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Troubled Families Programme National Evaluation

Family survey – Follow-up survey

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Summary



Families on the Troubled Families Programme

This report is based on a longitudinal follow-up survey of families in receipt of help from the Troubled Families Programme in nineteen local authorities, providing a picture of families' lives and feedback on the keyworker experience. It presents findings from a cohort of 654 main carers and 307 young people who were interviewed in 2015/16 as they were starting on the programme and again around two years later, in 2017/8, looking at how their attitudes and circumstances may have changed over this time. Despite efforts, it was not possible to form a comparison group that was sufficiently robust, in order to establish a measure of impact.

Employment and financial exclusion

In terms of employment and financial exclusion, the story for these main carers over the last two years is mixed. More are in employment than two years ago (31% compared with 27%) and fewer are unemployed (27% compared with 29%), but notably fewer of these unemployed are actively looking for work (nine per cent compared with 12% previously). Over half (55%) continue to live in a workless household.

Looking at work readiness, a third (34%) have taken steps to find a job, such as applying for a job, attending an interview or completing some training, mostly those who are already currently working. One in six have undertaken at least one active step towards work in the last four weeks. There is little change from the initial survey, but fewer have undertaken at least one training-related activity than previously (16% compared with 17% previously).

Fewer are receiving one of a number of in-work and out-of-work benefits, but this should be considered in light of changes to the benefit system more broadly. Families are continuing to find it difficult to keep up with bills and regular debt repayments but there has been no change in the proportion saying they have fallen behind with rent payments in the last six months or in their ability to say they are managing financially. Fewer appear to have at least one loan or credit product but more now have a credit card than was the case two years ago (20% compared with 12% previously).

Education

Three in ten (28%) main carers have no formal qualifications. This is significantly higher than nationally (eight per cent have no qualifications) and, unsurprisingly, there has been no change in qualification levels for this cohort over the last two years.

Main carers are significantly less likely to have been called into school to talk about their child/ren's behaviour or that there are concerns about their child/ren's attendance.

Children in need

Among families in this cohort more children are in need or on a child protection plan than nationally but there has been no change on this measure over the last two years.

Half of households (50%) contain at least one child with special educational or other special needs. Again, as may be expected, there has been no change between the two surveys, but this remains higher than nationally. Families continue to want more support with these children (39% want a lot more support).

Health and wellbeing

Main carers in this cohort report several significant changes in their health behaviours and wellbeing since they were last interviewed two years ago. For example, fewer households contain at least one person with a long-standing illness or disability (73% compared with 77% previously). Fewer main carers report signs of probable mental ill health, using the GHQ-12 measure (42% score four or more compared with 48% previously). However, the proportion reporting that their own health as excellent or very good has not changed significantly (16% compared with 20%) and overall levels of wellbeing measured by the SWEMWBS scale are also unchanged.

In terms of risk behaviours, more report potentially problematic levels of drinking than two years ago measured on the AUDIT-C (consumption) scale, although the proportion at the highest end of the scale has not changed significantly. The change is largely driven by the proportion saying they are drinking more on a typical day drinking (17% say they consume seven or more drinks compared with seven per cent previously). There has been no change in the proportions reporting consumption of either prescription or street drugs.

Domestic abuse and violence

The majority of cohort families are happy in their relationships, consistent with two years ago (74% happy in both surveys). However, this level of happiness is lower than nationally (91%). Reflecting their high levels of happiness, three in five (64%) do not regret marrying or living with their partners at all.

While there has been no change in levels of reported domestic abuse or violence, there has been a significant increase in experience of sexual abuse in the home since this cohort of main carers were last interviewed, two years ago.

There has also been no change in the proportion experiencing non-sexual abuse, such as threats and force or non-physical abuse (emotional or financial) from a partner or other household member – but this experience is more extreme than nationally.

Crime and anti-social behaviour

Reporting of crime and anti-social behaviour has fallen across all questions asked over the two years between initial and follow-up surveys. For example, fewer report contact with the police (not as a victim) (14% compared with 23% previously), the use of force or violence in their home (five per cent compared with eight per cent at the initial survey) and the use of police action as a result of involvement in crime (five per cent compared with eight per cent at the initial survey). However, fewer say they or any other members of their family have ever been cautioned by the police or convicted of a crime, which perhaps suggests a general pattern of lower levels of reporting in relation to crimes and anti-social behaviour.

Service experience

The majority (80%) recall their allocated keyworker by name. Of these, just under half (45%) said they saw them frequently, at least once a week, and that they mostly supported their children (82%) and themselves (53%), and help was most common in terms of parenting and mental health issues.

Most (78%) recall agreeing a plan with their keywoker and, of these, almost all (96%) say they felt involved in making it and slightly fewer (84%) that they were clear about the changes they needed to make. Overall, four in five (83%) said they found their keyworker helpful, and agree that they took their time to get to know them (81%), were honest and clear and asked what they needed to change (both 80%).

On a range of measures cohort families are positive about the future, and, of note, more are confident that their worst problems are behind them than they were two years ago (60% compared with 53% previously).

Young people

The findings for young people need to take account of the fact that they have aged over the last two years, at a time where relatively small shifts in age can lead to major changes in attitudes and behaviours, for example, in relation to education and work, or legal versus illegal behaviours in relation to alcohol.

Many have moved from school-based education to higher education, and significantly more are now working. More have taken steps towards finding work, including a range of direct job search and training-related activities and in terms of aspirations more say they will be working in the next year.

As the young people in this cohort have aged, there have also been some significant changes in their health behaviours and wellbeing over the last two years. For example, they are less positive about their health than previously (but they are more positive than their carers) and feel less satisfied with their life than two years ago. However, they are also less likely to say other children or young people pick on or bully them. They are more likely to have ever drunk alcohol, and more likely to have done so at least twice in the four weeks prior to interview. However, there has been no change in the proportion reporting that they have been intoxicated. They are more likely to smoke cigarettes and to have tried at least one street drug.

In terms of crime and anti-social behaviour, findings for young people are consistent with their main carers, and the proportions reporting involvement is lower. Fewer report contact with the police (not as a victim of crime) as well as involvement in offending or having police action taken as a result of their involvement in crime.

Introduction

Introduction

This report contains findings from a longitudinal follow-up survey of families (main carers and selected young people) in receipt of help from the Troubled Families Programme, conducted by Ipsos MORI on behalf of the Ministry of Housing, Communities and Local Government (MHCLG).

Families were first interviewed in 2015/16 as they were starting on the programme, with the follow-up conducted in 2017/18 around 18 months later when the majority had completed their engagement. This report looks at how attitudes and circumstances for this cohort have changed during this time.

Background

The Troubled Families Programme

The Troubled Families Programme (2015-2020) aims to support up to 400,000 complex families with multiple high-cost problems by 2020. It is designed to help families with severe and persistent problems make significant and sustained progress towards their goals. Key features include promoting a whole family, early help approach across partner agencies including the police, housing, schools, voluntary sector and health.

Every family must have at least two of the following problems to be eligible:1

- Worklessness and financial exclusion
- Poor school attendance
- Crime and anti-social behaviour
- Children who need help (including Children In Need or on Child Protection Plans, children with Special Educational Needs (SEN))
- Physical and mental health problems
- Domestic abuse and violence

Local authorities committed to working with an agreed total number of families over a five year period from 2015/16. This involved prioritising families with multiple problems, of most concern and attracting the highest reactive costs. Local authorities also committed to engage in ongoing service reform. Each local authority appointed a keyworker/lead worker for each family to coordinate multiagency support, working towards agreed goals for every family for all of their problems. During the

¹ For full definitions of the six headline problems of the programme, please refer to the Financial Framework for the Expanded Troubled Families Programme: https://www.gov.uk/government/publications/financial-framework-for-the-troubled-families-programme-january-2018-onwards

engagement these goals were shared and jointly owned across local partners, such as the police, schools and health professionals.

The programme allows a high level of local discretion and national flexibility. Local areas have the flexibility to identify and prioritise families of greatest local concern and cost, and to commission services locally to meet families' needs. All local areas have their own local results framework (a Troubled Families Outcomes Plan) which sets out their outcomes and measures.

The Troubled Families evaluation

The national evaluation of the Troubled Families Programme aims to explore the level of service transformation driven by the programme as well as establishing the impact of the family intervention approach on the families themselves, and the cost benefits that this has for the taxpayer.

Key strands of the evaluation include:

- The Family Survey, on which this report is based, a quantitative longitudinal follow-up survey of families in receipt of help from the programme in 19 local authorities, providing a picture of families' lives and feedback on the keyworker experience.
- The National Impact Study, where individuals in families being worked with by all local authorities are matched to data held by other government departments and outcomes tracked throughout the programme. This is the best standard of evidence for measuring the impact of the programme.
- Annual staff surveys in the form of online quantitative surveys of delivery staff (Troubled Family Co-ordinators, keyworkers/local practitioners and Troubled Family Employment Advisers (TFEAs)).
- Qualitative research involving in-depth interviews with staff delivering the programme and families receiving services.

The Family Survey

This report focuses on the findings from the cohort of families who took part in both the initial and the follow-up waves of the Family Survey²; a key part of the evaluation that aims to demonstrate how attitudes and circumstances have changed for these families over the course of their interaction with the programme. To assess the family's circumstances, initial interviews were conducted with the main carer³ and one young person (aged 11-21) around the time they started on the programme. The same individuals were interviewed again around two years after the initial interview, to provide evidence of how their circumstances or attitudes may have changed.

The Family Survey aims to capture information on outcomes that either cannot be monitored through national administrative data or provide greater depth of understanding on these measures, but which are vital in providing a picture of the full effect of the programme, such as domestic violence and wellbeing. The survey also profiles the support families received from keyworkers, and perceptions of the quality and effectiveness of that support.

At the outset the aim was to compare findings from the family survey with counterfactual outcomes from a historical data set of UK families, using the UK Household Longitudinal Survey (UKHLS, or Understanding Society). This analysis, carried out by Bryson Purdon Social Research (BPSR), attempted to match families across a number of key characteristics in order to measure what would have happened in the absence of the intervention and therefore estimate the effect of the Troubled Families Programme over this period. However, on further investigation it was not possible to form a comparison group that was sufficiently robust and the survey cannot be used as a measure of impact of the programme. As a result, this analysis has not been presented alongside the family survey data in this report, but is summarised in the Appendix C.

Local authority participation

All local authorities were initially invited to participate in the research by MHCLG; they were briefed about the survey requirements either by email or at a presentation about the evaluation by the Areas Team. A total of 19 local authorities volunteered to take part. While these do represent a range of types of local authority area, a significant proportion is based in the North West. Due to the burden of participation and concerns about the numbers of families available within the specified timeframes, a

² Note that some families who took part in the initial survey were not interviewed in the follow-up. This may have been because their local authority indicated that they did not complete the programme or that taking part in the follow-up was not appropriate (e.g. recent bereavement). It may also have been because the family had moved and were not traceable.

³ Main carers are defined as the person who spends most time caring for the family (preparing meals, washing clothes, taking children to school etc.).

number of authorities in this region worked collaboratively to provide the target numbers. On the basis that the profile of families entering the programme is broadly similar across the country and that any change delivered is also consistent, it was felt that this regional emphasis should not lead to biased estimates.

The questionnaire

The initial questionnaire was designed with the full involvement of MHCLG and through consultation with colleagues in other government departments. In order to facilitate matching for the counterfactual, as far as possible, questions were taken from the UKHLS. Where questions on issues of specific interest were not covered in the relevant wave of the UKHLS, questions were based on those included in other national surveys.

The questionnaire was reviewed ahead of the follow-up. Some factual questions were removed if this information had already been gathered at the initial survey (e.g. ethnicity or parent employment when the main carer was aged 14). Additional questions were added to the service experience section, asking directly about the main carer's perceptions of support from their keyworker (note that this may be affected by recall issues due to the gap between the end of the intervention and interview but may also be influenced by the possible emotional strain that families were experiencing at the time (both positive and negative)). In addition, to reflect changes in policy focus a question was added to the main carer interview about whether the respondent regretted marrying as a measure of parental conflict. A question was also added to the young person interview about experience of carrying and intent to use a weapon as a measure of youth violence.

A copy of the questionnaire is provided under separate cover.

Research ethics

Activities prior to initial fieldwork (2015/2016)

To ensure families understood the research process, so they could give fully informed consent to taking part, several steps were taken:

• Local authorities identified families who were eligible to take part in the research (i.e. those who were near the beginning of the intervention). Note that while all families enrolled on the programme were eligible, local authorities could exclude those where participation was not considered appropriate, for example, due to family circumstances (e.g. recent bereavement), or where it was considered detrimental to the family intervention.

- Families identified as eligible were given a pre-notification letter and FAQ leaflet by their local authority. These materials explained the purpose of the research, and what taking part would involve. It also provided families with the opportunity to opt-out of the research, so that their details were not shared with Ipsos MORI.
- All local authorities entered a data sharing agreement with MHCLG, allowing them to provide families' details for the initial survey. These details were then sent to Ipsos MORI through a secure exchange site.
- Prior to contacting families for the initial survey, Ipsos MORI interviewers attempted to speak to
 the nominated keyworker to establish any relevant family history, language or literacy
 requirements and to confirm the details provided. In some instances, keyworkers helped by
 introducing the survey and interviewers directly to families.
- Interviewers also sent families an advance letter, as well as another copy of the FAQ leaflet shared by their local authority. The advance letter highlighted that their local authority had provided their contact details, the name of the Ipsos MORI interviewer who would be contacting them about the research, and reiterated that participation was voluntary and confidential.

Activities prior to follow-up fieldwork (2017/2018)

Following the initial survey a range of activities were undertaken with participating families and local authorities to ensure that those interviewed in the follow-up had completed the programme, were considered suitable for recontact and in order to maximise response rates.

Engagement with families

After the initial interview, interviewers left an information leaflet and change of address card with families. Together these were designed to answer any questions families might have after the interview and to allow them to update their contact details should they move.

All families interviewed were then sent two further keeping in touch (KIT) mailings. The first KIT mailing thanked them for taking part, reminded families about the follow-up study and asked them to contact the research team if they moved. The second mailing was similar but also included findings showing satisfication with the support received from their local authority, to help engage respondents in the study. Finally, prior to the follow-up survey interviewers sent an advance letter including their name

and contact details, and reiterated that participation was voluntary and confidential. Again, the FAQ leaflet was sent with the advance letter. 4

Local authorities

All participating local authorities were recontacted ahead of fieldwork for further information on the families' status in relation to the programme, and to ask for updated contact details. This was done for all families from the original sample regardless of whether they had taken part in the initial survey, to ensure confidentiality. They were also asked to provide the name of each family's keyworker for this to feed directly into the questionnaire (service experience section). At this stage, local authorities indicated whether a family had completed the programme or whether there were any known issues which would mean that taking part in the follow-up research was not appropriate. They also recorded if they knew a family had moved out of the local authority area.

As a result of this consultation with local authorities, it was clear that families had varying lengths of intervention, dependent on the level of support that they needed at the time. A two year gap between interviews was chosen to ensure that as many families as possible had completed their contact with the programme, but note that for some this would have happended more recently and for a small number contact with the local authority was ongoing.

At the request of several local authorities, this process of updating contact information was discussed with the Information Commissioner's Office (ICO) to confirm that the approach was consistent with the principles of the Data Protection Act (1998), the relevant legislation at the time. New data sharing agreements were set up between MHCLG and the individual local authorities to cover them providing updated sample files and to reflect the fact that Ipsos MORI would not contact those individuals who said they did not want to be recontacted.

Interviewer briefing

All interviewers were fully briefed before working on the survey. This included background to the programme and evaluation, the survey design, engagement issues, data linkage and questionnaire practice, as well as interviewer safety and respondent safeguarding.

Once interviewers began to contact a family, a minimum of six calls were made at each address at different times and on different days, including evenings and weekends in an attempt to complete an

⁴ Note that this information was updated to reflect the principles of the General Data Protection Regulation (GDPR) in May 2018.

interview. Interviewers were instructed to initally contact families face-to-face; after two attempts they could try to contact them using a telephone number for the main carer, if available.

Key information about the research was reiterated at the start of the interview by Ipsos MORI interviewers. This gave families the opportunity to talk through the information they had received and ask any questions. Informed consent was gained for all respondents in the research.⁵ Where the young person was aged between 11 and 15, interviewers obtained written consent from the parent/guardian to approach them and written consent from the young person to participate. For young people aged 16-21, written consent was obtained directly from the young person. All young people were able to refuse to be interviewed even where their parents had provided their consent.

Information was left with families so that they could get in touch if they had any queries or wanted to opt-out of the research.

Fieldwork

Interviews were carried out face-to-face and in-home between 14 October 2015 and 17 July 2016 for the initial interview and between 20 October 2017 and 23 September 2018 for the follow-up interview, using Computer Assisted Personal Interviewing (CAPI) and Computer Assisted Self-Interviewing (CASI). Where possible interviewers who spoke to the family at the initial survey were matched with the same family for the follow-up interview.

Prior to agreeing to the interview, respondents were offered an incentive as a 'thank you' for taking part (on completion) in the form of a Love2Shop voucher (£10 main carer and £5 young person). Interviewers were instructed to leave a further information leaflet with all households. There were two versions of the leaflet; for main carers this included information about data linkage and details of sources of support should they have been affected by any of the issues raised by the research; for young people, this only included relevant sources of support.

Response rates

In total, 1,061 families were issued to interviewers for follow-up interviews, and 654 interviews were completed with the same main carers and 307 with the same young people.

The overall adjusted response rate was 72%, ranging from 62% to 85% by local authority. These adjusted response rates are calculated by removing all unusable sample from the total sample

⁵ Prior to follow-up fieldwork, the consent process was updated to reflect the principles of GDPR.

received, including inaccessible addresses, movers, deceased, or those identified by local authorities as not completing the programme.

Interpretation of the data in this report

This report presents findings for a longitudinal sample of families (i.e. the same main carers and young people at two points in time, and referred to throughout as a 'cohort') who were enrolled on the Troubled Families programme, comparing their attitudes and experiences at a time when they were just starting to work with a keyworker⁶ to a time, around two years later, when the majority had completed their engagement in order to look at sustained outcomes. This means that families will have been at slightly different stages of intervention and post-intervention when interviewed.

Significant differences are shown using statistical testing for longitudinal samples, which allows for a high degree of statistical power. This would usually be achieved through the application of a paired t-test, where answers from the same people at two points in time are compared, assuming that these data are not independent and where the variables are continuous and normally distributed. However, for this data, where the outcomes are represented as binary categorical variables coded as 0 or 1 (0 representing negative and 1 positive answers), assumptions of continuity and normality do not hold, and it is more appropriate to apply McNemar's tests.

In each case, the test statistic is distributed as a chi-squared and for each relevant outcome variable the difference between baseline and follow-up responses are tested, to detect whether such difference is statistically significant. The significance level adopted is 5% for all tests. On relevant charts, where these tests have been applied, a table shows the percentage point difference for the overall question with an indication of whether the difference is significant. However, note that without the counterfactual data it is not possible to say whether any change observed is a result of Troubled Family programme interventions or other factors.

A full list of questions and variables tested is provided in the appendices.

It is also worth emphasising that some questions in the survey deal with respondents' perceptions rather than objective measures; in particular, these perceptions may not accurately reflect the level of services actually being delivered.

⁶ It was not possible to identify families before they started working with the programme.

Background information about families

In order to provide a check on representativeness at the time of the initial survey, local authorities were asked to provide information on the number of eligible families over the study period and the number opting-out or not included. Fifteen local authorities provided this information, although it was not all complete. However, the information provided indicates that while in some areas the vast majority of families enrolled on the programme were invited to participate by their local authority, this was by no means consistent, for example, some local authorities could exclude families where participation was not considered appropriate (see *Research Ethics* above). Note that this does have implications for the overall representativeness of the data.

At the outset local authorities were also asked to include an assessment and start date for each family, and at the follow-up stage they were asked to provide an end date. As with other information provided, this was incomplete and difficult to interpret consistently across areas. As a result, ahead of the follow-up, local authorities were also asked for further information about how they implemented the programme as further context for interpretation of the results:

- Confirmation of assessment and start dates: despite differing definitions most local authorities
 were able to confirm that the majority of families had only recently met their key worker or
 had a few weeks of support when contact details were initially provided, and that almost all
 had completed their intervention, with a very small number continuing to have contact with
 the local authority.
- The average length of intervention: to establish whether all families would have 'finished' the programme, local authorities were asked to describe the 'average' length of an intervention. Most confirmed this would last around 6-12 months with 'end' dates measured in various ways, including a claim being submitted, meeting an outcome-based measure, or triggered by a family moving or refusing to engage. In most cases, after leaving the programme, families would usually be 'stepped down' to other local services, such as the voluntary sector or schools. Further, in a small number of cases, interventions could be longer, where families require longer-term support. However, based on the information provided it is likely that families in the survey will have finished working with the Troubled Families Programme allowing measurement of post-intervention outcomes.

No weighting was applied to the data at the analysis stage due to the lack of detailed demographic information on the population of all families on the programme (main carers and young people), available from local authorities.

However, by matching household characteristics, it is clear that families included in the follow-up survey are representative of all families interviewed at the initial survey.⁷ This is summarised below (with further detail in the appendices):

- half of follow-up families (53%) are lone parents with dependent children (nationally, 22% of families with dependent children are lone parents);⁸
- a third (33%) are two parent families with dependent children;
- the mean household size is 4 (compared with 2.4 nationally);⁹
- the majority (59%) of household members continue to be aged between 0-18 years;
- four in five (82%) follow-up households rent (compared with 37% nationally), with one in ten (11%) owning their property with a mortgage or loan (63% for England as a whole);¹⁰
- of those who rent or live rent-free, four in five (82%) are social renters, including half (49%) who rent from their local authority and a third from (33%) a housing association, co-operative or charitable trust. One in twenty (six per cent) are private renters and one in ten (11%) rent from another individual; and,
- qualification levels continue to be low; 28% have no qualifications, 25% have a GCSE or equivalent (NVQ1-2) as their highest qualification, and 27% have an NVQ3+. Just eight per cent have an NVQ4+ compared with 42% nationally.¹¹

Note on the charts

The number of respondents answering (the base size) is shown for each question at the bottom of each chart. Note that an asterisk (*) represents a value below 0.5% but above zero. Where responses do not add up to 100%, this may be due to computer rounding (due to summing of responses) or multiple responses.

⁷https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/605190/Family_survey.pdf

⁸https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/families/bulletins/familiesandhouseholds/2017

⁹ Labour Force Survey, April-June 2017

¹⁰https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/710382/Dwelling_Stock_Estimates_2017_England.pdf

¹¹ Annual Population Survey 2017 http://www.nomisweb.co.uk/query/construct/submit.asp?menuopt=201&subcomp=#

National prevelance data

Where possible, to provide context, many of the questions included in the survey were taken from other national data sources, particularly the UKHLS. This data is presented to highlight the differences between these families and the national population. However, all national prevelance data should be treated with caution, given that different question wording and categories may have been used; this is highlighted where necessary. Further, this national data can only provide indicative comparisons due to inherent differences between family and population-based samples: differences may be due to the particular age and gender profile of the main carers interviewed. In addition, many include different time/reference periods.

Employment and financial exclusion

Employment and financial exclusion

Among the cohort of main carers interviewed when families were starting on the Troubled Families programme and at the follow-up interview two years later, the picture in terms of employment and financial exclusion is mixed.

- More main carers are in employment and fewer are unemployed but looking for work
- There has been no change in the proportion of workless households, i.e. where noone of working age has a job
- Most main carers have not actively taken any steps towards finding a job in the last year
- Fewer are receiving benefits than two years ago, particularly in-work and out-ofwork benefits
- Household incomes have remained low, and cohort families are continuing to find it difficult to keep up with bills and regular repayments
- There has also been no change in the proportion experiencing rent arrears, or perceptions of families' ability to manage financially
- Overall fewer say they have a loan or credit product but more have a credit card

Employment

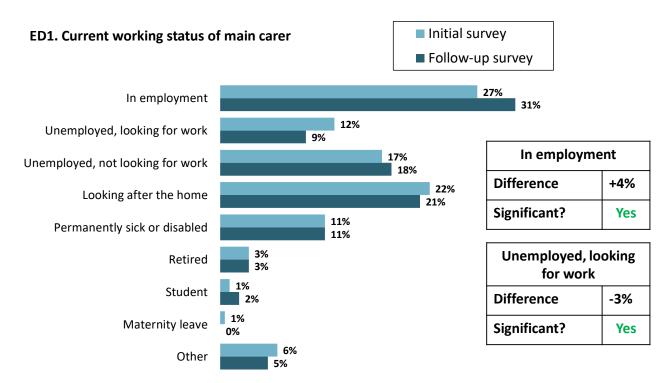
Work status

Main carers are more likely to be in employment than when they were interviewed two years ago and less likely to be unemployed

Compared with their situation two years ago, main carers interviewed in both waves of the research are significantly more likely to be in employment (31% compared with 27%) and less likely to be unemployed (26% versus 29% previously).

Looking in more detail at the unemployed, nine per cent are actively looking for paid work and 18% are not. While unemployment overall is lower, the proportion of this cohort who are unemployed but looking for work has fallen significantly (from 12% to nine per cent).

