Monitoring and evaluation of family intervention services and projects between February 2007 and March 2011

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Glossary

ABC Acceptable Behaviour Contract

ASB Anti-Social behaviour

ASBO Anti-Social Behaviour Order

ALMO Arms Length Management Organisation
CAMHS Child and Adult Mental Health Services

CP Child Poverty

FI Family Intervention

FIIS Family Intervention Information system

FIPs Family Intervention Projects

FIS Family Intervention Services (including Family

Intervention Projects)

HA Housing Association
HAT Housing Action Trust

LA Local Authority

NEET Not in Education, Employment or Training

RSL Registered Social Landlord SEN Special Educational Needs

WO Women Offender YC Youth Crime

Executive Summary

Introduction and background

Family interventions were set up to work with some of the most troubled and challenging families to tackle anti-social behaviour (ASB), youth crime, inter-generational disadvantage and worklessness. They take an intensive and persistent multi-agency approach to supporting families to overcome their problems, coordinated by a single dedicated 'key worker'. Family interventions form part of the Prime Minister's commitment to work with every troubled family – and specifically to turn around the lives of the estimated 120,000 troubled families in England.

This report provides the latest monitoring evidence on families working with a family intervention between February 2007 and 31st March 2011.

Key findings

- Of the 12,850 referrals¹ to a family intervention 69 per cent (8,841 families) were either currently working with a family intervention or had previously completed an intervention, two per cent were placed on a waiting list and three percent refused to work with a family intervention. The remaining 26 per cent of referrals were not offered a family intervention, either because they did not meet the referral criteria (54 per cent) or a family intervention was not needed (38 per cent).
- Family interventions continue to work with very disadvantaged families, including a
 considerably higher than average proportion of lone parents (64 per cent compared to
 25 per cent in the general population) and large families (51 per cent have three or
 more children under the age of 18).
- A total of 3,675 families exited a family intervention between February 2007 and 31st March 2011.
- At least half of the families completing a family intervention were reported to have a successful outcome in the following areas:
 - poor parenting (53 per cent)
 - relationship or family breakdown (56 per cent)
 - domestic violence (65 per cent)
 - involvement in crime (65 per cent) and/or ASB (60 per cent)
 - lack of exercise or poor diet (52 per cent)
 - drug or substance misuse (50 per cent)
 - alcohol misuse (55 per cent);
 - truancy, exclusion or bad behaviour at school (57 per cent).

¹ Of all the families referred to a family intervention - 554 families were referred more than once.

Families were least likely to achieve a successful outcome in relation to mental health (40 per cent) and worklessness (20 per cent).

Methodology

As part of the original evaluation of the design and set up of Family Intervention Projects², the National Centre for Social Research (NatCen) created a secure web-based monitoring system (Information System) in 2007 to collect comprehensive data about all families referred to a family intervention. This information is collected and inputted by family intervention staff and provides quantitative evidence about the type of families referred to a family intervention, their circumstances and risk factors when a Support Plan is put in place, how they are progressing at regular formal reviews, their outcomes at the point a family exits from a family intervention and whether these outcomes are sustained nine to 14 months after they leave a family intervention.

The findings presented in the report are based on the families referred to family interventions in 159 local authorities (LAs; 150 top tier LAs and 9 district councils) prior to 31st March 2011. The outcomes analysis is based on a smaller number of LAs (120) where families had actually exited a family intervention (i.e. not all family interventions had been operating long enough for families to have completed their intervention). The report is primarily based on simple descriptive statistics which provide a summary of the quantitative evidence. In addition statistical modelling (logistic regression) was used to look at the factors associated with successful and unsuccessful outcomes. We also report the findings from a small scale impact assessment to look at the extent to which the outcomes reported can be attributed to the ASB Family Intervention Projects.

Families referred to family interventions

- Of the 12,850 referrals³ to a family intervention 69 per cent (8,841 families) were either currently working with a family intervention or had previously completed an intervention, two per cent were placed on a waiting list and three per cent refused to work with a family intervention. The remaining 26 per cent of referrals were not offered a family intervention.
- The agencies who most commonly referred families to family interventions were Social Services, including Children and Young People's Services (referred 24 per cent of families); local ASB teams (13 per cent); and Youth Offending Services or Youth Offending Teams (12 per cent).
- Unsurprisingly, the reasons for referral reflected the type of family intervention. ASB family interventions received more referrals than other family interventions relating to

² http://www.education.gov.uk/research/data/uploadfiles/acf44f.pdf

ASB and homelessness. Overall, the most common reason for referral was ASB (58 per cent of referred families).

• 3,338 of the referred families were not offered a family intervention. In more than half of these cases (54 per cent) this was because the family did not meet the qualifying criteria for the intervention (e.g. their problems were not severe enough) and in just over a third of cases other services were felt to be more appropriate to support a family.

Profile of family intervention families

- Family interventions continue to work with very disadvantaged families, including a considerably higher than average proportion of lone parents (64 per cent compared to 25 per cent in the general population) and large families (51 per cent have three or more children under the age of 18). Three-quarters of families were workless households (where no adult member aged over 16 years was in employment), compared to 13 per cent of households in England⁴. Thirty-two per cent of families had one or more children aged 16 or under with special educational needs (SEN).
- The majority (88 per cent) of family members were White. Three per cent of family members were Black, two per cent Asian, and seven per cent were classified as 'other or mixed race'. The proportion of White family members is slightly higher than the national average but has declined over time (91 per cent in 2008).

Presenting risk factors at the Support Plan stage

The presenting risk factors are categorised into five domains: family functioning and risk, crime and ASB involvement, health, education and employment.

- 81 per cent of all families had a problem with family functioning at the Support Plan stage. The most common problem for families was poor parenting (67 per cent of families). Other key risk factors for these families were relationship or family breakdown (32 per cent), domestic violence and child protection issues (30 per cent each).
- 85 per cent of families were reported to have engaged with some form of anti-social or criminal behaviour; overall 79 per cent were reported to have engaged with some form of ASB and 39 per cent were in contact with the criminal justice system as a result of their criminal activities (for example a family member was arrested, on bail, probation, a tag or a conditional discharge at the time of the Support Plan).

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⁴ Workless households for areas across the UK in 2010, ONS, Released 8 September 2011 (http://www.ons.gov.uk/ons/publications/re-reference-tables.html?edition=tcm%3A77-223100)

- 60 per cent of families had at least one child with problems at school (i.e. truancy, exclusion, or bad behaviour).
- Just over two-thirds of families had health problems. Mental health conditions were most prevalent within this domain (39 per cent), and physical health problems were the least reported (10 per cent).
- Just over two-thirds of families had no adult member aged over 16 years in employment, education or training.

