey and carried out a range of analyses. Where we examine three groups amongst the sample (users of Children's Centres, people who are not aware of Children's Centre, and people who are aware of Children's Centre but do not use it) we have a dependent variable that takes on three different values and therefore estimate a 'multinomial logit model'; where we divide the data into only two groups (users and non-users of Children's Centre) we estimate a simple 'maximum likelihood logit model'. We have identified 16 characteristics that we include in our models as independent variables, to explore which factors are significantly associated with using Children's Centre services. In all cases we weight our results, using the weight variable provided in the dataset. This adjusts the achieved sample to make it representative of the eligible population on the basis of age of youngest child, type of area and age of respondent. The composition of the weighted sample is 45 per cent are users of a Children's Centre, 33 per cent are aware of the Children's Centre but do not use it, and 22 per cent are not aware of the Children's Centre.

**Table 6.1 Characteristics of those who are not aware of Children's Centres (CC)**

<b>Variable</b>		<b>Coefficient</b>	<b>Variable</b>		<b>Coefficient</b>
Gender of respondent	male	*0.421	Number of children	0	*1.099
				2	-0.261
				3+	**-0.409
Age of respondent	Under 20	-0.056	Social class	C2	-0.121
	20-24	-0.128		C1	0.070
	30-34	0.003		AB	-0.216
	35-39	0.359			
	40 plus	0.364			
Highest level of education achieved by respondent	None	0.026	Ethnicity	BME	***0.836
	GCSEs – lower grades	0.173	Person with long term illness in the household	Child	-0.109
	A level	-0.244		Adult	-0.027
	Degree	*-0.431	Household type	Lone parent	-0.159
				Other	0.136
Age of youngest child	Respondent pregnant	-0.013	Employment status of household	Workless	***0.697
	1	0.223			
	2	0.045	Languages spoken at home	Language other than English	-0.136
	3	-0.385			
	4	-0.084	Child with SEN in household	Yes	-0.432
			Children's Centre on site of previous Sure Start LP	Yes	*-0.259
			Children's Centre on school site	Yes	***0.418
Urban/rural location	Rural	***-1.525	Constant		**-0.712
Poverty status	Status missing	-0.202			
	Poor	***-0.835			

Notes: The coefficients indicate for the group who are not aware of Children's Centres the relative likelihood of having a particular characteristic, compared with the group who are aware and use Children's Centres.

\* significant at 90% level of confidence; \*\* significant at 95% level of confidence; \*\*\* significant at 99% level of confidence

### Aware non-users

We now move on to the second group of non-users – **those who are aware of the Children's Centre but do not use its services**. Table 6.2 presents our findings for this group of non-users. We find a similar significant relationship – of positive association with living in a workless household and having the local Children's Centre located on a school site, and significantly less chance of being highly educated, living in a rural area and being in a poor household. But there are some important differences between the two groups of non-users. Compared with the previous table, there are no significant findings in Table 6.2 for gender, number of children, being from a minority ethnic group, or having your local Children's Centre developed from a Sure Start LP. This indicates that these factors,

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whilst being important predictors of awareness of Children's Centres, do not play a significant role in distinguishing between those who choose to use the services of their local Children's Centre and those who do not.

Instead, Table 6.2 suggests there are some other indicators which significantly relate to the choice to use Children's Centre services. Those who choose not to use the Children's Centre are more likely to live in non-standard households, with other adults as well as parents/step parents. These additional adults may be able to provide childcare, which may explain why such households are less likely to use the local Children's Centre. Those who choose not to use Children's Centre services are less likely to have a child with special educational needs than Children's Centre users. It is perhaps not surprising that such people are more likely to take up the support of their local Children's Centre.

We have shown that there are some important differences between the two groups of non-users of Children's Centres, according to whether non-use results from lack of awareness or through 'choice'.

**Table 6.2 Characteristics of those who are aware of Children's Centres (CC) but do not use their services**

Variable	Coefficient	Variable	Coefficient
Gender of respondent	male 0.190	Number of children	0 0.440 2 0.208 3+ -0.050
Age of respondent	Under 20 0.414 20-24 -0.047 30-34 -0.078 35-39 -0.109 40 plus -0.123	Social class	C2 0.033 C1 0.003 AB -0.264
Highest level of education achieved by respondent	None 0.233 GCSEs – lower grades -0.223 A level **-0.450 Degree **-0.475	Ethnicity	BME -0.121
		Person with long term illness in the household	Child -0.066 Adult -0.240
		Household type	Lone parent -0.162 other **0.414
Age of youngest child	Respondent pregnant 0.079 1 -0.146 2 0.047 3 0.034 4 0.125	Employment status of household	Workless *0.362
		Languages spoken at home	Language other than English 0.028
		Child with SEN in household	Yes -0.396
		Children's Centre on site of previous Sure Start LP	Yes 0.054
		Children's Centre on school site	Yes *0.233
Urban/rural location	Rural ***-0.836	Constant	-0.110
Poverty status	Status missing 0.058 Poor **-0.415		

Notes: The coefficients indicate for the group who are not aware of Children's Centres the relative likelihood of having a particular characteristic, compared with the group who are aware and use Children's Centres.

\* significant at 90% level of confidence; \*\* significant at 95% level of confidence; \*\*\* significant at 99% level of confidence

### *Uptake and non-users*

We now bring these two groups of non-users together, so that we can compare the users of Children's Centres with all the non-users. The purpose of this exercise is to identify which groups are over – and under-represented amongst the users, compared with the rest of the eligible population.

Our findings are presented in Table 6.3. They indicate that targeting services through pilots in Children's Centres means they are more likely to reach more highly educated parents, those living in rural areas, the poor and those parents with a child who has special educational needs. The groups who are at risk from being excluded from provision through Children's Centres are male parents, those from a black or ethnic minority, people living in a workless household or those where the local Children's Centre is based on a school site.

If we compare our findings from a multivariate analysis of the Survey of Parents data with those from the cross-tabulations presented in the survey report, we find a broadly consistent picture. The Survey Report (TNS Social 2009) finds that users of Children's Centres are significantly more likely to be living in a rural area and highly educated, whereas those from a black or ethnic minority or where their Children's Centre is based on a school site are relatively less likely to use Children's Centre services. This is in accordance with our results. However, the results in the published Survey Report also show that users of Children's Centres are more likely to be from a higher social class, which is not suggested by our analysis. It is likely that social class and education level are highly correlated, so given that our analysis examines multiple factors simultaneously, our results may more accurately identify which specific characteristics are significant.

Our findings highlight significant differences between users and non-users that are not suggested by the results presented in the report. These are the associations with living in a poor household, being a male parent, living in a workless household and having a child with special education needs. In the case of gender and children with special educational needs, the Survey of Parents report did not examine difference in use according to these characteristics.

**Table 6.3 Characteristics of those who use Children's Centres**

<b>Variable</b>		<b>Coefficient</b>	<b>Variable</b>		<b>Coefficient</b>
Gender of respondent	male	*-0.291	Number of children	0	-0.705
				2	-0.028
				3+	0.194
Age of respondent	Under 20	-0.262	Social class	C2	0.024
	20-24	0.073		C1	-0.023
	30-34	0.048		AB	0.248
	35-39	-0.080			
	40 plus	-0.077			
Highest level of education achieved by respondent	None	0.139	Ethnicity	BME	*-0.292
	GCSEs – lower grades	0.084		Person with long term illness in the household	Child 0.082
	A level	**0.373		Adult 0.153	
	Degree	**0.469			
			Household type	Lone parent 0.164	
				other -0.298	
Age of youngest child	Respondent pregnant	-0.043	Employment status of household	Workless **-0.495	
	1	-0.008			
	2	-0.042			
	3	0.120	Languages spoken at home	Language other than English 0.041	
	4	-0.045			
			Child with SEN in household	Yes *0.410	
			Children's Centre on site of previous Sure Start LP	Yes 0.063	
			Children's Centre on school site	Yes ***-0.306	
Urban/rural location	Rural	***1.048	Constant		-0.352
Poverty status	Status missing	0.044			
	Poor	***0.578			

Notes: The coefficients indicate for the group who are not aware of Children's Centres the relative likelihood of having a particular characteristic, compared with the group who are aware and use Children's Centres.<sup>11</sup>

- 11 Note on controls: for all three tables (6.1, 6.2 and 6.3), the reference category for each set of dummy variables is as follows:  
 Gender of respondent: female; age of respondent: 25-29; highest level of education achieved: GCSEs – higher grades; age of youngest child: 0; urban/rural location: urban; poverty status: Non poor; number of children: 1; social class: DE; ethnicity: white; person with long-term illness in the household: none; household type: married/cohabiting couple with or without children; employment status of household: at least one person in paid work; languages at home: English only; child with SEN in the household: No; Children's Centre on site of previous Sure Start LP: No; Children's Centre on school site: No.

\* significant at 90% level of confidence; \*\* significant at 95% level of confidence; \*\*\* significant at 99% level of confidence

Drawing firm conclusions or clear evaluation messages from these results at this interim stage of synthesis is not wise. However, once final results from the pilot evaluations and their surveys are available these results will enable us to more clearly interpret findings.

### **6.2.1 What particular characteristics in the early evidence suggest potential problems to apply findings from the pilot sites to the more general population of poor children?**

Our earlier discussion of interim findings on the characteristics of participants of the Work-focused Services Pilot in Chapter 3 suggest that there are lower levels of take-up of Child Tax Credit (CTC) than would be expected for a similar profile of low income families from national take-up estimates (HMRC, 2010). National take-up profiles for low income groups, when matched to the employment status, earnings of those in work, and age profile of children of the respondents to the baseline surveys, would suggest take-up levels in the 90 per cent and above range for CTC<sup>12</sup> rather than 65-70 per cent found in the baseline survey.

What explains any difference between national profiles of tax credit take-up and that found in the baseline survey of Work Focused Interviews? The earlier evidence on those who use Children's Centres indicates that there are many instances where the characteristics of those in the pilots are taking up services, for instance all the proxies for low income such as education level and poor. However, there are other factors that explain non-participation in Children's Centres that may also be related to non-take-up of tax credits, such as lower participation rates for workless, urban and black and ethnic minority parents (see Table 6.3). However, it is important to bear in mind that entitlement to tax credits surveys depends on other factors as well as income levels.

The baseline surveys report crude take-up rates that show the percentage of respondents who report receiving tax credits and some of those who report non-receipt who may not in fact be entitled to claim<sup>13</sup>. A potential explanation of low take-up rates may be that a higher percentage of Children's Centre participants in the pilot areas are not entitled to claim tax credits for reasons other than income.