Similar proportions of this cohort remain looking after the home (21% compared with 22% two years ago), permanently sick or disabled (both 11%) or retired (both three per cent).



In employment refers to main carers in part-time, full-time and self-employment, as well as those on a Government training scheme.

Base: All main carers.

Initial survey: (654). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (654). Fieldwork dates 16 Oct 2017 – 16 Sept 18

Source: Ipsos MORI

The Labour Force Survey is a survey of all households in the UK, which provides some useful context in terms of the employment characteristics of follow-up families, as shown in the chart above¹². For example, while things have improved, this cohort of main carers is much less likely to be working than nationally (31% compared with 76% of adults measured by the Labour Force Survey) and more likely to be unemployed (27% versus four per cent). It should also be noted that the fall in unemployment levels for main carers reflects the broader national context of declining unemployment more generally (from five per cent in 2015/16 to four per cent in 2017/18).¹³

¹² Office for National Statistics, June-August 2018:

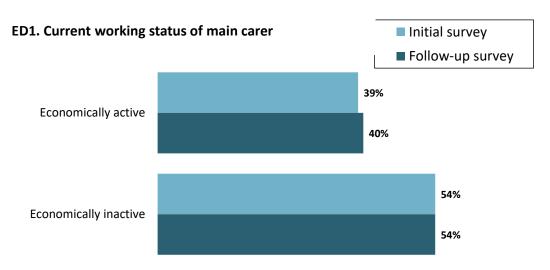
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¹³ Office for National Statistics, April-June 2016

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Economic activity is a measure of those in employment and the unemployed who are actively looking for work. While more are working, fewer are now unemployed but looking for work, which means overall levels of economic activity have not changed

Economic activity is a measure of the adult population who are either working or unemployed but actively looking for work, including those who are on a Government training scheme or maternity leave. In these terms, while more are in employment, the fact that fewer are unemployed but actively looking for work means there is no difference in rates of economic activity for this cohort of main carers over time (39% economically active at the initial survey compared with 40% at the follow up).



Economically active refers to main carers who are unemployed but actively looking for paid work, in part-time and full-time employment, on a Government training schemes or maternity leave.

Economically inactive refers to main carers who are not actively looking for paid work, doing unpaid work in family business, in retirement, studying, permanently sick or disabled, looking after the home.

Economically active	
Difference	+1%
Significant?	No

Base: All main carers.

Initial survey: (654). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (654). Fieldwork dates 16 Oct 2017 – 16 Sept 18

Source: Ipsos MORI

There has been no significant change in the proportion of families living in workless households

Workless households are those where no-one over the age of 16 is in employment, either because they are unemployed or economically inactive. In a national context the proportion of working households is increasing, and evidence shows that outcomes for children in workless households compared with those in working households on lower incomes are poorer in terms of education, and that these homes also experience high levels of parental conflict and ill health.¹⁴

Among the cohort of main carers interviewed in the follow-up survey more than half (55%) live in a workless household, i.e. they contain no-one over the age of 16 years in work. While many more cohort families are workless than found nationally (14%),¹⁵ there is no significant difference in the proportion of workless households than when these same families were interviewed two years ago (57%).

Workless household: No-one in household (aged 16 or over) currently working



Base: All households. Initial survey: (654). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (654). Fieldwork dates 16 Oct 2017 – 16 Sept 18 National data from Labour Force Survey (Apr-Jun '16; Jun-Aug '18)

Workless household	
Difference	-2%
Significant?	No

Source: Ipsos MORI

¹⁴ https://www.understandingsociety.ac.uk/sites/default/files/downloads/case-studies/52179 US CS Tackling Worklessness Lft web.pdf

¹⁵ Office for National Statistics, April-June 2016

https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/employmentandemployeetypes/bulletins/uklabourmarket/latest, and June-August 2018:

https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/employmentandemployeetypes/bulletins/uklabourmarket/latest

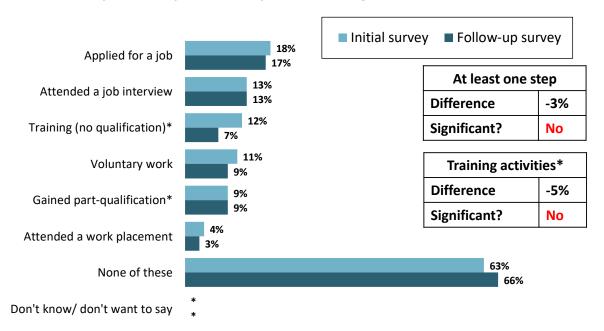
Work readiness

Most main carers in this cohort have not taken any steps towards finding a job, training or qualifications in the last year – no change from two years ago

In the last year, the majority of main carers (66%) have not taken any steps towards finding a job, training or qualifications. Among the one in three who have, this is most likely to include applying for a job (17%) or attending a job interview (13%). One in ten have completed some voluntary work or gained a part-qualification (both nine per cent), and slightly fewer (seven per cent) have done some training that did not lead to a qualification. Just three per cent have attended a work placement.

Compared with reported behaviour two years ago, at the overall level the proportion demonstrating work readiness has not changed significantly, either for those undertaking at least one step or any training related activities.

ED6. In the last year have you done any of these things?



Base: All main carers. Initial survey: (654). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (654). Fieldwork dates 16 Oct 2017 – 16 Sept 18

Ipsos MORI | Troubled Families programme – Family survey | 30

Looking at the demographics of main carers, there are some differences in terms of who has taken any of these steps:

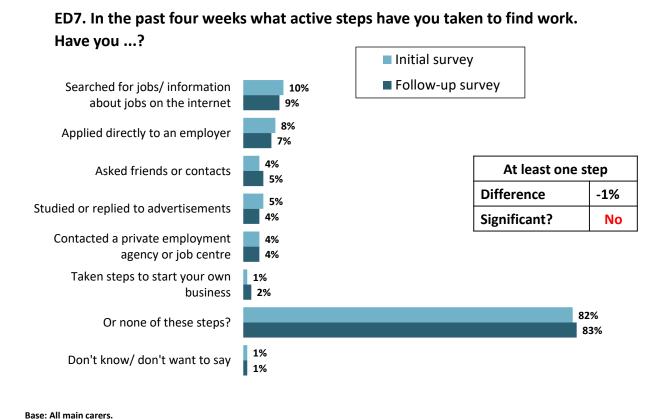
- Those currently working are more likely to have applied for a job (24% compared with 17% overall), attended a job interview (22% compared with 13%) or gained a part-qualification (14% compared with nine per cent;
- Main carers with a long term condition are less likely to have attended a job interview (10% compared with 13% overall); and,
- Those from black and minority ethnic backgrounds are more likely to have attended a job interview (21% compared with 13% overall) or work placement (13% versus three per cent).

Most main carers in this cohort have not undertaken any active job search activities in the last four weeks – a similar situation to two years ago

In the last four weeks, the majority of main carers (83%) have not taken any active steps to find work. Overall, around one in six (16%) have taken at least one step, including one in ten (nine per cent) who have searched for jobs and information online and seven per cent who have applied directly to an employer. Five per cent or fewer have asked friends or contacts, responded to advertisements or contacted an employment agency/job centre. Two per cent have taken steps to start their own business.

Of note, there are few differences among the main demographic sub-groups but those who have a partner are less likely to have undertaken at least one step (10% compared with 15%).

These actions are very similar to those reported by the same main carers two years ago.



15-007937 | Version 1 | Public | Internal Use Only | Confidential | Strictly Confidential [DELETE CLASSIFICATION] | This work was carried out in accordance with the requirements of the international quality standard for Market Research, ISO 20252:2012, and with the Ipsos MORI Terms and Conditions which can be found at http://www.ipsos-mori.com/terms. © [CLIENT NAME] 2016

Source: Ipsos MORI

Initial survey: (654). Fieldwork dates 14 Oct 2015 - 17 Jul 2016.

Follow-up survey: (654). Fieldwork dates 16 Oct 2017 - 16 Sept 18

Main carers continue to be optimistic about their future employment prospects – again, no change from two years ago

Taking everything together, main carers in this cohort continue to be optimistic about their future employment prospects. Over half (57%) say they will be working either full or part-time in the next year, although more say part-time than full-time (33% and 24% respectively).

Compared with attitudes two years ago, overall there is no significant difference in optimism about future employment prospects.

Initial survey ■ Follow-up survey 38% Working part-time* 33% 21% Working full-time* 24% 34% Not working 38% 7% Don't know/ don't want to say / +% Sig? can't remember 5% Working full/part time* -2% No Working full-time only +3% No

ED5. Taking everything together, in the next year do you think you will be...?

Base: All main carers. Initial survey: (654). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (654). Fieldwork dates 16 Oct 2017 – 16 Sept 18

Source: Ipsos MORI

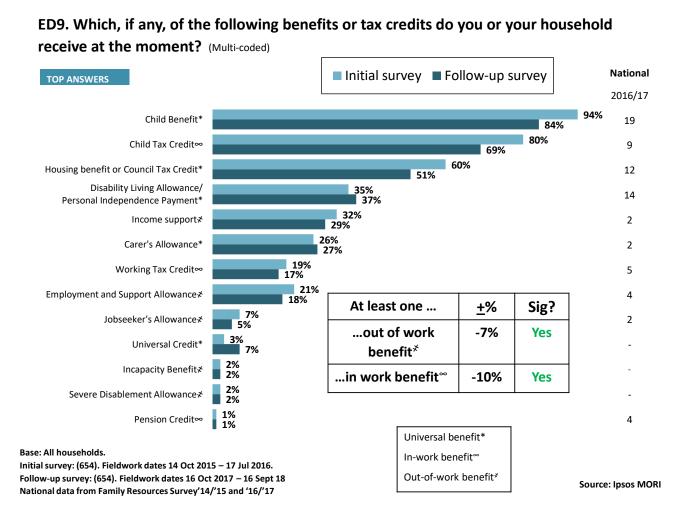
This level of optimism does vary by sub-group with those who are working more positive about their future employment prospects; 97% say they will be working either full or part-time in the next year compared with 57% overall. Non-workers are less positive about the future; 54% say they won't be working compared with 38% overall. Those with a long-term condition are also more likely to say they will not be in work (49%).

Financial exclusion

Benefits

Overall fewer cohort families are receiving benefits than they were two years ago, particularly in-work and out-of-work benefits

Overall, fewer cohort families are receiving a number of benefits compared with their situation two years ago, as shown in the chart below. However, note that some of this change may be a result of changes to the benefits system, with families moving onto Universal Credit. This possibly explains some of the falls for Child Tax Credit, Housing Benefit, Income Support, Employment and Support Allowance and Job Seekers Allowance, and is described in more detail below.



- The fall is greatest for in-work benefits; 74% have at least one compared with 84% previously. The majority of this change is a result of the fall in those receiving Child Tax Credit (69% compared with 80% previously), this is despite almost all households containing at least one dependent child.
- However, significantly fewer are also receiving out-of-work benefits: 51% have at least one compared with 58% when they were interviewed two years ago. Fewer are receiving Income Support or Employment and Support Allowance (ESA), but there is no change in the proportion receiving Incapacity Benefit or Severe Disablement Allowance (SDA).
- The change is less marked for universal benefits at the overall level; 94% have at least one compared with 97% previously. However, the picture for each of the specific universal benefits is more diverse, with falls of around ten percentage points in the proportion receiving both Child Benefit and Housing benefit/Council tax credit. In contrast there have been small increases in the proportions receiving Disability Living Allowance, Carer's Allowance and Universal Credit.¹⁶

Receipt of benefits and tax credits continues to be higher for these families when compared with national data from the Family Resources Survey,¹⁷ as shown in the chart above. While there are differences in terms of the populations being measured that should be considered when making comparisons (longitudinal family survey versus nationally representative population data), the differences in benefit receipt highlight some of the issues these families are continuing to face, including low incomes and health problems.

¹⁶ Note that Universal Credit has been included as a 'universal benefit' for analysis purposes. It does replace out of work benefits (including Job Seekers Allowance, Employment Support Allowance and Income Support) but also includes in-work benefits (Child Tax Credit and Working Tax Credit) and universal benefits (housing benefit).

¹⁷Family Resources Survey 2016/17: https://www.gov.uk/government/statistics/family-resources-survey-financial-year-201617

Household income

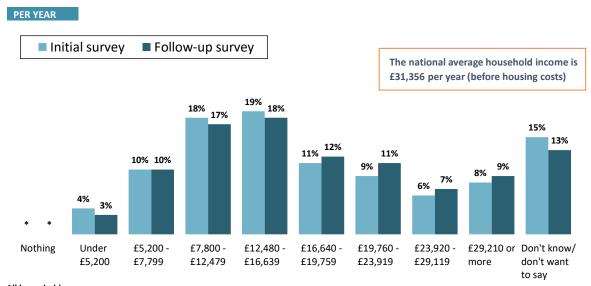
Household incomes have remained low for these families

Household incomes remain relatively low, with around half who have a total take-home income after tax and other deductions of below £16,640 a year (48% compared with 51% two years ago). Fewer than one in ten have an income of £29,210 or more (nine per cent compared with eight per cent previously).

Taking into account the size and composition of each household using the modified OCED equivalisation, 66% have a net household income below £12,500 a year.

As context, the Family Resources Survey estimates the mean average household income for individuals, before housing costs, as £31,356 in the financial year ending 2017.¹⁸

ED10. Which of these represents your household's total take-home income after tax and other deductions? Please think about all sources of income, including from work, benefits, pensions, child maintenance, rent or other sources.



Base: All households. Initial survey: (654). Fieldwork dates 14 Oct 2015 – 17 Jul 2016.

Follow-up survey: (654). Fieldwork dates 16 Oct 2017 – 16 Sept 18.

National data from Family Resources Survey, ONS 2017, Equivalised disposable household income for England

Source: Ipsos MORI

¹⁸ Office for National Statistics, 2017, Equivalised disposable household income for individuals in average 2016/17 prices (three year average), Available from: https://www.gov.uk/government/statistics/hbai-199495-to-201617-incomes-data-tables

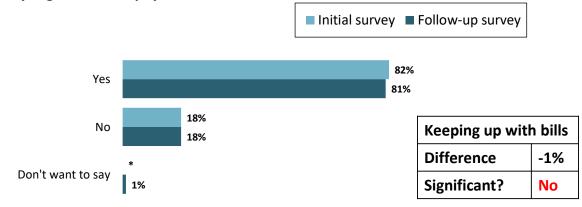
Attitudes to finance

Cohort families are continuing to find it difficult to keep up with bills and regular debt repayments

There has been almost no change in families' abilities to keep up with bills and other regular debt repayments over the last two years. In both surveys, four in five of this cohort said they had been finding it difficult (81% and 82% respectively).

Among the main sub-groups, those finding it harder to keep up with payments include main carers who are not working (78%), have a long-term illness or disability (76%) or no qualifications (75%), as well as workless households (77%).

ED11 In the last six months, have you (and your partner) been keeping up with bills and any regular debt repayments?



Base: All households.

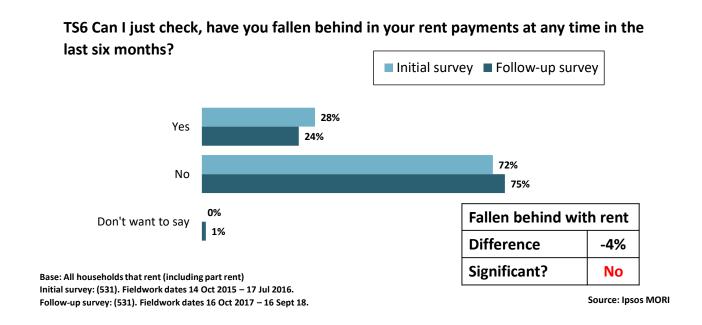
Initial survey: (654). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (654). Fieldwork dates 16 Oct 2017 – 16 Sept 18.

Source: Ipsos MORI

There has also been no significant change in the proportion of these families who have fallen behind in rent repayments in the last six months

There has been no significant change in the proportion of cohort families who have have fallen behind in their rent payments at some point in the six months prior to their interview (24% compared with 28% previously). This finding is consistent among the main sub-groups.

To provide some context, the English Housing Survey reports on rent arrears for social and private renters separately; of cohort families who rent, 67% are social renters. Nationally arrears are higher for those in the social rented sector, with 25% having fallen behind in 2016-17 compared with nine per cent who rent privately. These figures suggest that the proportion of families who have been on the programme and fallen behind with rent payments is similar to others who rent from the local authority or a housing association across England as a whole.

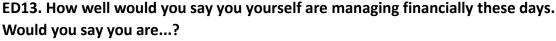


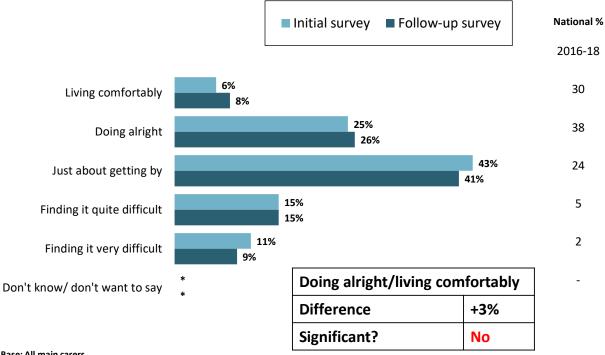
¹⁹ Department for Communities and Local Government, 2016, English Housing Survey 2013 to 2014: Headline report, Available from: https://www.gov.uk/government/statistics/english-housing-survey-2013-to-2014-headline-report

There is no significant change in cohort families' perception of their ability to manage financially compared with two years ago

There is no significant change in families' perception of their their ability to manage financially. Similar proportions say they are living comfortably/doing alright (34% compared with 31% two years ago) and are finding it difficult (24% compared with 26% previously).

These families continue to find it more difficult to manage than families nationally, where seven per cent find it difficult.





Base: All main carers
Initial survey: (654). Fieldwork dates 14 Oct 2015 – 17 Jul 2016.
Follow-up survey: (654). Fieldwork dates 16 Oct 2017 – 16 Sept 18.
National data from Understanding Society Wave 8 (Jan '16- Dec '18)

Source: Ipsos MORI

Among the main sub-groups, there is a similar pattern in terms of those who are less likely to be managing financially, including main carers with no partner or who have a long-term condition (29% and 26% respectively) as well as those living in workless households (29%).

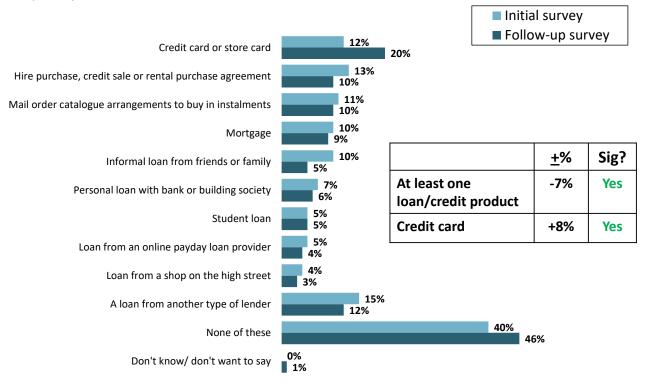
Loans and credit products

While fewer have at least one loan or credit product, more have a credit card than was the case two years ago

Overall there has been a significant fall in the proportion of families who have at least one type of credit product or loan. When these families were just starting the programme this applied to three in five main carers (60%) and now has fallen to half (53%).

However, in terms of individual types of loan the picture is more complex. Significantly more now have a credit or store card (20% compared with 12% two years ago), and fewer have a range of other products including hire purchase agreements, informal loans and loans from another type of lender.

ED12. Do you have any of the following loans or credit products, either in your own name or jointly with someone else? (Multi-coded)



Base: All main carers.

Initial survey: (654). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (654). Fieldwork dates 16 Oct 2017 – 16 Sept 18

Education

Education

There are no significant changes in the educational attainment of main carers in this cohort.

Main carers were also asked about the behaviour of their children at school, and fewer report issues in this respect, or with their attendance.

Educational attainment

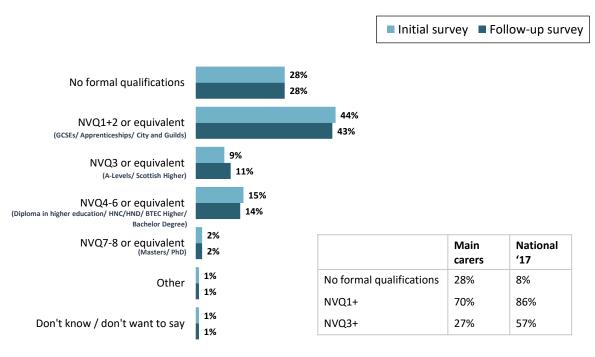
Main carer

There has been no change in the highest level of qualifications achieved by this cohort of main carers since they were last interviewed

Seven in ten (71%) main carers have at least one qualification, with two in five (43%) having an NVQ1-2 or equivalent and one in ten (11%) A-levels (or equivalent). One in three (28%) do not have any formal qualifications.

As may be expected, there has been no significant change in qualification levels among these main carers since they were first interviewed two years ago, and qualifications continue to be lower than among the population as a whole.²⁰

ED8. Which, if any, is the highest qualification you have?



Base: All main carers.

Initial survey: (654). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (654). Fieldwork dates 16 Oct 2017 – 16 Sept 18. National data from the Annual Population survey 2017.

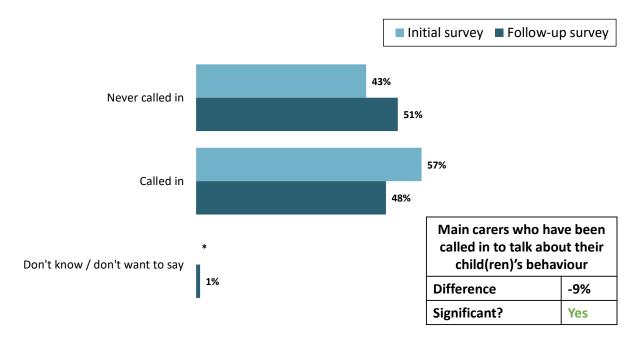
²⁰Annual Population Survey 2017 Aged 16-64 http://www.nomisweb.co.uk/query/construct/submit.asp?menuopt=201&subcomp=#

Children's behaviour in school

Fewer main carers have been called into school to talk about their child(ren)'s behaviour

Around three in five (57%) main carers said they had been called in to talk about their child(ren)'s behaviour at the initial survey. In the follow-up just under half (48%) reported this. This is a significant decrease of nine per cent.

CB2/CB3. In the last six months how often has the school/college or sixth form/Pupil Referral Unit (PRU) called you or asked you to come in to talk about the behaviour of (interviewed young person) / any of your other children?

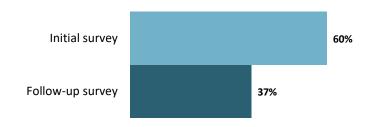


Base: All where young person interviewed/other children aged 18 or under and at school/college/sixth form/Pupil Referral Unit (PRU). Initial survey: (496). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (496). Fieldwork dates 16 Oct 2017 – 16 Sept 18.

Fewer main carers have also been told there are concerns with their child(ren)'s attendance at school or college

When the initial survey was conducted, three in five (60%) main carers were told that there were concerns about their child(ren)'s attendance at school or college. This has significantly fallen with just under two in five (37%) reporting this in the follow-up survey.

CB4/CB4OTH. Have you been told that there are concerns about the attendance of any of your children at their school/college or sixth form or Pupil Referral Unit (PRU) over the last three school terms?



Main carers who have been called in to talk about their child(ren)'s attendance	
Difference	-23%
Significant?	Yes

Base: All with child(ren) aged 18 or under at school/college/sixth form/Pupil Referral Unit (PRU). Initial survey: (501). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (501). Fieldwork dates 16 Oct 2017 – 16 Sept 18.

Children in need

Children in need

Troubled Family households are more likely to be considered in need or on a child protection plan than nationally but there has been no change on these measures between surveys.

There has also been no change in the proportion saying they have a child with a Special Educational Need (SEN) or other special need.

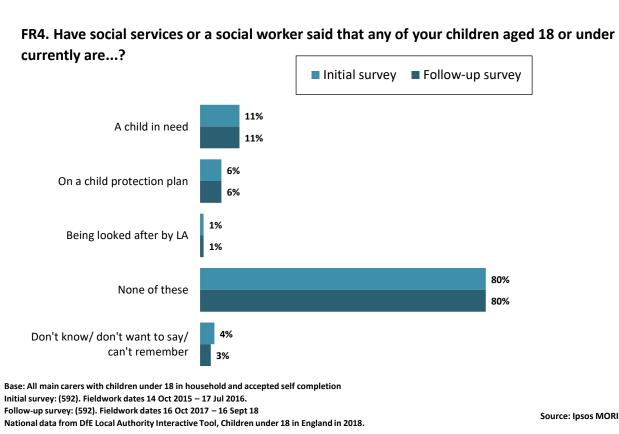
Families continue to want more support with these children.

Children in need

More children are in need or on a child protection plan than nationally, but there has been no change for cohort families on this measure

Local authority data from the Department for Education indicates that levels of children in need²¹ are higher among families on the programme than for England overall,²² though it is important to consider differences in the populations being measured (a family level survey versus data for all children under 18).