The family intervention

- The average length of a family intervention has slightly decreased from 13 months reported in 2010 to around 11 months.
- The weekly hours of direct contact time with a family decreases during their intervention from an average of 9 hours between the Support Plan being put in place and the first Review to 6.6 hours between the final Review and leaving the intervention.
- 86 per cent of families had the same key worker between the Support Plan and leaving the intervention.

Successful and unsuccessful outcomes

- 3,675 families exited a family intervention between February 2007 and 31st March 2011:
 - 70 per cent (2,569 families) left for a successful reason;
 - 4 per cent (142 families) left for an unsuccessful reason;
 - 9 per cent (316 families) left for an inconclusive reason (i.e. a reason which could not be counted as successful or unsuccessful);
 - 18 per cent (648 families) were recorded as having both successful and unsuccessful reasons for leaving, or no reason for leaving was given.
- Considerable improvements were reported across the main outcomes that family interventions seek to address including crime and ASB, educational problems, family functioning and health.
- There was, on average, a 50 per cent reduction in the proportion of families involved in crime and ASB:
 - There was a 58 per cent reduction in the percentage of families engaged in ASB from 81 per cent of families to 34 – when they exited (representing a 47 percentage point reduction)

- There was a 41 per cent reduction in the percentage of families involved in crime-from 35 per cent of families to 20 per cent when they left a family intervention (representing a 14 percentage point reduction based on unrounded percentages)
- There was a 53 per cent reduction in the percentage of families who had a school aged child who was either truanting, excluded or behaving badly at school – from 58 per cent of families to 28 per cent at the end of the intervention (a 31 percentage point reduction based on unrounded percentages).
- There was, on average, a 47 per cent reduction in the proportion of families
 experiencing risks associated with poor family functioning including poor parenting,
 relationship or family breakdown, domestic violence or child protection issues. This
 includes a 34 per cent reduction in the number of families with child protection issues,
 from 27 per cent at the start of the intervention to 18 per cent at the end.
- There was, on average, a 34 per cent reduction in the proportion of families with health risks including mental or physical health and drug or alcohol problems.
- There was on average a 14 per cent reduction in the proportion of families who were 'workless' (i.e. with no adult aged over 16 in education, employment or training) from 68 per cent of families at the start of the intervention to 58 per cent at the end of the intervention (a 10 percentage point reduction).
- At least half of family intervention families who were reported to have the following problems at the Support Plan stage achieved a successful outcome (i.e. they no longer had this problem when they left):
 - involvement in crime (65 per cent) and/or ASB (60 per cent);
 - domestic violence (65 per cent);
 - truancy, exclusion or bad behaviour at school (57 per cent);
 - relationship or family breakdown (56 per cent);
 - alcohol misuse (55 per cent);
 - poor parenting (53 per cent);
 - lack of exercise or poor diet (52 per cent);
 - drug or substance misuse (50 per cent).
- Just under half (49 per cent) of families with child protection issues at the Support Plan stage no longer had this problem at the end of their intervention.
- Families were least likely to have achieved a successful outcome in relation to mental health (40 per cent) and worklessness (20 per cent).

Factors associated with successful and unsuccessful outcomes

 The longer families worked with a family intervention there was a slightly greater chance that they achieved a successful outcome in all of the five domains (crime and ASB, family functioning, employment, education and health). The duration of the family intervention was associated with successful outcomes for every individual problem across the domains.

- The analysis also identified a number of socio-economic characteristics associated with an increased chance of success in the five domains which could help to inform how support might be tailored to address specific needs.
- Non-white families and workless families were less likely to address family functioning problems. Whereas families who were in debt at the beginning of the intervention were more likely to achieve success with family functioning.
- Families with younger children appeared to have an increased chance of success
 addressing problems connected with crime and ASB. Whereas families with at least
 one child subject to a child protection plan were less likely to achieve success on
 crime and ASB, education, employment and health.
- Larger families were less likely to address family functioning, education and employment problems.
- Families with older children were more likely to achieve success in getting at least one adult in the family into work, however these families were less likely to achieve success relating to health.
- Families who were supported by a Child Poverty family intervention were less likely to achieve success relating to health.
- Families with at least one disabled person and those with nobody (aged 16 or over) in education, employment or training were less likely to address their health problems.

Sustainability of outcomes

- 470 families⁵ were followed up nine to 14 months after exiting a family intervention to establish whether they sustained the outcomes they achieved during their family intervention.
- Despite efforts to track the progress of these families (via other agencies), family intervention workers inevitably lost contact with some families.
- Families who were not followed up tended to have achieved less successful outcomes, particularly in relation to their ASB, poor parenting skills and relationship or family breakdown.

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 $^{^{5}}$ This is out of a total of 775 families that were eligible for the post-intervention stage.

- We can cautiously conclude that families were more likely to sustain a successful outcome in relation to family functioning, crime and ASB, and education:
 - 84 per cent of the families sustained their outcomes in the family functioning domain;
 - 71 per cent of the families sustained their outcomes in the crime and ASB domain;
 - 89 per cent of the families sustained their outcomes relating to education.
- A lower proportion of families sustained their health outcomes (61 per cent).
- Whilst families appeared to sustain their employment outcomes (84 per cent), this should be treated with caution due to the small number of families for whom this data was available.

Impact assessment

- We estimated impact by comparing what happened to a sample of 56 comparison families with ASB FIP families on key outcomes.
- The study provides clear evidence that ASB FIPs reduce crime and ASB amongst the families they work with.
- There is also evidence, albeit not statistically significant, that ASB FIPs help reduce education and employment problems amongst families.
- There is however limited evidence that ASB FIPs generate better outcomes than other non-FIP interventions on family functioning or health issues, although FIPs do appear to be at least as effective as these alternatives.

Conclusions and implications

This report builds on the compelling evidence endorsing the role and value of family interventions. The outcomes reported at the point of exit have remained consistently high since the projects were first set up despite the increasing number of families being worked with. In the current economic climate it is very encouraging that family interventions appear to be achieving a similarly impressive set of results in a shorter time duration (from 13 months in 2010 to 11 months in 2011). However, as there is a link between the length of intervention and success we will need to wait to assess the impact of a shorter duration of intervention in the longer term.

The findings from the impact assessment provide the first indication that the positive outcomes achieved by families can be attributed to a family intervention and go some way to address an important gap in the evidence base. There is also further encouraging evidence that the outcomes are sustained nine to 14 months after leaving an intervention.

That said, there are still a significant number of families who do not have a successful outcome. We also need to build on this first impact assessment of ASB FIPs, particularly as family intervention models evolve and develop. In tandem with this, future research needs to assess the degree to which outcomes are sustained in the even longer term (beyond 14 months) and undertake further value for money assessments to inform the evidence on payment by results. As the provision of family intervention services increases to meet the Prime Minister's target of helping 120,000 troubled families we will need to know how the outcomes vary as services use different delivery models to work with an even wider range of families with different thresholds of risk and crisis.

