

2 Communities For Children

The National Evaluation will focus on the evaluation of CfC, and in particular on outcomes for children and families in CfC communities.

2.1 Conceptual Approach

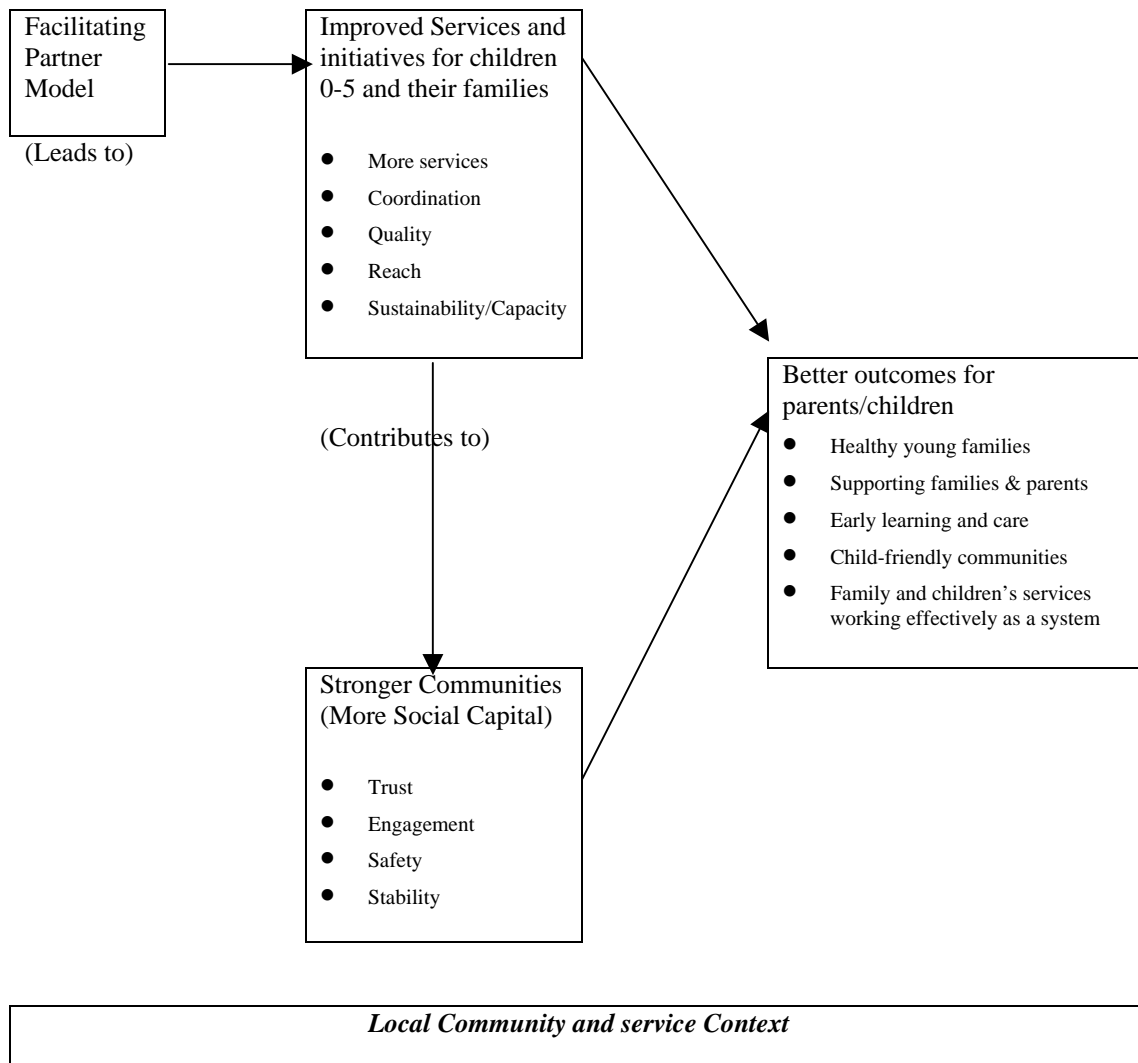
The overall evaluation questions for CfC are:

- Have outcomes for children and families in CfC sites improved as a result of the Initiative?
- Do services in CfC sites work more effectively as a system?
- Are CfC communities more child-friendly?
- How successful has the Facilitating Partner (FP) model been in facilitating these outcomes?

Figure 1 illustrates the conceptual framework or logic model for the Communities for Children evaluation. In essence it asserts that the FP model² will lead to improved services and other initiatives and contribute to strengthening of the community. These in turn will lead to better outcomes for children and parents in the community.

² This model consists essentially of an NGO taking the role of the Facilitating Partner (FP) in each CfC community. The FP has the responsibility for bringing existing and new services together with community members to develop new ways of addressing the needs of children and families in the community. The FP coordinates a Communities for Children Committee (CCC) composed of the major stakeholders in CfC. The FP also distributes the CfC funding within the community. The CCC is responsible for drawing up a Strategic Plan which identifies the strengths and assets, and the needs and service gaps of children in the community. Once the Plan has been approved, the Facilitating Partner is then responsible for implementing and monitoring the plan.