There has been no change in the proportion of cohort households with children under the age of 18 years including a child in need (11% in both surveys), a child on a protection plan (six per cent in both surveys) or who are looked after by the local authority (both one per cent).



²¹ A child in need is defined under the Children Act 1989 as a child (under 18) who is likely to: need local authority services to achieve or maintain a reasonable standard of health or development; need local authority services to prevent significant or further harm to health or development; be disabled.

²² Department for Education, 2018, Local Authority Interactive Tool, Available from: https://www.gov.uk/government/publications/local-authority-interactive-tool-lait

Special Educational Needs (SEN)

There has been no significant change in the proportion of children with special educational needs or other special needs living in cohort family households

Half (50%) of cohort family households include at least one child with special educational needs or other special needs (SEN)²³, a similar proportion to when they were interviewed two years ago (52%).

Although there are differences in the way this is calculated, this is considerably higher than the English national figure among school aged children of 14.6% (based on all pupils on the school roll 2014/15, including nursery and independent schools).²⁴

HWB8/9. Do any of your children have any special educational needs or other special needs?



Has child with special educational needs	
Difference	-2%
Significant?	No

Base: All main carers with children in household Initial survey: (567). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (567). Fieldwork dates 16 Oct 2017 – 16 Sept 18

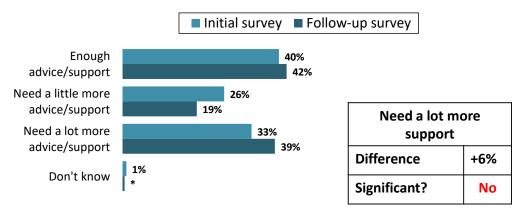
²³ A young person has special educational needs (SEN) if they have a learning difficulty or disability which calls for special educational provision. A learning difficulty or disability is defined as a significantly greater difficulty in learning than the majority of others of the same age, or a disability which prevents or hinders a person from making use of facilities of a kind generally provided for others of the same age in mainstream schools/post-16 institutions.

²⁴ Department for Education, 2018, SFR 25/2018: Special educational needs in England, January 2018, Available from: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/729208/SEN_2018_Text.pdf

More cohort families would like a lot more support with their children with special education needs or other special needs

Of those main carers with children who have special educational or other needs almost three in five (58%) feel they need more advice and support to help their children, including two in five (39%) who would like a lot more assistance. While there has been an increase in the proportion who would like a lot more support (39% versus 33% previously), this difference is not significant.

HWB10. Do you feel you have had enough advice or support to help your children with their any special educational needs or other needs?



Base: All households with children with special educational or other needs Initial survey: (233). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (233). Fieldwork dates 16 Oct 2017 – 16 Sept 18

Health and wellbeing

Health and wellbeing

The cohort of main carers who have been on the Troubled Families Programme, report several significant changes in relation to their health behaviours and wellbeing:

- Although visits to the GP and A&E remain high, cohort families are less likely to have made multiple visits to their GP (i.e. seven or more times) in the last six months
- Fewer households contain at least one person with a long-standing health
- These main carers are less likely to indicate probable mental ill health as measured by GHQ-12 specifically, they are less likely to say they have recently felt constantly under strain, lost much sleep over worry or lost much confidence in themselves
- Although overall levels of wellbeing have not significantly changed (as measured by SWEMWBS), more report feeling relaxed in the past two weeks
- While the proportion who drink alcohol is unchanged, more indicate potentially problematic levels of drinking (although the proportion at the highest end of the scale has not significantly changed)

Notably, where figures on national prevalence are available members of cohort families are less positive or exhibit more extreme behaviours. This is also true on a number of other measures, where cohort behaviours and attitudes remain unchanged:

- There has been no change in the proportion rating their health as very good or excellent and similar proportions are satisfied with their life overall
- There has been no change in the proportion of main carers who smoke cigarettes or report taking either prescription or street drugs in the last six months

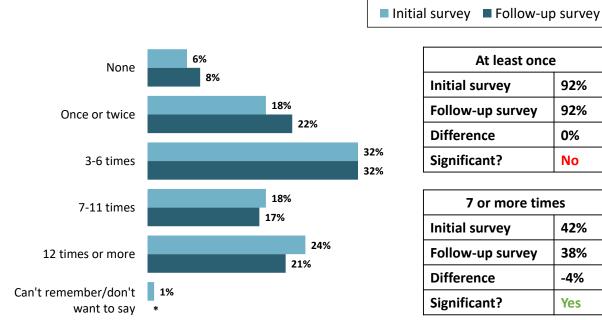
Visits to a GP and A&E

Main carers are less likely to have made multiple visits to a GP or family doctor than they were two years ago

Not surprisingly for a cohort of families, almost all (92%) have visited a GP in the last six months for an illness or issue that they or their child has had. To set this in context, national figures show this to be high; 77% of adults (aged 16+) had personally visited an NHS GP in the last 12 months (but the differences in reference period and person (individual versus household) should be noted).²⁵

However, the proportion of cohort families visiting a GP or family doctor seven or more times has significantly decreased over the last two years (42% in the initial survey, now 38%).

HWB3. In the last six months roughly how many times have you been to a GP or family doctor for an illness or issue you or any of your children has had? Please do not include any visits to a hospital.



At least once	
Initial survey	92%
Follow-up survey	92%
Difference	0%
Significant?	No

7 or more times	
Initial survey	42%
Follow-up survey	38%
Difference	-4%
Significant?	Yes

Base: All main carers.

Initial survey: (654). Fieldwork dates 14 Oct 2015 - 17 Jul 2016. Follow-up survey: (654). Fieldwork dates 16 Oct 2017 - 16 Sept 18.

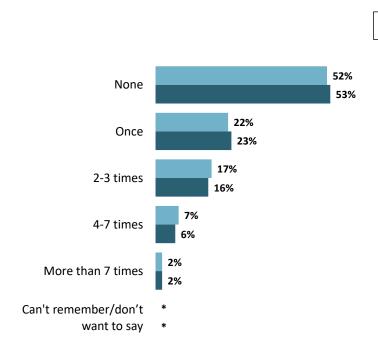
²⁵ Ipsos MORI Public Perceptions of the NHS Tracker, Winter 2016, Available from: https://www.ipsos.com/sites/default/files/ct/publication/documents/2018-06/16-070450-01 nhs public perceptions tracker 2016 v1 public.pdf

There has been no significant change in the number of A&E visits, though national figures suggest these families are more reliant on urgent and emergency care than the population in general

There has been almost no change over the last two years in relation to the number of A&E visits made in the last six months. In both surveys, around one-quarter of this cohort said they had visited A&E on at least two occasions for an illness or accident they or their child experienced (26% and 24% respectively).

Although there are differences in reference period and a focus on individual rather than family visits, national figures show this to be are high; while 25% nationally have visited A&E in the last 12 months²⁶ this compares with 47% of cohort families in the last six months.

HWB4. And in the last six months roughly how many times have you been to Accident & Emergency (A&E) for an illness or accident you or any of your children has had?



2 or more times	
Initial survey	26%
Follow-up survey	24%
Difference	-2%
Significant?	No

■ Initial survey
■ Follow-up survey

Base: All main carers.
Initial survey: (654). Fieldwork dates 14 Oct 2015 – 17 Jul 2016.
Follow-up survey: (654). Fieldwork dates 16 Oct 2017 – 16 Sept 18.

²⁶ Ipsos MORI Public Perceptions of the NHS Tracker, Winter 2016, Available from: https://www.ipsos.com/sites/default/files/ct/publication/documents/2018-06/16-070450-01 <a href="https://www.ipsos.com/sites/default/files/ct/publication/documents/2018-06/16-070450-01

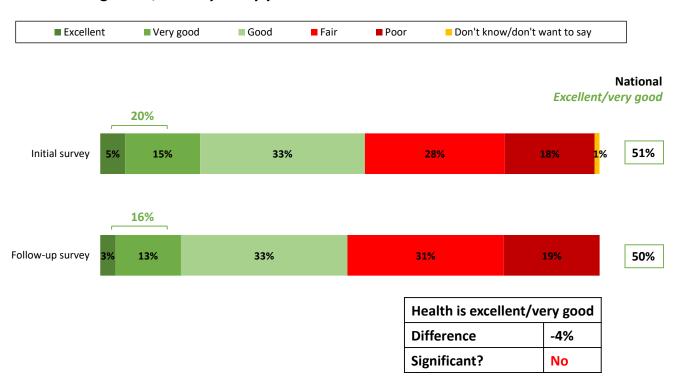
Health status

Similar to two years ago, main carers in this cohort of families are less likely to rate their health as very good or excellent compared with the population as a whole

Over the last two years there has been no significant change in the proportion of main carers in this cohort who say health is either very good or excellent (20% in the initial survey, compared with 16% at the follow-up).

Again in national context, this cohort remain less positive about their own health than the population as a whole (where half, aged 16 or over, rate their health as either very good or excellent).²⁷

SCHWB5. In general, would you say your health is...



Base: All main carers who accepted self-completion.
Initial survey: (609). Fieldwork dates 14 Oct 2015 – 17 Jul 2016.
Follow-up survey: (609). Fieldwork dates 16 Oct 2017 – 16 Sept 18.
National data from Understanding Society (wave 5, Jan'13-Jun'15; wave 7, Jan'15-Jun'17).

²⁷ Institute for Social and Economic Research (ISER), University of Essex. Understanding Society. Wave 7 (Jan'15-Jun'17). Available from: https://www.understandingsociety.ac.uk/documentation/mainstage/dataset-documentation

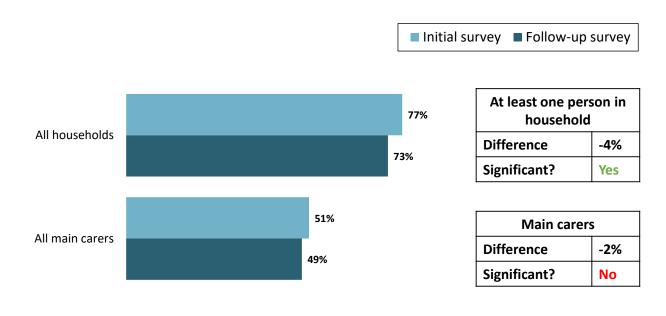
Long-standing illness or disability

Compared with two years ago, the proportion of households containing at least one person with a long-standing health condition has decreased

The proportion of Troubled Families households containing at least one person with a long-standing condition has significantly decreased (from 77% to 73% of households). However, there has been no change among main carers: around half of main carers in this cohort consider themselves to have a long-standing condition (51% in the initial survey and 49% in the follow-up survey).

Incidence of a long-term condition remains higher for this cohort than the population as a whole: applicable to a third of individuals aged 16 or over (33%) nationally.²⁸

HWB5/6/7. Do you have any long-stand physical or mental impairment, illness or disability? By 'long-standing' I mean anything that has troubled you over a period of at least 12 months or that is likely to trouble you over a period of at least 12 months.



Base: All main carers. Initial survey: (654). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (654). Fieldwork dates 16 Oct 2017 – 16 Sept 18.

²⁸ Institute for Social and Economic Research (ISER), University of Essex. Understanding Society. Wave 7 (Jan'15-Jun'17). Available from: https://www.understandingsociety.ac.uk/documentation/mainstage/dataset-documentation

Mental health and wellbeing

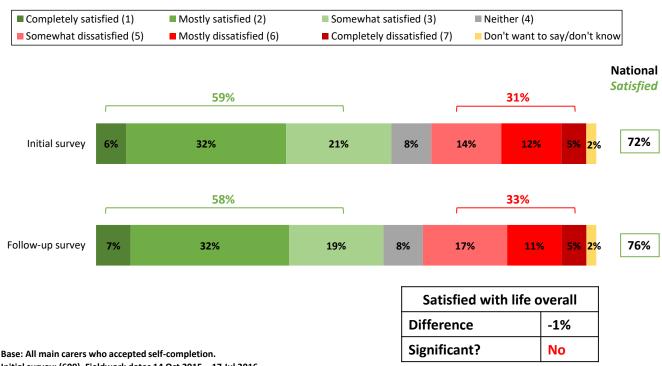
Life satisfaction

Similar proportions of main carers are satisfied with their life compared with two years ago – though this remains lower than satisfaction among the population as a whole

Over the last two years, there has been no significant change in the proportion of main carers in this cohort who are satisfied with their life overall (59% somewhat, mostly or completely satisfied in the initial survey, compared with 58% at the follow-up).

Compared with national findings, this cohort remain less satisfied with their life than the population as a whole (where three-quarters (76%) of individuals aged 16 or over are satisfied).²⁹

SCHWB1. Please select the number which you feel best describes how dissatisfied or satisfied you are with your life overall?



Base: All main carers who accepted self-completion.
Initial survey: (609). Fieldwork dates 14 Oct 2015 – 17 Jul 2016.
Follow-up survey: (609). Fieldwork dates 16 Oct 2017 – 16 Sept 18.
National data from Understanding Society (wave 5, Jan'13-Jun'15; wave 7, Jan'15-Jun'17).

²⁹ Institute for Social and Economic Research (ISER), University of Essex. Understanding Society. Wave 7 (Jan'15-Jun'17). Available from: https://www.understandingsociety.ac.uk/documentation/mainstage/dataset-documentation

General Health Questionnaire (GHQ-12)

The proportion of main carers in this cohort indicating probable mental ill health has significantly declined over the last two years

The General Health Questionnaire (GHQ)³⁰ is a widely-used self-administered screening device for assessing the mental wellbeing of the general population in a non-clinical setting. It is a self-administered questionnaire that assesses the respondent's current state and asks if that differs from his or her usual state. As a result, it is deemed sensitive to short-term disorders but is not recommended for diagnosis of specific psychiatric problems.

The 12-item version used in this study is considered to have comparable psychometric properties to the longer (60-item and 28-item) versions, and consists of six positively and six negatively phrased questions. Each item is rated on a four-point scale indicating whether each item is 'not at all' present, present 'no more than usual', present 'rather more than usual' or present 'much more than usual'. To allow comparison with population norms derived from the Health Survey for England, the standard GHQ coding method has been applied; a score of zero for the first two responses and one for the latter two, producing a maximum score of 12 for any individual.

While there is no formal threshold for identifying probable mental ill health, the Health Survey for England groups participants' scores according to three categories:

- 0: no evidence of probable mental ill health
- 1-3: less than optimal mental health
- 4 or more: indicating probable psychological disturbance or mental ill health

Compared with two years ago, the proportion of main carers who scored four or more on the GHQ-12 scale has significantly declined: from 48% in the initial survey, to 42% in the follow-up survey. However, compared with national data for both women and men³¹, these main carers indicate higher levels of probable mental ill health.³²

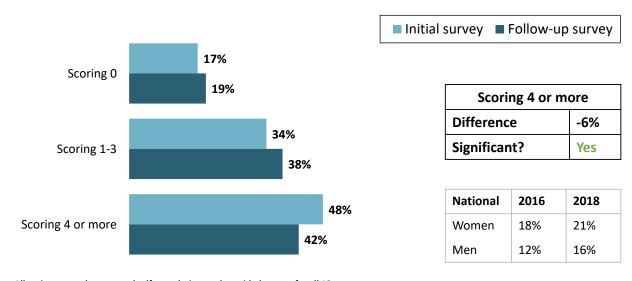
³⁰ The Health and Social Care Information Centre, 2013, Chapter four, General mental and physical health, Available from: http://content.digital.nhs.uk/catalogue/PUB13218/HSE2012-Ch4-Gen-health.pdf

³¹ Health Survey for England (2016). Available from https://digital.nhs.uk/data-and-information/publications/statistical/health-survey-for-england/health-survey-for-england-2016

³² Please note, due to small base sizes it is not possible to provide GHQ-12 scores by gender for main carers in the Family Survey cohort.

GHQ-12 Scores

Scores on the General Health Questionnaire (GHQ-12) range from 0 to 12. Generally, a score of 4 or more is indicative of probable mental ill health



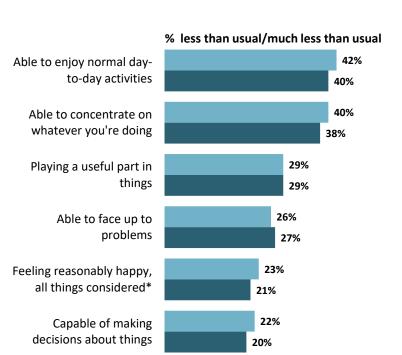
Base: All main carers who accepted self-completion, and provided a score for all 12 statements. Initial survey: (523). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (523). Fieldwork dates 16 Oct 2017 – 16 Sept 18. National data from Health Survey for England (2014; 2016).

Main carers are less likely to have felt under strain, lost sleep over worry or lost confidence in themselves than two years ago

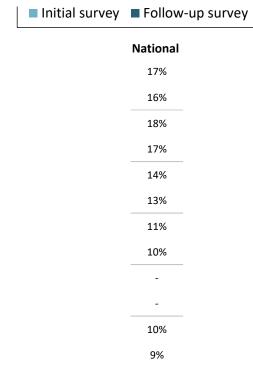
The following charts look at the distribution of scores across each of the 12 items; the first chart lists the positively phrased questions and the second those negatively phrased.

There has been no change in response to the positive statements, but main carers in this cohort remain less positive than nationally.³³ However, compared with the initial survey, the proportion who have recently felt under strain, lost sleep over worry or lost confidence in themselves has significantly declined. In addition, on these statements, the gap between the cohort and population nationally has narrowed.³⁴

GHQ-12. Six positively-phrased items







*Scale for this statement reversed: % much more/rather more

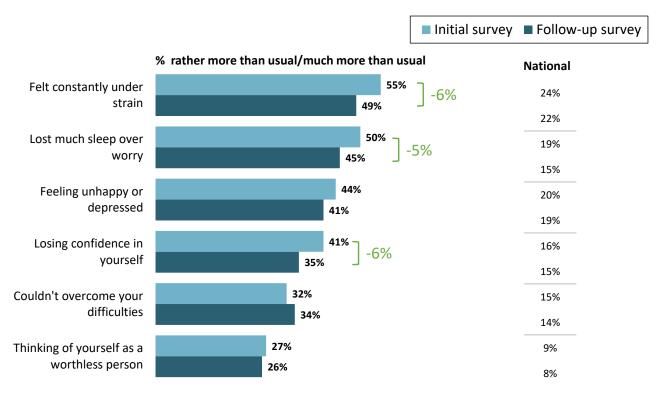
Source: Ipsos MORI

Available from: https://www.understandingsociety.ac.uk/documentation/mainstage/dataset-documentation

³³ Institute for Social and Economic Research (ISER), University of Essex. Understanding Society. Wave 7 (Jan'15-Jun'17). Available from: https://www.understandingsociety.ac.uk/documentation/mainstage/dataset-documentation

³⁴ Institute for Social and Economic Research (ISER), University of Essex. Understanding Society. Wave 7 (Jan'15-Jun'17).

GHQ-12. Six negatively-phrased items



Base: All main carers who accepted self-completion.
Initial survey: (609). Fieldwork dates 14 Oct 2015 – 17 Jul 2016.
Follow-up survey: (609). Fieldwork dates 16 Oct 2017 – 16 Sept 18.
National data from Understanding Society (wave 5, Jan'13-Jun'15; wave 7, Jan'15-Jun'17).

Note: Significant differences are highlighted in green

Warwick-Edinburgh Mental Wellbeing Scale (short-version, SWEMWBS)

Compared with two years ago, the overall levels of wellbeing among main carers in this cohort have not significantly changed

The Warwick-Edinburgh Mental Wellbeing scale (WEBWMS) was developed to enable the monitoring of mental wellbeing in the general population and has been widely used in the evaluation of projects, programmes and policies which aim to improve mental wellbeing. It is a model of mental wellbeing that involves both feeling good and functioning well. SWEMWBS is a shortened version, comprising a seven rather than 14-item scale. The seven items selected relate more to functioning than to feeling and offer a slightly different perspective on mental wellbeing, but the two scales are highly correlated. It is easy to complete and considered to capture concepts of wellbeing in a familiar way.³⁵ Scores for SWEMWBS are obtained by summing the score for each item on a scale of 1-5 ('none of the time' through to 'all of the time'). This gives a range of scores between 7 and 49 for each individual, with higher scores indicating greater levels of wellbeing. For SWEMWBS each score must be transformed using a conversion table.³⁶

Over the last two years, there has been no significant change in the mean SWEMWBS scores for these main carers: from 20.5 in the initial survey, to 20.6 in the follow-up survey.

³⁵ Warwick Edinburgh Mental Wellbeing Scale (WEMWBS), 2015, User guide – Version 2, Avialbale from: http://www2.warwick.ac.uk/fac/med/research/platform/wemwbs/researchers/userguide/wemwbs_user_guide_jp_02.02.16.pg

³⁶ Warwick Medical School, 2015, Guidance on scoring, Available from: http://www2.warwick.ac.uk/fac/med/research/platform/wemwbs/researchers/quidance/

SWEMWBS Scores

Scores on the Warwick-Edinburgh Mental Wellbeing Scale (short-version) range from 7 and 49, with higher scores indicating greater levels of wellbeing.



Difference in mean	
scores	
Difference	+0.08
Significant?	No

Base: All main carers who accepted self-completion, and provided a score for all 7 statements. Initial survey: (572). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (572). Fieldwork dates 16 Oct 2017 – 16 Sept 18.

Source: Ipsos MORI

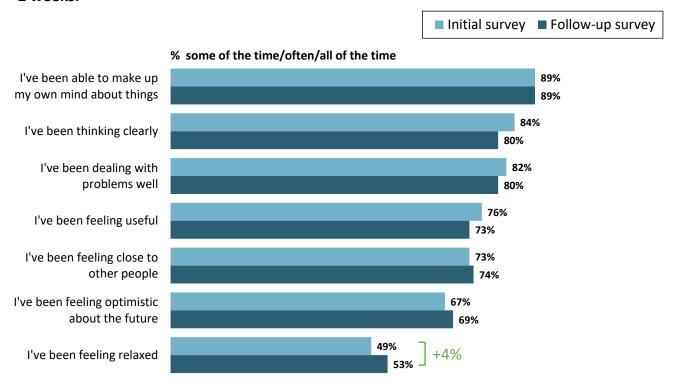
An up-to-date published figure for the short form of WEMWBS is not available, but based on data for 2011, the corresponding national figure is 23.6,³⁷ indicating that levels of wellbeing are lower than for England as a whole.

³⁷ Health Survey for England, (2011). Avaiable from: https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/researchers/interpretations/wemwbs population norms in health survey for england data 2011.pdf

Although overall levels of wellbeing have not significantly changed, main carers in this cohort are more likely to report feeling relaxed in the past two weeks than previously

Looking at these elements individually, compared with two years ago only one item in the SWEMWBS scale has significantly changed. Main carers in this cohort are more likely to say they have been feeling relaxed at least 'some of the time' in the past two weeks than they were two years ago (49% in the initial survey, compared with 53% in the follow-up survey).

SWEMWBS. Please say how often, if at all, you have felt each of the following in the past 2 weeks.



Base: All main carers who accepted self-completion. Initial survey: (609). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (609). Fieldwork dates 16 Oct 2017 – 16 Sept 18.

Note: Significant differences are highlighted in areen

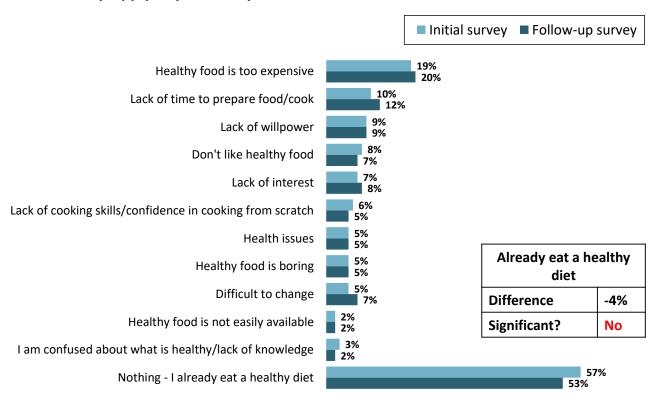
Healthy eating

The majority of main carers in this cohort continue to believe they already eat a healthy diet

Over the last two years there has been almost no change in the proportion of main carers in this cohort who believe they already eat a healthy diet (57% in the initial survey, compared with 53% at the follow-up).

In line with the initial survey, the main barrier to eating more healthily continues to be the cost, mentioned by one in five in both waves (19% at the initial survey and 20% at the follow-up).

HWB11. This card contains a list of things that might stop people from eating healthily. Which, if any, apply to your family? (Multi-coded)



Base: All main carers.

Initial survey: (654). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (654). Fieldwork dates 16 Oct 2017 – 16 Sept 18.

Note: Only responses >1% are shown Source: Ipsos MORI

Alcohol

Main carers are more likely to indicate potentially problematic levels of drinking than two years ago – though the proportion at the highest end of the scale has not changed significantly

Main carers were asked a range of questions about alcohol consumption that feed into the Alcohol Use Disorders Identification Test (AUDIT) scale.³⁸ It was developed by the World Health Organization as a simple screening tool which is sensitive to early detection of risky and high risk drinking, but is also commonly used as an outcome measure. It comprises questions on alcohol consumption, drinking behaviour and dependence and the consequences or problems related to drinking. Respondents were also shown an image outlining the quantities comprising one standard drink or unit of alcohol to assist their answers: half a pint of regular beer, lager or cider, one small glass of wine or sherry and a single measure of spirits or aperitifs.