1 Introduction

'When you grow up in a strong family, you learn how to behave, you learn about give and take. You learn about responsibility and how to live in harmony with others. Strong families are the foundation of a bigger, stronger society'. David Cameron 23.5.2011

Among the 17.9 million families in the UK (ONS, 2011)⁶ most are likely to encounter some problem from time to time. Typically they will resolve these difficulties by drawing on their own resources, their family and friends, local community and mainstream services. However, a small minority of families - roughly 2 per cent or 140,000 of the families in Britain (around 120,000 families in England)⁷ - lack the resilience, insight and capability to overcome problems, or the capacity to find and use the support they need, significantly affecting their life chances and those of their children. These are families with multiple problems (FMP)⁸ who need joined up intensive family focused solutions to address their complex and interlocking needs.

A network of Family Intervention Projects (FIPs) was set up in January 2006 to work with challenging and anti-social families. The initial focus of these projects was to address their anti-social behaviour so as to prevent them becoming homeless and their children being taken into care. Subsequently the model was rolled out to target families who were living in poverty and who were affected by inter-generational unemployment and families with children at risk of offending. As of March 2011 there were 117 ASB family interventions, 149 Youth Crime family interventions, 43 Child Poverty family interventions (forming part of the suite of Child Poverty pilots), 60 family interventions focusing on Housing Challenge and 16 Women Offender family interventions across England that had submitted data to the family intervention services online monitoring system. This report provides an analysis of the families working with these family interventions and the outcomes they achieve.

Following an initial evaluation of the design, set-up and early outcomes of FIPs⁹ the Department for Education (DfE) commissioned the National Centre for Social Research (NatCen) to provide further monitoring and other evidence as to how effectively family

⁷ The Social Exclusion Task Force estimated that around 2% of families in Britain experience five or more of the following disadvantages: no parent in the family is in work; family lives in poor quality or overcrowded housing; no parent has any qualifications; mother has mental health problems; at least one parent has a longstanding limiting illness, disability or infirmity; family has low income (below 60% of the median); or family cannot afford a number of food and clothing items. The analysis for this estimate is explained in "Reaching Out: Think Family – Analysis and themes from the Families at Risk Review", Social Exclusion Task Force, Cabinet Office, 2007. Unpublished analysis for the Department for Education estimated this was equivalent to 120,000 families in England.

 $^{^{6}\} http://www.statistics.gov.uk/pdfdir/famhh0411.pdf$

⁸ A family with multiple problems (FMP) is defined as a family who has five or more of the above disadvantages (in footnote 7).

White et al., 2008 (https://www.education.gov.uk/publications/eOrderingDownload/DCSF-RW047.pdf)

interventions are working. This report follows three earlier monitoring reports¹⁰. This introductory chapter maps the policy and research context for the study (sections 1.1 and 1.2), the aims and design of the evaluation (section 1.3) and the coverage of the report (sections 1.4 and 1.5).

1.1 The case for intensive family and parent focused interventions

Family focused interventions and parenting programmes can reduce risk factors in families (Farrington and Welsh, 2003, 2007 and NICE 2006)¹¹ and as a result can reduce the financial burden families place on local services and wider society.

These interventions and parenting programmes can have lasting effects in improving behaviour even in cases where parents are initially reluctant to accept help. They can impact on a range of outcomes for children and young people, including educational attainment, prevention of ASB and risky behaviours. Testament to the success of evidence based parenting and whole family responses, current and recent governments have invested heavily in a raft of initiatives dedicated to improving the life chances for families at risk. (See, for example: *Early Intervention: Securing good outcomes for all children and young people; Think Family toolkit: Guidance Note 4, Family Intervention; Reaching out: Think Family, 2007; Children's Plan 2007; Every Child Matters, 2004)* 12. Indeed, there is now an impressive toolkit of effective local practice for working with families in different circumstances at different points in time (e.g. FIPs, Intensive Intervention Projects, Family Pathfinders, Family Nurse Partnership, Multi-systemic Therapy, Functional Family Therapy and evidence based Parenting Programmes including Triple P and Strengthening Communities Strengthening Families).

1.1.1 Family Intervention Services (including FIPs)

Family Intervention Services or Projects (referred to as family interventions throughout the report) take an assertive and persistent yet supportive approach to work with all members of a family so as to address the inter-connectedness of their problems. Following a rigorous assessment a key worker is assigned to work intensively with each family, building a close and trusting relationship. Key workers are usually family support workers who take on a lead professional role for the family. Their role is to manage the family's

¹¹ Farrington and Welsh, *Saving children from a life of crime*, 2007; Farrington and Welsh, meta analysis in ANZJC, 2003; NICE, Parent-Training/education programmes in the management of children with conduct disorders, in NICE Technology appraisal guidance 102, 2006

NatCen, November 2009 (https://www.education.gov.uk/publications/eOrderingDownload/DCSF-RBX-09-16.pdf), March 2010 (https://www.education.gov.uk/publications/eOrderingDownload/DCSF-RR215.pdf) and November 2010 (https://www.education.gov.uk/publications/eOrderingDownload/DFE-RR044.pdf).

Department for Children, Schools and Families (2010c) *Early Intervention: Securing good outcomes for all children and young people*. London: Department for Children, Schools and Families; Department for Children, Schools and Families (2009b) *Think Family toolkit: Guidance Note 4, Family Intervention Projects*. London: Department for Children, Schools and Families; Cabinet Office (2007) *Reaching Out: Think Family*. London: Cabinet Office; Department for Children, Schools and Families (2007) *The Children's Plan: Building brighter futures*. London: Department for Children, Schools and Families; HM Government (2004) *Every Child Matters: Change for Children*. London: HM Government.

problems, coordinate the delivery of services and use a combination of support, rewards and the possibility of sanctions to motivate families to change their behaviour. Persistence and assertiveness with families is critical to keeping them engaged with the intervention. It also ensures they follow their agreed contract or Support Plan which sets out the support they will be offered, the actions members of the family agree to take and the goals they will work towards. The Support Plan is reviewed on a regular basis and sanctions, such as the demotion of tenancies, can be used to motivate the family to change.

Each key worker has a small caseload of about six families at any one time and on average works with a family for around a year. Key workers provide practical help managing the household as well as information, advice and emotional support. They deliver direct support to families (around parenting, life skills, self confidence, motivation and goals) as well as coordinating existing support and levering in new support (e.g. parenting programmes, education and health services, social services, youth services, housing and the criminal justice system). Family intervention activities could include: anger management; one-to-one and group based parenting sessions; educational support and advocacy, and organising activities for family members (e.g. sports and arts-based activities for children, family outings and activities).