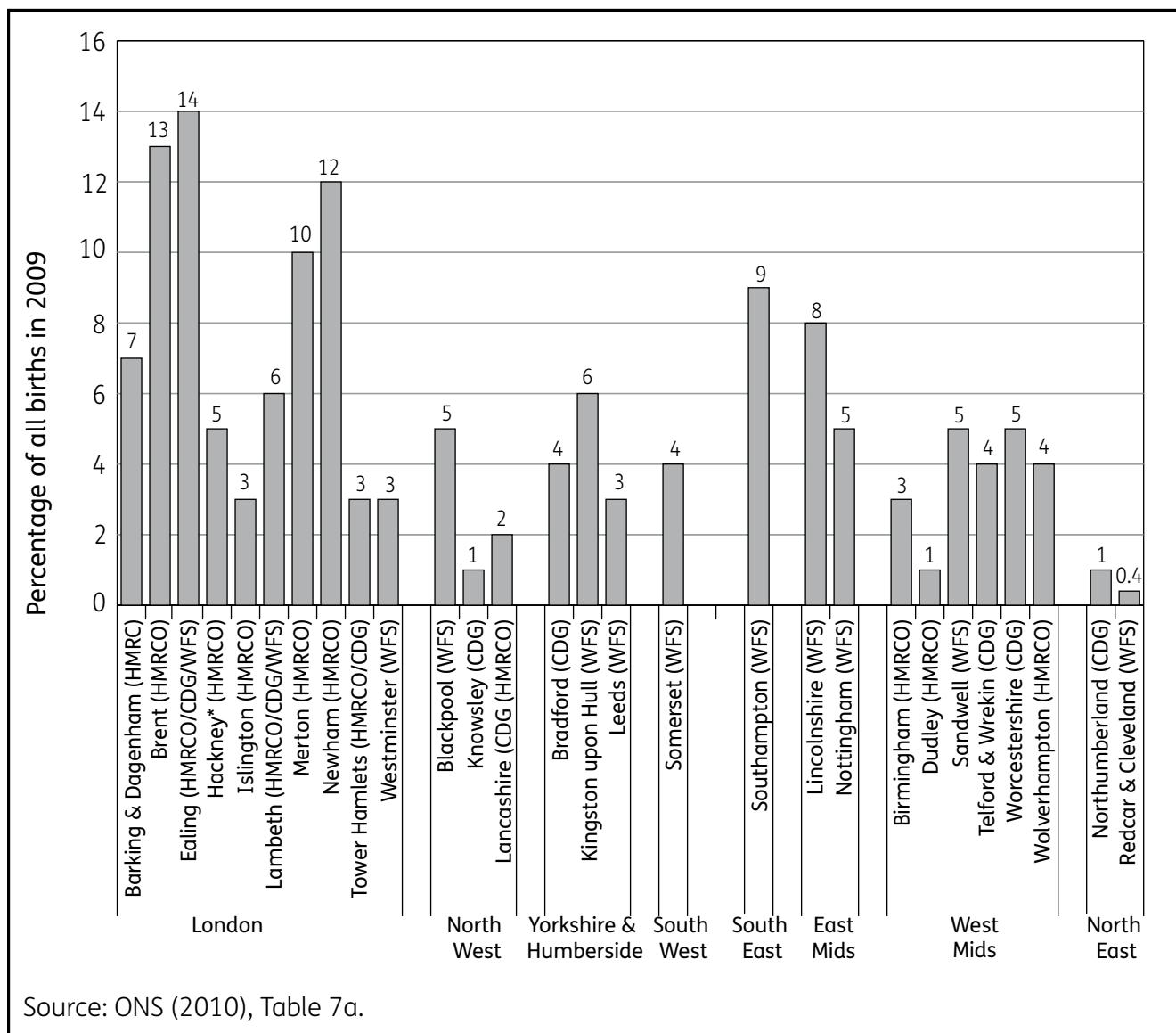
This potential explanation is supported by the earlier profile of the population characteristics in the pilot areas that showed very high proportions of births in 2009 to foreign (non-UK born) mothers in those areas (see Figure 3.1 above). The length and status of 'residence' in the UK is a condition of entitlement on a number of grounds. We can further explore this potential explanation by looking at the sub-group of those births that can be reasonably apportioned to those who are most likely to fall outside of tax credit entitlement on the grounds of shorter-term residence in the UK – i.e. the most recent migrants. Figure 6.1 shows the births to mothers born in the 'new EU' countries<sup>14</sup> of Central and Eastern Europe, who will, in the main, have migrated since 2004. Figure 6.1 shows that some of the participating London authorities have 10 per cent or over of births in 2009 to 'new EU' born mothers: Ealing, 14 per cent; Brent, 13 per cent, Newham, 12 per cent and Merton, 10 per cent. Such

<sup>12</sup> All references to 'take-up' refer to 'caseload' rather than 'expenditure' take-up as outlined in HMRC 2010. Comparative national profiles for take-up can be seen in Tables 3, 4 and 8 of HMRC 2010 for 2008/09.

<sup>13</sup> Net take-up rates are calculated as a percentage of those entitled to claim who make a claim (on income and other grounds) rather than of the whole population.

<sup>14</sup> Bulgaria, Cyprus, Czech Republic, Estonia, Hungary, Latvia, Lithuania, Malta, Poland, Romania, Slovakia, Slovenia.

high proportions may well lead to a very different pattern of entitlement to tax credits (and other benefits) than for longer-term migrants and to UK-born mothers.



Source: ONS (2010), Table 7a.

**Figure 6.1 Births to mothers born in new EU countries in 2009 in local authorities where Child Poverty Pilots are situated in Children's Centres**

Figure 6.1 also shows some areas outside of London where a significant proportion of births are to 'new EU'-born mothers – such as Southampton (nine per cent) and Lincolnshire (eight per cent). On the other hand, Figure 6.1 also shows the very low proportions of births to these recent migrants in other areas that are economically less attractive to in-migration for work such as Knowsley (one per cent), Dudley (one per cent) and the two authorities in the North East with one per cent or under.

The importance of migrant profiles within Children's Centres operating pilots is supported by interim evidence from the Child Development Grant evaluation where particular areas have identified sub-groups of families to support. These include refugees and asylum seekers, Polish speakers (in Lambeth) as well as longer-standing Bangladeshi migrant groups (York Consulting, 2010). The size of such groups in some localities as well as the variation across localities suggests a potential

significant role for migrant status affecting the outcomes of the pilots as well as the interpretation of their outcomes and in generalising from them. The employment outcomes from pilots will be affected by the differences in the characteristics of recent migrants from others for two potentially very significant reasons. First, restricted entitlement to benefits and tax credits will mean very different financial incentives to work than those that exist for those who have full entitlement to such help both out of work and in work. Second, while there is very low-skilled in-migration for agricultural work (for instance in Lincolnshire) a large proportion of recent ‘new EU’ migrants to London and other growth areas have higher skills and education levels than their occupations in the UK labour market would warrant (a skills mismatch) and are working in the service and manufacturing sectors in low or semi-skilled jobs (Coleman 2010). Such differences across Pilot participants are not random and may be unobserved and careful consideration of evaluation results will have to consider these factors.

More generally, given that the main division into control and treatment groups across the pilots in Children’s Centres in these LAs is at the Centre level, and are matched by area level characteristics in the main, there may be the need to carefully consider how migrant status could affect outcomes. The clustering of migrant populations in and across deprived areas may potentially affect the characteristics of treatment and control groups in some LAs (not in the North East or other low migrant population areas) and a careful consideration of the need for controls on the basis of migrant status may be needed at a later stage when considering evaluation evidence. There is thus some uncertainty at the interim stage of the potential effect of migrant populations on pilot evaluations. Reports that discuss survey non-response for baseline surveys provide some insights but a fuller appraisal will have to await final publication of evaluation reports in spring 2011.

The final synthesis report will discuss this issue in more detail and will use bespoke profiles of the LA areas by ONS that look at five years of birth data (to capture the 0-5 year age group associated with Children’s Centre participation) and local Index of Multiple Deprivation scores at both the participating LA and England level.

### **6.2.3 How can pilot findings be interpreted and programmes replicated to future more restrictive ‘pro-poor’ targeting of Children’s Centres services?**

The future of Children’s Centres is likely to be different from that envisaged in 2008. The Coalition Government set out its approach to move ‘*Sure Start back to its original purpose of early intervention, increase its focus on the neediest families, and better involve organisations with a track record of supporting families*’. Early Intervention Grant will provide LAs’ funds for early intervention and preventative services, supporting a focus on early intervention in the early years. Sure Start Children’s Centres will remain ‘accessible to all’ but their role in identifying and supporting families in greatest need will be emphasised. New investment from Department of Health budgets will provide 4,200 extra health visitors, working alongside outreach and family support workers. Additionally, either through Children’s Centres or other providers, there will be an expansion to provide free early education for disadvantaged two-year olds from 2013. In short, Children’s Centres as providers of universal services will continue but there is likely to be a resulting change in the profile of users – for instance, charges for some services may be raised for higher income users at the same time as supporting improved access to disadvantaged children.

Improving access and services has been part of many Pilot interventions across many of the Local Authority Innovation Pilots, the Child Development Grant as well as in outreach work as part of Work-focused Services. However, emphasis on changing the participation profile towards those with higher risk of child poverty will differ across the participating Children’s Centres. Local differences in catchment populations, in governance and in LA strategic policy will result in a range of outcomes

in terms of any rebalancing of services to directly approach poor children and contemporary child poverty.

To interpret how the findings of the Pilots can relate to future profiles of Children's Centre users will need careful contextualising of results and an clear explanation of user-profiles alongside outcomes. We will pursue this point further in the final synthesis report.

## 6.3      Summary

This brief overview demonstrates three early crucial synthesis findings that will be essential for the development of learning from the pilots:

First, that the volume of activity is high and extremely varied. There are far more interventions being piloted than the nine headline pilots. There are, for instance, five distinct sub-pilots within the Childcare Affordability pilots, variations of treatment within the Child Development Grant pilot, and local authority variation in approach in Teenage Parents Supported Housing, Coordinated Support for Separating Parent and Child Poverty Family Intervention pilots. Put these variants and sub-pilots all together across the nine headline pilots and you have an extremely large and complex exercise in policy trials.

Second, there is recognition of the limits of synthesis. Making inferences from the large variation design of pilots and the range of evaluation approaches necessitates an approach that can stand back from the detail and extract some synthesising themes around core issues of child poverty and policy development. Such themes have been discussed in Chapters 3 to 5, but there is a clear need to recognise that most of the evidence (to be) reported from a significant proportion of the pilots can only be, descriptively summarised rather than consistently synthesised.

Third, even in the more systematic pilot evaluations that involve treatment and control sites/populations there is also a considerable amount of analytical work that will be necessary to generalise from their findings and to apply the learning of what works to future policies on child poverty.

# 7 Content of the final synthesis report

The final report will bring together the outcome evidence on parents and children under the four building blocks of child poverty strategic policy. In addition, there will be a separate chapter considering various approaches to cost effectiveness and costs and benefits.

## 7.1 Child Poverty Building Blocks

### 7.1.1 Employment and skills

Employment and skills will bring together evidence on findings from the pilots on improving job entry, retention and progress in work alongside improved skills. ‘Hard’ outcomes in terms of job entry, training and earnings and retention can be synthesised into a set of roughly consistent measures.

However, when it comes to ‘soft outcomes’ there is a more significant problem of consistency and a need for a separate assessment of the evidence base in a new ‘themed synthesis’ on **distance travelled and distance from the labour market**.

#### *‘Distance Travelled and Distance from Labour Market’ Synthesis theme*

This need arises because of a potential problem in interpreting evidence across the Work-focused Services in Children’s Centres (WFSCC), School Gates Employment Support (SGES) and the Local Authority Innovation (LAIP) pilots on soft employment gains short of job entry. Differences in approach stem from differences in target groups – where LAs and pilots may be delivering services to parents who are not core customers of Jobcentre Plus (because they or their partners do not claim core DWP benefits) – or from differences in approach because the pilots, LAs and local partners primarily dealing with ‘inactive parents’ not mainstream unemployed or other lone parent of ESA ‘jobseekers’. Many of the Local Authority Innovation pilots see themselves as providing services to groups that are not only different from Jobcentre Plus customers but are reported as averse to Jobcentre Plus approach. Some bridging evidence will be available between the SGES and WFSCC pilots due to there being a common evaluator for both that has taken on this task within the SGES study. However, there will remain problems in interpreting evidence across different forms: from narratives based on ‘personal journeys’ towards employment (SGES) to the qualitative measurement using commercial tools designed to capture subjective progress in target achievement (used in some Local Authority Innovation pilots) and to Jobcentre Plus customer profiling of uptake of services used in WFSCC.

The themed synthesis on ‘distance travelled’ will place the evidence from the pilots against the approaches in the applied literature on the subject of employment and training programmes to improve employability for low skilled inactive parents. This will enable the evidence to be assessed in context to other findings (for instance from European Social Fund programmes in the UK and from international literature on programmes for ‘women returners’ – who represent the majority of those treated by the pilots). The underlying literature ranges from theoretically based applied approaches based in occupational psychology (James, 2002), labour economics (Blau and Kahn,

1994, and others) and sociology (Tomlinson, Oldham and Purdham, 2008), and recent overviews of methodological approaches in the UK (Lloyd and O'Sullivan 2003 and Dewson *et al.*, 2000). This synthesis module will harmonise terminological differences as far as possible as well as clearly showing what 'soft outcomes' measures have been collected and assess their comparability and quality. This synthesis module will be in a position to highlight best practice across the pilots and help disseminate such practice for adoption in development of the child poverty strategy.

### **7.1.2 Financial support**

Financial support will collect together all outcomes that relate to monetary and other gains from the pilots, such as debt reduction, improvements in benefit/tax credit take-up, financial literacy as well as improvements to income and assets.

#### *Child poverty effects*

Child poverty effects will be a new and original profiling across all of the pilots to show their potential to make an impact on the overall child poverty rates (as defined in the Child Poverty Act target measures). In the absence of comprehensive data on income changes from the pilot evaluations, this synthesis will mostly be descriptive and illustrative. We will place each pilot's activity and participation profile against existing profiles of child poverty (DWP 2010). Evidence on the effects of the pilots will then be used to show illustrative potential impacts on poverty. The approach will not only look at the numbers of poor, and thus the overall potential population affected if the pilot was expanded and introduced across the country, but also look at 'distance' from poverty of the participant profiles and hence the potential pathway out of poverty. This means new analytical work in terms of the depth of poverty, the poverty gaps (the difference between income and the poverty line), and how soon those in long-term or persistent poverty can cross the poverty line.

### **7.1.3 Families and life chances**

Families and life chances will synthesise evidence from the pilots on outcomes from the pilots that show improved life changes for children. The evidence will also be discussed alongside the findings by *The Review of Poverty and Life Chances* published in December 2010.

### **7.1.4 Place and delivery**

Place and delivery will synthesise evidence from the pilots on outcomes that illustrate improved housing conditions and social capital and capacity building in local areas. There is no additional synthesis theme planned for this area of pilot evidence.