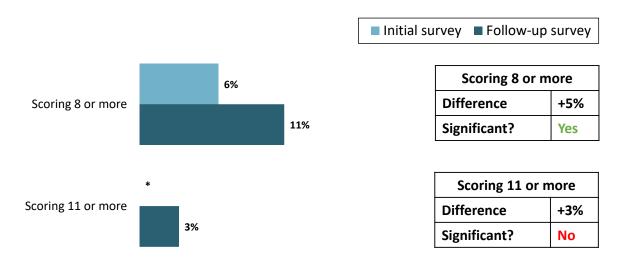
AUDIT can be asked in a number of forms, AUDIT C (consumption), AUDIT PC (drinking behaviour and dependency) and the full scale (consequences or problems related to drinking). Each question is scored from 0 to 4 (never to daily). For this study AUDIT C can be calculated, with higher scores indicating that drinking is affecting the individual's health and safety. AUDIT C is scored on a scale of 0-12. A score of 8 or more indicates potentially problematic levels of alcohol consumption, while a score of 11 or more indicates an increased risk of problematic drinking.

³⁸ The Alcohol Use Disorders Identification Test (AUDIT), 2001, Guidelines for use in primary care, World Health Organisation, Available from: http://www.talkingalcohol.com/files/pdfs/WHO audit.pdf

Compared with two years ago, main carers in this cohort are more likely to score 8+ on the AUDIT-C scale, indicating an increase in potentially problematic levels of levels of drinking. However, there has been no significant change in the proportion of the cohort who indicated an increased risk by scoring 11+.

AUDIT-C Scores

Scores on the Alcohol Use Disorders Identification Test (consumption) range from 0 and 12, with higher scores indicating greater levels of consumption.

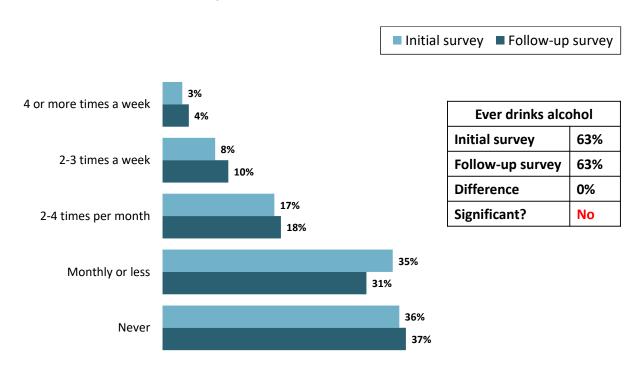


Base: All main carers who accepted self-completion, and provided a score for all 3 statements. Initial survey: (312). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (312). Fieldwork dates 16 Oct 2017 – 16 Sept 18.

There has been no change in the proportion of main carers in this cohort who say they ever drink alcohol

Looking in more detail at the individual questions that comprise the AUDIT-C scale, although there has been a significant increase in the past two years in the proportion of main carers in this cohort who report potentially problematic levels of drinking, there has been no significant change in the proportion who ever drink (63% in both surveys).

AUD1. How often, if ever, do you have a drink that contains alcohol?



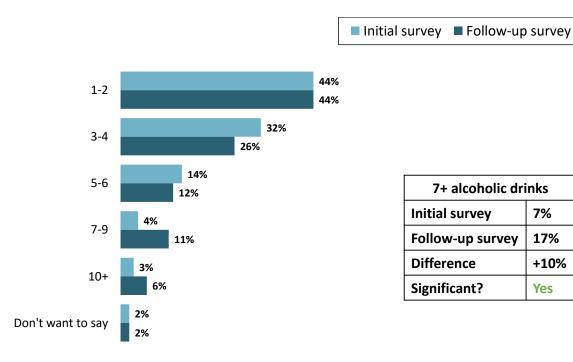
Base: All main carers who accepted self-completion. Initial survey: (609). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (609). Fieldwork dates 16 Oct 2017 – 16 Sept 18.

Note: Excludes don't want to say (>0.5% for both surveys) Source: Ipsos MORI

However, this cohort report drinking more on a typical day drinking than they were two years ago

In line with the increase in potentially problematic drinking levels over the last two years, among those main carers in this cohort who ever drink the proportion consuming seven or more alcoholic drinks on a typical day of drinking has also significantly increased: from seven per cent in the initial survey to 17%.

AUD2. How many alcoholic drinks do you have on a typical day when you are drinking?



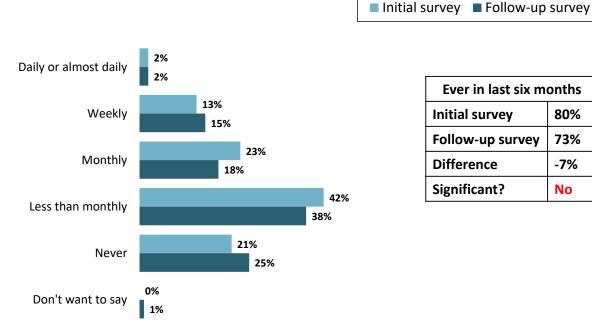
7+ alcoholic drinks	
Initial survey	7%
Follow-up survey	17%
Difference	+10%
Significant?	Yes

Base: All main carers who accepted self-completion, and has alcoholic drinks. Initial survey: (325). Fieldwork dates 14 Oct 2015 - 17 Jul 2016. Follow-up survey: (325). Fieldwork dates 16 Oct 2017 - 16 Sept 18.

There has been no significant change in the proportion exceeding a set number of alcoholic units (six for women and eight for men) at least once in the previous six months compared with two years ago

Among drinkers, 73% have had more than a specified number of units of alcohol on a single occasion (six for women and eight for men) at least once in the six months prior to interview. This has not changed significantly over the last two years (80% had exceeded this number of drinks in the initial survey).

AUD3. How often have you had << Female=6, Male=8>> or more units of alcohol on a single occasion in the last six months?



Ever in last six months	
Initial survey	80%
Follow-up survey	73%
Difference	-7%
Significant?	No

Base: All main carers who accepted self-completion, and has alcoholic drinks. Initial survey: (325). Fieldwork dates 14 Oct 2015 - 17 Jul 2016. Follow-up survey: (325). Fieldwork dates 16 Oct 2017 – 16 Sept 18.

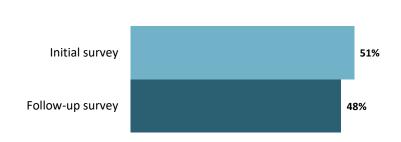
Smoking

Around half of main carers say they smoke; no change from when this cohort were first interviewed

Compared with the initial survey, the proportion of main carers in this cohort who smoke cigarettes has not significantly changed over the last two years; half say they currently smoke (51%) compared with 48% previously.

Prevalence of smoking is higher than found among adults nationally, where just under one in five (17%) smoke.³⁹

DRU_SMOKE. Do you smoke cigarettes? Please do not include electronic cigarettes (e-cigarettes).



Smoke cigarettes	
Difference	-3%
Significant?	No

National	2015	2017
16+ year olds	18%	17%

Base: All main carers who accepted self-completion. Initial survey: (609). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (609). Fieldwork dates 16 Oct 2017 – 16 Sept 18. National data from Health Survey for England (2015; 2017).

³⁹ Health Survey for England (2015, 2017). Available from: http://healthsurvey.hscic.gov.uk/data-visualisation/data-visualisation/explore-the-trends/smoking.aspx

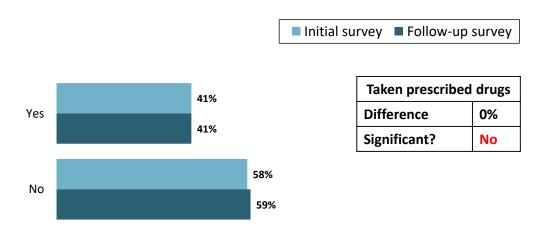


Prescription drugs

There has been no change in the proportion of main carers who report taking prescription drugs in the last six months

Compared with two years ago, there has been no significant change in the proportion of main carers who report taking a drug prescribed to them by a doctor or nurse for depression, to help them sleep, or to make them less anxious (41% in both surveys).

DRU1. In the last six months have you taken any drugs, prescribed for you by a doctor or nurse, for depression or to help you sleep, or make you less anxious?



Base: All main carers who accepted self-completion. Initial survey: (609). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (609). Fieldwork dates 16 Oct 2017 – 16 Sept 18.

Note: Excludes don't want to say (>0.5% for both surveys) Source: Ipsos MORI

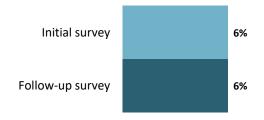
Street drugs

There has been no change in the proportion of main carers who report taking street drugs in the last six months

Compared with the initial survey, there has been no change in the proportion of main carers who report taking street drugs in the last six months. In both surveys, six per cent of this cohort report taking any of the street drugs listed.

Cannabis is consistently the most commonly taken street drug; consumed by five per cent on both occasions.

DRU2. In the last six months which of the following street drugs, that is drugs not given to you by a doctor or pharmacist, if any, have you taken?



Taken any street drug?	
Difference	0%
Significant?	No

Base: All main carers who accepted self-completion, and self-completed. Initial survey: (522). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (522). Fieldwork dates 16 Oct 2017 – 16 Sept 18.



Domestic abuse and violence

The majority of cohort families are happy in their relationships, consistent with when they were surveyed two years ago. Reflecting their high levels of happiness, the majority do not regret marrying or living with their partners. However, it is important to note that this level of happiness is lower than nationally, a figure which has also increased over the past two years in contrast to the pattern for cohort families.

Main carers in this cohort report an increase in experience of sexual abuse in their home since they were last interviewed, two years ago. However, levels of reported domestic abuse or violence have not changed.

There has also been no change in the proportion experiencing non-sexual abuse, such as threats and force or non-physical abuse (emotional or financial) from a partner or other household member – but this experience is more extreme than nationally.

Family relationships

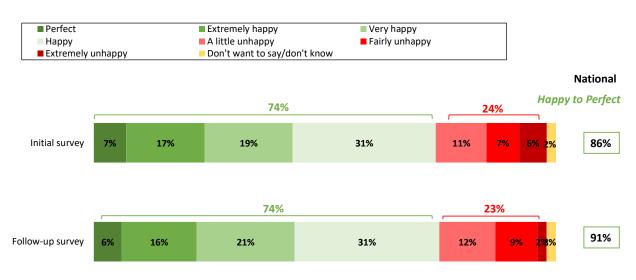
Happiness of relationship

The majority of cohort families continue to report that they are happy in their relationship, but levels of happiness are lower than nationally

Three quarters (74%) of main carers say the degree of happiness with their relationship is either happy, very happy, extremely happy or perfect, both at the initial interview and two years later at the follow-up.

To set this in context, nationally more say they are at least happy (91%) and this has increased over the last two years (from 86% in 2015).⁴⁰

FR1. On a scale of 0 to 6 where 0 is extremely unhappy, 3 is happy (representing the degree of happiness of most relationships), and 6 is perfect. Which best describes the degree of happiness, all things considered, of your relationship?



Base: All main carers who accepted self-completion and have a partner in the household. Initial survey: (207). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (207). Fieldwork dates 16 Oct 2017 – 16 Sept 18. National data from Understanding Society (wave 5, Jan'13-Jun'15; wave 7, Jan'15-Jun'17).

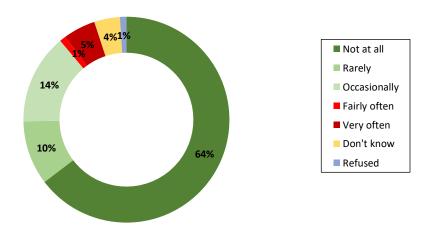
⁴⁰ Institute for Social and Economic Research (ISER), University of Essex. Understanding Society. Wave 7 (Jan'15-Jun'17). Available from: https://www.understandingsociety.ac.uk/documentation/mainstage/dataset-documentation

Attitudes to marrying or living with partner

The majority of main carers do not regret marrying or living with their partner

At the follow-up interview a new question asked main carers whether they ever regret marrying or living with their current partner. Reflecting their high levels of happiness with their relationship, nearly two thirds (64%) say they have no regrets at all, a quarter (24%) say rarely or occasionally, and just six per cent admit to feeling this way often (fairly or very often).

W2FR1. Do you ever regret that you married? (or lived together)



Base: All main carers who accepted self-completion, self-completed and have a partner in the household. Follow-up survey: (213). Fieldwork dates 16 Oct 2017 – 16 Sept 18.

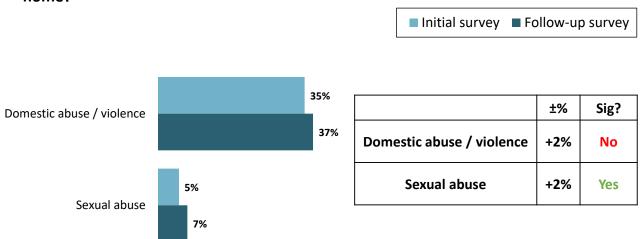
Domestic abuse and violence

Intergenerational relationship issues

More main carers report experiencing sexual abuse in their home than when initially surveyed two years ago

There has been a significant increase in the proportion of main carers reporting experience of sexual abuse within their home; seven per cent, up from five per cent of this cohort two years ago. Those experiencing domestic abuse and violence has also increased from 35% to 37%, but this change is not significant.

FR3. And since you became an adult, which of these things have happened to you in your home?



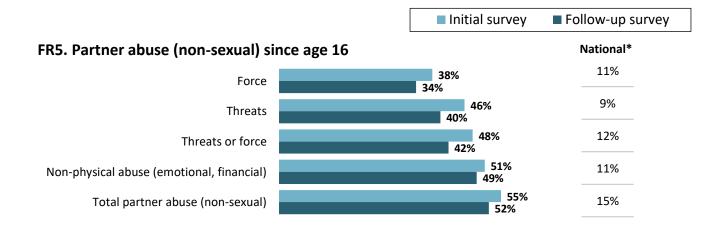
Base : Main carers who accepted self-completion. Initial survey: (FR3: 609). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (FR3: 609). Fieldwork dates 16 Oct 2017 – 16 Sept 18.

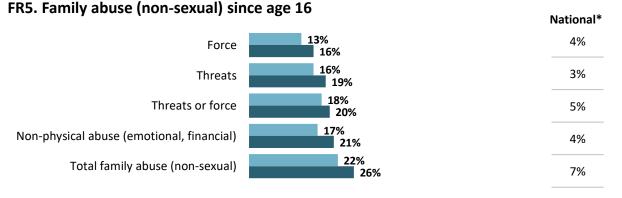
Domestic violence

There has been no change in reported experience of non-sexual abuse from a partner or other family member since the age of 16, but levels are higher than nationally

Main carers were asked whether they had experienced any form of non-sexual abuse from their partners or any other family members both since they were 16 and in the last six months. This includes threats, force and non-physical abuse (for example, financial and emotional).

There has been no significant change in terms of reported experience of these forms of non-sexual abuse between the two interviews, either from a partner or other household member since the cohort were aged 16.





Base: Main carers who accepted self-completion, and self-completed. Initial survey: (522). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (522). Fieldwork dates 16 Oct 2017 – 16 Sept 18. National data from the Crime Survey in England and Wales '17/'18.

*Note: this question asks about abuse in the last year

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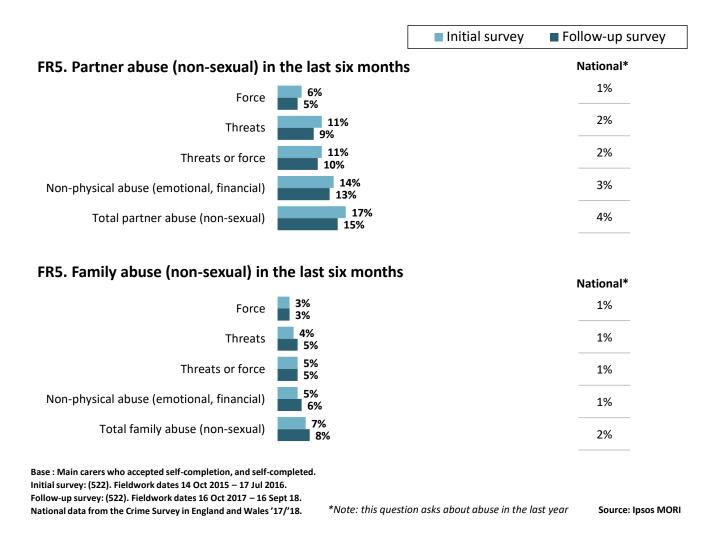
However, setting this in context, it should be noted that this experience is more extreme than among the population nationally. For example, overall half have experienced non-sexual abuse from their partner since they were 16 compared with 15% for the country as a whole, and a quarter (26%) report ever experiencing abuse within their family since they became an adult compared with seven per cent nationally⁴¹.

⁴¹ Crime Survey for England and Wales March 2018: https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice#datasets

A similar proportion of main carers at both the initial and followup survey reported experiencing abuse from their partners in the last six months

Looking at more recent experience (in the last six months) of non-sexual abuse both from a partner or other household member, this is also unchanged. For example, 15% of this cohort have experienced any form of non-sexual abuse from a partner, compared with 17% two years ago, and in both surveys eight per cent report this happening at the hand of another household member.

However, as with other measures, experience of this form of abuse among cohort members is higher than the available national comparisons from the Crime Survey for England and Wales⁴².



⁴² Crime Survey for England and Wales March 2018: https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice#datasets



Crime and anti-social behaviour

Families were asked a range of questions about crime and anti-social behaviour, including contact with the police (as a victim or perpetrator) and experience of actions taken as a result of these behaviours.

On all measures reported behaviours in the six months prior to interview have fallen between the two surveys:

- Fewer report contact with the police
- Fewer report use of force or violence within their home
- Fewer report police or landlord action as a result of involvement in crime or antisocial behaviour

However, fewer also say that they, or any other member of their family, have <u>ever</u> been cautioned by the police or convicted of a crime. Given that this relates to the same group of people it perhaps points to lower levels of reporting in relation to crime overall in the follow-up survey.

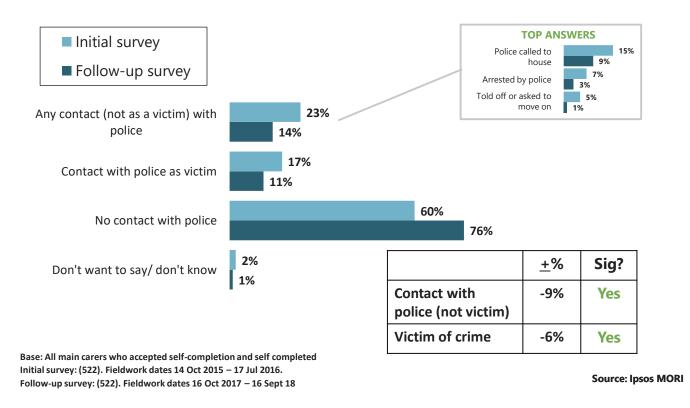
Contact with the police

Recent contact with the police has fallen for cohort families, both as a result of being accused of doing something wrong as well as for those who have been a victim of crime

Main carers were asked about contact they or other members of their household may have had with the police in the last six months. This was either as a victim or for another reason, including having the police called to their house, being arrested or reprimanded, stopped, stopped and searched, or completing voluntary work to make amends.

The chart below shows that overall contact with the police has fallen significantly for cohort households, both in instances when they were accused of doing something wrong or were a victim of crime. In particular, members of these families were significantly less likely to have had the police called to their home, been arrested or told off or asked to move on.

CR6/CR6OTH. Police contact in the last 6 months (household)

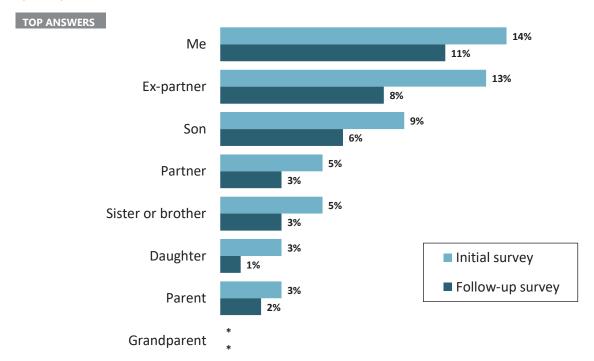


Cautions and convictions

Fewer main carers say they or members of their household have committed a crime than when they were last interviewed

One in ten (11%) main carers say they themselves have ever been cautioned or convicted of a crime by the police, followed by an ex-partner (eight per cent) or a son (six per cent). These levels of reporting are slightly lower than for this cohort when they were first interviewed two years ago, which perhaps suggests some evidence of a more general pattern of lower levels of reporting in relation to crime in the follow-up survey.

CR1. Have you, or any other members of your family listed below, ever been cautioned by the police or convicted of a crime?



Base: All main carers who accepted self completion, and self complete. Initial survey: (522). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (522). Fieldwork dates 16 Oct 2017 – 16 Sept 18

Sanctions

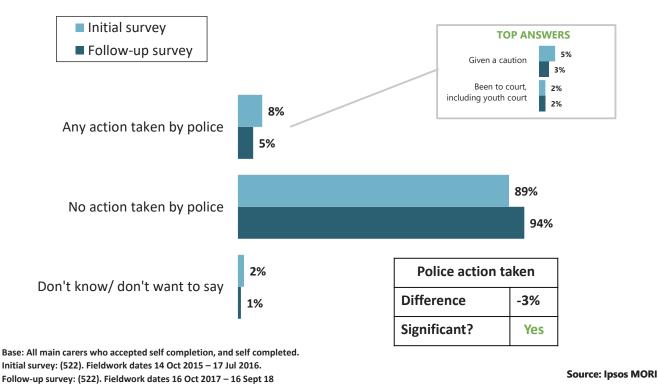
Fewer cohort households report experience of police action as a result of involvement in crime

Overall, one in twenty (five per cent) main carers report having police action taken against someone in their household in the last six months because they were accused of committing a crime, which is significantly lower than when the same families were interviewed two years ago (eight per cent previously).

This includes a range of actions, including three per cent who were given a caution and two per cent or fewer who were charged by the police, taken to court, given a fine, sentenced to supervision by a probation officer or youth offending case worker, or sent to prison, a secure training centre or a local authority run secure care home. However, while there has been a significant decrease in the proportion experiencing sanctions overall, there are no significant changes in the proportions reporting these actions individually.

CR7/CR7OTH. Police action taken in the last 6 months (against main carer or family)

Including given a caution, charged by the police, been to court, fined by the police or court, sentenced to supervision, sent to prison/ a secure training centre/ LA secure care home

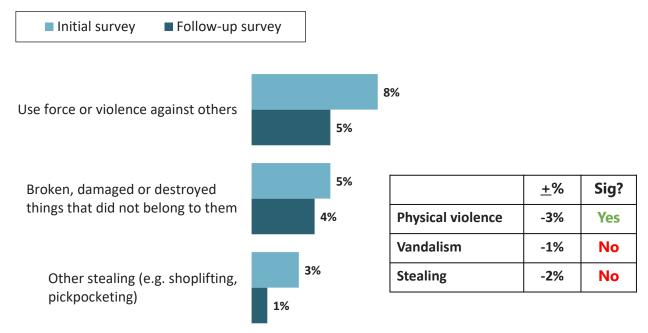


Self-reported offending

Fewer cohort members report the use of force or violence against others in their home over the last six months than experienced this two years ago

Main carers were asked about a range of crimes and anti-social behaviours that they might have experienced in their home during the last six months, both when they were initially interviewed and then again at the follow-up interview. Between the two years there has been a significant fall in the proportion of this cohort who say they have witnessed the use of force or violence in their home or have used it themselves in the last six months (eight per cent falling to five per cent). There has been no change in the proportions reporting vandalism or stealing.

CR4/CR4OTH. Which of the following did you/someone else in your current household do in the last six months?



Base: All main carers who accepted self completion, and self completed. Initial survey: (522). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (522). Fieldwork dates 16 Oct 2017 – 16 Sept 18

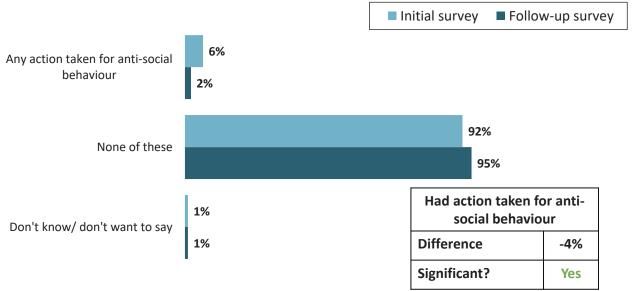
Actions against anti-social behaviour

Reflecting the fall in reported anti-social behaviours, fewer of this cohort say action to stop this type of behaviour has been used against someone in their household than two years ago

Action taken against main carers or other household members as a result of anti-social behaviour in the last six months is consistently low between the two surveys. However, there has been a significant fall in the proportion of families reporting these sanctions; mentioned by six per cent when they were initially interviewed and two per cent of this cohort two years later.