There are three models of family intervention. The choice of model depends on a family's needs and the impact their behaviour is having on the community:

- An assertive outreach service works with families in their own homes;
- A **dispersed service** works with families housed in temporary accommodation managed by the family intervention but dispersed in the community;
- A **core unit service** houses families in accommodation managed by the family intervention and supervised 24 hours a day. Upon satisfactory completion of a core unit programme, the family can be moved into a dispersed property.

The majority of families access the assertive outreach family intervention. Core units are used much more exceptionally for families with very significant needs.

1.1.2 The evidence for family interventions

There is now compelling evidence endorsing the role and value of family interventions. This originates with the prototype for family interventions, the Dundee Families Project, established in November 1996, which reported very positive outcomes for the families involved (Dillane et al., 2001)¹³. The project reduced anti-social behaviour (ASB), forestalled eviction and prevented children being taken into care and consequently resulted in savings for the local authority.

Following the success of the Dundee Families Project, seven more projects were established in the north of England: five were developed by NCH in partnership with LAs,

¹³ Dillane, J., Hill, M., Bannister, J. and Scott, S. (2001) *Evaluation of the Dundee Families Project.* Edinburgh: Scottish Executive/ Dundee City Council/NCH Action for Children.

while the other two were established by Sheffield City Council and Shelter in Rochdale. The Shelter project was evaluated by Jones et al. (2006)¹⁴ and the other six projects by Nixon et al. (2006 and 2008)¹⁵. Both evaluations further endorsed the effectiveness of what would become the Family Intervention Project (FIP) model.

The first evaluation of the national network of FIPs (White et al., 2008)¹⁶ established from 2006 onwards provided important evidence based on a much larger sample of projects, about their effectiveness in the primary areas of their work. At the point when families exited from a FIP, ASB and criminal activities declined considerably, families' housing situations seemed to have improved, as had the positive outcomes reported for children and young people. Local agency partners and FIP staff also endorsed the way FIPs helped to reduce the burden on local services working with troubled families; contributed to multi-agency working; and helped to break down some of the barriers between FIP families and other services. That said, 35 per cent of families were still reported to be perpetrating some ASB.

The evaluation also identified eight core features of the FIP model that were viewed as critical to its success and which were subsequently set as required criteria for future government funding bids for family interventions:

- Recruitment and retention of high quality staff;
- Small caseloads;
- Having a dedicated key worker who works intensively with each family;
- A 'whole-family' approach;
- Staying involved with a family for as long as necessary;
- Having the scope to use resources creatively:
- Using sanctions alongside support for families;
- Effective multi-agency relationships.

Later monitoring reports (November 2009; March 2010 and November 2010)¹⁷ continued to show impressive outcomes for families. The most recent findings from November 2010 show that families were most likely to achieve success in the areas of family functioning, crime and ASB. Critical to this success was the length of intervention - the longer families

¹⁵ Nixon, J., Parr, S., Hunter, C., Myers, S., Sanderson, D. and Whittle, S. (2006) *Anti-social Behaviour Intensive Family Support Projects: An evaluation of six pioneering projects.* London: Communities and Local Government; Nixon, J., Parr, S., Hunter, C., Myers, S., Sanderson, D. and Whittle, S. (2008) *The longer term outcomes for families who had worked with Intensive Family Support Projects.* London: Communities and Local Government

¹⁴ Jones, A., Pleace, N., Quilgars, D. and Sanderson, D. (2006a) Addressing Anti-social Behaviour: An independent evaluation of Shelter Inclusion Project. London: Shelter.

¹⁶ White, C., Warrener, M., Reeves, A. and La Valle, I. (2008) *Family Intervention Projects: An Evaluation of Their Design, Setup and Early Outcomes.* London: Department for Children, Schools and Families/Communities and Local Government.

¹⁷ NatCen, November 2009 (https://www.education.gov.uk/publications/eOrderingDownload/DCSF-RBX-09-16.pdf), March 2010 (https://www.education.gov.uk/publications/eOrderingDownload/DCSF-RR215.pdf) and November 2010 (https://www.education.gov.uk/publications/eOrderingDownload/DFE-RR044.pdf).

work with a family intervention the greater the chance that they will achieve successful outcomes. There is also very promising early evidence of the positive outcomes enduring nine to 14 months after families exit from a family intervention.

Similarly positive results were reported for young people and their families who completed an Intensive Intervention Project (IIP) - an intervention for young people based on the FIP model (Lloyd et al., 2011)¹⁸. Considerable improvements were evident in most areas of their work albeit to a lesser extent with education and employment, which is an area that is critical to ensuring a positive outcome for the young person.

Evaluations of related 'whole family' initiatives across the UK have also provided positive indicative findings:

- The evaluation of the Family and Young Carer Pathfinders Programme¹⁹ showed significant improvement in outcomes for nearly a half (46 per cent) of families supported by the Family Pathfinders and nearly a third (31 per cent) of the families supported by the Young Carer Pathfinders. Areas were also able to demonstrate savings to local partners, so that for every £1 spent, the Family Pathfinders generated a financial return of £1.90. Achieving improved and sustainable outcomes for families was dependent on the use of a key worker responsible for providing and coordinating effective support for families.
- The evaluation of the Early Parental Intervention Pilot Projects in Wales (Wright et al., 2010)²⁰ concluded that positive outcomes could result for families in a relatively short period but multiple and chronic problems required medium to long term (and possibly permanent) intervention.
- The evaluation of the Aberdeen Families Project and the three new 'Breaking the Cycle' Projects in Scotland (Pawson et al., 2009²¹) reported that over two-thirds of families whose cases were closed during the evaluation period successfully completed their agreed support programme.

The evidence for family interventions is strong but their efficacy still needs to be judged by a formal impact assessment which compares the outcomes of those families who work with these interventions against those of a 'control' group of families who do not receive the service. In tandem with this, further research could helpfully assess the degree to which outcomes are sustained in the even longer term (beyond 14 months) and to provide further value for money assessments. We also need to know how the outcomes vary as services develop and evolve, to work with a wider range of families with different thresholds of risk and crisis, using different delivery models.

¹⁸ Lloyd, C, Gowland, S, Turczuk, O., and White, C. (2011) *Monitoring and Evaluation of Intensive Projects for Young People*, London: DfE

¹⁹ York Consulting (2011) *Turning around the lives of families with multiple problems - an evaluation of the Family and Young Carer Pathfinders Programme*, London: DfE

²⁰ Wright, S., Gray, P., Watts, E., McAteer, L., Hazel, N., Liddle, M. and Haines, K. (2010) *Evaluation of early Intervention Pilot Projects*. Swansea: University of Swansea.

²¹ Pawson, H., Flint, J., Scott, S., Atkinson, R., Bannister, J., McKenzie, C. and Mills, C. (2005) *The Use of Possession Actions and Evictions by Social Landlords*. London: Office of the Deputy Prime Minister.