#### *New ways of working*

The range of approaches to Service Integration and Partnership Working explored in the pilots is considerable. We will develop a theme of synthesis that brings these new operational approaches together and appraises their efficiency and effectiveness.

This will require the development of typologies of partnership working. There is already some evidence on typologies in the early findings of pilots. For example, the Coordinated Support for Separating Parents pilot illustrates the differences of integration approaches based on a new service hub, as against expanding the service levels of existing agencies, providing a useful distinction that may well apply to other pilots as process evaluation material becomes available (Tavistock Institute *et al.*, 2010). The Teenage Parent Supported Housing pilot illustrates differences in integrating tiers of local government and in mixes of service providers and provision. However, there are wider underlying issues of how best to improve the efficiency and effectiveness of service delivery through partnership working.

The key task of this synthesis area will be to bring together and appraise evidence from the pilots on approaches taken to partnership working and service integration, and develop a typology in order to distinguish forms of partnership working, such as, for instance, ‘co-location’ (the ‘one-stop’ approach), ‘intensive brokering’ (as in Child Poverty Family Intervention, and other key-worker approaches where a single worker brings together packages of support). Such evidence will then be considered in terms of wider structural changes in public service delivery from evidence from the Total Place and similar recent initiatives.

Additional focus will be given within this module to:

- partnerships involving third sector organisations;
- procedural and protocol development, such as the use of Common Assessment Frameworks.

## 7.2 Costs and cost-effectiveness

This module will try and generate a set of measures that can be developed into a consistent set of indicators of cost-effectiveness. We will use existing information on budgets and activity to estimate ‘unit cost’ data if none are available from evaluation evidence. The main difficulty on assessing cost effectiveness will lie around the absence of any net cost data linked to the difference that pilots make. However, there is a range of data on the costs of alternative mainstream programmes that can be used as comparisons. Some pilots like the Child Poverty Family Intervention already have ‘costing’ models in the Family Savings Calculator, which identify the underlying programme costs of mainstream services and can be explored and used where appropriate. It is likely that there will be a considerable degree of approximation and uncertainty in results. Additionally, as many of the pilots are involved in treatments that provide potential long-term benefits that will not be captured in the timeframe of the pilots, we will use the best evidence from public policy and social policy literature to give ranges of estimates of what long-term savings could be where appropriate.

# Appendix A

## Summary of pilot evaluation methodology

### A.1 Childcare Affordability 2009 – HM Revenue and Customs

#### **Background**

This pilot tests three changes to Working Tax Credit<sup>15</sup> (WTC) subsidies for childcare – for more information see Chapter 2. The pilot looks at the affect of changes to the amount paid and the way it is administered to lower income families

#### **Evaluation aims and methodology**

The evaluation has a quantitative and qualitative strand, and includes:

- in-house analysis of administrative data and pilot management information;
- qualitative research with take-up and non-take-up families from all pilots.

#### **100 per cent pilot**

There are two stages of interviews with take-up families:

- one during the pilot between Jan and March 2010;
  - a second round post-pilot with the same families – autumn 2010
- and one interview with the most engaged non-take-up families.

#### **Disabled Child pilot**

There is one stage of interviews with take-up and non-take-up families in autumn 2010.

#### **Actual Cost pilot**

There are two cohorts. In cohort 1 there are two stages of interviews with take-up families (one during the pilot between January and March 2010; a second post-pilot with the same families – autumn 2010)

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<sup>15</sup> WTC is paid to people in work (for 16 hours a week or more if they are parents). WTC includes a childcare element which can help towards the actual costs of approved or registered childcare. There are two maximum figures used to calculate the childcare element of WTC: a maximum percentage contribution set normally at 80 per cent or a maximum weekly cap on childcare costs which is £175 per week for one child and £300 for two or more children. Therefore maximum help from WTC is £140 per week (£175\*0.8) for one child and £240 per week (£300\*0.8) for two or more children. Note that the Coalition Government has plans to change the welfare system by introducing Universal Credits. More information can be found here: <http://www.dwp.gov.uk/policy/welfare-reform/legislation-and-key-documents/universal-credit/>

In cohort 2, there is 1 stage of interviews with non-take-up families (autumn 2010)

- Cost benefit analysis

Cost benefit analysis will be of the Actual Costs pilots.

The 100 per cent and Disabled Child pilots will capture differences between treatment and control in job entry rates and also some information on the sustained nature of employment. The impact on childcare use will be assessed in its own right as well as in a factor in employment impacts. Most quantitative impacts will use HMRC administrative data, alongside management information records from the DfE/HMRC advice lines. Qualitative impacts will be measured through in-depth interviews, for instance gathering data on experiences and behaviour around the time of the pilot offer, and to pick up on retrospective measures of changes to job search behaviour.

The Actual Cost pilot differs from the other two pilots as it is not aiming to influence people's incentives to work. Instead, it tests a change to the administration of tax credits and how far such changes affect family budgeting as a result of reporting actual monthly childcare costs.

Another strand of evaluation captures the outcomes of changing operational practices in tax credits – does the need for more regular and detailed interaction with HMRC on changing childcare costs improve the tax credit claiming process.

### **Link(s) to evaluation reports**

No evaluation reports have been published yet, reports are expected in late spring 2011.

## A.2 Childcare Affordability 2009 – London Development Agency

### **Background**

This separate sub-pilot under the overall Childcare Affordability 2009 provides targeted funding to test the effectiveness of two distinct approaches on non-working parents:

- a supply-side subsidy; the 'Subsidised Offer' delivers more flexible and affordable childcare on demand; and
- the 'Parental Support Offer' provides accessible pathways to employment, through the provision of 'end to end' personalised support.

Both approaches combine help in taking up formal childcare with job-entry assistance.

### **Evaluation aims and methodology**

The evaluation aims to measure the impact of the pilot on take-up of childcare and sustainable employment amongst the target groups; to measure the effectiveness of the processes for establishing and implementing the CAP09 pilots and the intermediate outcomes achieved for low income families; and, to measure the strategic added value (SAV) of the CAP09 programme, in achieving the intended leverage over local partners, resources and infrastructure.

In more detail:

- **Subsidised Offer** that will operate a supply-side outcome-based funding model for childcare providers to give employment services to out of work families. The outcome funding model will provide 20 per cent of grant paid upfront and the remaining 80 per cent once the parent has moved into work. Compared to the previous CAP05 pilot, the funding elements have been made more generous: from the CAP05 maximum of £205 per week to £215, raising the maximum contribution from £30 to £40 per week. This pilot will target out-of-work lone parents, couples where both partners are out-of-work and single earner couples, all of whom have a household income of up to £20,000.
- **Parental Support Offer** in which 500 families across five London boroughs will be provided with up to 12 months of hand-holding support in the form of advice and guidance on Working Tax Credit to encourage parents to move into work.

The LDA guidance requires that all participants must be parents; age over 16 years and under 65; economically inactive for the past 12 months; with a household income of < £20,000 from the previous year, and reside within the borough where the pilot is funded. Potential eligible participants meeting these criteria include: out-of-work lone parents, couples where both partners are out of work, and single earner couples where there is a potential second earner.

No evaluation reports have been published yet.

### A.3 Child Development Grant

#### **Background**

This pilot provides cash payments for each family that takes up and completes a programme of activity at Children's Centres based around an agreed parental 'action plan'. The pilot addresses the importance to child development of high quality service provision in the 0-3 age group from improving health and emotional and cognitive development of children alongside supporting parents. Increasing uptake of Children's Centre provision will come from two groups: those who would never previously have attended and also those who would otherwise have attended at a later point of time.

#### **Evaluation aims and methodology**

The evaluation is designed to be based on comparison of control and treatment sites situated in each local authority, with comparisons of impacts based on treatment differences (four week compared to 12 week treatments) as well as comparison between treated and two control groups – one that are given action plans but no grant and a second control group of normal attendees who receive neither. However, random assignment between control and treatment groups at Children's Centre level and within LAs has been difficult to implement and the subject of local controversy in some areas. The catchment areas for Children's Centres are not fixed at the local level and predictable difficulties in maintaining clear isolation of control and treatment sites and groups of parents will be considerable.

There are important points to consider on the 'outcomes' from this pilot. The main outcome measured in the evaluation of the pilot is 'participation' in Children's Centres. Other outcomes that result from the intervention such as improvements in children's or parents' circumstances are less considered. There is a sensible presumption that such participation will be beneficial to the parents and their children. However, it is important to future interpretation of evaluation results that the gains from participation will predictably be different from those found for existing users of Children's

Centres. This is because the characteristics of those that are incentivised to attend will be different when compared to those that attend under normal circumstances and the level of gains between these two types of users of Centres may differ. Evaluation of similar ‘Conditional Cash Transfer’ programmes internationally has shown that there is a problem of uncertainty on the ‘outcomes’ from incentivised participation, where for instance, improved school attendance has not resulted in improved educational outcomes (Fizbein and Schady, 2009). In addition to these problems of unseen ‘selection’ and uncertain ‘outcomes’ beyond participation, there is also uncertainty about any projected longer-term gains from short to medium term (four week or 12 week programmes) engagement at Children’s Centres as provided by the pilot. Current evidence of Sure Start effects is based on longer-term assumptions of participation. Overall, the effects of the pilot on child poverty can be interpreted as concentrating on improving parental engagement in services, improving elements of human capital in terms of parenting, health and education awareness and other ‘softer’ outcomes in attitudes and reduced isolation. There will also be longer-term potential gains to child development. However, they will not be captured as part of the evaluation.

Evaluation of the pilot will be limited by its early closure

### **Link(s) to evaluation reports**

York Consulting *Evaluation of the Child Development Grant Pilot Interim Report* (unpublished). However, findings will be included in the final report due in spring 2011.

## A.4 Child Poverty Family Intervention

### **Background**

This pilot is trialling an extension to the Anti-Social Behaviour and Youth Offending Family interventions. It focuses on supporting low-income families with multiple problems. As with all strands of Family Intervention it is based on long-term intensive casework interventions from keyworkers who have very low caseloads (around five families).

### **Evaluation aims and methodology**

The evaluation aims to capture whether Family Intervention is successful for low-income families with multiple problems, and how it compares to the other strands. There is no formal distinct evaluation of Child Poverty Family Intervention pilot but an ongoing monitoring of cases and outcomes that will allow comparison of before and after positions.

This information is collected and input by family intervention staff and provides quantitative evidence about the type of families referred to a family intervention, their circumstances and risk factors when a support plan is put in place, how they are progressing at regular formal reviews, their outcomes at the point a family exits from a family intervention and whether these outcomes are sustained nine to 14 months after they leave the intervention.

Key workers, managers or parenting commissioners also use a Family Savings Calculator, a tool to help LAs who are managing intensive support services for families with multiple problems, to quantify the cost benefits saved by services and agencies from a family at risk undergoing and successfully completing an intensive intervention. The aim is to give a broad estimate based upon a list of specified unit costs. For more information see <https://registration.livegroup.co.uk/fip/Default.aspx>

This tool is based upon the reduction in risk analysis and estimate outcome costs of the Think Family Toolkit (2009). These costs have been taken from the research paper *Family Intervention Projects:*

Assessing potential cost-effectiveness, Parrott, S. and Godfrey, C., Department of Health Sciences, Alcuin College, University of York (2008). The reduction in levels of risk has been determined from data collected by the National Centre for Social Research (NatCen). The percentage in reduction of risk has been calculated from looking at the percentage of families engaged in a particular negative outcome at the start of the intervention and then at the end of the intervention.

For the most developed strand of Family Intervention, Anti-Social Behaviour (ASB), there was an observed drop of 64 per cent in families with ASB issues between the start and end of the intervention. Note that care needs to be taken when interpreting the savings/cost avoidance identified. Data on the Child Poverty strand will be reported on in the final synthesis.

### A.5 Coordinated Services for Separating Parents

#### **Background**

This pilot is helping to test in more detail a range of approaches in order that:

- access to financial, practical, legal and emotional help is speeded up;
- parental conflict is minimised; and
- the negative impact of separation on children's outcomes is minimised.

#### **Evaluation aims and methodology**

The aims of the evaluation are to examine models of local partnerships and delivery of services with different lead organisations. The pilot evaluation consists of a:

- before and after survey of participating parents together;
- process evaluation of the partnerships put in place to run co-ordinated services;
- cost effectiveness analysis of the intervention and services, which could be disseminated and replicated at a local level.

Specific aims are to gather evidence on how effectively the pilot projects have:

- reduced conflict between parents;
- enabled families to avoid significant reductions in income which impact negatively on their quality of life;
- reduced the negative impact on children and their progress to child outcomes, e.g. enable children to maintain or improve their levels of educational performance;
- enabled children and families to maintain or improve their emotional health and wellbeing;
- enabled the most disadvantaged parents (those in, or at greatest risk of living in poverty); to access the help/services they need at the time they are needed.