CR2/CR2OTH. Action taken to stop anti-social behaviour in the last 6 months (households)

Including civil injunction, criminal behaviour order, dispersal power, community protection notice, public spaces protection order, closure power, NOSP, possession order, youth caution



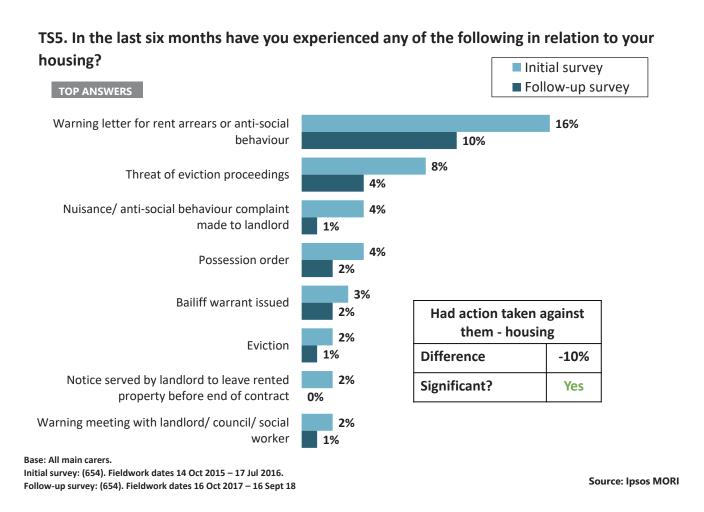
Source: Ipsos MORI

Base: All main carers who accepted self-completion.
Initial survey: (609). Fieldwork dates 14 Oct 2015 – 17 Jul 2016.
Follow-up survey: (609). Fieldwork dates 16 Oct 2017 – 16 Sept 18

Anti-social behaviour and housing

Significantly fewer households report actions being taken as a result of anti-social behaviour in relation to their housing

There has also been a significant fall in reported anti-social behaviours in relation to housing. Overall, 17% report at least one action being taken against them in the last six months compared with 27% when these families were first interviewed. In particular, there have been large falls in terms of those receiving a warning letter for rent arrears or anti-social behaviour (16% compared with ten per cent at the initial survey) and the threat of eviction proceedings (four per cent compared with eight per cent).



Service experience

Service experience

As a measure of the quality of the interaction that main carers and their families had with the programme, cohort families' views of their relationship with their keyworker are largely positive (though note that responses may be affected by recall, given the at least 12-18 month period since help was last received from the programme, and also the emotional strain main carers were likely to be feeling at the time).

- Most remember their keyworker by name and say contact was frequent; 63% saw them at least every two weeks
- Keyworkers mostly provided support to children in the household as well as to the main carers themselves, offering advice with parenting and help with mental health issues
- Most main carers recall agreeing a plan with their keyworker and are positive about their level of involvement in this process
- Main carers feel that keyworkers were clear on the changes they needed to make as a family and found them helpful and supportive
- Attitudes towards the help received are positive, with most feeling the keyworker made a difference, particularly in relation to parenting

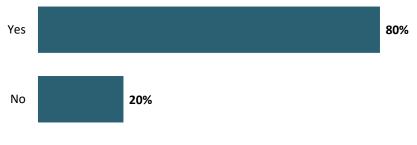
Main carers continue to be positive about the future and are significantly more confident that their worst problems are behind them.

Keyworkers

The majority recall the name of the keyworker allocated to them when they were on the programme

The majority (80%) of main carers can remember the keyworker they worked with when they were on the programme by name. This information was provided by local authorities before the initial survey and then checked again ahead of the follow-up in case this had changed during the course of the family's engagement. The following questions were asked specifically about their relationship with this keyworker, and answers are limited to those who specifically recall the named individual.

SE_KWNAME. Can you remember someone called <key worker> working with you and your family in the last 18 months or so?



Source: Ipsos MORI

Base: All main carers

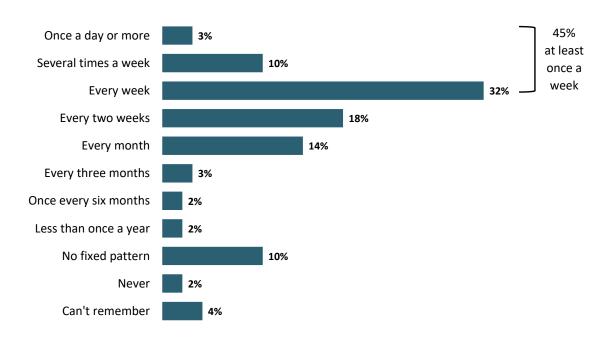
Follow-up survey: (654). Fieldwork dates 16 Oct 2017 – 16 Sept 18

Contact with keyworker

Three in five had frequent contact with their keyworker, seeing them at least once every two weeks while they were on the programme

For most families contact with their keyworker was frequent, with more than two in five of those who remember their keyworker by name (45%) saying they saw them at least once every week, including one in eight (13%) who had contact several times a week or more while they were on the programme. However, a quarter (23%) say they saw them less than once a month or not at all. Another 10% say there was no fixed pattern to their contact.

W2SE1. How often did you have contact with <key worker>?



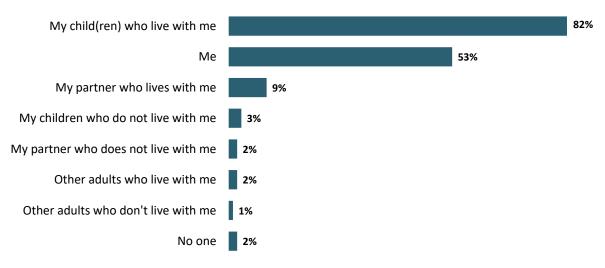
Base: All main carers who remember their key worker working with their family in the last 18 months or so Follow-up survey: (520). Fieldwork dates 16 Oct 2017 – 16 Sept 18

Support from keyworker

Most keyworkers were supporting the children in the household, along with the main carer themselves

Four in five who recall their keyworker by name (82%) say that this keyworker provided support to their children who were living with them at the time. Half of all main carers (53%) say that this keyworker was also supporting them directly, and one in ten (nine per cent) say their partner was helped. In addition, small proportions say that members of their family living outside their household had support.

W2SE2. Who in your family did <key worker> support?



Base: All main carers who remember their key worker working with their family in the last 18 months or so. Follow-up survey: (654). Fieldwork dates 16 Oct 2017 - 16 Sept 18

Planning with keyworker

Four in five recall agreeing a plan with their keyworker, and almost all are positive about their involvement in this process

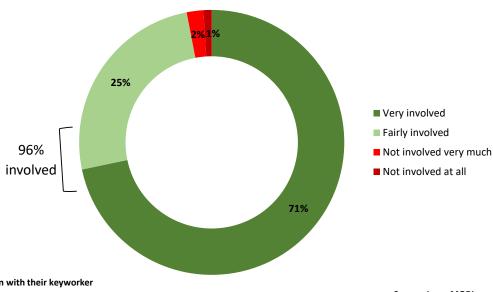
Of those who recall their keyworker by name, four in five (78%) remember agreeing a plan together. These carers are very positive about their level of involvement in making this plan: almost all (96%) say they were involved, including seven in ten (71%) who felt very involved.

W2SE3. Did you agree a plan with <key worker>?



Base: All main carers who remember their key worker working with their family in the last 18 months or so. Follow-up survey: (520). Fieldwork dates 16 Oct 2017 – 16 Sept 18

W2SE4. How involved were you and your family in making this plan?



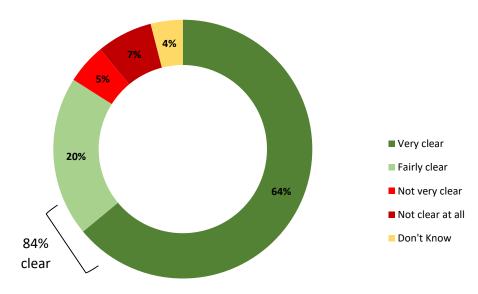
Base: All main carers who agreed a plan with their keyworker Follow-up survey: (404). Fieldwork dates 16 Oct 2017 – 16 Sept 18

Keyworkers were clear about the changes families needed to make

Reflecting this high level of engagement in the planning process, main carers are also likely to feel that their keyworker was clear about the changes they needed to make as a family. Over four in five (84%) say this was clear, including over three in five (64%) who say it was made very clear to them.

Main carers who had contact with their keyworker at least once a week, are more likely to say that there was clarity around the changes they needed to make.

W2SE5. How clear, if at all, was (key worker) about the changes you needed to make as a family?

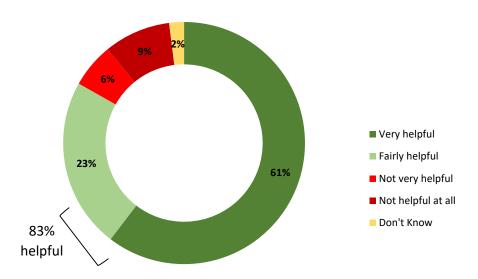


Base: All main carers who agreed a plan with their keyworker Follow-up survey: (520). Fieldwork dates 16 Oct 2017 – 16 Sept 18

Families are very positive about the impact of their keyworker, with most finding them helpful

Again, among those who can recall their keyworker, families are very positive about their overall impact. Over four in five (83%) say they were helpful, including three in five (61%) who say they were very helpful. Those who saw their keyworker more frequently, at least once a week, are more likely to have found them helpful (increasing to 91%). Note that responses may be affected by recall, given the at least 12-18 month period since help was last received from the programme, and also the emotional strain main carers were likely to be feeling at the time.

W2SE7. Overall, how helpful, if at all, have you found having <key worker> working with you and your family?



Base: All main carers who remember their key worker working with their family in the last 18 months or so Follow-up survey: (520). Fieldwork dates 16 Oct 2017 – 16 Sept 18

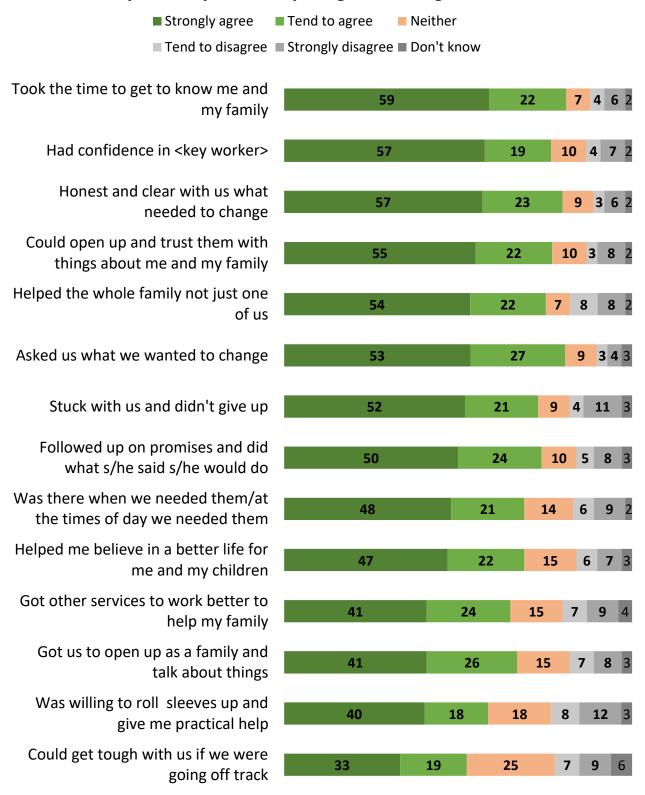
Main carers are very positive about the relationship and support they received from their keyworker while they were on the programme

Those main carers who could remember their keyworker by name were asked to give feedback on their relationship and the support received. They are mostly positive with half or more agreeing with a range of statements, as shown in the chart below.

- Four in five say their keyworker 'took the time to get to know them and their family' (81%), was 'honest and clear' with them and 'asked them what they needed to change' (both 80%).
- Around three quarters felt they could 'open up with their keyworker' (77%), say they had 'confidence in their keyworker' and that they 'helped the whole family not just the main carer themselves' (both 76%).
- Slightly fewer say their keyworker followed up on 'promises and did what they said they would' or 'stuck with them and didn't give up' (74% and 73% respectively).
- Seven in ten (69%) agreed with each of the statements that their keyworker was 'there when they needed them/at the particular time of day they needed them' and that they 'helped them believe in a better life for them and their children'.
- Two thirds (67%) say their keyworker 'helped them to open up as a family and talk about things', and slightly fewer (65%) say they 'got other services to work better to help their family'.

On every measure those who had more contact with their keyworker (at least once a week) are more positive about the support and help received.

W2SE6. I'm going to ask you some things about <key worker>. For each I would like you to say whether you agree or disagree.



Base: All main carers who remember their key worker working with their family in the last 18 months or so.

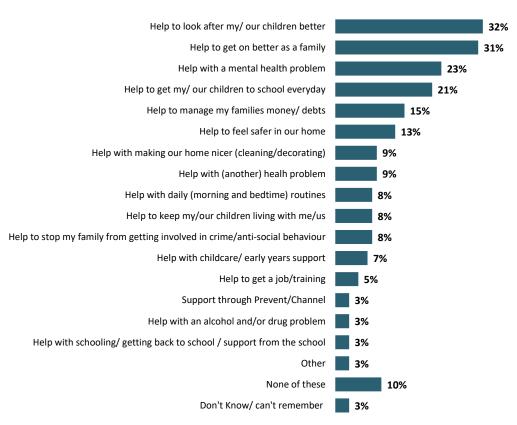
Follow-up survey: (520). Fieldwork dates 16 Oct 2017 – 16 Sept 18 Source: Ipsos MORI

Help received

Families had help from their keyworkers in a broad range of areas, but mostly in relation to parenting and mental health

Main carers were asked what help they or other members of their family were given when they were working with their keyworker, as shown in the chart below.

SE2. When you were working with <key worker>, what type of help were you and/or other members of your family given?



Base: All main carers who remember their key worker working with their family in the last 18 months or so. Follow-up survey: (520). Fieldwork dates 16 Oct 2017 – 16 Sept 18

Source: Ipsos MORI

From the list shown, help spanned a range of areas:

Most help focused around family and parenting; a third each had help looking after their child/ren or to get on better as a family (32% and 31% respectively). One in five (21%) had help getting their children to school each day, and around one in ten received help with making their home nicer (nine per cent), daily routines and keeping their children living with them (both eight per cent), as well as childcare support (seven per cent).

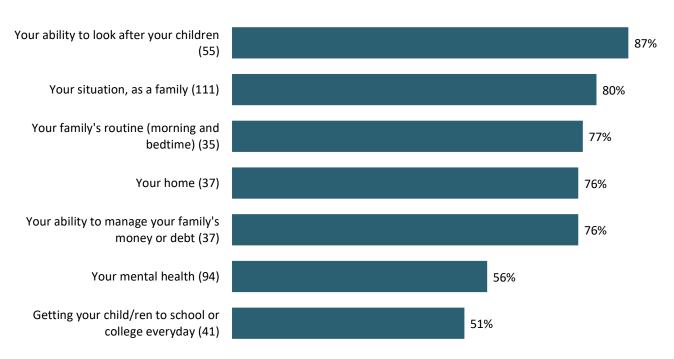
- Another quarter (23%) had help with a mental health problem and one in ten (nine per cent) another health issue. Three per cent received help with alcohol or drugs.
- One in seven (15%) had advice on money management or debt, and five per cent were supported in getting a job or training.
- One in eight (13%) say they received support which helped them feel safer in their home and eight per cent had help to stop their family getting involved in crime or anti-social behaviour.
- Three per cent have received help through Prevent/Channel.

Attitudes towards help received from keyworkers are positive, particularly in relation to parenting

Where families say they received help from their keyworker when they were on the programme they are positive about its impact, with half or more agreeing that their ability or circumstances in each of these areas improved as a result. However, although this is positive, between one in ten and two in five say the help made little or no difference.

SE3. As a result of this help, to what extend would you say ... has improved?





^{* %} improved = improved a great deal + improved a fair amount

Base: All main carers selected to be asked – where help given to the household (SE2)

Fieldwork dates 16 Oct 2017 – 16 Sept 18

Source: Ipsos MORI

• The most positive views on the impact of the support are in relation to parenting; four in five say their ability to look after their children and their situation as a family has improved either a great deal or a fair amount (87% and 80% respectively). Three quarters say their family's morning and bedtime routines as well as their home have improved (77% and 76% respectively) and half (51%) are positive about the effectiveness of help getting their children to school

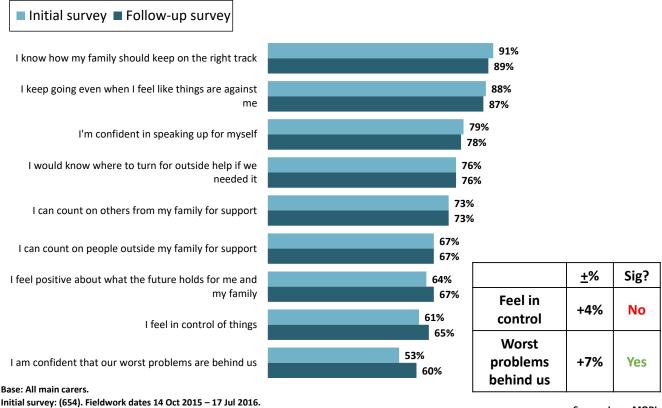
- Three in four (76%) say their ability to manage money and debt has improved as a result of the support received.
- Among those who have received help with their mental health, just over half (56%) say that things have improved as a result of the support.

Attitudes to the future

Cohort families continue to be positive about what the future holds, and are significantly more confident that their worst problems are behind them

All main carers were asked to consider a series of statements about their attitudes towards the future when they were first interviewed and two years later. On all measures this cohort contine to be confident, with three in five or more agreeing with each statement, as shown in the chart below. Of particular note, significantly more main carers are confident that the worst of their problems are behind them (60% now compared with 53% two years ago).

SE1. For each statement about the future for you and your family, please read out the letter that applies. % Agree



Follow-up survey: (654). Fieldwork dates 16 Oct 2017 – 16 Sept 18

For all statements, generally these views are strongly held – main carers are more likely to *strongly* than *tend to agree*, with the exception of feeling in control where the split is more even.

- Nine in ten (89%) agree that they know how to keep their family on the right track, including 58% who strongly agree, and a similar proportion (87%) feel resilient, agreeing that they keep going even when they feel things are against them.
- Around three quarters say they feel confident speaking up for themselves or that they know where to go for help outside their family if needed (78% and 76% respectively).
- Networks of support both within and outside the family also appear to remain strong. Seven in ten (73%) say they can count on others within their family and slightly fewer (67%) can count on people outside their family for support. Both findings are unchanged from the initial survey.
- Two thirds say they feel positive about what the future holds for their family and that they feel in control of things (67% and 65%).

There is little difference in response dependent on the amount of contact a family has had with a keyworker, but those who had contact at least weekly are more likely to agree that they would know where to turn for outside help if needed (81% compared with 76% overall).

However, across all statements, there are some clear patterns related to the demographic characteristics of the main carer, largely driven by whether they have a long-term health condition, but also related to their ethnic background and work status. These differences were similar to those found in the initial survey. For example:

- Those with a disability are significantly less likely to agree with seven of the nine statements, demonstrating less confidence and a degree of social isolation: they are less confident in feeling they know how to keep their family on the right track or how to speak up for themselves, less likely to feel they can count on others from outside the family for support or would know who to turn to for outside help, feel less in control of things or about what the future holds for their family and less confident that their worst problems are behind them.
- Fewer main carers from BME backgrounds say they can count on others either from outside or their family for support. However, they are more likely than average to feel positive about what the future holds for their family.
- Main carers who are working are more positive about what the future holds than average.

Young people

Young people

The young people (aged 11-21 years) interviewed as part of the family survey have aged over the last two years. The findings for young people need to take this into account; at a time where relatively small shifts in age can lead to major changes, for example, in relation to education and work, or legal versus illegal behaviours in relation to alcohol.

- Many have moved from school-based education to higher education, and significantly more are now working
- More have taken steps towards finding work, including a range of direct job search and training-related activities and in terms of aspirations more say they will be working in the next year

As the young people in this cohort have aged, there have also been some significant changes in their health behaviours and wellbeing over the last two years:

- They are less positive about their health than previously (but they are more positive than their carers) and feel less satisfied with their life than two years ago. However, they are also less likely to say other children or young people pick on or bully them
- They are more likely to have ever drunk alcohol, and more likely to have done so at least twice in the four weeks prior to interview. However, there has been no change in the proportion reporting that they have been intox icated
- They are more likely smoke cigarettes and to have tried at least one street drug

In terms of crime and anti-social behaviour, findings for young people are consistent with their main carers, and the proportions reporting involvement is lower:

- Fewer report contact with the police (not as a victim of crime)
- Fewer report involvement in offending or having police action taken as a result of their involvement in crime

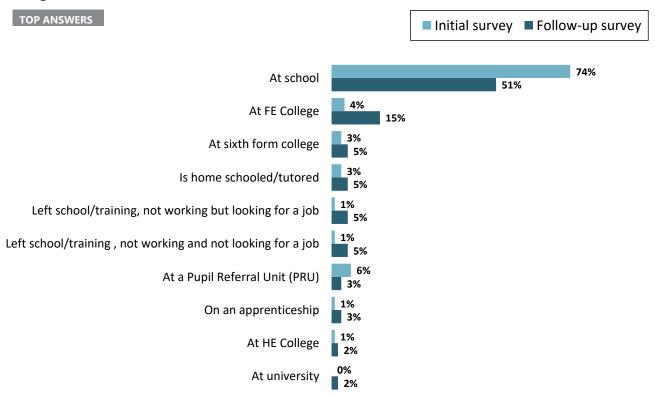
Education

Educational setting

Young people have moved on from school into different forms of further / higher education

As the young people have aged two years since they were last interviewed, more are no longer at school and have moved onto different activities and educational settings, as would be expected. However, school is still the most common activity among this cohort (attended by 51%) followed by a further education college (15%). A small proportion are also home schooled or tutored (five per cent). Some have also left school or training; five per cent each are either not working but looking for a job or not working and not looking for a job.

CB1. Which of these on this card best describes what the young person interviewed is doing at the moment?



Base: All main carers where young person has been interviewed. Initial survey: (282). Fieldwork dates 14 Oct 2015 - 17 Jul 2016. Follow-up survey: (282). Fieldwork dates 16 Oct 2017 - 16 Sept 18.

Note: Only responses >2% for follow-up survey are shown

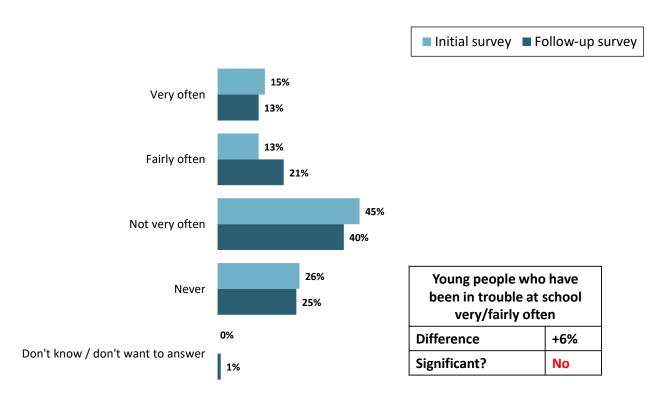
Trouble in school

The majority of young people in this cohort report getting into some form of trouble at school in the last six months

Among young people in this cohort, three quarters (74%) report having been in trouble at school in the last six months, but this includes two in five (40%) who say this has not happened very often.

While the proportion of young people saying they have been in trouble at school very or fairly often has increased, this difference is not significant.

YXB4. In the last six months how often have you been in trouble at school?



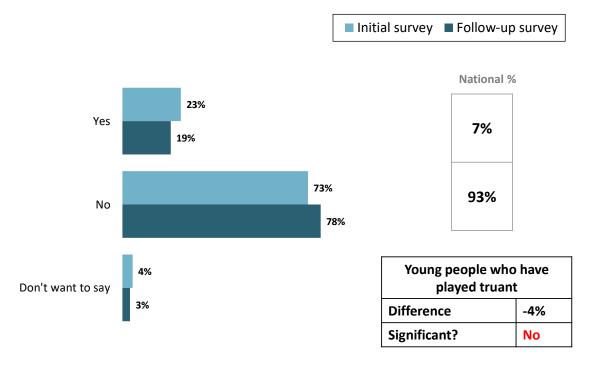
Base: All young people interviewed who accepted self-completion aged 11 to 15 and in school or college. Initial survey: (119). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (119). Fieldwork dates 16 Oct 2017 – 16 Sept 18.

There has been no significant change in the proportion of young people in this cohort who report an unauthorised absence from school in the past 12 months

There has been no change in the proportion of young people who say they have had an unauthorised absence, i.e. missed school without permission, even for only half a day or a single lesson, in the past 12 months (19% at the follow-up compared with 23% two years before).

However, this is nearly three times higher than the national average (seven per cent).⁴³

YXB5. In the last 12 months, have you ever played truant, that is missed school without permission, even if it was only for a half day or single lesson?



Base: All young people interviewed who accepted self-completion aged 11 to 15 and in school or college. Initial survey: (119). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (119). Fieldwork dates 16 Oct 2017 – 16 Sept 18. National data from Understanding Society (wave 5, Jan'13-Jun'15; wave 7, Jan'15-Jun'17).