1.2 Current policy context

The Prime Minister has committed to turning around the lives of the estimated 120,000 most troubled families across England by March 2015. A national campaign was launched on 10 December 2010, and a commitment was made in the summer to boost this work in order to rapidly increase the number of families supported to meet this ambition. In November 2011, the Secretary of State for Communities and Local Government was appointed to lead the delivery of the Prime Minister's commitment. A new Troubled Families Team, headed up by Louise Casey CBE, was also established within the Department for Communities and Local Government to drive forward this work.

The Voluntary and Community sector continue to play a major role in supporting troubled families. The BIG Lottery Improving Futures Fund will support innovative voluntary sector projects working with families with multiple problems. Around £20 million will be allocated to around 20 areas across the whole of the UK over the next five years. This programme is aimed at extending the whole family model to families at a lower threshold of need than those currently the focus of family interventions. Social Impact Bonds are also being trialled in four LAs as an innovative approach to funding intensive help for families with multiple problems.

1.3 Evaluation aims and design

Building on the initial evaluation of the design and set up of FIPs (White et al., 2008)²² this component of work aimed to provide further monitoring and other evidence of how effectively family interventions are working. It aimed to:

- Provide quantitative evidence about how effectively family interventions were working. This is based on monitoring data collected and recorded by intervention staff at five different points during their intervention;
- Provide an independent measure of parenting and family functioning to complement the monitoring data;
- Assess the extent to which the outcomes reported can be attributed to FIPs, by carrying out a small scale impact assessment of the ASB FIPs.

The findings in this report are based on the families referred to family interventions between February 2007 and 31st March 2011 in 159 Local Authorities²³. The outcomes analysis is based on the families who have exited an intervention.

White, C., Warrener, M., Reeves, A. and La Valle, I. (2008) *Family Intervention Projects: An Evaluation of Their Design, Setup and Early Outcomes.* London: Department for Children, Schools and Families/Communities and Local Government.

²³ The findings presented in the report are based on the families referred to 159 local authorities prior to 31st March 2011. Certain local authorities had more than one type of family intervention (e.g. an Anti-social Behaviour family intervention and a Youth Crime family intervention, or a Youth Crime family intervention and a Child Poverty family intervention). The findings for families who had exited a family intervention are based

1.3.1 The Family Intervention Information System (FIIS)

A secure web-based Information System, known as the Family Intervention Information System (FIIS) was set up to collect comprehensive data about families referred to a family intervention. Whilst all family interventions are invited to enter their families in the FIIS it is not mandatory and not all do. Family intervention staff are asked to enter information about the families at five key stages:

- When a family is first referred to a family intervention ('Referral stage');
- At the beginning of an intervention, after the assessment has been completed and when a Support Plan for a family is first put in place ('Support Plan stage');
- Each time a family has a formal progress review (a 'Review stage');
- When a family exits a family intervention ('Exit stage');
- Nine to 14 months after a family has stopped working with a family intervention ('Post-intervention stage').

Further detail about the coverage of each stage is provided in Appendix A.

Family intervention staff are trained to ensure that the information they provide is as accurate as possible and a number of specific prompts and questions help to encourage this. The outcomes are primarily based on 'hard' factual measures such as whether the family is receiving any benefits or tax credits, or whether the family is subject to any formal enforcement actions, and professional judgements and assessments of other information which is available to key workers. Family intervention staff are instructed only to identify a family as facing a particular issue if they have specific evidence for this. They also base their assessments on information and discussions with other agencies who are working with families (such as during multi-agency review meetings).

1.3.2 The Family Assessment Device

In order to complement the evidence on family functioning we asked families to complete a validated screening tool known as the Family Assessment Device (FAD) as part of the monitoring process. The FAD was developed by Epstein et al. (1983)²⁴ and aimed to measure general family functioning, as assessed by a parent in each family. This also served to address criticisms about the subjective nature of the parenting data entered by staff in the FIIS.

All families that started working with a family intervention from 27 April 2010 onwards were asked to complete the FAD. The FAD asks a parent to indicate their level of agreement with 20 statements choosing either: strongly agree, agree, disagree or strongly disagree. These statements relate to two different dimensions of family functioning: 'roles' which consider the way a family manages their household tasks and budgeting for

²⁴ Epstein, N. B., Baldwin, L. M., & Bishop, D. S. (1983). The McMaster Family Assessment Device. Journal of Marital and Family Therapy, 9, 171-180.

on data from 100 local authorities (because not all family interventions – particularly those that set up relatively recently - have families who have completed their intervention).

example; and 'general functioning' which assesses the interaction between family members, examining the way they communicate and express their feelings and make decisions. The responses are scored on a scale of 1 to 4, and an average score is calculated for each dimension. A score of 2 or more is considered to be an indicator of poor family functioning. For more information about the FAD please see Appendix A.

In total 704 FADs were submitted from families at the start of the intervention, and 307 FADs were submitted by families at the end of the intervention.

1.3.3 Impact assessment

In this report we present the findings from the first ever impact study of family interventions – which specifically measures the impact of FIPs that focus on ASB rather than the other variants.

Between 2009 and 2010 a small number of LAs that were not running an ASB FIP agreed to identify and provide data on a sample of families in their authority who met the referral criteria for an 'ASB FIP', to act as our comparison group for the impact assessment. We then tracked these families over nine months to assess how they fared under 'non-FIP' conditions. Comparing change over time for these non-FIP families with the change over time experienced for similar FIP families has allowed us to estimate the added value or 'net' impact of ASB FIPs. The study was limited to 'ASB FIP eligible' families as this was the most established FIP variant at the time when the impact assessment was set up. We also carried out interviews with staff in our comparison LAs to help understand more about why follow-up data was not available for all comparison families and what interventions and services these families engaged with during the nine months.

1.4 Guidance for the interpretation of tables

In view of the whole family focus of family interventions most of the findings presented in this report are based on analysis of the whole family. Where appropriate we have also provided individual family member analysis. This means, for example, we have typically counted the number of family intervention families in which one or more family members have a disability (with the base for this analysis being 'total number of families'), and occasionally also counted the number of individuals in family intervention families who have a disability where we have the data (with the base for this analysis being 'individual family members').

Throughout the report, a '+' sign in tables denotes that a figure is less than 0.5 per cent. Figures in brackets '[]' denote that this should be treated with caution due to low base size.

Returning families

There are a small number of families who have been referred to a family intervention on more than one occasion (554 families), and therefore have been entered in the FIIS two or more times. For data collected at the Referral stage (presented in sections 2.1 and 2.2), each of these families is included every time they are referred, in order give a true picture

of the total number of referrals, and show how the reasons for referral may have changed between first and subsequent referrals. For data collected at other stages of the intervention each of these families is only counted once (irrespective of the number of times they have returned). For more information about these families please see Appendix A.