## A.6 HMRC Outreach in Children's Centres

### **Background**

In 2009 HMRC committed to having a presence of tax credit advisers in 100 Children's Centres across London (40), Lancashire (25) and West Midlands (35). This initiative aimed to increase the take up of tax credits for those eligible, but not claiming, to improve existing customers' understanding of the tax credit system to raise awareness of their responsibilities and reduce errors and therefore overpayments.

### **Evaluation aims and methodology**

The research included a baseline survey conducted in Children's Centres carried out before the introduction of the HMRC Outreach initiative, where interviewers spoke to visitors of 86 children centres (43 pilot and 43 control). However, the follow up survey was not conducted due to a change in Government priorities in May 2010.

There is also a qualitative strand of the research, Children's Centres users who were actual or potential tax credit customers, and of HMRC advisers and Children's Centre staff were included. A further element of quantitative evidence using tax credit records for those participants who agree for their records to be used for evaluation<sup>16</sup> was planned but not conducted when the research was curtailed.

Both Children's Centres report were published late February 2011, <http://www.hmrc.gov.uk/research/reports-111-120.htm>. However, publication was too late for the content to be considered in this report.

Note that although outside the scope of this pilot. It is worth considering that there are secondary effects to consider. Improving customer information, awareness and reducing error and overpayments can impact on finances and living standards. Indeed, this is what tax credits are designed to do: to improve employment incentives and thus to encourage employment as well as improve living standards. Second order effects of HMRC Outreach can be expected in employment behaviour of participants.

The evidence from earlier WFTC evaluation and from international literature on similar in-work benefits<sup>17</sup> would clearly lead us to anticipate employment outcomes of two types: 1) decisions to work or not – the so called 'extensive employment margin'; and 2) decisions on the amount of work to do – the so-called 'intensive margins' of work.

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<sup>16</sup> See Item 7. Minutes of the Tax Credits Consultation Group (TCCG) meeting 16 September 2009.

<sup>17</sup> See Blundell and Walker (2001) and the reviews of evidence the feature 'In-work benefit reform in a cross-national perspective' issue 593 of Vol 119 of the *Economic Journal* 2009 with an overview by Brewer, Francesconi, Gregg and Grogger.

## A.7 Local Authority Innovation Pilots

### **Background**

The suite of ten locally designed and implemented programmes for these pilots were selected for their locally appropriate and innovative approach and ability to reduce local child poverty levels.

### **Evaluation aims and methodology**

The pilot was established to trial locally designed and innovative approaches to address one or more of the following:

- increasing parental employment;
- raising family income, including through the improved take-up of tax credits and benefit, including LA administered benefits
- narrowing the outcome gap between children in low income families and their peers;
- promoting economic regeneration focused on families and tackling deprivation at a community wide level; and
- building the capacity of communities to tackle poverty.

The ten pilots are very diverse and present a wide variety of approaches to reducing child poverty. More detailed description at the LAIP level of the pilots can be found in the two existing evaluation reports published to date (GHK, 2010a, 2010b) and in the summary provided as Appendix B.

There is no single policy logic across the ten pilots other than that they have been developed to be locally appropriate, i.e. to meet the local context. The majority are not seeking to make significant gains in employment for participants and instead rely on investment human and social capital to make progress towards employment, the outcomes are likely to be more towards gains in employability, in reduced material deprivation and increased engagement in local services. The evaluation includes ten separate pilot level evaluations led by a core evaluator who produces a synthesis evaluation of the whole suite. The components of evaluation are overarching and rely on descriptive ‘Local Area Mapping’ of underlying social and economic context for the authorities as well as analysis of monitoring and outcome data from each LA that is stated as *‘including user characteristics, outputs and outcomes’* (GHK 2010a p.1). Additionally, qualitative analysis will be done of partnership working and process outcomes. Consistent cost effectiveness analysis will also be explored.

## A.8 School Gates Employment Support

### **Background**

This initiative was not one of the original eight formal ‘Child Poverty Pilots’ set up with funding from the Budget 2008. Ten million pounds overall has been split between the 25 areas in the UK with the highest levels of families with children dependent on out of work benefits. The initiative runs from October 2009 to the end of March 2011 in 25 areas of across England, Wales and Scotland. The initiative takes a different form in Scotland and Wales, where the devolved administrations will communicate separately to local partners in their jurisdictions. We focus on the English pilots in 22 LAs across six regions. The initiative was introduced in response to the post-2008 economic downturn in order to increase the amount of employment and enterprise support that parents receive in and around their children’s schools.

## Evaluation aims and methodology

The main target groups for the intervention are parents in low-income families who are not in work. Specifically, this includes both lone parent and non-working partners (usually mothers) in couples. The focus on these so-called second earners is part of the *raison d'être* of the initiative to reach parents who are not actively seeking skills or employment support, many of whom are not benefit claimants or the partners of benefit claimants and may not be comfortable approaching Jobcentre Plus. Such an approach ensures that the initiative is not duplicating coverage of employment services by Jobcentre Plus. The aims are to promote increased parental employment – and this could be part-time, full-time or self-employment that best matches parental suitability. It is accepted that many participating parents may not enter work within the lifetime of the initiative, but the support provided is aimed to assist their employability and to help them move 'closer to the labour market'.

The support offered by SGES is described as<sup>18</sup>:

- delivering a co-ordinated, tailored package of information and support to parents in and around their children's schools;
- promoting greater awareness among parents of the support that is available to them in their local areas and how they can access it;
- increasing the number of parents with a desire to move into work and a clear understanding of how to pursue this goal;
- increasing the engagement of parents with existing employment and enterprise support.

There is no formal evaluation set up contemporaneously with the design and implementation of the initiative but a study to establish outcomes has been commissioned to enable improve policy learning from the initiative. This study will provide an account of the performance of School Gates in meeting its aims and on the success of local partnerships working together in their areas. Outcomes for the participants will be profiled using qualitative and quantitative data on support and results for parents that include case-study 'journeys' that parents have taken into or back towards employment. Emerging best practice and a comparison with other employment services (Jobcentre Plus) outreach work will be identified. No evaluation reports have been published yet, but the final report is due in March 2011.

## A.9 Teenage Parents Supported Housing

### Background

This pilot tests different innovative approaches to enhancing the housing support available to teenage parents. The main aim of the pilot is to develop models of integrated education, health and housing support to improve outcomes for teenage parents and their children. Such integrated housing support was a recommendation of the original Social Exclusion Unit report on Teenage Pregnancy (1999) but on which limited progress had been made despite some expansion of supported housing for teenage parents since 1999. The pilot addresses the problem that many pregnant teenagers and teenage parents are allocated accommodation in temporary tenancies or hostels deemed unsuitable for a young family and lack appropriate support. The resulting isolation reduces the likelihood of continuing engagement with education and training and increases the risk of poor physical and emotional health for themselves and their children.

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<sup>18</sup> See [http://www.schoolgates.org.uk/resources/what\\_is\\_the\\_school\\_gates\\_employment\\_support\\_initiative\\_](http://www.schoolgates.org.uk/resources/what_is_the_school_gates_employment_support_initiative_)

## Evaluation aims and methodology

This evaluation tests pilot schemes in seven different LAs. A multi-method evaluation approach is being used.

A longitudinal case study evaluation of all seven pilot projects which will provide feed back on the different delivery models, and give an indication of how successful they have been in supporting teenage parents. This involves

- a review of the successful LA bids
- analysis of project-level funding and other administrative data;
- design and analysis of project monitoring data;
- qualitative interviews with service providers, stakeholders and service users, conducted in two main waves (at the beginning and the end of the pilot funding period); and
- ‘mid-point’ interviews with project coordinators/managers.

A longitudinal ‘census’ survey of teenage parents receiving support from the pilots will be used to assess treatment outcomes. Telephone surveys of participating teenage parents will be conducted shortly after the beginning and towards the end of the pilot. There is no direct comparison group in this evaluation. However, analysis of the Supporting People Outcomes Framework Database and other datasets will provide information on outcomes for a comparable population. This comparison will help to compensate for the lack of a direct comparison group and enable a better estimate of outcomes as a result of the pilot interventions, controlling for local institutional factors. This should increase the generalisability and replicability of the pilot findings.

The evaluation will also conduct qualitative interviews with a sample of parents of service users across the pilot project towards the end of the pilot to provide an additional perspective on the services provided.

There is a specific cost effectiveness element to the evaluation based on ‘value for money’ criteria of the enhanced support package in each pilot area in comparison to the baseline pre-pilot provision.

The pilot sites were chosen to maximise the potential to learn from different organisational approaches. The sites include two counties where education, social services and supported housing services are provided by county councils while housing, including housing allocation, is done by district councils. The other pilot sites are located where unitary authorities provide all these services.

## A.10 Work-focused Services in Children’s Centres

### Background

This pilot is providing a full-time Jobcentre Plus employment adviser in each of three Children’s Centres in ten LA areas from December 2008 to June 2011 in order to extend existing obligations for joint work that are largely based on signposting and referral. One clear difference from the HMRC Outreach outlined above is, thus, in the level of staff resources being put into work in Children’s Centres – a full time worker in this case as opposed to one day a month (or thereabouts) under HMRC Outreach. The aims of the pilot are both to provide some direct effects on participants from the new services and also to explore new ways of working.

## Evaluation aims and methodology

The evaluation of the pilot is based on geographically matched control sites for comparison of outcomes. Marangozov and Stevens describe the objectives of the evaluation as an assessment of:

- impact on take-up of work-focused services within Children's Centres, both by those already accessing centre services and those who access them for the first time as a result of the pilot
- 'reach' into groups of parents not normally accessing such services, such as partners of people who are on benefits or in low-paid work;
- any observed impact on parents' attitudes to Jobcentre Plus services, and to work and training, which may affect future take-up of opportunities;
- any observed impact on the understanding and communication of key messages about employment and child poverty by Children's Centre staff – to what extent are these now 'owned' by all stakeholders?;
- development of partnership working between Jobcentre Plus personal adviser and Children's Centre staff, and the extent to which the personal adviser role and services have become integrated into Children's Centre core service offer.

Note that the pilot is co-located alongside HMRC Outreach in two London Boroughs and additionally alongside Child Development Grant pilot in some sites. The Work Focuses Services pilot evaluation is set up to consider interactions between the different pilots.

# Appendix B

## Overview of the interim evaluation findings

This synthesis report has relied heavily on the evidence produced in the early and interim evaluation reports of the suite of Child Poverty pilots. This appendix provides an overview of the key findings from each of the interim evaluation reports available to date. The key findings are presented as they appear in the individual evaluation reports and a link is provided to the full report for those who would like more details. Final evaluation reports are due in spring/summer 2011.

This report has also been able to rely on unpublished interim evaluation evidence from the Child Development Grant, and Coordinating Support for Separating Parents. Evidence on the Teenage Parents Supported Housing Pilots is drawn from an unpublished first interim report as well as the main interim report published in September 2010. Some of the key findings from these reports are provided below. However, the full content of these reports will be reflected/in the final evaluation reports.

Note that some pilots planned to produce a final evaluation report only. These are: Childcare Affordability (London Development and HMRC led strands) and School Gates Employment Support. For these pilots evaluation evidence won't be available until spring/summer 2011.

### B.1 Child Poverty Family Intervention

Note that this section includes evidence of all family intervention strands, including child poverty.

As of March 2010 there were 68 Anti-Social Behaviour (ASB) family interventions, 32 Child Poverty family interventions and 150 Youth Crime family interventions across England. This report presents findings from analysis of data concerning families engaged with these family interventions. Child Poverty family interventions were the most likely to have received referrals on the basis of poor housing conditions; adult substance misuse; mental health problems; worklessness and debt.

Poverty family interventions were the most likely to have received referrals from social services and schools, while Anti-social Behaviour family interventions had received the fewest referrals from these sources.

#### **Key findings**

- The longer families work with a family intervention the greater the chance that they will achieve successful outcomes. Surprisingly, the number of contact hours that a family intervention has with a family did not appear to be significant.
- Analysis suggests that it is not the differences between the particular family interventions that is affecting the likelihood that families will achieve successful outcomes, but the differences between the actual characteristics of the families, or differences in the duration, or intensity of intervention they are receiving (e.g. length of intervention) which is having an impact on the outcome.