⁴³ Institute for Social and Economic Research (ISER), University of Essex. Understanding Society. Wave 7 (Jan'15-Jun'17). Available from: https://www.understandingsociety.ac.uk/documentation/mainstage/dataset-documentation

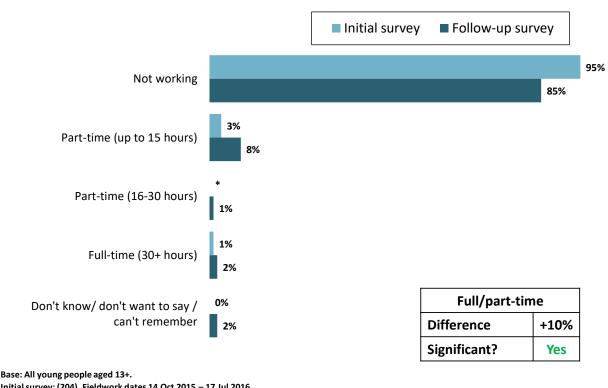
Employment

Work status

More young people are working than at the time of the initial survey, but this is likely to be related to the fact they are now two years older

One in ten (nine per cent) young people aged 13 to 21 years interviewed in the follow-up survey are working, mostly part-time (eight per cent). While most (85%) are not working, this is a significant change from two years ago (95% not working previously), and is likely to be a result of the fact that this group has aged between the two surveys. However, also related to their age, the majority are in education; see the later section on Educational setting – young person for more detail.

YXE2. Are you working, either full-time or part-time?



Initial survey: (204). Fieldwork dates 14 Oct 2015 - 17 Jul 2016. Follow-up survey: (204). Fieldwork dates 16 Oct 2017 - 16 Sept 18

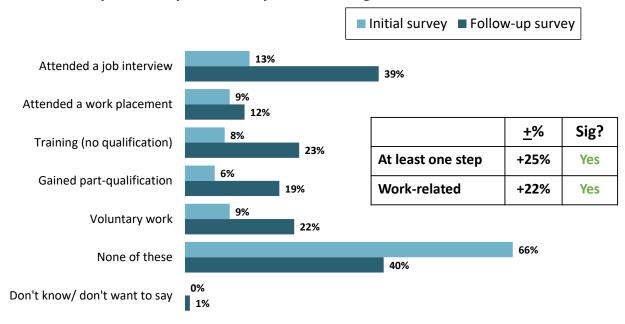
Work readiness

More young people in the cohort have taken steps towards finding work, including a range of direct job search and training related activities

Significantly more of the young people aged 15 to 21 years interviewed in both waves have taken at least one step towards finding work (59% now compared with 44% previously) – again, this change is likely to be related to the fact they have aged between surveys.

Of note, three times as many have attended a job interview (39% compared with 13%) or gained a part qualification (19% compared with six per cent) and four times as many have taken part in training that did not lead to a qualification (23% compared with eight per cent).

YXE4. In the last year, have you done any of these things?



Base: All young people interviewed aged 15-21 years Initial survey: (90). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (90). Fieldwork dates 16 Oct 2017 – 16 Sept 18

Aspirations

Again related to their age, more young people say they will be working in the next year than in education compared with the initial survey

Young people who were aged 15 to 21 at the initial interview were asked about their aspirations for the future, specifically what they think they will be doing in a year's time, both when they were first interviewed and at the follow-up. Related to the fact that they are now two years older they are significantly more likely to say they will be working, both full and part-time (50% compared with 17% previously) and less likely to say they will be in education or training (71% compared with 32%).

Four per cent say they do not think they will be in education, employment or training (NEET); no change from two years ago.

■ Follow-up survey Initial survey 13% Working part-time 4% Working full-time Not working 71% **Education or training** 32% Don't know/ don't want to say / Full/part-time can't remember 13% Difference +33% Significant? Yes Base: All young people interviewed aged 15-21 years Initial survey: (90). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Source: Ipsos MORI Follow-up survey: (90). Fieldwork dates 16 Oct 2017 – 16 Sept 18

YXE3. In the next year do you think you will be ...?

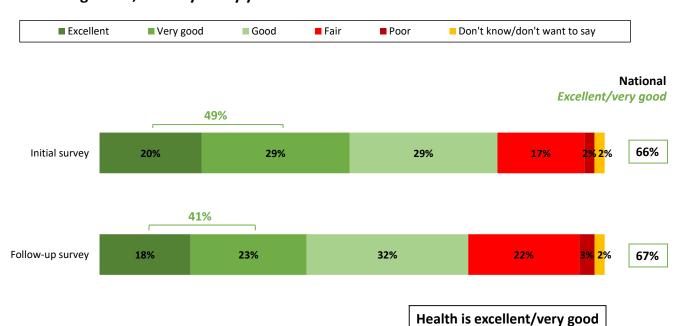
Health status

Young people are more positive about their own health than their carers tend to be, but their sense of wellbeing has decreased over the last two years and remains less positive than nationally

Similar to the initial survey, young people in this cohort are more positive about their own health than their carers. However, the proportion of young people who rate their health as either very good or excellent has significantly declined over the past two years: from 49% to 41%.

While figures are available for a slightly different age range, this decline is not apparent nationally. For the UK as a whole young people aged 10-15 years are more positive about their health; 67% rate it as very good or excellent, which is very similar to two years ago.⁴⁴

YXH1. In general, would you say your health is...



Difference

Significant?

Base: All young people who accepted self-completion. Initial survey: (286). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (286). Fieldwork dates 16 Oct 2017 – 16 Sept 18. National data from Understanding Society (wave 4, Jan'12-Jun'14; wave 6, Jan'14-Jun'16).

Source: Ipsos MORI

-8%

Yes

⁴⁴ Institute for Social and Economic Research (ISER), University of Essex. Understanding Society. Wave 6 (Jan'14-Jun'16). Available from: https://www.understandingsociety.ac.uk/documentation/mainstage/dataset-documentation

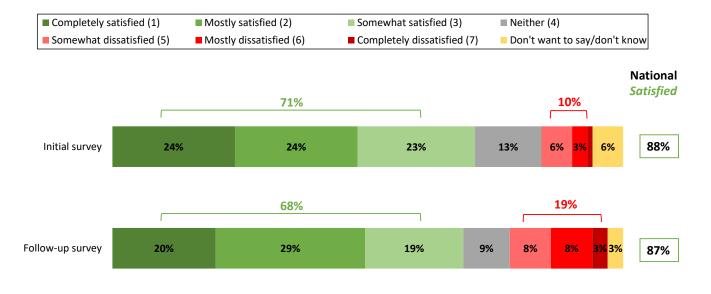
Mental health and wellbeing

Young people in this cohort feel less satisfied with their life than two years ago, and are also less satisfied than young people nationally

The proportion of young people who say they are somewhat, mostly or completely satisfied with their life overall has significantly declined over the past two years: from 71% to 68%.

This decline is not apparent nationally, where young people aged 10-15 years are overall more satisfied with their lives; 87% satisfied, which is very similar to two years ago⁴⁵ (again noting the slightly different age range being asked this question).

YXS1. Please select the number which you feel best describes how dissatisfied or satisfied you are with your life overall?



Base: All young people who accepted self-completion.

Initial survey: (286). Fieldwork dates 14 Oct 2015 – 17 Jul 2016.

Source: Ipsos MORI

Satisfied with life overall

Base: All young people who accepted self-completion.

Initial survey: (286). Fieldwork dates 14 Oct 2015 – 17 Jul 2016.

Follow-up survey: (286). Fieldwork dates 16 Oct 2017 – 16 Sept 18.

National data from Understanding Society (wave 5, Jan'13-Jun'15; wave 7, Jan'15-Jun'17).

⁴⁵ Institute for Social and Economic Research (ISER), University of Essex. Understanding Society. Wave 7 (Jan'15-Jun'17). Available from: https://www.understandingsociety.ac.uk/documentation/mainstage/dataset-documentation

Bullying

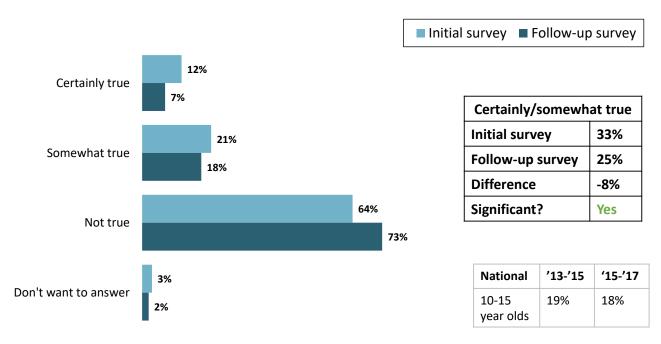
Young people are less likely to say other children or young people pick on or bully them compared with two years ago

Compared with two years ago, young people in this cohort are significantly less likely to say other children or young people pick on or bully them (25% compared with 33% previously).

Setting this in national context, bullying is more prevalent among the Troubled Families cohort of young people. Nationally, 18% of 10-15 years say other children or young people pick on or bully them ⁴⁶

YXS2. Please select the answer that most closely matches how you feel. Please give your answer on the basis of how things have been for you over the last six months.

"Other children or young people pick on me or bully me"



Base: All young people who accepted self-completion.
Initial survey: (286). Fieldwork dates 14 Oct 2015 – 17 Jul 2016.
Follow-up survey: (286). Fieldwork dates 16 Oct 2017 – 16 Sept 18.
National data from Understanding Society (wave 5, Jan'13-Jun'15; wave 7, Jan'15-Jun'17).

⁴⁶ Institute for Social and Economic Research (ISER), University of Essex. Understanding Society. Wave 7 (Jan'15-Jun'17). Available from: https://www.understandingsociety.ac.uk/documentation/mainstage/dataset-documentation

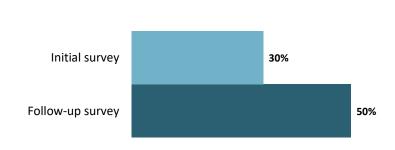
Alcohol

As young people in this cohort have aged, there has been a significant increase in the proportion who have ever had an alcohol drink

The young people in this cohort were also asked if they had ever had at least one whole alcoholic drink. Compared with two years ago, young people are significantly more likely to have drunk alcohol, an increase of 20 percentage points (from 30% to 50%). However, it should be noted that this may be a function of the fact they have aged between the two interviews; seven per cent were aged 17+ at the initial survey increasing to 30% now.

Compared with national findings, this cohort of young people are more likely to have drunk alcohol, and the national trend has been for fewer to drink. However, these national figures refer to 10-15 year olds only⁴⁷.

YXA1. Have you ever had an alcoholic drink? That is a whole drink, not just a sip.



Base: All young people who accepted self-completion, and self-completed.
Initial survey: (242). Fieldwork dates 14 Oct 2015 – 17 Jul 2016.
Follow-up survey: (242). Fieldwork dates 16 Oct 2017 – 16 Sept 18.
National data from Understanding Society (wave 5, Jan'13-Jun'15; wave 7, Jan'15-Jun'17).

Ever had an alcoholic drink			
Difference +20%			
Significant? Yes			

National	2013- 2015	2015 - 2017
10-15 year olds	28%	20%

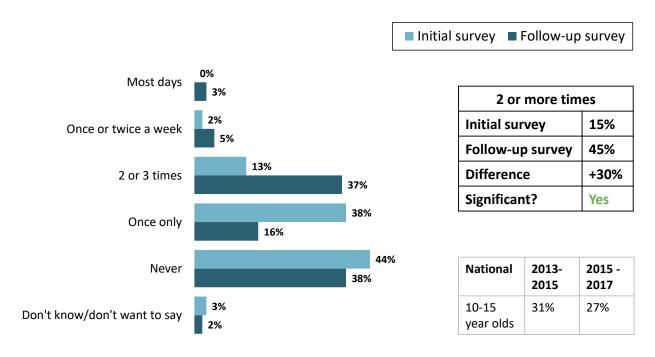
⁴⁷ Institute for Social and Economic Research (ISER), University of Essex. Understanding Society. Wave 7 (Jan'15-Jun'17). Available from: https://www.understandingsociety.ac.uk/documentation/mainstage/dataset-documentation

Similarly, frequency of drinking alcohol has also increased for young people in this cohort compared with two years ago

Young drinkers in this cohort are also more likely to drink on more occasions; 45% have drunk alcohol at least twice in the last four weeks compared with 15% two years ago, when they were younger.

Again, comparing this with available national figures, this cohort of young people (who are aged between 13 and 21 years) are more likely to have drunk alcohol at least twice in the last four weeks, compared with 10-15 year olds in the population as a whole.⁴⁸ However, this comparison should be treated with caution as the different age ranges do mean that some of the cohort are legally able to buy and consume alcohol.

YXA2. How many times in the last four weeks have you had an alcoholic drink?



Base: All young people who have accepted self-completion, self-completed, and has alcoholic drinks. Initial survey: (63). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (63). Fieldwork dates 16 Oct 2017 – 16 Sept 18. National data from Understanding Society (wave 5, Jan'13-Jun'15; wave 7, Jan'15-Jun'17).

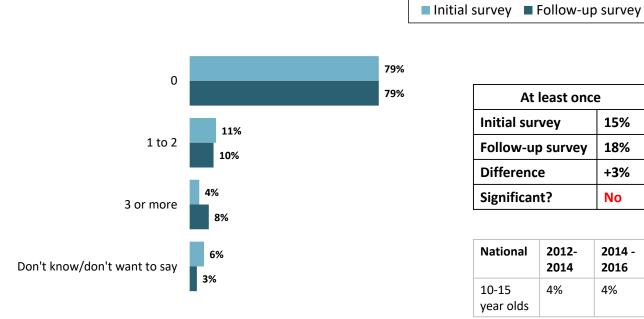
⁴⁸ Institute for Social and Economic Research (ISER), University of Essex. Understanding Society. Wave 7 (Jan'15-Jun'17). Available from: https://www.understandingsociety.ac.uk/documentation/mainstage/dataset-documentation

However, similar proportions of young people report that they have been drunk in the last four weeks compared with two years ago

Compared with the initial survey, there has been no significant change in the proportion of young people in this cohort that drink alcohol and say they have been intoxicated or drunk in the last four weeks (18% compared with 15% two years ago).

Although there are differences resulting from age, setting this in context, more young people in this cohort (aged 13-21 years) have been intoxicated in the last four weeks compared with 10-15 year olds in the population as a whole. 49 Again, this comparison should be treated with caution as the different age ranges do mean that some of the cohort are legally able to buy and consume alcohol.

YXA3. How many occasions during the last 4 weeks (if any) have you been intoxicated or drunk from drinking alcohol, for example staggered when walking, not being able to speak properly, throwing up or not remembering what happened?



At least once	
Initial survey 15%	
Follow-up survey	18%
Difference	+3%
Significant? No	

National	2012- 2014	2014 - 2016
10-15	4%	4%
year olds		

Base: All young people who have accepted self-completion, self-completed, and has alcoholic drinks. Initial survey: (63). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (63). Fieldwork dates 16 Oct 2017 - 16 Sept 18. National data from Understanding Society (wave 4, Jan'12-Jun'14; wave 6, Jan'14-Jun'16).

⁴⁹ Institute for Social and Economic Research (ISER), University of Essex. Understanding Society. Wave 6 (Jan'14-Jun'16). Available from: https://www.understandingsociety.ac.uk/documentation/mainstage/dataset-documentation

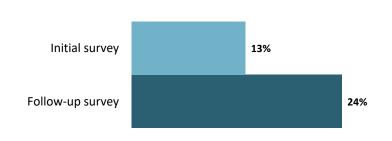
Smoking

More young people in this cohort smoke, but this is likely to be a result of the fact they are two years older

There has been a significant increase in the proportion of young people who smoke cigarettes: from 13% in the initial survey to 24% in the follow-up survey. As noted above, in relation to alcohol consumption, this may be a function of the fact the cohort have aged between the two interviews.

Nonetheless, a greater proportion of this cohort of young people (aged 13-21) smoke cigarettes compared with the national findings for both 13-15 year olds (11%) and adults aged 16+ (17%).⁵⁰

YXDRU_SMOKE. Do you ever smoke cigarettes at all? Please do not include electronic cigarettes (e-cigarettes).



Smoke cigarettes	
Difference +11%	
Significant? Yes	

National	2015	2017
13-15	11%	11%
year olds		

Base: All young people who accepted self-completion, and self-completed. Initial survey: (242). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (242). Fieldwork dates 16 Oct 2017 – 16 Sept 18. National data from Health Survey for England (2015; 2017).

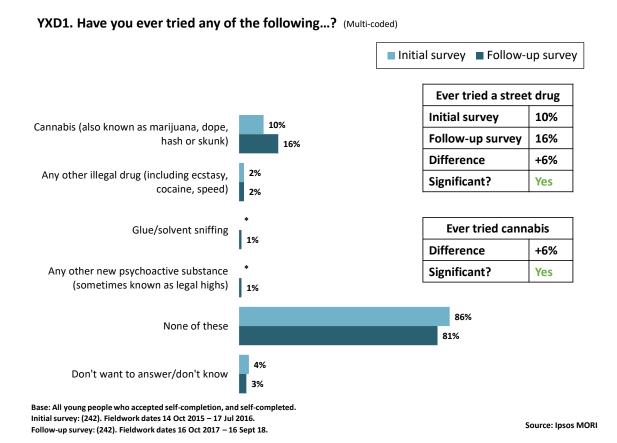
⁵⁰ Health Survey for England (2017). Available from: http://healthsurvey.hscic.gov.uk/data-visualisation/data-visualisation/explore-the-trends/smoking.aspx

Street drugs

As they have aged, young people in this cohort are more likely to report trying at least one street drug

The cohort of young people were asked whether they had tried any of a list of street drugs. Compared with two years ago, they are significantly more likely to report trying at least one (16% compared with 10% when initially interviewed). However, as with other health behaviours, this needs to be interpreted in light of the fact that they are now two years older.

Similar to the cohort of main carers, cannabis is the most commonly taken drug (16%), with fewer than one in ten having tried any of the other types of drugs listed. Notably, the proportion of young people interviewed (aged 13-21) who have tried cannabis is significantly higher than nationally (16% compared with two per cent of 10-15 year olds⁵¹). In addition, the proportion of young people in this cohort that has tried cannabis has significantly increased over the last two years (16% compared with 10% when initially interviewed).



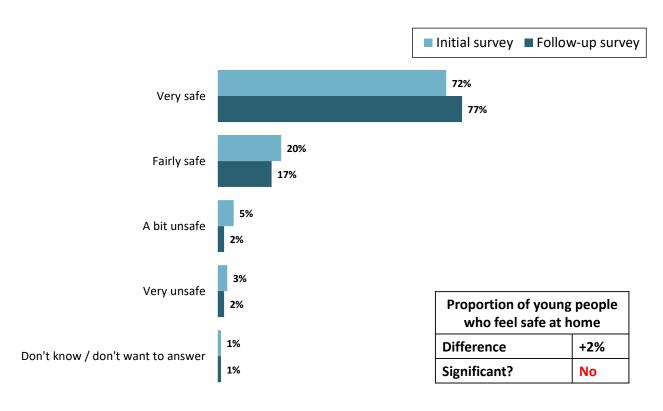
⁵¹ Institute for Social and Economic Research (ISER), University of Essex. Understanding Society. Wave 6 (Jan'14-Jun'16). Available from: https://www.understandingsociety.ac.uk/documentation/mainstage/dataset-documentation



Young people continue to report feeling safe at home

The majority of young people (94%) say they feel very or fairly safe at home. This is consistent with when they were surveyed two years ago where (92%).

YXC1. Overall, how safe would you say you feel now at home?



Base: All young people interviewed who accepted self-completion. Initial survey: (286). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (286). Fieldwork dates 16 Oct 2017 – 16 Sept 18.

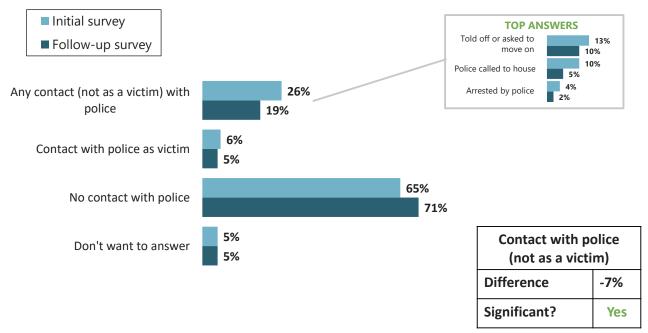
Crime and anti-social behaviour

Contact with the police

Recent contact with the police has also fallen for young people in these families, specifically in relation to instances where they may have committed or are suspected of committing a crime

The same questions were also asked of the young people interviewed in both waves. Overall significantly fewer young people were likely to have had contact with the police (not as a victim) than when they were first interviewed (19% compared with 26%). However, in terms of specific reasons for contact, the differences are not significant.

YXC4. Police contact in the last 6 months (young person)



Base: All young people interviewed who accepted self completion, and self completed. Initial survey: (242). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (242). Fieldwork dates 16 Oct 2017 – 16 Sept 18

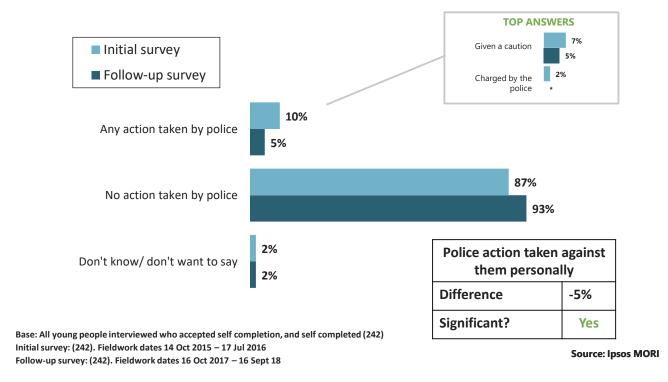
Sanctions

Similarly, fewer young people report having action taken against them as a result of their involvement in crime

One in twenty young people (five per cent) report police action because they were accused of committing a crime in the last 6 months. This is a significant fall in reported behaviours for these young people compared with two years ago. However, again, there is no significant change in the proportions reporting each of the individual actions asked about.

YXC5. Police action taken in the last 6 months (young person)

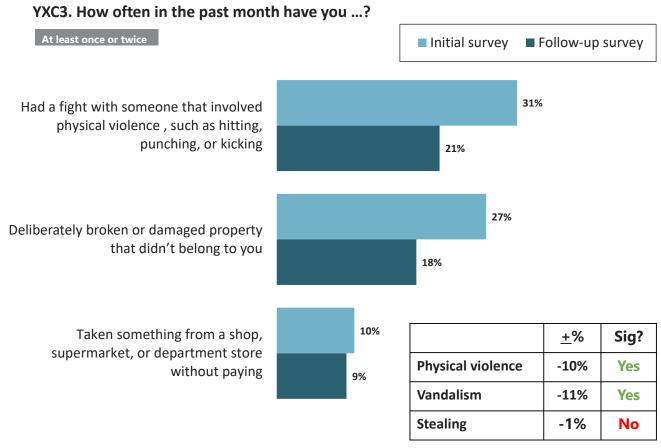
Including given a caution, charged by the police, been to court, fined by the police or court, sentenced to supervision, sent to prison/ a secure training centre/ LA secure care home



Self-reported offending

Reported involvement in crime and anti-social behaviour is also lower for the young people who have been involved with the Troubled Families Programme

Young people were also asked about their involvement in criminal activity and anti-social behaviour when they were first interviewed and at the follow-up. While reporting levels have remained higher than among main carers, fewer of these young people say they have been involved in physical violence or vandalism than when they were interviewed two years ago.



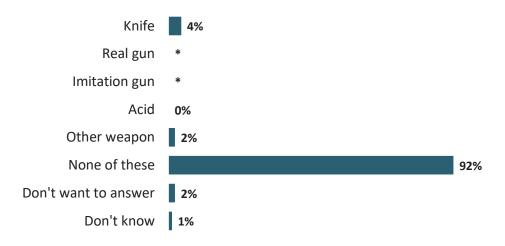
Base: All young people who accepted self completion, and self completed Initial survey: (242). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (242). Fieldwork dates 16 Oct 2017 – 16 Sept 18

One in five (21%) report having had a fight with someone that involved physical violence at least once or twice in the past month, a significant fall from reported behaviours two years ago (31%). Another one in five (18%) say they have deliberately broken or damaged property that didn't belong to them in the past year on at least one occasion. Again, this is a significant fall in reported anti-social behaviour. In contrast, the proportion having taken something from a shop, supermarket or department store without paying more than once in the past year has remained consistent (10% compared with nine per cent).

The majority of young people have not carried a weapon with the intent to use it if attacked

Overall five per cent have carried a weapon with the intent of using it if attacked, with four per cent carrying a knife, two per cent carrying another weapon and fewer than 0.5% each carrying either a real or imitation gun. This question was asked for the first time in the follow-up survey, meaning no comparison is available.

W2YXC1. Have you ever carried any of the following with the intent to use as a weapon if attacked?