1.5 Report outline

This report is based on data collected from all families working with a family intervention between February 2007 and 31st March 2011. It is structured as follows:

- Chapter 2 provides a profile of family intervention families and an overview of the referral process;
- Chapter 3 reviews the capacity and throughput of family interventions, the number of weekly contact hours and duration of an intervention, key worker consistency and reasons for families leaving a family intervention;
- Chapter 4 compares the successful and unsuccessful outcomes achieved by family intervention families;
- Chapter 5 uses statistical modelling (logistic regression) to explore the factors associated with successful and unsuccessful outcomes;
- Chapter 6 looks at the extent to which families have been able to sustain successful outcomes nine to 14 months after exiting a family intervention, and the factors associated with sustained success;
- Chapter 7 presents the results of an impact study of ASB FIPs;
- Chapter 8 draws out the key findings and conclusions presented in the report.

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2 Family intervention families

This chapter profiles family intervention families and provides an overview of the referral process. It begins by outlining the range of agencies that refer families to a family intervention and their reasons for making these referrals (sections 2.1 and 2.2). Section 2.3 describes the socio-demographic profile of family intervention families, and the presenting issues and risk factors are addressed in section 2.4. Section 2.5 presents data on the families who were not offered the intervention, describing why just over a quarter of the families who are referred do not go on to work with a family intervention.

As will be seen family interventions continue to work with very disadvantaged families, including a considerably higher than average proportion of lone parent families and large White families (with between three and five children aged under 18 years). Just under two-thirds of families had no adult aged 16 or over in employment, education or training. Families also frequently presented with parenting issues and with children who were truanting, excluded or badly behaved at school.

There were 12,850 referrals to a family intervention service between February 2007 and 31st March 2011²⁵, compared to 7,231 between February 2007 and 31st March 2010.

Of the 12,850 referrals up to and including 31st March 2011:

- 69 per cent (or 8,841) of referrals²⁶ resulted in families being offered and agreeing to work with a service. This is compared to 67 per cent of families (4,870) up to 31st March 2010.
- 26 per cent (or 3,338) of referrals were not offered a family intervention service. This is a similar proportion (26 per cent or 1,860 referrals) reported up to 31st March 2010. Families were not offered a service if they did not meet the referral criteria (e.g. ASB levels were too low or not at risk of homelessness); were not suitable for a service to work with; were working with another more appropriate service or they were not engaging with the service during the referral process.
- Three per cent (or 363) of referrals declined the offer of a service. This is compared to 3 per cent (or 203) of referrals up to 31st March 2010.

having their Support Plan put in place (but this stage had not been submitted to the FIIS on 31st March 2011).

occasions.

The figure of 8,841 includes those families who were initially put on a waiting list and have since had a

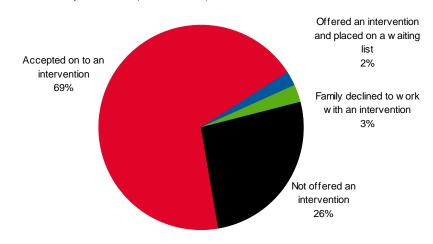
Support Plan put in place and families who have agreed to work with an intervention and are in the process of

²⁵ There are a small number of families (554) who are referred to intervention services more than once; this data includes families every time they are referred. For example, a family is counted twice if they have been referred to a service two times, and they are counted three times if they have been referred on three occasions.

 Two per cent (or 308) of referrals resulted in families being placed on a waiting list prior to a Support Plan being put in place²⁷. This is compared to 4 per cent (or 298) of referrals up to 31st March 2010.

Figure 2.1 Outcomes of referrals to family intervention services

Base: All families referred to a family intervention (12,850 familes)



Key findings from this chapter include:

Referral agencies and reasons for referral (sections 2.1 and 2.2)

- Across all types of family interventions the agencies who most commonly referred families were Social Services, including Children and Young People's Services (24 per cent); local ASB teams (13 per cent); and Youth Offending Services or Youth Offending Teams (12 per cent).
- Overall, the most common reasons for referral were ASB issues (58 per cent of referred families – a drop of 4 percentage points compared to 31st March 2010), followed by parenting issues and problems at school.
- Unsurprisingly, the reasons for referral reflected the type of family intervention.
 ASB family interventions received more referrals than other family interventions
 relating to ASB and homelessness. Interestingly, housing enforcement has
 become a less common reason for referral than in the past and poor parenting
 has now become the third most common reason for referral to ASB family
 interventions.

Family intervention families (section 2.3)

Family interventions continue to work with very disadvantaged families, including

²⁷ Prior to the 2010 report, figures for the number of families offered and accepted for intervention did not include families who were put on a waiting list and subsequently progressed to having a Support Plan. Therefore, this figure can only be used to compare differences over time with the 2010 report.

a considerably higher than average proportion of lone parents (64 per cent) and large families (38 per cent have three or four children under the age of 18 and 14 per cent with five or more children in this age group). Just under two-thirds were workless households (where no adult member aged over 16 years was in employment, education or training). Thirty-two per cent of families had one or more children aged 16 or under with special educational needs (SEN).

 The great majority (88 per cent) of family members were White. Three per cent of family members were recorded as Black, two per cent were recorded as Asian, and seven per cent were classified as 'other or mixed race'. The proportion of White family members is slightly higher than the national average but has declined over time (91 per cent in 2008).

The risk factors family intervention families present with at the Support Plan stage (section 2.4)

- The presenting risk factors are categorised into five domains: family functioning, crime and ASB involvement, health, education and employment.
- 81 per cent of all families had a problem with family functioning at the Support Plan stage. The most common problem for families was poor parenting (67 per cent of families). Other key risk factors for these families were marriage, relationship or family breakdown (32 per cent), domestic violence and child protection issues (30 per cent each).
- 85 per cent of families were reported to have engaged with some form of antisocial or criminal behaviour; overall 79 per cent were reported to have engaged with some form of ASB and 39 per cent had contact with the criminal justice system (for example a family member was arrested, on bail, probation, a tag or a conditional discharge at the time of the Support Plan).
- 60 per cent of families had at least one child with problems at school (i.e. truancy, exclusion, or bad behaviour at school).
- Just over two-thirds of families had health problems. Mental health conditions were most prevalent within this domain (39 per cent), and issues with physical health the least reported (10 per cent).
- Just over two-thirds of families had no adult member aged over 16 years in employment, education or training.

Families not offered an intervention (section 2.5)

• 26 per cent of families were not offered an intervention. In more than half of these cases (54 per cent) the family did not meet the referral criteria, and in more than a third of cases they were not suitable for a family intervention service to work with

(38 per cent).

2.1 Referral to a family intervention

A total of 9,149 families were offered and accepted a family intervention, including the 308 families who were put on a waiting list.