- Making progress with workless families seems to be particularly challenging. It is not clear from the analysis whether worklessness is itself a barrier to achieving successful outcomes, whether workless families share certain characteristics that constrain their ability to overcome these issues or whether the poor ‘outcomes’, such as poor health, substance misuse or contact with the criminal justice system are in fact causal factors in worklessness. However, a similar association was found between families with special educational needs and the domain of crime and anti-social behaviour, which adds weight to the idea that different types of family (i.e. those who are workless or with special educational needs) are more likely to struggle to overcome particular types of issues.
- Out of the 7,231 referrals, 4,870 families (67 per cent) were offered and accepted a family intervention, 1,860 families (26 per cent) were not offered a family intervention, 203 families (three per cent) declined an intervention and 298 families (four per cent) were placed on a waiting list.
- 1,952 families had completed a family intervention by 31 March 2010 and show a number of improvements across a range of measures (between their Support Plan being put in place and Exit):
  - of the 1,413 families reported to have problems with family functioning and risk, 65 per cent (917 families) experienced a reduction in the number of their problems including poor parenting, relationship or family breakdown, domestic violence or child protection issues;
  - of the 1,588 families reported to have involvement with crime and anti-social behaviour, 64 per cent (1,024 families) experienced a reduction in the number of issues they were involved with;
  - of the 1,137 families reported to have a health risk, 56 per cent (634 families) had reduced their health risks including mental or physical health and drug or alcohol problems;
  - of the 1,546 families reported to have an issue with education and employment 48 per cent (746 families) had reduced the number of their problems in this domain.

### *Profile of family intervention families*

- Family interventions continue to work with very disadvantaged families, including a considerably higher than average proportion of lone parents (65 per cent), large families (40 per cent have three or four children under the age of 18 and 20 per cent with five or more children in this age group). Just under two-thirds were workless households (where no adult member was in employment, education or training). Thirty-three per cent of families had one or more children aged 16 or under with special educational needs (SEN).
- The great majority (88 per cent) of family members were White. Three per cent of family members were recorded as Black, two per cent were recorded as Asian, and seven per cent were classified as ‘other or mixed race’. The ethnicity of Family Intervention Project families is in line with the national average and the proportion of White families has slightly declined over time (91 per cent in 2008).

### *Risk factors for families at the beginning of the intervention*

- The risk factors identified for families when they began working with a family intervention are categorised into four domains: family functioning and risk; crime and anti-social behaviour involvement; health; and education and employment.
- In the family functioning and risk domain the most common problem for families was poor parenting (68 per cent of families). Other key risk factors for these families were: marriage, relationship or family breakdown (31 per cent); domestic violence (29 per cent); and child protection issues (28 per cent).

- In the crime and anti-social behaviour domain, 82 per cent were reported to have engaged with some form of anti-social behaviour and 36 per cent had contact with the criminal justice system (for example a family member was arrested, on bail, probation, a tag or a conditional discharge at the time of the Support Plan).
- It was not possible to classify the reason(s) for 167 families (nine per cent) of families, e.g. they were a high risk case and unsuitable for staff to visit, the family moved out of the area, family no longer live together or child was taken into care.
- In the health domain around a third of families faced issues associated with mental health, drug/substance misuse, or drinking problems/alcohol.
- In the education and employment domain, just under two-thirds of families had no adult member in employment, education or training while 60 per cent of families had at least one child with problems at school (i.e. truancy, exclusion, or bad behaviour at school).

### *The intensive family intervention*

- The average length of an intensive family intervention (i.e. including a planned Exit) was around 13 months – this has increased from just over 12 months reported for Anti-social behaviour family interventions in November 2009 (and six to 12 months in 2008).
- The direct contact between with a family decreases during their intervention from an average of nine hours a week between the Support Plan being put in place and the first Review to 6.8 hours a week between the final Review and leaving the intervention.
- 91 per cent of families had the same key worker between the Support Plan being put in place and the first Review and 95 per cent of families had the same key worker between the time of their final Review and leaving the family intervention.

### *Successful and unsuccessful outcomes*

- 19525 families left an intensive family intervention before 31 March 2010:
  - 76 per cent (1,351 families) left for a successful reason
  - 14 per cent (245 families) left for an unsuccessful reason
  - 11 per cent (189 families) left for a reason which could not be counted as a success or failure.
- At least half of family intervention families who were reported to have the following problems at the Support Plan stage achieved a successful outcome (i.e. they no longer had this problem when they left): poor parenting (1,204 families or 54 per cent), marriage, relationship or family breakdown (492 families or 58 per cent), domestic violence (451 families or 64 per cent), child protection issues (477 families or 51 per cent), involvement in crime (558 families or 59 per cent) and/or anti-social behaviour (1,543 families or 59 per cent), lack of exercise or poor diet (155 families or 55 per cent), drug or substance misuse (597 families or 50 per cent), drinking problem or alcoholism (531 families or 57 per cent), and truancy, exclusion or bad behaviour at school (1,047 families or 59 per cent).
- Families with more positive experiences of family interventions are over-represented in this sample.
- Families were least likely to have achieved a successful outcome in relation to mental health (553 families or 40 per cent) and worklessness (1,155 families or 20 per cent).

### *Factors associated with successful and unsuccessful outcomes*

- The longer families work with a family intervention the greater the chance that they will achieve successful outcomes in each domain. Surprisingly, the number of contact hours that a family intervention has with a family did not appear to be significant.
- The analysis also identified a number of socio-economic characteristics associated with an increased chance of success in the four domains which help us identify where families might need differing levels of support to others.
- Families with at least one member of the family aged 16 or over in work or lone parent families were more likely to achieve full success in the family functioning and risk domain.
- Families with younger children appeared to have an increased chance of success addressing problems connected with crime and anti-social behaviour at the start of the intervention.
- Families with any kind of special educational need (SEN); or with at least one family member from a non-white ethnic group; or families being supported by a family intervention focused on reducing child poverty were less likely to achieve this success
- Families facing child protection issues were the least likely to achieve successful outcomes in the domains of health, and education and employment, as well as the individual areas of contact with the criminal justice system, poor parenting, domestic violence, being a NEET family, and truancy, exclusion and bad behaviour at school. These families are likely to have some of the most severe problems, particularly with regard to children, and it may be the case that they are more difficult to help than other families.
- Analysis of how outcomes vary for different family interventions suggests that it is length of intervention which is the most important factor in families achieving successful outcomes.

### *Sustainability of outcomes*

- 283 families were followed up nine – 14 months after exiting a family intervention to establish whether the outcomes have been sustained after leaving.
- These families were found to be more likely to achieve a successful outcome in family functioning and risk and crime and anti-social behaviour domains at the time they exited a family intervention. They were also more likely to sustain success in these outcomes nine – 14 months later. Eighty-four per cent of the families (111 families) followed up sustained their outcomes in the family functioning and risk domain nine to 14 months after leaving a family intervention.
- 71 per cent (107 families) of the families followed up sustained their outcomes in the crime and anti-social behaviour domain nine to 14 months after leaving the intervention.
- Lower proportions of families sustained outcomes in the health (63 per cent) and education and employment (34 per cent) domains at nine to 14 months.

### *Link to evaluation report*

Monitoring and evaluation of family interventions (information on families supported up to March 2010 (2010)).

<http://publications.education.gov.uk/default.aspx?PageFunction=productdetails&PageMode=publications&ProductId=DFE-RR044&>

Final report due in spring 2011.

## B.2 Local Authority Innovation Pilots

### **Key findings of first interim report**

This report demonstrates how positive progress has been made in the establishment of the local pilot programmes, and their preparations for trialling a range of new and innovative approaches to addressing the challenges of child poverty in their areas. At the time of our fieldwork the majority of the programmes were in the early stages of service delivery and finalising their preparations for implementation, having faced many of the challenges expected in the early stages of project development. But there remains much work to do before all of the local Pilot programmes are delivering across the breadth of activities described in their individual applications.

#### *Proposed pilot activities*

The pilot involves a wide range of approaches to be trialled, each of which are being implemented in a range of contexts and circumstances. These include approaches to:

- increasing parental employment and employability, supporting access to employment and providing in-work support;
- providing holistic, flexible packages of support tailored to the needs of parents and families, employing a case-work and family focused approach;
- providing mobile outreach services to communities to promote access to services;
- providing training and employment opportunities through Community Entrepreneurs;
- providing immediate alleviation of some of the impacts and consequences of child poverty; and
- increasing the capacity of families to address their needs, building on their strengths, and through employment and local support lifting them out of poverty.

Each of the local programmes reflect the aims of the pilot overall, and are closely aligned to current and emerging policy; primarily, raising employment through supportive personalised, holistic and flexible approaches, with short-term advice and long-term intensive support being provided according to need. While the focus on employment as a route out of poverty features strongly across the pilots, they are also seeking to address the accompanying ‘poverty of expectation’ which underpins inter-generational poverty in families by raising aspirations and building family capacity and resilience. Importantly, the local pilots all demonstrate how they are firmly set within the local context and are linked to appropriate local partners and services through their management and steering arrangements. In line with current policy, Children’s Centres (and to a lesser extent, schools) are in many cases playing key roles in helping families access new and existing provision. This is related to the pilot’s underlying objectives to increase the levels of service take-up by families in need. The importance of ‘strategic’ ownership of, and engagement with, the pilots was emphasised in terms of both supporting implementation and utilising future lessons learnt.

#### *Innovation*

The local programmes have demonstrated how their approaches are new within the contexts of their own areas, and it is within the interplay between local circumstances, service infrastructures and the individual project ‘ideas’ that their innovation lies. Consequently innovation focuses on testing approaches new to an area or a delivery partnership, including applying existing or proven approaches to different target groups, in different circumstances and in different combinations. Given this focus for innovation, the pilots have minimised the risks associated with wholly new approaches – where failure rates would be expected to be high. This pragmatism does not mean,

however, that their approaches are without risk or diminish their potential value. Indeed, their fit within their local contexts is one of their key strengths and increases the likelihood of transferable lessons emerging.

Across the pilot, the partnership working between children's services and economic and regeneration departments was identified as an innovative feature. Although strategic links exist between these key LA departments operational examples were often described as more ad hoc and temporal, for example linked to pilot and project work that had not changed mainstream practice. The Pilot is providing the impetus to develop joint working where a shared agenda had been recognised, or to promote and provide leverage for developing a common agenda where it had not existed previously. The flexible and holistic whole family approach to support towards employment that is a result of the local interplay described above was also identified by local programmes as innovative. Whole-family approaches are promoted across government by the Cabinet Office's 'Think Family' initiative, but in practice such approaches are rare. This rarity is itself reflected in the promotion of the approach and the associated pilots, for example the Family Intervention Project (FIP) and the Family Nurse Partnership. The evaluation team were unable to identify a whole-family tool that is not issue (substance misuse or crime) related but that provides the basis for an open approach. Similarly, the Gregg Review that has informed the Welfare Reform Act 2009 (and outlined in Chapter 2) is clear that the supportive, personalised approaches to employment and employability support are not currently provided in the mainstream.

### *Baselining and targeting*

The first stage of Component 2 has provided baselines for each of the pilot authorities, which provide a context for understanding and interpreting the pilot outcomes. The baselining also showed that while the pilots are not necessarily the authorities experiencing the highest levels of poverty all were appropriate for pilot activity, having notable child poverty problems. In addition, where the local sites were explicit about specific sub-areas they intended to target, these were not always those with the highest levels of deprivation or poverty. However, it is important to consider that levels of poverty were not the sole rationale for the targeting of specific pilot activities. This was often based on a combination of factors including the existing infrastructure for children and family services, other ongoing pilot or developmental activities, and other practical factors of relevance to the nature of the approaches being trialled. The baselining process, and comments from many of the individuals interviewed during the fieldwork, has illustrated the challenges facing the local pilot programmes and others in identifying and quantifying levels of child poverty at the local level. While there may be little that can be done to alleviate this position, with the wide scale sharing of data such as benefit take-up being unlikely to change over the pilot period, several pilots were testing approaches to use data in new ways to improve their ability to target interventions locally. As several of the pilots are, or propose to, use local knowledge to target areas or groups not identified in national datasets, valuable learning can be expected for LAs seeking to map and understand child poverty.

### *Delivery*

The pilot is testing a range of approaches to addressing child poverty across the ten local areas, and exploring the factors that underpin it. Each of the local programmes has made progress towards the delivery of their pilot services. All are delivering at least part of their service offer by December 2009. Many local programmes have faced, and continue to face, challenges and most have experienced delay against their initial delivery plans. The challenges identified are those that would be expected in any fixed term project, but particularly where new approaches are developed, commitment to them fostered and the means of taking forward to delivery agreed. In some cases the pilots faced specific challenges, such as the restructuring of services following the move to a

single tier authority in Cornwall, where the potential to provide learning to inform ongoing change is paralleled by the challenges of implementation in an environment of rapid and dynamic change. Nonetheless, whatever the context developing new partnerships and innovative programmes takes time. We conclude that the next few months will be crucial for the pilot, and it will be essential that the momentum built up so far is maintained so that all local interventions and activities are taken forward. As we have also shown there remains much to be done across the pilot in terms of finalising plans and starting delivery more widely, and defining final outcomes and the data collection approaches to support effective evaluation. It is crucial that each local programme allows sufficient time for their activities to be implemented, reviewed and evaluated to ensure both local and national learning is maximised.