Base: All young people who accepted self completion, and self completed. Follow-up survey: (264). Fieldwork dates 16 Oct 2017 – 16 Sept 18

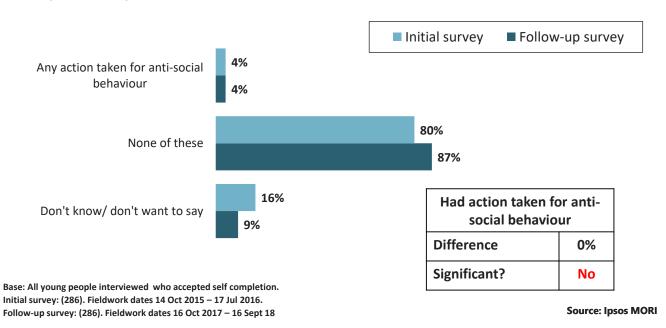
Actions against anti-social behaviour

There is no difference in the proportion of young people having actions used to discourage anti-social behaviour over the 6 months prior to interview compared with two years ago

The level of action taken to stop anti-social behaviour among young people in the six months prior to being interviewed is unchanged. Four per cent say actions were taken against them when they were starting on the programme and this figure is the same two years later.

YXC2. Action taken to stop anti-social behaviour in the last 6 months (young people)

Including civil injunction, criminal behaviour order, dispersal power, community protection notice, public spaces protection order, closure power, NOSP, possession order, youth caution



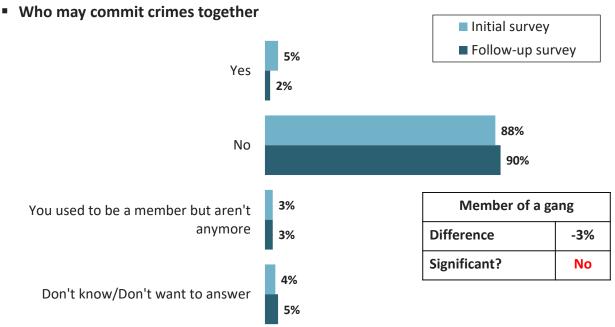
Gang membership

One in twenty young people report current or past gang membership – no change from when they were interviewed two years ago

Five per cent of the young people interviewed report being or having been a member of a gang in the past, including two per cent who are currently a member. There is no significant difference on this measure from when they were interviewed two years ago (previously eight per cent).

YXC6. Are you a member of a gang? By gang we mean groups of 3 or more young people who hang around each other and:

- Have a specific area or territory
- Share a characteristic and are seen by others as a group e.g. have a name or something else to identify them
- Possibly have rules or a leader, or



Base: All young people interviewed who accepted self completion, and self completed. Initial survey: (242). Fieldwork dates 14 Oct 2015 – 17 Jul 2016. Follow-up survey: (242). Fieldwork dates 16 Oct 2017 – 16 Sept 18

Appendices

Appendix A: Counterfactual analysis

The feasibility of constructing a comparison group using the UK Household Longitudinal Study (UKHLS)

Summary

As part of the evaluation of the new TF programme, our research partners BPSR undertook a study to test whether the UK Household Longitudinal Study (UKHLS) could be used to identify a comparison group of families for the TF survey families. If it proved feasible to identify families whose profile closely matched those of the TF survey families, change in outcomes over time for these comparison families would generate an estimate of the counterfactual change for the TF families in the survey.

The conclusion reached by BPSR was that this was not feasible in practice, with a UKHLS comparison group likely to give biased, and hence misleading, estimates of the counterfactual. The feasibility assessment made by BPSR was discussed by the TF Technical Advisory Group and the Evaluation Steering Group, with both groups agreeing with the conclusions.

This annex sets out the main elements of that feasibility assessment.

Background

At the time of commissioning the longitudinal survey of TF families, consideration was given to whether it would be feasible to recruit and survey a parallel sample of comparison families who presented with similar problems to the TF families but who were not invited to join the programme. These comparison families would give an estimate of the change over time in outcomes in the absence of the TF programme - that is the 'counterfactual' change.

The conclusion at that commissioning stage was that there would be very significant challenges to identifying and actively surveying a contemporaneous comparison group given the national rollout of the programme. In principle, to generate a naturally occurring comparison sample among which longitudinal survey data could be collected, two key 'waiting list' criteria would have to be met:

- 1. Local authorities would need to be able to identify programme-eligible families well in advance of them starting on the programme;
- 2. For a sample of those families, local authorities would need to agree to those families not entering the programme for at least a year (so that baseline and one year follow-up interviews could be conducted).

The experience of the research team on the first TF programme suggested that neither of these two criteria were likely to be met unless local authorities were to change their way of working specifically for the evaluation. The initial evaluation suggested that local authorities did not hold families on a waiting list: many families are referred to the programme (rather than being identified solely through administrative data), and those families tended to be entered onto the programme very soon after their referral. Nor would local authorities be willing to adopt a waiting list approach to support the evaluation.

Given these problems an alternative approach was proposed, namely to seek to identify a historical comparison group of families from the UKHLS 52. It was acknowledged at the time that this alternative would be technically weaker and might give biased estimates of impact. However, it had the benefit of being non-intrusive and inexpensive. Moreover, it provided data on a potential comparison group collected prior to the national rollout of the TF programme. Essentially it would have worked as follows:

- We would identify the sub-set of families in the UKHLS who, when they were interviewed in 2011/12, appeared to have a number of problems that suggested they were similar, if not identical, to the 'troubled families' in the TF survey;
- For those outcomes that are common to both UKHLS and the TF longitudinal survey, the change in outcomes for the TF survey would be compared to the change in the UKHLS outcomes. The change in the UKHLS outcomes would give an estimate of how far outcomes for families with multiple problems change over the space of two years. Because that change was prior to the national rollout of the new TF programme, it would be safe to assume that most of the UKHLS families in the analysis would not have been through the TF programme. There were two key reasons behind the decision to look at two, rather than one-year outcomes. Firstly, when the initial TF programme evaluation used a nine-month follow up, it found that a high proportion of families were still on the TF programme and there were concerns that a year may be too early to capture the full impact of the programme. Secondly, some of the outcomes of interest are only collected in the UKHLS every two years.

⁵² The UK Household Longitudinal study (UKHLS), known to respondents as 'Understanding Society', was launched in 2009 to follow 100,000 individuals in forty thousand households and question them annually about a wide spectrum of areas relating to their working and personal lives.

A number of potential problems were acknowledged, notably that the UKHLS does not include all the outcomes of interest for the TF evaluation, affecting both the ability to match families on their baseline outcomes and measure change. Of most concern was the fact that the UKHLS does not include questions on ASB or crime, so if a very high percentage of families in the new programme were selected because of ASB/crime issues, it was doubtful that a set of families could be identified in UKHLS that would give a credible comparison. The same applied to domestic violence and housing problems. A secondary potential issue acknowledged was that the UKHLS comparison group would have to be taken from 2011/12 to avoid any of the families having entered the new TF programme during their follow-up period. As a result, the comparison families will have experienced a slightly different economic environment to the TFP families, with the potential to affect, particularly, employment outcomes.

The assessment of feasibility

The assessment of feasibility was carried out in three main stages:

- Once the baseline data collection for the survey of TF families was complete, the demographics and baseline outcomes of TF families were used to identify a potential comparison sample of families from the UKHLS who, in 2011/12, had very similar characteristics to the TF programme families;
- 2. Once the follow-up data collection was close to complete, those data were used to establish whether all the predictors of follow-up outcomes for the TF families (other than the programme itself) were also outcomes collected in the UKHLS. If some of the variables which predict the outcomes for the TF families are unobserved in the UKHLS then any selected UKHLS comparison group would be very likely to be biased.
- 3. Finally, use was made of the fact that the main impact study for the new TF programme identified a comparison group through administrative records. Change over time in employment for the administrative data comparison group was compared to the change over time in employment for the UKHLS comparison group. If the UKHLS comparison group was unbiased, the estimates of change in employment from these two sources would be very similar

More detail on these three stages is given below.

Stage 1: Identifying a potential UKHLS comparison sample

1. The UKHLS

The UKHLS is a longitudinal household panel survey launched in 200953 which tracks household members from around 40,000 households54 across the UK via annual face-to-face interviews (with self-completion elements) with each household member aged 16 and over, and self-completion questionnaires for those aged 10 to 15.

At each wave, the survey collects a wealth of data on the demographic and socio-economic circumstances of the families, as well as data on household members' health and well-being, their relationships, and so on. As such, it contains:

- a wide range of variables which could be used to identify families whose profiles closely match those involved in the TF;
- a good number (but not all) of the outcomes that were collected in the TF survey.

The aim was to construct a baseline sample of families from the UKHLS that was as similar as possible to the sample of families in the TF baseline survey, including all comparable outcome measures and family profile variables. (At the questionnaire design stage, the questions in TF questionnaire was designed to mirror those in the UKHLS as far as possible.)

There were a few technical issues to be addressed in the first instance. The TF survey respondent is the main carer. Although 'main carers' are not identified within the UKHLS, as the best proxy, the UKHLS was reduced to a dataset of mothers with children under 19.55 At wave 3 (data collection 2011/12), the UKHLS included 8,655 mothers with dependent-age children. Then, to allow for the TF and UKHLS survey to be compared, the small number of male main carers in the TF survey were excluded, with the intention of finding comparators for them later if feasibility was established.

⁵³ It includes respondents from its predecessor study the British Household Panel Survey which ran from 1991.

⁵⁴ Starting sample size, not taking into account attrition.

⁵⁵ The TF survey includes families with children up to the age of 21. The analysis reported on here was restricted to TF families with at least one child under 19.

During the TF survey, respondents were asked to provide proxy information about their partners (e.g. employment status, health). As a household survey, the UKHLS aims to interview all household members. So UKHLS data was taken directly from the partners' interview (or from proxy data where partners were not interviewed).

The UKHLS provides comparison data for the following outcome variables about the household, respondent or partner:

Arrears with rent/mortgage
Respondent and partner's employment status
Anyone in household in paid work
Respondent's and partner's jobsearch
How well managing financially
Life satisfaction
Self-reported health of respondent and partner
GHQ12
Quality of the couple relationship

Note that the list of outcome variables does not included anti-social behaviour, crime, alcohol or drug use, domestic violence, truancy or school behaviour or use of medical services.

2. Constructing the comparison group

Propensity score matching (PSM) was used to identify a subset of families from the UKHLS who were comparable to the TF survey families on all the variables available in both datasets. This was done in two stages:

- Firstly, PSM was used to reduce the original sample of 8,655 UKHLS families down to 3,345 families who were similar in terms of their profile variables (that is, demographic structure; tenure; economic status; benefit receipt; qualification levels);
- Secondly, the 3,345 'similar' families were propensity score matched to the TF families on these profile variables *plus* the full range of baseline outcome measures (such as GHQ; whether in arrears; how managing financially). This second step did not discard any families, but it severely weighted down families who were dissimilar to the majority of TF families and weighted up those families that had a good deal in common with the TF sample.

The net result of these two stages was to identify a weighted sample of UKHLS families who, between them, were very similar to the TF families. Table A.3 shows the level of comparability between the two samples.

3. Potential biases

A significant risk of bias in this analysis was that it was not possible to check whether the UKHLS comparison group was similar to the TFP group on those outcomes not collected in the UKHLS. The key ones missing were crime, domestic violence, and truancy, but others include alcohol and drug use, expectations about future employment, and reported experiences of problems when growing up. For instance,

- 22 per cent of the main carers in the TFP baseline survey said at least one family member had been in contact with the police (not as a victim) in the six months before the interview;
- 33 per cent of main carers said they had experienced domestic abuse or violence since becoming an adult;
- 40 per cent of main carers said there were concerns about the school attendance of the young person selected for interview.

Clearly it would not have been possible to use the UKHLS comparison group to generate estimates of counterfactual levels of changes for any of these outcomes. But, also, because it was not possible to check whether the UKHLS comparison families were similar, at baseline, on these outcomes, there was a risk that the comparison group were, on average, somewhat less 'troubled'. This could mean that positive change in observed outcomes (such as the GHQ) was more probable in the comparison group than it would be if the comparison group was matched across all the outcomes. This would mean that the measured counterfactual level of change was too high, and the TFP impact consequently too low. Stage 2 of the feasibility study tested this.

Stage 2: Identifying the predictors of outcomes for the TF group

Once a reasonable sample size of follow-up data was available from the TF family survey, analysis was undertaken to test whether change in outcomes over time for the TF families was dependent on baseline circumstances, and in particular, whether change in outcomes was dependent on baseline circumstances/characteristics that are not covered by the UKHLS and hence could not be matched on. For instance, analysis tested whether change in the GHQ score depends upon the baseline levels of contact with the police or with different levels of alcohol use. The dataset available had only a small sample size for father/partner outcomes so the analysis focused on outcomes for mothers. Of course,

it was not possible to test whether there were predictors of outcomes beyond those collected in the baseline TF survey, but the TF survey does have a reasonably broad range of relevant characteristics.

The results of this analysis varied from outcome to outcome as is summarized below:

Managing financially, life satisfaction, self-reported health and GHQ

There were no TF survey predictors of how well the family were managing financially, life satisfaction, self-reported health or GHQ score over and above variables that could be matched on. The strongest predictor for all these outcomes was the baseline version of the outcome measure. Variables such as crime or domestic violence were not predictors after having controlled for these baseline outcomes. So, the UKHLS comparison group looked to be reasonable for these outcomes, with the caveat that there may be other predictors not collected in either the TF survey or the UKHLS that cannot be matched on and that might have biased the comparison.

Employment outcomes

For employment outcomes, the TF data suggested that self-reported expectation of whether anybody in the household will be in work in two years' time was a significant predictor of household level employment at follow-up even after controlling for employment at baseline and one year prior to baseline. The table below shows the strength of this relationship.

Table A.1: Percentage in work at two-year follow-up by employment at baseline and by whether or

not the respondent expected employment two years later

		At least one adult in work at two-year follow-up %
No adult in work	All	20
at baseline	Expected somebody to be in paid work	26
	Did not expect anybody to be in paid work	13
One or both	All	78
adults in work at	Expected somebody to be in paid work	81
baseline	Did not expect anybody to be in paid work	46

This relationship between expectation of employment and actual employment was a problem for the UKHLS comparison, because the UKHLS does not collect expectation, and it was not possible, therefore, to match on it. Overall, only 68 per cent of mothers in the TF survey said they expected themselves or their partner to be in paid work in two years time. Ideally the UKHLS comparison group would have the same percentage, but this was not observable.

Arrears

For arrears there was a similar problem as for employment, with the analysis of the TF data suggesting there are predictors of outcomes that cannot be matched on in the UKHLS. In this instance the predictors outside of the matching set were 'childhood experience of break-up or abuse' and 'childhood experience of drugs or alcohol problems in family'56. Table A.2 illustrates the strength of this relationship.

Table A.2: Percentage in arrears at two-year follow-up by arrears at baseline and by history of family break-up, abuse, drug or alcohol problems

		In arrears at follow-up %
In arrears at	All	15
baseline	Childhood experience of break-up or abuse	25
	No childhood experience of break-up or abuse	7
Not in arrears at	All	34
baseline	Childhood experience of break-up or abuse	40
	No childhood experience of break-up or abuse	27
In arrears at	All	15
baseline	Childhood experience of drug or alcohol problems	31
	No childhood experience of drug or alcohol problems	13
Not in arrears at	All	34
baseline	Childhood experience of drug or alcohol problems	53
	No childhood experience of drug or alcohol problems	29

⁵⁶ This is an empirical relationship. It seems unlikely that these variables are themselves the causes of arrears, rather they act as proxies for other uncaptured causes.

Just over a half (51 per cent) of the TF respondents said they grew up in a family where they experienced break-up, abuse, drug or alcohol problems. If this percentage was much lower in the UKHLS comparison sample (which is certainly plausible) then it seems the UKHLS comparison sample would underestimate the counterfactual level of arrears and bias the estimate of impact.

So, in summary, for the employment and arrears outcomes there was good evidence to suggest the UKHLS comparison sample would give a biased estimate of the counterfactual.

Stage 3: Comparing the UKHLS comparison group with the administrative data comparison group

The analysis completed by the end of Stage 2 suggested that generating a UKHLS comparison group that would give an unbiased estimate of the counterfactual was probably not feasible. But as a final stage, the change in employment for the UKHLS comparison group was compared to the level of change from the administrative comparison group constructed by the MHCLG team of analysts. The UKHLS comparison group showed a marked change over time in household employment levels: 55 per cent of the comparison families had no adults in work at baseline; two years later this reduced to 44 per cent. This level of change was markedly at odds with the amount of change observed in the administrative data comparison group. The most plausible explanation was that the UKHLS comparison group of families are not as 'troubled' as the TF group and would not give an unbiased estimate of the counterfactual.

Based on these analyses, the UKHLS approach was judged not to be feasible.

Table A.3: Troubled Family survey respondents and the UKHLS matched comparison families

Note: Table excludes Troubled Families survey respondents with a male main carer, and UKHLS lone father families

		Matched UKHLS families
	Troubled Families group	with children
	%	%
Age of mother		
17-24	6	7
25-34	35	37
35-44	38	38
45+	22	18
Household type		
Lone parent	65	62
Couple with children	35	38
Number of children		
None under 17	3	2
One	28	31
Two	33	34
Three	20	19
Four or more	17	14
Age of youngest child		
0-3	31	32
4-7	26	25
8-10	16	17
11-12	8	11
13-14	10	8
15-16	7	4
17+/missing	3	2
Ethnic group		
White British	84	82
Other	16	18
Highest qualification of main carer		
Degree	8	9
Other higher	11	11
A level	9	10
GCSE	26	25
Other	21	21
No qualifications	24	24

		Matched UKHLS families
	Troubled Families group	with children
	%	%
Tenure		
Own (outright or with mortgage)	15	16
Rent from LA	36	38
Rent from HA	24	23
Other inc private renting	25	24
Whether in arrears with rent or mortgage		
Yes	22	21
No	78	79
Economic activity of main carer		
Employed	30	30
Unemployed	29	28
Long term sick/disabled	9	9
Looking after family/home	24	26
Other	9	7
Economic activity of partner		
Employed	59	51
Unemployed	19	24
Long term sick/disabled	10	15
Other	12	11
Any adults in paid work		
Yes	44	43
No	56	57
Any adult on JSA or income support		
Yes	39	41
No	61	59
Any adult on sickness-related benefits		
Yes	48	45
No	52	56
How managing financially		
Living comfortably	6	5
Doing alright	26	23
Just about getting by	42	41
Finding it quite difficult	16	18
Finding it very difficult	10	13

		Matched UKHLS families
	Troubled Families group	with children
	%	%
Life satisfaction		
Completely dissatisfied	5	7
Mostly dissatisfied	12	9
Somewhat dissatisfied	14	18
Neither/nor	9	14
Somewhat satisfied	19	16
Mostly satisfied	29	21
Completely satisfied	7	4
Missing	5	11
Self-reported health of main carer		
Excellent	4	8
Very good	16	13
Good	33	33
Fair	27	26
Poor	17	11
Missing	3	10
GHQ		
Score lower than 4	45	42
Score 4+ (indicative of mental health		
problems)	56	58
How happy in relationship		
Extremely unhappy	6	7
Fairly unhappy	9	12
A little unhappy	9	9
Нарру	29	27
Very happy	22	19
Extremely happy	18	19
Perfect	7	7

Appendix B: Profile of families

Table B.1 Profile of families

	Initial survey – all families 2015/16	Follow-up families 2017/18
Base: all household members	(2,743)	(2,709)
Age of all household members		
0-4 years	13%	8%
0-18 years	61%	59%
19+ years	39%	41%
Base: all households	(1,145)	(654)
Household composition		
One parent families (with dependent children)	56%	53%
Two parent families (with dependent children)	32%	33%
Families with non-dependent children	12%	13%
Partner in household	36%	38%
Mean household size	4	4
Number of children in household		
1-2	57%	54%
3 or more	42%	43%
Household tenure		
Rent	82%	82%
Social renter	60%	66%
Private renter	6%	5%
Own with mortgage/loan	11%	11%
Own outright	3%	3%
Part rent/part mortgage (shared equity)	1%	1%
Rent free/have it in some other way	2%	2%

	Initial survey – all families 2015/16	Follow-up families 2017/18
Base: all households	(1,145)	(654)
Workless household	57%	55%
Base: all main carers	(1,145)	(654)
Long-term disability	48%	49%
Qualifications		
No qualifications	25%	28%
NVQ1-2 or equivalent	20%	25%
NVQ3 or more	28%	18%
Ethnicity		
White	87%	87%
Mixed	2%	2%
Asian	5%	5%
Black	5%	5%
Other	1%	1%

Appendix C: Significance testing

Table C.1 McNemar tests included in the report

Note: any codes that are not included in the 'Variables tested' column were coded as missing variables and therefore do not form part of the test

Employment and financial exclusion	
Question	Variables tested
ED1: Which of the following best describes what <u>you</u> are doing at the moment? 1. Not working, but actively looking for paid work	In employment (codes 3-5) Not in employment
 Not working and not looking for paid work Working part-time including self-employment (up to 15 hours) Working part-time including self-employment (16-30 hours) Working full-time including self-employment (30+ hours) 	(codes 1,2, 6-13, 15)
 6. Retired early and claiming benefits (ESA or JSA) 7. Retired early and not claiming benefits 8. Retired and receiving state pension 9. Student 10. On a government training scheme 11. Permanently sick or disabled 12. Looking after the home 	Economically active (codes 1, 3-5, 10) Economically inactive (codes 2, 6-9, 11-13, 15)
 13. Maternity leave 14. Unpaid worker in family business 15. Other 16. Don't know 17. Don't want to say 	

Working vs workless households – combined variable (ED1, PXED1 and ED2)

ED1/PXED1: Which of the following best describes what <u>you</u> are doing at the moment?

- 1. Not working, but actively looking for paid work
- 2. Not working and **not** looking for paid work
- 3. Working part-time including self-employment (up to 15 hours)
- 4. Working part-time including self-employment (16-30 hours)
- 5. Working full-time including self-employment (30+ hours)
- 6. Retired early and claiming benefits (ESA or JSA)
- 7. Retired early and not claiming benefits
- 8. Retired and receiving state pension
- 9. Student
- 10. On a government training scheme
- 11. Permanently sick or disabled
- 12. Looking after the home
- 13. Maternity leave
- 14. Unpaid worker in family business
- 15. Other
- 16. Don't know
- 17. Don't want to say

ED2: Can I just check, is <u>anyone else</u> in your household currently in paid work?

- 1. Yes
- 2. No
- 3. Don't want to say

ED6: Looking at this card, in the last year have <u>you</u> done any of these things?

- 1. Attended a job interview
- 2. Attended a work placement
- 3. Applied for a job
- 4. Received training that did not lead to a qualification (e.g. confidence building, CV writing, time management)
- 5. Gained a part-qualification (e.g. completed a module that contributes towards a qualification)
- 6. Voluntary work
- 7. None of these
- 8. Don't want to say
- 9. Don't know

At least one step (chose at least one from codes 1-6)

None (code 7)

Working (ED1 codes 3-5 or PXED1 codes 3-5

Workless households

(all remaining codes and none of the

or ED2 code 1)

working codes

selected)

Training activities (codes 4 and 5)
Work activities (codes 1, 2, 3 and 6)

ED7: In the past four weeks what active steps have you taken to find work. Have you 1 Applied directly to an employer 2 Studied or replied to advertisements 3 Searched for jobs/information about jobs on the internet 4 Contacted a private employment agency or job centre 5 Asked friends or contacts 6 Taken steps to start your own business 7 Or none of these steps? 8 Don't know 9 Refused	At least one step (chose one from codes 1-6) None (code 7)
ED5: Taking everything together, in the next year do you think <u>you</u> will be	Working (code 1 and 2)
1 working part-time 2working full-time 3 or not working 4. Don't know 5. Don't want to say	Not working (code 3) Working full-time (code 2) Not working full-time (codes 1 and 3)
ED9: Which, if any, of the following benefits or tax credits do <u>you or your household</u> receive at the moment? 1. Income Support 2. Jobseeker's Allowance 3. Housing Benefit or Council Tax Credit	Out of work benefits (codes 1, 2, 4, 5 and 8) Not out of work benefits (none of codes 1, 2, 4, 5 and 8)
 Incapacity Benefit Employment and Support Allowance (ESA) Disability Living Allowance or Personal Independence Payment Carer's Allowance Severe Disablement Allowance 	In work benefits (codes 10, 11 and 15) Not in work benefits (not codes 10, 11 and 15)
 9. Pension Credit (including Guarantee Credit and Savings Credit) 10. Working Tax Credit (formerly Working Family Tax Credit and Disabled Person's Tax Credit) 11. Child Tax Credit 12. Universal Credit 13. Child Benefit 14. Any other state benefit 15. None of these 16. Don't want to say 17. Don't know 	Universal benefits (codes 3, 6, 7, 12 and 13 Not universal benefits (not codes 3, 6, 7, 12 and 13)

ED11: In the last six months have <u>you and <<partner name="">></partner></u> been keeping up with bills and any regular debt repayments 1. Yes 2. No 3. Don't want to say TS6: Can I just check, have you fallen behind with your rent payments at any time in the last six months? 1. Yes 2. No	Keeping up with bills (code 1) Not keeping up with bills (code 2) Fallen behind with rent (code 1) Not fallen behind with rent (code 2)
3. Don't know/ can't remember4. Don't want to say	
ED13: How well would you say you, yourself are managing financially these days? Would you say you are 1. Living comfortably 2. Doing alright 3. Just about getting by 4. Finding it quite difficult 5. or Finding it very difficult? 6. Don't want to say 7. Don't know	Managing financially (codes 1-3) Not managing financially (codes 4 and 5)
ED12: Do you have any of the following loan or credit products, either in your own name or jointly with someone else? 1. Personal loan with bank or building society	At least one loan / credit product (codes 1-10) None (not codes 1-10)
2. Loan from an online payday loan provider (from companies such as Wonga, QuickQuid, KwikCash, etc) 3. Loan from a shop on the high street 4. A loan from another type of lender 5. Mortgage 6. Student loan 7. Informal loan from friends or family 8. Hire purchase, credit sale or rental purchase agreement 9. Mail order catalogue arrangement to buy goods in instalments 10. Credit card or store card 11. None of these 12. Don't want to say 13. Don't know	Has a credit card (code 10) Does not have a credit card (not selected code 10)

Health and wellbeing	
Question	Variables tested
 Question HWB3: In the last six months roughly how many times have you been to a GP or family doctor-for an illness or issue you or any of your children has had? Please do not include any visits to a hospital. 1. None 2. Once or twice 3. 3 – 6 times 4. 7 – 11 times 5. 12 times or more 6. Can't remember 7. Don't want to say 	At least once (codes 2-5) None (code 1) 6 times or less (codes 1-3) 7 or more times (codes 4 and 5)
HWB4: And in the last six months roughly how many times have you been to Accident & Emergency (A&E) for an illness or accident you or any of your children has had? 1. None 2. Once 3. 2 – 3 times 4. 4 – 7 times 5. More than 7 times 6. Can't remember 7. Don't want to say	Less than twice (codes 1 and 2) Two or more times (codes 3-5)
SCHWB5: In general, would you say your health is 1. Excellent 2. Very good 3. Good 4. Fair 5. Poor 6. Don't know 7. Don't want to say	Excellent or very good (codes 1 and 2) Good or fair or poor (codes 3-5)

HWB5/6/7 combined variable:

HWB5: Do you have any long-standing physical or mental impairment, illness or disability? By 'long-standing' I mean anything that has troubled you over a period of at least 12 months or that is likely to trouble you over a period of at least 12 months.