Figure 1: Evaluation of CfC - Conceptual Framework



The overall approach to the evaluation will be to establish baselines for child and family wellbeing, the child-friendliness of the community (a kind of social capital), and service coordination and quality, and to measure changes in these dimensions over the course of the funding period. The analysis will then relate outcomes for children and parents, and the changes in the community's child-friendliness, to the quality, quantity and coordination of services and other local initiatives. The evaluation will also develop tools that can assist local communities to monitor their own progress and to coordinate their future planning in relation to services and activities for children and families.

It is expected that the impact of the CfC initiative will be felt over a period of time, rather than being apparent in the early part of the Strategy. The implications for the evaluation structure and methods are that they will need to reflect the expected timing of those changes, especially with respect to the Outcomes Framework.

Figure 2 shows how outcomes are likely to be staggered over time (although they will be overlapping). It shows that, in the short-term, the main impact of the initiative will be to change the way services and activities are delivered, improving the effectiveness of family and children's services working together as a system. Other short-term outcomes should include greater awareness of services by community members and, eventually, gradual improvements in parenting skills, smoking status and breastfeeding for example, for those families directly involved in the initiative. Ultimately the whole community will feel the impact of CfC on child outcomes with community members being more trustful of each other, feeling safer and more willing to participate in community activities. Changes in the way services work together – better coordination, more early intervention, co-location, etc. – will become a feature of mainstream service delivery.

To understand this process, it is important to note the work on socio-economic health gradients (Keating and Hertzman, 1999). This demonstrates how the development of health and wellbeing is a population phenomenon related to socio-economic status and is not purely an individual occurrence. This points to a need to monitor population-level indicators as well as outcomes specifically intended to result from the initiatives. However the timescales required for these changes to take place are, by their nature, longer term than those relating to individuals who come into direct contact with initiatives funded by CfC.

In broad terms, changes relating to the SFCS priority areas will become evident in the following sequence:

- Family & children's services working effectively as a system
- Supporting families & parents
- Early learning & care
- Healthy young families
- Child-friendly communities.

Figure 2 provides some examples of the timeline for expected changes.

Of course, CfC is a complex initiative and changes will be continuous, overlapping and interacting, so it will be difficult to predict exact timeframes in which particular outcomes are likely to begin. For example, improving the way child and family services work as a system will be a continuous process rather than a specific event in time – so a judgement about whether this has been achieved will be dependent on the criteria and definitions applied, as well as on the quality of the data available to the National Evaluation. Similarly, trust in the community will build slowly and continuously, and the time when it appears to be achieved is unclear, and depends on how the concept is operationalised. However, the evaluation recognises differences in the timing of outcomes and when they can be expected to manifest, and this is captured in Figure 2.

Figure 2: Examples of Indicative Outcome Timeline for CfC

Year/ Outcome domain	1st year	2nd year	3rd year	4th year	5th year and beyond
Services working together	New Services established	Planning and monitoring Quality		Engage hardest to reach	
	Coordination improved				
Child- Friendly Communities	Consulted	Awareness of services and other community initiatives.		Trust	Reciprocity
Early learning/ supporting families/ healthy families – service users		Receive service and develop parenting skills	Build parenting skills	Relationships School readiness	Anti-social behaviour Teenage pregnancy
		Maternal smoking decreases Breastfeeding rises			
Early learning/ supporting families/ healthy families – community					Anti-social behaviour Teenage pregnancy
			Breastfeeding rises School readiness Maternal smoking decreases		

The National Evaluation recognises the review of SFCS, which will take place in mid-2007, and have designed the evaluation to maximise the information that will be available for that review, given the timescales for setting up and delivering the various strands of the Strategy. However, the evaluation is also designed to encourage a focus on outcomes for children, families and service delivery systems beyond the funded period, and so has developed tools such as the Outcomes Framework, which will help point communities to the indicators and sources of data with which to monitor changes over the longer term. .

Table 2.1 Communities for Children – Summary of overall evaluation questions and methodologies

Evaluation Questions	Methodologies						
	Outcome Indicators Framework	Family Study	Service Users Study	Comprehensive Community Profile	Service Coordination Study	Partnership Model Study	Progress Reports Analysis
Have outcomes for children and families in CfC sites improved as a result of the Initiative?	✓	✓	✓				
Do services in CfC sites work more effectively as a system?			✓	✓	✓	✓	
Are CfC communities more child-friendly?	✓	✓					
How successful has the FP model been in helping to achieve these outcomes?						✓	
What were the key factors that facilitated or inhibited success of CfC initiatives?				✓	✓	✓	✓
Have the CfC interventions been cost-effective?	✓	✓					
To what extent, and how successfully, were evidence-based interventions used?					✓	✓	✓