### *Impacts*

Although delivery is in the earliest stage across almost all the local pilot programmes, examples of emerging benefits and impacts for children and families were identified. These form the beginnings of an evidence base to allow the effectiveness of pilot approaches to be assessed.

The impacts of pilot services will be a key area of exploration for the remaining stages of the evaluation, although the early indications are positive in terms of initial indicators of effectiveness.

### *Learning*

The breadth of pilot coverage suggests that the individual programmes will provide learning in a wide range of areas, of relevance to both the individual authorities and their partners and to other stakeholders seeking to address child poverty more widely. Indeed, the commonality of core themes emerging emphasises the opportunity for lessons to be learnt both during and after the pilot is completed – with ‘formative’ lessons providing opportunities for the exchange of learning between the local sites as they develop. There are also opportunities for local stakeholders to share their experiences of developing and implementing practical aspects of their programmes, such as assessment tools and approaches, or systems for collecting data on soft outcomes and assessing distance travelled. The local pilot teams, their stakeholders and their partners have demonstrated a commitment to learning from their activities, valuing the opportunity to trial new ideas and to be engaged in a genuine pilot that supports innovation and risk. As with impacts to date, lessons so far have expectedly been limited, although again promise has been demonstrated and early learning identified. The pilots have established expectations for the learning from their activities, which includes both generic (for example, finding out ‘what works’ in general) and more tightly focused expectations. Here the firm positioning of the pilots within their strategic and operational contexts is helpful – both in helping define learning expectations and setting their ‘outcomes’ (for example, changes through mainstreaming) in the local context.

More broadly, the learning from the local programmes can also inform national developments, and local responses to them, perhaps most notably the Child Poverty Bill. Here, lessons can be expected around the four ‘building blocks’ of the Bill, for example:

**Education, health and families** – including: how can whole family approaches address the needs of families as a unit, and the children and young people within them?; how can families be supported to access (for the first time, or to re-engage with) existing provision?; and, what short- and medium-term impacts result (and indeed how can short-term impacts lead to impacts in the longer term)?

**Employment and adult skills** – including: how different approaches can work with individuals at different distances from the labour market, especially where other complex underpinning issues need to be addressed?; how nurturing and a mix of short- and long-term support can be combined effectively?; and, what barriers exist to adult engagement and how can these be addressed?

Previous research has shown that often ‘pilots’ are not genuine opportunities for policy development, but are used to phase the introduction of policy and delivery mechanisms that are fixed (see: Cabinet Office (2003)

**Financial support** – including: what approaches to financial inclusion are effective?; what flexibilities are required, are outreach methods effective?; what in-work support is required?; and, how can financial measures be built upon to provide ‘whole family’ benefits?

**Housing and neighbourhoods** – including: what housing-related barriers exist to long term family wellbeing and to parental employment, and how can they be addressed?; what role can social and private landlords play in identifying and engaging vulnerable families?; how do ‘community empowerment’ models, such as the Community Entrepreneurs and Volunteer Family Mentors, build capacity within communities?; and, how can family capacity most effectively be raised?

From a formative perspective, we have also found that the local pilot programmes are already sharing experiences and learning between each other, although most commonly on an informal and one-to-one basis. As suggested above, this offers the opportunity to provide developmental, practical learning but also allow for the exchange of specific tools and approaches developed.

## **Link to evaluation report**

GHK, Local Authority Child Poverty Innovation Pilot: First National Evaluation Report, London:CPU/ DCSF, January 2010.

<http://publications.education.gov.uk/default.aspx?PageFunction=productdetails&PageMode=publications&ProductId=DCSF-RR208&>

## **Key findings of second interim report**

### *Addressing poverty and increasing parental employment*

Immediate impacts can be made on poverty and inequality by providing parents and families with resources to alleviate the effects of living on a low income. The provision of resources that support parents and families to engage with progression or action plans towards employment will address the causes of child poverty and thus build long-term outcomes.

### *The Big Society*

Involving and engaging local people in activity to build community capacity to address child poverty and family disadvantage is a theme of pilot programmes in Knowsley and Tyne Gateway. These two pilot programmes indicate a high level of local interest in community action and will provide valuable learning for the Big Society agenda as they progress.

### *Local delivery*

Each of the pilots involves working with local services to develop responsive provision and to support parents to access that which is new as well as established. The programme has a true **pilot** ethos, with LAs and their partners exploring and adapting their strategies and learning about ways of establishing and reaching local targets.

### *Strengthening families*

The report presents evidence of the ways in which families can be supported to address the problems that cause strain on relationships between parents and within the family as a unit. Accessing local services, adapting services so that they are responsive to family-based issues and

take a family perspective, and supporting families to take action to address their needs by building on their strengths are all themes that the findings from the evaluation contribute to.

### *The four ‘Child Poverty Building Blocks’*

Our conclusion demonstrates the key messages for each of the four child poverty ‘building blocks’. In summary, they include:

- **Employment and skills:** packages of training and support should be bespoke and tailored to parents’ strengths and needs.
- **Life chances and families:** packages of support bring a range of benefits for individual and family wellbeing. As these links are often inherent, a single intervention with an individual can also bring a range of individual and familial benefits.
- **Financial support:** there are high levels of debt amongst low income parents, with a range of associated problems including impacts on family wellbeing and disincentives to (re)enter the labour market.
- **Place and delivery:** Effective targeting of low-income families requires a range of techniques and approaches. Work to raise awareness with local partners can be effective but must be dedicated activity that is well structured and resourced.

### **Link to evaluation report**

GHK, Local Authority Child Poverty Innovation Pilot Evaluation: Second Synthesis Report, London: CPU/DfE, October 2010.

<http://publications.education.gov.uk/default.aspx?PageFunction=productdetails&PageMode=publications&ProductId=DFE-RR036&>

## B.3 Teenage Parents Supported Housing

### **Key findings of interim report**

The interim assessment of the progress of the Teenage Parent Supported Housing (TPSH) pilot consisting of seven schemes designed to test a range of ‘enhanced support packages’ for teenage parents. The pilots are funded by central government from early 2009 to March 2011. The report evaluates the early setting up stages and first full year of operation of the pilots (to March 2010).

### *Establishing the TPSH pilot*

The former DCSF encouraged the development of, and selected, a range of models of enhanced support packages for young parents for the TPSH pilot programme. Potential pilot authorities were asked to define ‘enhanced support’ themselves, rather than work to a prescribed model. Local authorities responded accordingly and the pilot programme, and evaluation, is therefore testing a diverse range of models. Notably, pilots have interpreted the ‘supported housing’ core element of the pilot differently. One pilot is delivering a residential model with intensive on-site support. Others have developed floating support or programmes of support to facilitate access to the private rented sector. One project has focused on education, whilst many include other types of specialist support services including mentoring, life-coaching and mediation. Some pilots are testing a number of services at the same time.

The projects took different lengths of time to become established in their local areas, with a number of challenges encountered in setting up the projects. Most significantly, LAs were required to set up a project with a short lead-in time for development. This caused some difficulties particularly in areas which were also undergoing restructuring or had to tender for the new pilot services. There were also some stakeholder tensions around data sharing and/or potential service duplication. Some areas were better placed to move forward quickly particularly where models were building upon existing services. A high degree of ‘buy-in’ from key partners and senior staff, along with wider positive inter-agency working, also assisted the establishment of the projects considerably.

### *Finding and engaging young parents*

Nearly 500 young parents (including parents-to-be) were referred to the seven pilot projects in the first year of the TPSH pilot. One project also worked with an additional 56 young people at risk of teenage parenthood. The vast majority of referrals were accepted onto the projects and only a small proportion of young people declined the service offered.

Whilst some projects met their recruitment targets better than others overall this represents one of the key achievements of the first year of the pilot. It should be noted that the numbers of referrals to the project nearly doubled in the three months from December to March 2010. The (main) target group for all pilots are teenage parents including young pregnant women/fathers-to-be. Additionally, one project is also working with young people considered to be at risk of teenage parenthood. Referrals were received from a diverse range of agencies, including Connexions, health professionals (particularly midwives) and housing and hostel providers. However, one main referral source appeared to predominate in each area. Most projects are proactively seeking to expand referral sources. The majority of the young parents recruited were female, of White British origin and had an average age of 18. A number of the projects have worked very proactively to recruit or include 50 young fathers, and therefore often support couples. This has not always proved easy as most local services are predominately set up to support mothers – and young couples on a low income also find it difficult to access appropriate supported and/or independent accommodation. In effect, the pilots are engaged in challenging established patterns of service delivery to better support young couples. Some pilots are also concerned as to whether they are reaching young people from ethnic minorities and again are reviewing this.

Overall, the young parents recruited had few health problems, with the exception of one-quarter experiencing mental health issues. Very few young parents had any problems with drugs or alcohol or offending. Reflecting this, the key support needs were around accommodation issues, maximising people’s income, accessing training/education and negotiating their new status as a parent. Few appeared to need intensive support with multiple issues, as is often common amongst homeless young people. Some pilots were concerned that they might not have reached some of the most vulnerable young people in their area, and this was a key factor prompting expansion of referral sources. However, despite this overall profile, there was some evidence that a minority of young parents required more intensive support, including around child protection issues. Providers also raised a concern that domestic violence was an issue affecting some young people and needed to be investigated further.

### *Supporting young parents*

The experience of the first year of the pilot strongly suggests that accommodation is a key issue for many of the young parents. Unsurprisingly given the focus of the pilot, assistance with housing was identified as one of the main support needs of young parents by providers at the point of referral. In the telephone survey, young people identified assistance with accommodation as one of the most useful elements of the support that they had received, as well as one of two main priorities for

making a difference to their lives in the future. Crucially a significant minority of young people (41 per cent of survey respondents) had moved accommodation since starting with the pilot and the vast majority reported higher satisfaction with their new accommodation. Although the TPSH pilot was not designed primarily to work with young people in the parental home, projects appeared to be assisting some young people to make a successful move from the parental home into suitable supported or independent accommodation.

The vast majority of young parents were looking after their children and/or looking for work at the point of referral. All projects were attempting to re-engage young parents in education, training or employment. The early pilot experience suggests that flexible responses to this are important, ensuring that courses are accessible, where possible module-based so providing some flexibility, and parent-friendly. Providers and young people both felt that the timing of going back into education or employment was important after the birth of a child. The telephone survey indicated that young people hoped to be engaged in education or employment in a year's time after the birth. Most young people had a preference for continuing education rather than taking up employment. However, barriers to doing so were significant including transport difficulties, not wanting to spend time apart from their children and childcare issues.

The telephone survey with young parents showed that, despite it sometimes being hard work, the majority of people liked being a parent to their child(ren). The TPSH pilot identified parenting support as an important issue, and many young people (particularly those with older children) also expressed interest in learning how to parent. However, there was also considerable reluctance on their part to engage in any support that they perceived to judge or stigmatise them. The early experience of the pilot suggested that support with parenting worked best if responsive to young people's agendas and integrated into other services. Overall, it was clear that the projects were explicitly focused on supporting the young parent rather than the child(ren). This was not raised as a concern by providers or young people and may represent a complementary approach when operating alongside other child-centred services, for example as provided through Children's Centres.

Young people identified increased income as one of two things that would most make a positive difference to their lives. Young people varied in the extent to which they were coping financially, but some were in financial difficulty.

In terms of delivering support, the early pilot experience suggested that some types of support were more easily understood and readily taken up than other elements of support (for example, floating support compared to life-coaching). A number of potential factors appeared to be at play here.

Firstly, familiarity with some service types may have aided takeup, whilst conversely young people may have been wary about the purpose and approach of newer types of services. Linked to this, sometimes the package of support was not fully understood and take-up may have improved by more clearly specifying the support on offer. Thirdly, take-up of services appeared to be influenced by the location of services (with co-location with other services for young parents working best). Fourthly, and crucially, within a clear offer of support, services needed to be flexible enough to respond to young people's needs. Finally, the quality of the relationship between the young parent and the worker was central to the effective delivery of any support.

### *Wider benefits of the TPSH pilot*

There was an overall consensus amongst providers and stakeholders that the TPSH pilot had led to improvements in inter-agency working at the local level. There appeared to be a particular gain in terms of health and social care services learning about the accommodation needs of young parents; moreover it was reported that agencies were working together more effectively across

all sectors. The TPSH pilot had clearly raised the issue of teenage pregnancy and young people's needs more generally at the local level. The clearest example of this was the decision already taken to mainstream the floating support service for teenage parents in one of the pilots. All the pilots will continue delivering services until March 2011 and a full evaluation of the pilot programme will be available in summer 2011 to inform the future development of supported housing services for teenage parents more generally.

### **Link to evaluation report**

Sarah Johnsen and Deborah Quilgars. *Teenage Parent Supported Housing Pilot Evaluation, Interim Report*. Centre for Housing Policy, University of York.