- 1. Yes
- 2 No
- 3. Don't know
- 4. Don't want to say

HWB6: Does <<CHILD NAME>> have any long-standing physical or mental impairment, illness or disability? By 'long-standing' I mean anything that has troubled them over a period of at least 12 months or that is likely to trouble them over a period of at least 12 months.

- 1. Yes
- 2. No
- 3. Don't know
- 4. Don't want to say

HWB7: And does anyone else in your household have any long-standing physical or mental impairment, illness or disability?

- 1. Yes
- 2. No
- 3. Don't know
- 4. Don't want to say

HWB5: Do you have any long-standing physical or mental impairment, illness or disability? By 'long-standing' I mean anything that has troubled you over a period of at least 12 months or that is likely to trouble you over a period of at least 12 months.

- 1. Yes
- 2. No
- 3. Don't know
- 4. Don't want to say

At least one person in the household has a long-standing illness or disability (code 1 for any of HWB5, HWB6 or HWB7) No one has a longstanding illness or disability (not code 1 for any of HWB5, HWB6 or HWB7)

Main carer has a longstanding illness or disability (code 1) Main carer does not have a long-standing illness or disability (code 2)

SCHWB1: Please choose the number which you feel best describes how dissatisfied or satisfied you are with your life overall.	Satisfied (codes 5-7) Dissatisfied (codes 1-3)
1 Completely dissatisfied 2 Mostly dissatisfied 3 Somewhat dissatisfied 4 Neither 5 Somewhat satisfied 6 Mostly satisfied 7 Completely satisfied 8 Don't know 9 Don't want to say	
GHQ individual statements tested: GHQ1: Have you recently been able to concentrate on whatever you're doing? Better than usual Same as usual Less than usual Much less than usual	For all statements top 2 codes were tested against bottom 2 codes (Don't know and don't want to say were coded as missing values)
GHQ2: Have you recently lost much sleep over worry?	
Not at all No more than usual Rather more than usual Much more than usual	
GHQ3: Have you recently felt that you were playing a useful part in things?	
More so than usual Same as usual Less so than usual Much less than usual	
GHQ4: Have you recently felt capable of making decisions about things?	
More so than usual Same as usual Less so than usual Much less capable	

GHQ5: Have you recently felt constantly under strain?

Not at all

No more than usual

Rather more than usual

Much more than usual

GHQ6: Have you recently felt you couldn't overcome your difficulties?

Not at all

No more than usual

Rather more than usual

Much more than usual

GHQ7: Have you recently been able to enjoy your normal day-to-day activities?

More so than usual

Same as usual

Less so than usual

Much less than usual

GHQ8: Have you recently been able to face up to problems?

More so than usual

Same as usual

Less so than usual

Much less than usual

GHQ9: Have you recently been feeling unhappy or depressed?

Not at all

No more than usual

Rather more than usual

Much more than usual

GHQ10: Have you recently been losing confidence in yourself?

Not at all

No more than usual

Rather more than usual

Much more than usual

GHQ11: Have you recently been thinking of yourself as a worthless person?	
Not at all	
No more than usual	
Rather more than usual	
Much more than usual	
GHQ12: Have you recently been feeling reasonably happy, all things considered?	
Not at all	
No more than usual	
Rather more than usual	
Much more than usual	
DDI 11. In the last six magnified by a control of the six of the s	المراد والمراد
DRU1: In the last six months have you taken any drugs, prescribed for you by a doctor or nurse, for depression, or to help you sleep, or make you	Has taken prescribed drugs (code 1)
less anxious?	Has not taken
	prescribed drugs (code
1. Yes	2)
2. No	
3. Don't want to say	
SWEMWBS tested:	Same coding for all
MWB1: I've been feeling optimistic about the future	statements Not frequently (codes 1
1. None of the time	and 2)
2. Rarely	Frequently (codes 3-5)
3. Some of the time	
4. Often	
5. All of the time	
MWB2: I've been feeling useful	
1. None of the time	
2. Rarely	
3. Some of the time	
4. Often	
5. All of the time	

MWB3: I've been feeling relaxed

- 1. None of the time
- 2. Rarely
- 3. Some of the time
- 4. Often
- 5. All of the time

MWB6: I've been dealing with problems well

- 1. None of the time
- 2. Rarely
- 3. Some of the time
- 4. Often
- 5. All of the time

MWB7: I've been thinking clearly

- 1. None of the time
- 2. Rarely
- 3. Some of the time
- 4. Often
- 5. All of the time

MWB9: I've been feeling close to other people

- 1. None of the time
- 2. Rarely
- 3. Some of the time
- 4. Often
- 5. All of the time

MWB11: I've been able to make up my own mind about things

- 1. None of the time
- 2. Rarely
- 3. Some of the time
- 4. Often
- 5. All of the time

HWB11: This card contains a list of things that might stop people from eating healthily. Which, if any, apply to your family? Just read out the letters that apply. 1. Healthy food is too expensive 2. Lack of time to prepare food/cook 3. Lack of willpower 4. Don't like healthy food 5. Lack of interest 6. Healthy food is not easily available 7. I am confused about what is healthy/lack of knowledge 8. Health issues 9. Healthy food is boring 10. Difficult to change 11. Lack of cooking skills/ confidence in cooking from scratch 12. Nothing - I already eat a healthy diet 13. Other (SPECIFY) 14. Don't know 15. Don't want to say	Already eats a healthy diet (code 12) Does not already eat a healthy diet (not code 12)
Audit C scores – scores of 8 or more and 11 or more tested	
AUD1: How often, if ever, do you have a drink that contains alcohol? 1. 4 or more times a week 2. 2-3 times a week 3. 2-4 times per month 4. Monthly or less 5. Never 6. Don't want to say	Ever drinks alcohol (codes 1-4) Never drinks alcohol (code 5)
AUD2: How many alcoholic drinks do you have on a typical day when you	Less than 7 drinks
are drinking? 1. 1-2 2. 3-4 3. 5-6 4. 7-9 5. 10+ 6. Don't want to say	(codes 1-3) 7 or more drinks (codes 4 and 5)

AUD3: How often have you had < <female 6,="" =="" male="8">> or more units of alcohol on a single occasion in the last six months? 1. Daily or almost daily 2. Weekly 3. Monthly 4. Less than monthly 5. Never 6. Don't want to say</female>	Ever in the last 6 months (codes 1-4) Never in the last 6 months (code 5)
DRU_SMOKE: Do you smoke cigarettes? Please do not include electronic cigarettes (e-cigarettes). 1. Yes 2. No 3. Don't want to answer	Smokes cigarettes (code 1) Does not smoke cigarettes (code 2)
 DRU2: In the last six months which of the following street drugs, that is drugs not given to you by a doctor or pharmacist, if any, have you taken? Cocaine (Coke, Charlie, 'C', Snow, Percy, Toot) Crack (Rock, Stones, White, Freebase, Wash) Ecstasy ('E', MDMA, Mitsubishis, Rolexes, Dolphins, XTC, Pills) LSD (Acid, Tabs, Trips, Dots, Flash, Smilies) Heroin (Smack, Skag, 'H', Brown, Gear, Horse) Methadone (Linctus, Physeptone, Meth) not given to you by a doctor or pharmacist Amphetamines (Uppers, Methamphetamine, Crystal Meth, Yaba, Speed, Meth, Ice) Mephedrone (Meow, Drone, Cat, MCat) Semeron (Sems) Cannabis (Marijuana, Dope, Pot, Grass, Hash, Spliff, Joints, Weed, Ganja, Blow, Draw, Skunk) Tranquilisers (Downers, Moggies, Jellies, Roofies, Benzos) Ketamine (Green, 'K', Super K) Other (SPECIFY) Any other New Psychoactive Substances (sometimes known as legal highs) None of these Don't want to say 	Taken any street drug (any of codes 1-14) Not taken any street drug (none of codes 1-14)

Education	
	Variables tested
Question CB2 / CB3 combined variable tested:	Have been called in to
CB2: In the last six months how often has the < <text cb1,<="" fill="" from="" td=""><td>speak about their</td></text>	speak about their
either School / College or sixth form / Pupil Referral Unit (PRU)>> called	child(ren)'s behaviour
you or asked you to come in to talk about the behaviour of < <child< td=""><td>(codes 1-5 at either</td></child<>	(codes 1-5 at either
NAME>>?	CB2 or CB3)
CD2. And in the last six magnification become because the second and saled	Has not been called in
CB3: And in the last six months how often have you been called or asked	to speak about their
to come in to talk about the behaviour of any of your other children?	child(ren)'s behaviour
1 Novem	(not coded 1-5 at
1. Never	either CB2 or CB3)
2. Once or twice	
3. 3 – 7 times	
4. 8 – 10 times	
5. More than 10 times	
6. Don't know	
7. Don't want to say	
CB4/CB4OTH combined variable tested:	Have been called in to
CB4: Have you been told that there are concerns about the attendance of	speak about their
< <child name="">> at their school/college or sixth form or Pupil Referral</child>	child(ren)'s attendance
Unit (PRU) over the last three school terms?	(code 1 at CB4 or
ornit (1 No) over the last times school terms:	CB4OTH)
CB4OTH: And have you been told that there are concerns about the	Has not been called in
attendance of any of your other children at their school/college or sixth	to speak about their
form or Pupil Referral Unit (PRU) over the last three school terms?	child(ren)'s attendance
Torri or rupir Neterral orlit (i No) over the last timee school terms:	(not code 1 at either
1. Yes	CB4 or CB4OTH)
2. No	
3. Don't know	
4. Don't want to say	
Children in need	
Question	Variables tested
HWB10: Do you feel you have had enough advice and support to help	Need a lot more
your children with their special educational or other needs?	support (code 3
	Doesn't need a lot
1. Enough advice and support	more support (codes 1
2. Need a little more advice and support	and 2)
3. Need a lot more advice and support	
4. Don't know	
5. Don't want to say	

Domestic violence	
Question	Variables tested
FR3: Since you became an adult, which of these things have happened to you in your home? Multi-code	Domestic abuse (code 2) No domestic abuse (did not select code 2)
 Partner left/family break-up Domestic abuse/violence Sexual abuse My children living in care None of these Don't know/can't remember Don't want to say 	Sexual abuse (code 3) No sexual abuse (did not select code 3)
Crime and anti-social behaviour	
Question	Variables tested
CR6/CR6OTH combined variable tested: CR6: Which, if any, of the following have happened to you in the last six months? Select any that apply CR6OTH: And which, if any, of the following have happened to someone else in your household in the last six months? Select any that apply	Contact with police (not victim) (code 1-7 in either) No contact with police (not victim) (not code 1-7 in either)
 Told off or asked to move on Stopped and searched Stopped, but not searched, and asked about something you/they had done Arrested by the police Made to do something to make amends (e.g. apologise to the victim or do voluntary work in the community) Police called to your house Some other contact I/they contacted them as a victim of crime Not had any contact with the police Don't want to say 	Victim of crime (code 8 in either) Not a victim of crime (not code 8 in either)

CR7/CR7OTH combined variable tested:

CR7: Which, if any, of the following has happened to you in the last six months because you were accused of committing a crime?

CR7OTH: And which, if any, of the following happened to someone else in your household in the last six months because they were accused of committing a crime?

- 1. Given a caution
- 2. Charged by the police
- 3. Been to court, including a youth court
- 4. Fined by the police or a court
- 5. Sentenced to supervision by a probation officer or youth offending case worker
- 6. Sent to prison, a secure training centre or local authority secure care home
- 7. Some other action (SPECIFY)
- 8. None of these
- 9. Don't want to say

Any police action taken (codes 1-7)
No police action taken (codes 8 and 9)

CR4/CR4OTH combined variable tested:

CR4: And which of the following, if any, have you done in the last six months? Select any that apply

CR4OTH: And which of the following, if any, are you aware that someone else in your household has done in the last six months? Select any that apply

- 1. Used force or violence against other people, including threatening or frightening them
- 2. Graffiti (written things or sprayed paint on things)
- 3. Broken, damaged or destroyed things that did not belong to you/them
- 4. Committed burglary
- 5. Stole a vehicle
- 6. Other stealing (e.g. shoplifting, pickpocketing)
- 7. Used violence or threats to steal from someone
- 8. Carried a knife
- 9. Carried a gun
- 10. Sold drugs to other people
- 11. Committed crime online (e.g. accessed indecent imagery of children, committed fraud, hacked a computer)
- 12. Committed fraud (e.g. gained by abuse of their position, failure to disclose information or deceived someone)
- 13. Another/other crime/s
- 14. None of the above
- 15. Don't know
- 16. Don't want to say

Used force or violence against others (code 1)
Not used force or violence against others (not code 1)

Broken, damaged or destroyed things that did not belong to you/them (code 3) Not broken, damaged or destroyed things that did not belong to you/them (not code 3)

Other stealing (e.g. shoplifting, pickpocketing) (code 6) Not taken part in other stealing (e.g. shoplifting, pickpocketing)

CR2 / CR2OTH combined variable tested:

CR2: In the last six months which of the following actions to stop antisocial behaviour, if any, have you had used against you personally?

CR2OTH: And in the last six months which of the following actions against anti-social behaviour, if any, have other members of your household had used against them?

Any action taken for anti-social behaviour (code 1-9) Not action taken for anti-social behaviour (code 10-12)

- 1. Civil injunction
- 2. Criminal Behaviour Order
- 3. Dispersal Power
- 4. Community Protection Notice
- 5. Public Spaces Protection Order
- 6. Closure Power
- 7. Notice seeking possession of your home (NOSP) on the grounds of nuisance or anti-social behaviour
- 8. Possession Order
- 9. Youth Caution or Youth Conditional Caution
- 10. None of these
- 11. Don't know
- 12. Don't want to say

TS5: In the last six months have you experienced any of the following in relation to your housing? Please read the list and tell me any letters that apply.

- 1. A Warning letter (for rent arrears or anti-social behaviour)
- 2. B Threat of eviction proceedings (notice of seeking possession)
- 3. C Possession Order (giving your landlord the right to evict you)
- 4. D Eviction
- 5. E Bailiff warrant issued
- 6. F Notice served by landlord to leave rented property before contract has ended
- 7. G Warning meeting/ interview with landlord, council or social worker
- 8. H Nuisance/anti-social behaviour complaint made to landlord
- 9. Other (SPECIFY)
- 10. None of these
- 11. Don't know
- 12. Don't want to say

Had action taken against them – housing (codes 1 – 9) Not had action taken against them – housing (codes 10-12)

Service experience	
Question	Variables tested
SE1: I'm going to read out some statements about the future for	Statement 2 and 3
you and your family. For each, I would like you to say whether you	Agree (codes 1 and 2)
"strongly agree", "tend to agree", "neither agree nor disagree",	Not agree (codes 3-5)
"tend to disagree" or "strongly disagree" with what I've said. Please	
read out the letter that applies.	
1. I know how my family should keep on the right track	
2. I am confident that our worst problems are behind us	
3. I feel in control of things	
4. I can count on others from my family for support	
5. I can count on people outside my family for support	
6. I would know where to turn for outside help if we needed it	
7. I feel positive about what the future holds for me and my	
family	
8. I'm confident in speaking up for myself	
9. I keep going even when I feel like things are against me	
1. A - Strongly agree	
2. B - Tend to agree	
3. C - Neither agree nor disagree	
4. D - Tend to disagree	
5. E - Strongly disagree	
6. Don't know	
Young people	
Question	Variables tested
YXB4: In the last six months how often have you been in trouble at	Been in trouble at school
school?	very/fairly often (codes 1 and
	2)
1. Very often	Not very often/never (codes
2. Fairly often	3 and 4)
3. Not very often	
4. Never	
5. Don't know	
6. Don't want to answer	

YXB5: In the last 12 months, have you ever played truant, that is	Played truant (code 1)
missed school without permission, even if it was only for a half day	Not played truant (code 2)
or single lesson?	
1.Yes	
2. No	
3. Don't want to answer	
YXE2: Are you working, either full-time or part-time?	Working (codes 2-4)
	Not working (code 1)
1. No	
2. Part-time (up to 15 hours)	
3. Part-time (16-30 hours)	
4. Full-time (30+ hours)	
5. Don't know	
6. Don't want to answer	
YXE4: In the last year, have you done any of these things? Please	At least one step (at least
read out any letters that apply.	one of codes 1-5)
	None (code 6)
1. A - Attended a job interview	Work related activities (codes
2. B - Attended a work placement	1,2 and 5)
3. C - Received training that did not lead to a qualification (e.g.	Training related activities
confidence building, CV writing, time management)	(codes 3 and 4)
4. D - Gained a part-qualification (e.g. completed a module	
that contributes towards a qualification)	
5. E - Voluntary work	
6. None of these	
7. Don't know	
8. Don't want to answer	
YXE3: Taking everything together, in the next year do you think you	Working (codes 1 and 2)
will be	Not working (codes 3 and 4)
1 working part-time	
2working full-time	
3 or not working	
4in education or training	
5. Don't know	
6. Don't want to answer	

YXH1: In general, would you say your health is	Excellent / very good (codes 1-2)
1. Excellent	Good / fair / poor (codes 3-
2. Very good	5)
3. Good	
4. Fair	
5. Poor	
Don't know	
Don't want to say	
YXS1: Please tick the number which you feel best describes how	Dissatisfied (codes 1-3)
dissatisfied or satisfied you are with your life overall	Satisfied (codes 5-7)
1 Completely dissatisfied	
2 Mostly dissatisfied	
3 Somewhat dissatisfied	
4 Neither	
5 Somewhat satisfied	
6 Mostly satisfied	
7 Completely satisfied	
8 Don't know	
9 Don't want to answer	
YXS2: Please select the answer that most closely matches how you	Certainly/somewhat true
feel. Please give your answer on the basis of how things have been	(codes 2 and 3)
for you over the last six months.	Not true (code 1)
"Other children or young people pick on me or bully me"	
1. Not true	
2. Somewhat true	
3. Certainly true	
4. Don't want to answer	
YXA1: Have you ever had an alcoholic drink? That is a whole drink,	Ever had an alcoholic drink
not just a sip.	(code 1)
	Not had an alcoholic drink
1. Yes	(code 2)
2. No	
3. Don't know	
4. Don't want to answer	

YXA2: How many times in the last four weeks have you had an alcoholic drink?	2 or more times (code 1-3) Less than 2 or more times (codes 4 and 5)
1. Most days	
2. Once or twice a week	
3. 2 or 3 times	
4. Once only	
5. Never	
6. Don't know	
7. Don't want to answer	
YXA3: On how many occasions during the last 4 weeks (if any) have	At least once (codes 2-7)
you been intoxicated or drunk from drinking alcohol, for example	Never (code 1)
staggered when walking, not being able to speak properly,	
throwing up or not remembering what happened?	
1. 0	
2. 1-2	
3. 3-5	
4. 6-9	
5. 10-19	
6. 20-39	
7. 40 or more	
8. Don't know	
9. Don't want to answer	
YXDRU_SMOKE: Do you ever smoke cigarettes at all? Please do not	Smokes cigarettes (code 1)
include electronic cigarettes (e-cigarettes).	Does not smoke cigarettes
	(code 2)
1. Yes	
2. No	
3. Don't want to answer	
YXD1: Have you ever tried any of the following?	Ever tried a street drug (code
1. Charles had spiffing	1-4)
1. Glue/solvent sniffing	Not tried a street drug (code
2. Cannabis (also known as marijuana, dope, hash or skunk)	5)
3. Any other illegal drug (including ecstasy, cocaine, speed)	Ever tried cannabis (code 2)
4. Any other New Psychoactive Substance (sometimes known	Not tried cannabis (not code
as legal highs)	2)
5. None of these	
6. Don't want to answer	
7. Don't know	

V/V/C1.	Overall how safe would you say you feel how at home?	Tools sofo at borns (so doe 1		
YXC1: Overall, how safe would you say you feel now at home?		Feels safe at home (codes 1		
vvouic	l you say you feel	and 2)		
1	Very cofe	Feels unsafe at home (codes		
1.	Very safe	3 and 4)		
	Fairly safe			
3.	A bit unsafe			
	Very unsafe			
	Don't know			
6.	Don't want to answer			
	The next questions are about contact that you may have had	Contact with police not as		
	ne police. Which, if any, of the following have happened to	victim (codes 1-7)		
you in	the last six months?	No contact with police not as		
		victim (none of codes 1-7)		
1.	Told off or asked to move on			
2.	Stopped and searched			
3.	Stopped, but not searched, and asked about something			
	you/they had done			
4.	Arrested by the police			
5.	Made to do something to make amends (e.g. apologise to			
	the victim or do voluntary work in the community)			
6.	Police called to your house			
7.	Other			
8.	I contacted them as a victim of crime			
9.	No contact with the police			
	Don't want to say			
YXC5: Which, if any, of the following has happened to you in the Police taken action against				
	months because you were accused of committing a crime?	them personally (any		
	,	selected of codes 1-7)		
1.	Given a caution	No action against them		
2.	Charged by the police	personally (codes 8 and 9)		
3.	Been to court, including a youth court	, , , , , , , , , , , , , , , , , , , ,		
4.	Fined by the police or a court			
5.	Sentenced to supervision by a probation officer or youth			
	offending case worker			
6	Sent to prison, a secure training centre or local authority			
	secure care home			
7	Some other action			
	None of these			
9.	Don't want to say			
٦.	Don't want to say			

YXC3: How often in the past month have you had a fight with someone that involved physical violence, such as hitting, punching, or kicking?		Been involved in physical violence (codes 2-4 for statement A) Not been involved in
A)	In the past year, have you deliberately broken or damaged property that didn't belong to you?	physical violence (code 1 for statement A) Committed vandalism (codes
В)	In the past year, have you taken something from a shop, supermarket, or department store without paying?	2-4 statement B) Not committed vandalism (code 1 statement B)
1.	Never	Stolen (codes 2-4 statement
2.	Once or twice	(C)
3.	Several times	Not stolen (code 1 statement
4.	Often	C)
5.	Don't want to answer	
6.	Don't know	
	In the last six months which of the following actions to stop ocial behaviour, if any, have you had used against you?	Has had action taken for anti-social behaviour (codes 1-9)
1.	Civil injunction	Has not had action taken for
2.	Criminal Behaviour Order	anti-social behaviour (codes
3.	Dispersal Power	10-12)
4.	Community Protection Notice	
5.	Public Spaces Protection Order	
6.	Closure Power	
7.	Notice seeking possession of your home (NOSP) on the grounds of nuisance or anti-social behaviour	
8.	Possession Order	
	Youth Caution or Youth Conditional Caution	
10.	None of these	
	Don't know	
12.	Don't want to say	

YXC6: Are you a member of a gang? By a gang, we mean groups of 3 or more young people who hang around together and:

- Have a specific area or territory;
- Share a characteristic and are seen by others as a group e.g. have a name or something else to identify them;
- Possibly have rules or a leader; or,
- Who may commit crimes together.
- 1. Yes
- 2. No
- 3. You used to be a member but aren't anymore
- 4. Don't know
- 5. Don't want to answer

Member of a gang (code 1 and 3)

Not a member of a gang (code 2)

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