Agencies that referred families to family interventions

Overall, the agencies who most commonly referred families to family interventions were Social Services, including Children and Young People's Services (24 per cent of families were referred in this way); ASB teams (13 per cent); and the Youth Offending Service or YOT (12 per cent). Other common referral agencies included Housing Departments or Arm's Length Management Organisations²⁸ (11 per cent), the police (11 per cent), schools (10 per cent), Housing Associations or Housing Offices (9 per cent) and Registered Social Landlords (7 per cent). Six per cent of families were referred by any other agency.

As can be seen from Table 2.1 the agencies referring families to family interventions varied according to the type of family intervention. ASB family interventions were most likely to have received referrals from local ASB teams (19 per cent) and agencies in the housing field, such as a Housing Department or Arms Length Management Organisations (19 per cent), whilst Child Poverty family interventions were the least likely to have received referrals from these agencies (one and two per cent, respectively). Youth Crime family interventions were most likely to have received referrals from YOTs (28 per cent), as well as Social Services (27 per cent). ASB and Youth Crime family interventions were equally likely to have received referrals from the police (11 and 12 per cent), and much more likely to have done so than Child Poverty family interventions (3 per cent). Child Poverty family interventions were by far the most likely to have received referrals from Social Services compared to the other type of interventions (47 per cent compared to 18 per cent-27 per cent), and also most likely to have received referrals from schools (16 per cent).

 28 Also known as ALMOs, these are companies set up to manage and improve council housing stock. They are owned by the local authority but operate under a management agreement between the ALMO and the local authority.

Table 2.1 Referral agencies by family intervention type

Base: Families who accepted a family intervention (including those on a waiting list)

Base: Families who accep	Base: Families who accepted a family intervention (including those on a waiting list)						
Type of family intervention							
		Youth	Child	Housing	Women		
Referral agency	ASB	Crime	Poverty	Challenge	Offenders	All	
Housing	%	%	%	%	%	%	
Housing Department or Arms Length							
Management Organisation (ALMO)	19	3	2	10	3	11	
Housing Association							
housing office	11	5	4	20	4	9	
Registered Social Landlord (RSL)	9	3	4	15	0	7	
Housing Action Trust (HAT)	+	+	1	+	0	1	
The Homeless Department*	1	+	+	2	3	1	
Борантон	<u> </u>				-		
Health							
Health professional	3	4	7	5	13	4	
Adults drugs or alcohol agency	1	2	2	2	9	1	
Young peoples drugs or alcohol agency	+	1	+	1	0	1	
Children's Disability Team	+	+	1	0	0	+	
Environmental Health/	<u> </u>						
Environmental Services	+	+	+	1	0	+	
Community Mental Health Team	+	1	1	+	3	1	
Child and Adolescent Mental Health Services							
(CAMHS)	1	4	1	3	0	2	
Education							
School	7	13	16	15	6	10	
Education Department /LEA	4	4	3	3	0	4	
Special Educational Needs Team	1	1	1	1	0	1	
Alternative Education	1	3	1	2	0	1	

Settings*						
Children's Centre or						
other early years setting*	+	1	3	1	1	1
other early years setting	т	1	3			<u> </u>
Offending and arims						
Offending and crime						
Local ASB Team	19	6	1	10	1	13
Police	11	12	3	11	15	11
Youth Offending Service			_			
or Youth Offending Team						
(YOT)	7	28	1	5	0	12
YISP (Youth Inclusion						
Support Panel)	3	5	1	3	3	3
Probation Services	1	5	1	1	45	2
Domestic Violence Team	1	1	1	3	4	1
Noise Nuisance Team	+	+	0	1	0	+
140130 Huisailee Tealii	7	7	U	1	<u> </u>	Т.
Social, voluntary or						
community						
organisations						
Social Services						
(including Children and						
Young People's						
Services)	18	27	47	24	25	24
Voluntary / community	10	21	47	24	23	24
organisation	1	1	1	1	3	1
Adult Community Care		!		1	3	ı
Team*	+	+	+	0	0	+
Neighbourhood	Т	Т	Т	0	U	Т.
Management Team*	+	_	+	1	0	+
Citizen's Advice Bureau	т	+	т	1	U	Т.
(CAB)	+	0	_	0	0	
(CAB)	т	U	+	0	U	+
Othor						
Other						
The family referred				_	_	
themselves	1	+	1	1	1	1
CAF Panel*	+	1	2	2	0	1
Family support agency*	1	2	2	2	1	1
Connexions	+	+	+	1	0	+
Other family intervention						
team*	+	+	+	1	0	+
JobCentre Plus	+	+	+	0	1	+
Neighbour of the family	+	+	0	0	0	+
Fire service	+	+	0	0	0	+
Multi-agency Panel*	+	2	+	+	0	1
Other	6	6	11	4	5	6
Base	4,613	2,661	868	536	80	9,149
*There and an avera added to t		Luly 2000	500	000	00	J, 173

^{*}These codes were added to the FIIS in July 2009.

Note: Percentages may add up to more than 100 as the family may have been referred for more than one reason.

Note: The bases in the first five columns do not sum to the base in the total column because the type of family intervention was not known for all families at the Referral stage.

2.2 Reasons families were referred to a family intervention

Family intervention workers were also asked to record the reasons families were referred to them. The FIIS allows them to choose more than one reason, but they are asked to identify the primary reason(s) for referral, and not to include all the issues and problems a family may present with.

The most common reasons for referral across all types of family intervention were ASB (58 per cent); poor parenting (43 per cent); children being at risk of exclusion from school or having serious attendance problems (33 per cent); children being at risk of offending (29 per cent); no one in the family being in work (29 per cent); and the family being at risk of becoming homeless (26 per cent; Table 2.2.). Other reasons included children offending (25 per cent); domestic violence problems (24 per cent); relationship breakdown (21 per cent); adults' substance misuse (20 per cent); a history of social care referrals (19 per cent); and criminal convictions of a family member (17 per cent).

The profile of referral reasons was very similar to that reported in 2010²⁹ for the three main types of family intervention in operation at the time (ASB, Youth Crime, and Child Poverty).