<http://publications.education.gov.uk/eOrderingDownload/DFE-RR050.pdf>

## B.4 Coordinated Support for Separating Parents

### **Key findings of interim report April 2010**

As the majority of the pilot sites began delivering services later than they had intended to, there is little to report about delivery at this relatively early stage in the development of the pilots. We have, therefore, focused more on the organisation of the pilots and how they see their partnerships operate – a crucial aspect of the pilots if they are able to help local families experiencing separation.

It was clear from the interviews undertaken that, with one or two notable exceptions, pilot site partnerships took longer than had been anticipated to reach the point of being able to offer services to clients. Those pilot site managers unfamiliar with establishing a partnership were surprised by the length of time needed to do so. This suggests that a longer period of time between gaining funding and delivering services might be allocated, both by providers and funders. The one manager of a lead project with considerable experience of this type of work knew that it took time and planned accordingly, being determined to have everything in place before delivery began.

In addition to this was the time taken to maintain the lines of communication. Although there was overall agreement that good communication was an essential element of partnership working, it nevertheless absorbed a considerable amount of workers' time. This was especially the case in the early stages of partnership development when many aspects of joint working had to be resolved, and meetings were held more frequently than they might be at a later stage when misunderstandings had been resolved and procedures were in place.

It was clear that there was commitment to the ethos of partnership working and to the need for agencies to work together to provide an improved service for separating parents and their children. However, with the exception of one partnership, which consisted primarily of two people working closely and harmoniously together, all of the arrangements had encountered difficulties of some kind. While none of these was serious and none posed a threat to the partnership, they seemed, on the whole, to have provided some learning for partners. This was chiefly around their need for tolerance of their partners' styles of working with clients and a willingness to make adjustments in order to serve the greater good. As the partnerships develop and more of the workers' time is absorbed by service delivery, it will be interesting to see whether the intended adjustments have been maintained.

This early exploration of the various partnership arrangements has prompted some interesting questions for future exploration about what makes partnerships work. For example: Is it the composition of the partnerships in terms of voluntary or statutory sector provision? Is it the number

of core partners or the number of stakeholder (referring) partners? Is it the personal relationships and soft skills of the constituent members? Or is it how they see the prime function of their partnership? This last question has led us to consider the models of the partnerships which have merged from the analysis of our data so far.

### *Models of partnership*

In trying to understand the ways in which the ten different pilots are trying to achieve the overall aims of the initiative we have sought to identify the differing models of partnership and service delivery. From our pilot staff interviews and other preliminary research there have emerged a number of key variations in approach taken by the ten pilot sites. Perhaps the most useful variation appears between the extent to which grant funding has been used to develop and provide new or enhanced frontline services and the extent to which the funding has been used to develop stronger and more effective ties between already existing services.

In reality, in all ten pilots both aims have been pursued, although often the emphasis has been placed more on one aspect than the other. Thus we have attempted to place each somewhere on the continuum between those mainly focused on coordinating the partnership (through the development of referral systems and employing case workers to help clients navigate available services) which we will refer to as the partnership end and those predominantly focused on developing new or broader services (through targeting new areas or groups, hiring new delivery staff or delivering a new sort of service) which we will refer to as the service end.

There are many variations on these themes and, of course, all ten projects seek to provide both better partnership working and increased services. In different ways both approaches aim at addressing the question of availability of services. The variation can be understood through looking at the context and underlying aims of each pilot. Each site has a differing service environment and each pilot has interpreted the brief in a different way. In those areas where there are few services available, the priority is seen as developing those services: for example, in Area E the project manager characterises the areas in which the pilot operates as having '*no specialist services, and no mediation or family counselling*'.

In other areas the services are available but not well coordinated and, therefore, the focus is on providing that coordination: for example, in Area B the project manager described the context of the pilot as being a '*lack of coordinated services*' despite the '*diverse range of initiatives and support services for parents*'.

At the partnership end we tend to find a model resembling a hub and spokes where the lead agency is allocated the majority of funding and plays the role of central hub, coordinating assessment of clients and referral on to relevant agencies. Often in this model, the lead agency will have employed a number of case workers (known variously as family support workers, family development workers, etc.) who, rather than providing a specific service themselves, assist the potential user in accessing appropriate support or advice. This central hub is then surrounded by partner services which continue providing their normal service while receiving increased and more detailed referrals from the centre.

At the other end of the spectrum, where the focus is more on services, we have found pilots where the funding is shared more equally between a smaller number of partners and is used to employ more frontline staff, allowing the service to cater specifically for issues around family separation, offer more or free services, or work in new geographical areas. While the development of these partnerships raises awareness among the partners of the other local services and allows for formal referral arrangements to be made, this type of pilot places more emphasis on a broader service

rather than service coordination.

Clearly this cannot be seen as the ultimate classification: as the pilots progress, other models may emerge either instead of or alongside these. However, we will be keen to track the impact of what pilots see as the most effective way to serve the needs of their local separating parents and their children.

### **Link to evaluation report**

This report has not been published, however, findings will be part of the final report to be submitted late spring 2011.

### **Key findings of interim report November 2010**

This report provides a profile of the families referred to the pilots by the end of September 2010. The key points to note include:

- **Referral routes:** a wide range of routes, with families most commonly coming to the Pilots directly (self-referral) or being referred by organisations (eg voluntary and advice) to whom families had already approached for advice.
- **Finding out about Pilot:** again via a wide range of routes, but most commonly from a professional or adviser, or schools or Children's Centres.
- **Support sought and received:** counselling and mediation more commonly sought and received than other forms of advice or support, although substantial minorities of families wanted practical help around finances and other issues.
- **Parents involved:** in most cases, only one parent was involved in the assessment, usually the mother.
- **Length of time since separation:** parents were coming to the Pilots having separated anywhere between very recently and two or more years ago; a fifth were still living together. More recently separated families were more likely to self-refer or come via an advice or voluntary agency; while those separated longer ago were more likely to come via schools or Children's Centres.
- **Economic profile of families:** while a fair proportion of families offered services look to be on low incomes, Pilots were also helping a wider range of families in terms of their economic situations.
- **Circumstances/risks:** for a large proportion of families, there are issues around contact arrangements and the payment of maintenance. Mothers' and children's mental health and issues around domestic violence are also of concern to Pilot staff.

### **Link to evaluation report**

This report has not been published, however, findings will be part of the final report to be submitted late spring 2011.

## B.5 Work-focused Services in Children’s Centres

### **Baseline report key findings**

- All of the pilot areas seem to be well placed to deliver the pilot, based on previous work-focused activity in the districts and on previous experience of partnership working.
- Nearly all of the LAs and most of the Children’s Centres are geographically and demographically well positioned to reach the pilot’s target communities. This is particularly the case for those Children’s Centres that are based in, or serve particularly deprived wards, or geographic concentrations of workless communities.
- From the user survey, we can see that most Children’s Centre users are women who have at least one child under five years of age. Most (around two-thirds) are not in employment, mostly because they are looking after the home and/or family.
- Over half of parents said that they had never used Jobcentre Plus services at either a Jobcentre Plus office or Children’s Centre. Fifteen per cent were using Jobcentre Plus services at a Jobcentre Plus office at the time of the survey and three per cent were using Jobcentre Plus service at their Children’s Centre (mostly for jobsearch). Among those currently using work-focused services, those parents who were out of work and on benefits had a higher level of take-up than all other parents, with a much higher proportion seeking advice on benefit entitlements over other work-focused services.
- Forty-eight per cent of parents said they intended to use Jobcentre Plus services in the future. This response was particularly high for those who were out of work and on benefits, lone parents, and parents with children under five, a positive indication for the potential of the pilot to reach these groups.
- Most parents said they would prefer to access Jobcentre Plus services in their local Children’s Centre, indicating more than sufficient demand for work-focused services in Children’s Centres. Importantly, this demand is particularly strong among those parents who are out of work and claiming benefit entitlements.
- Twenty-four per cent had no preference and ten per cent said they preferred the Jobcentre Plus office. Most said they would prefer to access Jobcentre Plus services in their local Children’s Centre because it was nearer to home or because it was more convenient and accessible. The fact that parents thought the Children’s Centre was a more comfortable and friendly environment was also an important factor.
- The pilot LA approaches have five central elements to the delivery of the pilot. These are:
  - the core provision of work-focused services delivered through Jobcentre Plus Personal Advisers;
  - the provision of additional packages of support and bespoke services to address the additional needs of the target client group;
  - partnership working;
  - integration of the Jobcentre Plus Personal Adviser into the Children’s Centres;
  - identifying and engaging parents.

Early views on the implementation of the pilot reveal there are notable concerns among children’s centre managers and Jobcentre Plus alike around ‘cultural’ differences that might emerge between Jobcentre Plus and Children’s Centre staff. A lesser, but no less significant, concern is the negative perceptions of Jobcentre Plus that exist among some parents and Children’s Centre staff.

## Key observations

- Central role and skills of the Jobcentre Plus Personal Adviser in contributing to the overall success of the pilot. This is particularly relevant to the atypical aspects of the Jobcentre Plus Personal Adviser role: the work of engaging and assisting parents who may have multiple and complex needs; the work of promoting work-focused service through outreach activities; and the work of embedding work-focused services in a multi-agency environment. It will be important to see how Jobcentre Plus Personal Advisers are managing these tasks and whether they are able to successfully strike an appropriate balance between the provision of ‘standard’ work-focused services and the more atypical outreach activities.
- The importance of support from Children’s Centre staff in contributing to the success of the Jobcentre Plus Personal Adviser role. This is particularly relevant to the work of familiarising the Jobcentre Plus Personal Adviser with the Centre facilities, services, working practices and local family networks; the work of promoting work-focused services through Centre activities and countering negative perceptions of Jobcentre Plus among parents; and the work of identifying parents and passing on referrals to the Jobcentre Plus Personal Adviser.
- Finally, given that many parents with young children, who were surveyed in our research, did not consider employment an option in the short to medium term alongside their childcare responsibilities, it will be important to see how successful the pilot is in getting parents to think about, or prepare for their longer term employment options, along with promoting the benefits and availability of good quality childcare, so that they can consider work as an option once their children start school, or earlier.

## Link to evaluation report

Rachel Marangazov. *Work-focused services in Children’s Centres pilot: evaluation baseline report*. Department for Work and Pensions Research Report No 602, 2009  
[http://research.dwp.gov.uk/asd/asd5/report\\_abstracts/rr\\_abstracts/rra\\_602.asp](http://research.dwp.gov.uk/asd/asd5/report_abstracts/rr_abstracts/rra_602.asp)

## Evaluation interim report key findings

### *Pilot delivery: critical success factors*

- Personal Advisers with the right mix of skills has been a consistent feature of successful pilot delivery. Personal Advisers who possess flexibility, resilience and strong interpersonal skills emerge as a critical success factor to delivering work-focused services in an outreach setting. These skills have proven to be key in mitigating the challenges arising from the new working environment that Personal Advisers have found themselves in, as well as the new way of working and new client groups. These skills have also been important in facilitating partnership working with Children’s Centre staff.
- The readiness of Jobcentre Plus staff to work outside of their usual targets has also been a hallmark of successful pilot delivery. It has left Advisers free to undertake much of the outreach work that is central to a pilot of this nature and has proven conducive to partnership working with the Children’s Centre staff. Most importantly, it has been more appropriate to the circumstances of the client group, most of whom have not considered work to be a short-term priority because of their primary childcare responsibilities.
- Personal Advisers supported by Children’s Centres and line managers has facilitated delivery of the pilot. Personal Advisers who reported good levels of support from Children’s Centre staff and line managers found it easier to deliver their services, to communicate potential problems and issues, and to integrate into their new environment. They were also better able to avert potential tensions and conflicts over differences of procedure, working practice or working priorities.

### **Conclusion**

- Tailoring pilot provision and delivery to local needs and circumstances has been an important feature of successful pilot delivery. A key ‘enabler’ to meeting the needs of the local community was the use of the discretionary pilot funds. This was being used in a variety of ways to flexibly plug gaps in provision or meet specific needs arising from pilot implementation. For example, discretionary funds have been used to cover the costs of buying in childcare to run alongside work-focused services, when local provision was not available. It has also been used to cover additional expenses for attending courses and interviews; to source training or fund volunteering projects; and to run area-wide engagement events. In one pilot area, these funds had been used to employ an additional worker to assist the Personal Adviser in developing community outreach work and to address the ad hoc demands of the job so that the Personal Adviser could have more time with parents.
- A dedicated working space for the Personal Adviser in the Children’s Centre has facilitated effective pilot delivery. A private space offers the Personal Advisers and parents the necessary privacy to discuss confidential issues, facilitating engagement with parents. A dedicated workspace also means Advisers can have more time with parents at their own workstations, as opposed to sharing a room with other Children’s Centre staff and activities. More generally, some office/interview rooms are not considered to be conducive to promoting customer engagement, being too small for purpose or not child-friendly. Although having space for the Personal Adviser within the Children’s Centre was perhaps not a critical factor to successful delivery (where Children’s Centres simply could not spare the space, some Personal Advisers often found a constructive solution), it was most definitely a facilitating factor. A private room for the Personal Adviser facilitated engagement with the parents and provided a base from which to conduct their work-focused activities.

### ***Partnership working: critical success factors***

- A flexible and committed approach to making the pilot work among all partner organisations has been key to successful partnership working. This enabled staff to overcome any problematic ‘cultural’ differences encountered (different ways of working) and to find alternative solutions that would not negatively impact on the pilot.
- Opportunities to work shadow or visit the Children’s Centre prior to the pilot going ‘live’. A key facilitating factor to partnership working would appear to be some form of shadowing (of Children’s Centre staff) prior to the start of the pilot. Where this had happened this was reported to be helpful in exposing Jobcentre Plus staff to the different ways of working in Children’s Centres and giving them a better idea of what their role would involve. Where this did not happen, some pilot staff reported that shadowing Children’s Centre staff (even for day) would have been useful in preparing Jobcentre Plus staff for the new environment, different priorities and a different way of working.
- Regular communications between the Children’s Centre manager and the Personal Adviser. Another important critical factor to partnership working by Jobcentre Plus staff has been regular communication with Children’s Centre staff, and the centre manager/Head in particular. Clear lines of open communication have been key to addressing any problems quickly and preventing their escalation into bigger issues. Once one party understood why the other had to work in a particular way, or had to adhere to particular protocol, they were more willing to accommodate this.

### ***Engaging parents: critical success factors***

- The ability of the Personal Advisers to make themselves accessible to parents. A key requirement has been to provide a personalised service that is sensitive and responsive to parents’ needs, which are often numerous and complex in nature. The continuity of the Adviser role enabled Advisers to gain parents’ trust and build up a relationship with them, thus sustaining their engagement in the pilot. Supportive Children’s Centre staff helped to facilitate.

### *Personal Advisers access to parents*

- Prioritising outreach activity early on in the pilot (over work-focused activities, such as Work Focused Interviews) has also been key to engaging parents early on in the pilot, raising awareness of pilot provision and allowing Advisers to get to know parents by making themselves visible and approachable. Establishing this sort of familiarity and trust with parents has proven to be a necessary precursor to engaging them in more structured work-focused activity.
- Given that so much of the success of the Adviser role depended on this kind of face-to-face, personalised contact, which was able to fit around the often hectic schedules of parents, the role appears to best suit full-time hours. Those Advisers who worked part-time, or as part of a job-share did not feel that these arrangements lent themselves well to the nature of the role, and of the outreach work in particular.
- Overall, the evidence from the interim evaluation research indicates that the pilot has had notable success in some key areas, including the range of outreach activities, the informal and trusted nature of engagement with Children's Centre users, and the personalised and intensive support provided by Personal Advisers. Personal Advisers have largely settled into their roles well, especially considering both their new environment and a new way of working, and customers are overwhelmingly positive about all aspects of the pilot – from initial engagement to the quality of help provided by the Personal Advisers. Crucially, there are early signs that work-focused services are beginning to embed themselves in many areas, with some partner organisations and agencies now coordinating their efforts alongside the pilot to address the needs of parents and families in a more holistic way.

### *Conclusion*

In terms of pilot outcomes, there have been more soft outcomes for customers than there have been hard employment outcomes. This is to be expected. As the baseline report showed, the demographics, labour market profiles, childcare responsibilities and personal circumstances of Children's Centre users indicate that for many, employment is a longer-term reality. Given this, many pilot staff and partner organisations felt that hard employment outcomes might not be captured within the lifespan of the pilot and that the focus should be on the softer outcomes which often mark the 'turning points' for many customers – turning points upon which further progress towards employment hinge. Indeed, the evidence to date would seem to validate this, as much of it points to increased confidence levels among customers, much greater awareness among customers of work-/training-related opportunities and options, and easier access to job preparation skills and support. Perhaps the most recurrent theme in our analysis of pilot delivery is the ongoing challenge of 'cultural differences' upon the effectiveness of the Personal Adviser role and upon overall pilot performance. These differences were identified as a potential risk to the pilot in the baseline report, and the evidence from our case study research is that this remains an issue. The differences have manifested themselves in two ways, mainly through the target-orientated expectations of the Jobcentre Plus line managers, but also through the difficulties that the Personal Advisers are having in managing the unstructured nature of the work and in meeting the complex and multiple needs of customers.

### **Link to evaluation report**

Rachel Marangazov and Helen Stevens, Work-Focused Services in Children's Centres Pilot: Interim Report, Department for Work and Pensions Research Report No 677, 2010 <http://research.dwp.gov.uk/asd/asd5/rports2009-2010/rrep677.pdf>

# **Appendix C**

# **Geographical overview of pilots locations**

**Table C.1 Geographical overview of pilots locations**

**Table C.1 Continued**

Code	LA	2008 Revised local child poverty measure	Childcare Affordability 2009 - HMRC	Affordability 2009 - London Development Agency	Childcare 2009 - London Development Agency	Child Development Grant	Child Poverty Family Intervention	Coordinated Support for Separating Parents	HMRC Outreach in Children's Centres	Local Authority Innovation Pilot	School Gates Employment Support	Teenage Parent Housing Support	Work Focused Services in Children's Centres
00FB	East Riding of Yorkshire	11.9%											
21	East Sussex	17.7%	Actuals					x		x			
00AK	Enfield	36.0%	Actuals & Disabled					x					
22	Essex	15.7%						x					
00CH	Gateshead	24.3%											
23	Gloucestershire	14.0%						x					
00AL	Greenwich	33.4%	100% & Actuals & Disabled							x			
00AM	Hackney	43.5%	Actuals & Disabled	subsidised offer				x		x			
00ET	Halton	25.6%									x		
00AN	Hammersmith and Fulham	35.8%	Actuals & Disabled							x	x		
24	Hampshire	11.6%	Actuals								x		
00AP	Haringey	39.2%	100% & Actuals & Disabled								x		
00AQ	Harrow	23.5%	Actuals & Disabled							x	x		
00EB	Hartlepool	28.9%								x			
00AR	Harvering	18.4%	Actuals & Disabled								x		
00GA	Herefordshire, County of	13.6%										x	
26	Hertfordshire	13.1%											
00AS	Hillingdon	25.0%	100% & Actuals & Disabled										
00AT	Hounslow	28.1%	Actuals & Disabled										
00MW	Isle of Wight	20.2%	Actuals										
00HF	Isles of Scilly	3.9%											
00AU	Islington	46.0%	Actuals & Disabled							x	x	x	
00AW	Kensington and Chelsea	28.4%	Actuals & Disabled							x			
29	Kent	17.0%	Actuals							x			
00FA	Kingston upon Hull, City of	32.0%								x	x	x	x
00AX	Kingston upon Thames	15.7%	Actuals & Disabled										
00CZ	Kirklees	21.5%											
00BX	Knowsley	32.8%						x		x	x	x	
00AY	Lambeth	35.5%	Actuals & Disabled					x		x	x	x	
30	Lancashire	18.2%						x		x			
00DA	Leeds	22.1%								x			
00FN	Leicester	33.7%								x			
31	Leicestershire	10.8%											
00AZ	Lewisham	33.5%	Actuals & Disabled								x		
32	Lincolnshire	15.9%								x			
00BY	Liverpool	34.6%								x			
00KA	Luton	28.4%								x			
00BN	Manchester	41.4%	Disabled (control)						x	x	x	x	
00LC	Medway	20.1%	Actuals										
00BA	Merton	20.6%	Actuals & Disabled						x			x	
00EC	Middlesbrough	33.5%						x			x		

**Table C.1 Continued**

Code	LA	2008 Revised local child poverty measure	Childcare Affordability 2009 - HMRC	Affordability 2009 - London Development Agency	Child Development Grant	Child Poverty Family Intervention	Coordinated Support for Separating Parents	HMRC Outreach in Children's Centres	Local Authority Innovation Pilot	School Gates Employment Support	Teenage Parent Housing Support	Work Focused Services in Children's Centres
00CJ	Newcastle upon Tyne	32.1%					x			x	x	
00BB	Newham	42.6%	Actuals & Disabled					x				
33	Norfolk	17.5%										
00FC	North East Lincolnshire	25.9%										
00FD	North Lincolnshire	19.0%										
00HC	North Somerset	14.2%										
00CK	North Tyneside	19.8%							x			
36	North Yorkshire	11.2%										
34	Northamptonshire	15.5%										
35	Northumberland	17.0%		x	x							
00FY	Nottingham	36.3%				x				x	x	x
37	Nottinghamshire	16.8%										
00BP	Oldham	29.3%	Disabled (control)				x					
38	Oxfordshire	11.7%	Actuals									
00JA	Peterborough	24.0%										
00HG	Plymouth	21.3%										
00HP	Poole	17.0%					x					
00MR	Portsmouth	24.0%		Actuals								
00MC	Reading	21.5%		Actuals								
00BC	Redbridge	28.6%	Actuals & Disabled									
00EE	Redcar and Cleveland	25.1%				x				x		
00BD	Richmond upon Thames	11.5%	Actuals & Disabled									
00BQ	Rochdale	28.3%	Disabled (control)			x						
00CF	Rotherham	22.0%										
00FP	Rutland	7.3%										
00BR	Salford	29.4%	Disabled (control)				x					
00CS	Sandwell	30.8%	Disabled (control)							x		
00CA	Sefton	19.9%								x		
00CG	Sheffield	24.3%					x					
39	Shropshire	12.8%										
00MD	Slough	23.9%	Actuals									
00CT	Southend-on-Sea	15.2%	Disabled (control)									
40	Somerset	14.2%										
00HD	South Gloucestershire	10.7%										
00CL	South Tyneside	27.6%							x			
00MS	Southampton	26.5%	Actuals							x		
00KF	Southend-on-Sea	23.0%	Disabled (control)									
00BE	Southwark	33.8%	Actuals & Disabled								x	
00BZ	St. Helens	24.4%										
41	Staffordshire	14.2%										
00BS	Stockport	15.2%	Disabled (control)									
00FF	Stockton-on-Tees	21.3%										
00GL	Stoke-on-Trent	28.7%							x			
42	Suffolk	14.7%							x			

**Table C.1** Continued

Code	LA	2008 Revised local child poverty measure	Childcare Affordability 2009 - HMRC	Childcare Affordability 2009 - HMRC	Child Development Grant	Child Poverty Family Intervention	Coordinated Support for Separating Parents	HMRC Outreach in Children's Centres	Local Authority Innovation Pilot	School Gates Employment Support	Teenage Parent Housing Support	Work Focused Services in Children's Centres
43	Surrey	9.9%	Actuals									
00BF	Sutton	16.9%	Actuals & Disabled									
00BT	Swindon	15.9%						x				
00BT	Tameside	23.5%	Disabled (control)				x					
00GF	Telford and Wrekin	24.1%			x							
00KG	Thurrock	19.8%										
00HH	Torbay	23.4%										
00BG	Tower Hamlets	57.0%	Actuals & Disabled		x	x	x			x		
00BU	Trafford	15.2%	Disabled (control)					x				
00DB	Wakefield	20.4%										
00CU	Walsall	28.4%	Disabled (control)									
00BH	Waltham Forest	34.2%	Actuals & Disabled					x		x		
00BJ	Wandsworth	26.0%	Actuals & Disabled								x	
00EU	Warrington	13.5%										
44	Warwickshire	13.2%								x		
00MB	West Berkshire	10.2%	Actuals									
45	West Sussex	12.8%	Actuals									
00BK	Westminster	40.7%	Actuals & Disabled						x	x	x	x
00BV	Wigan	18.8%	Disabled (control)									
46	Wiltshire	11.0%										
00ME	Windsor and Maidenhead	9.7%	Actuals									
00CB	Wirral	24.2%										
00MF	Wokingham	6.8%	Actuals									
00CW	Wolverhampton	30.8%	Disabled (control)							x		x
47	Worcestershire	14.5%								x	x	x
00FF	York	12.8%							x	x	x	x

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A suite of nine Child Poverty Pilots have been operating across England since 2008, with over a third of local authorities involved with at least one of the initiatives. This interim synthesis report brings together information from each of the pilots, and draws out early findings from across the evaluation evidence to help inform practitioners and policy makers at national and local level.

The report focuses on implementation and delivery evidence, and explores the following cross-cutting themes:

- pilot participants;
- developing tailored, innovative and localised solutions;
- early indications, experiences and perceptions of pilot services.

The report was commissioned by the Child Poverty Unit.

If you would like to know more about DWP research, please contact:  
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