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²⁹ March 2010 (https://www.education.gov.uk/publications/eOrderingDownload/DCSF-RR215.pdf)

Table 2.2 Reasons families were referred to a family intervention

Base: Families who accepted a family intervention (including those on a waiting list)

Base: Families who accepted a family intervention (including those on a waiting list)							
	Type of family intervention						
	4.05	Youth	Child	Housing	Women		
Reasons for referral	ASB	Crime	Poverty	Challenge	Offenders	All	
Housing Issues	%	%	%	%	%	%	
Family at risk of becoming homeless	36	15	16	41	19	26	
Housing enforcement actions	- 00	- 10	10	7.	10		
taken against family	19	7	4	21	10	13	
Family has poor housing							
conditions*	11	13	25	24	19	15	
Family is homeless	2	1	3	3	4	2	
ACD afformalings and anti-							
ASB, offending and crime issues							
ASB of family members							
7.65 of family members							
0	81	47	18	62	33	58	
Criminal convictions of family members / ex-offender	13	24	8	12	55	17	
ASB enforcement actions	13		0	13	55	17	
taken against family	16	9	1	13	8	11	
Children are at risk of	10		'	10	Ŭ		
offending*	22	45	12	24	6	29	
Children are offending*	17	41	7	18	3	25	
Adult is offending*	6	10	5	6	44	8	
Prolific and other Priority							
Offender (PPO)*	1	5	+	+	3	2	
School exclusion /							
attendance problems							
Children at risk of school							
exclusion / serious attendance	25	42	31	35	_	22	
problems* Children excluded from school*	25 6	13	4	8	9	33 8	
Cilidien excluded nom school	0	13	4	0	3	0	
Parenting and care issues							
Poor parenting*	34	47	56	45	40	43	
History of social care referrals*	13	24	23	20	21	19	
Relationship breakdown*	13	28	22	25	25	21	
Children at risk of going into							
care*	_	40	40	40	40	40	
	7	13	13	10	16	10	
Child Protection Plan is in place*	7	13	16	15	21	11	
Piaoe	<u> </u>	13		13		11	

25

Family includes a young	2	_	0	_		
person carer*	3	5	6	5	4	4
Domestic violence,						
substance misuse, and						
mental health issues						
Family has domestic violence						
problems*	16	29	31	25	29	24
At least one adult in the family						
has substance misuse						
problems*	14	23	29	24	49	20
At least one adult in the family						
has mental health problems*	11	16	24	15	18	15
At least one child in the family						
has substance misuse						
problems*	7	16	6	8	0	10
At least one child in the family						
has mental health problems*	_	0	_	7		_
	5	9	7	7	0	7
Employment, education,						
debt						
Family is without paid						
employment*	20	29	48	37	30	29
Family has serious issues with						
debt*	7	10	27	16	15	11
Intergenerational						
worklessness*	3	5	11	5	4	5
	_	_				
Other						
	4	5	9	5	5	5
Base	2,813	2,661	868	536	80	7,349

^{*}These codes were added to the FIIS in July 2009.

Note: Percentages may add up to more than 100 as the family may have been referred for more than one reason.

Note: The bases in the first five columns do not sum to the base in the total column because the type of family intervention was not known for all families at the Referral stage.

Unsurprisingly, the reasons for referral varied between the different types of family intervention:

- ASB family interventions received far more referrals than other family interventions relating to ASB (81 per cent compared to between 62 per cent and 18 per cent amongst other intervention types). They were also more likely to receive referrals relating to housing enforcement and homelessness, apart from Housing Challenge family interventions. ASB family interventions were considerably less likely to receive referrals for any of the other reasons, suggesting that the primary focus continues to be addressing ASB.
- Youth Crime family interventions were the most likely of all the types of interventions to receive referrals for reasons relating to criminal activity, including crimes perpetrated by adult family members (24 per cent, only the Women

Offenders figure is higher at 55 per cent), exclusion from school (13 per cent) and child substance misuse (16 per cent).

- Child Poverty family interventions were more likely to have received referrals
 on the basis of poor housing conditions (25 per cent); domestic violence (31
 per cent); poor parenting (56 per cent); adult family members with mental
 health problems (24 per cent); worklessness (48 per cent) and debt (27 per
 cent) than all the other types of intervention; they were least likely to have received
 referrals relating to criminal activity (8 per cent) and ASB (18 per cent).
- Women Offenders family interventions received far more referrals of adult family members with substance misuse (49 per cent) than other family interventions.

2.3 Profile of family intervention families

In this section, we profile the 6,267 families for whom a Support Plan was put in place by 31st March 2011³⁰.

2.3.1 Family type and size

In contrast with the general population, family intervention families are predominantly single parent families and tend to be large White families (Table 2.3).

- Just under two-thirds of family intervention families were lone parents (64 per cent), while the remaining third were two-parent families (36 per cent; Appendix B, Table B.1). This contrasts with the profile of two-parent households in the general population (75 per cent of families are two-parent households)³¹.
- Eighteen per cent of families had five or more children, including those aged over 18 who were living in the family home (14 per cent if we focus only on children aged under 18); in the general population just four per cent of families had four or more children under 18 in 2008³².
- Thirty-eight per cent of families had one or two children, including those aged 18 or over (44 per cent if we focus only on children aged under 18), while a

³⁰ This is lower than the 8,841 referrals that were offered and agreed to work with a family intervention because: 1) the data at the Support Plan stage counts each family once, even if they have been referred and accepted on to a family intervention on more than on occasion (whereas these families are counted each time they are referred at the Referral stage); 2) the 8,841 referrals includes families still waiting for their Support Plan to be put in place by 31st March 2011 and families who had a Support Plan in place which had not been submitted on the FIIS in time to be included in this year's report.

³¹ Families with children in Britain: Findings from the 2008 Families and Children Study (FACS) (2010). London: Department for Work and Pensions. http://research.dwp.gov.uk/asd/asd5/rports2009-2010/rrep656.pdf

³² Families with children in Britain: Findings from the 2008 Families and Children Study (FACS) (2010). London: Department for Work and Pensions. http://research.dwp.gov.uk/asd/asd5/rports2009-2010/rrep656.pdf

similar proportion (40 per cent) had three or four children (38 per cent if we restrict this to children aged under 18). Just four per cent of family intervention families included no children (five per cent if we focus only on children aged under 18).

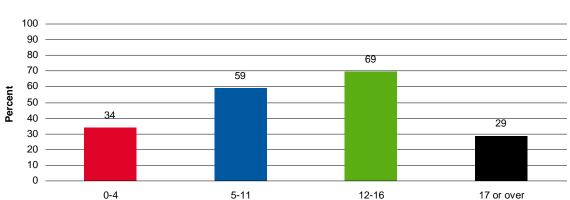
Table 2.3 Family size							
Base: All family intervention families with a Support Plan							
Total including children aged 18 Total children aged unde Number of children with the control of							
None	4	<u>%</u> 5					
1–2	38	44					
3–4	40	38					
5 or more	18	14					
Base	6,267	6,267					

2.3.2 Ages of family members

The median age of mothers in a family was 36 and of fathers was 38. Figure 2.2 shows the ages of children in family intervention families.

- Around a third of family intervention families included at least one child aged under five (34 per cent), while a slightly lower proportion included at least one child in the family home who was aged 17 or over (29 per cent).
- Fifty-nine per cent of family intervention families included at least one child aged five to 11, and 69 per cent included at least one child aged 12-16.

Figure 2.2 Percentage of families with at least one child in given age groups (across all types of intervention)



Base: Families with a Support Plan in place (6,267)

Note: Percentages may add up to more than 100 as the same family may have children in more than one age group.

Child Poverty and Women Offender families tended to have younger children.

- Child Poverty (47 per cent; Appendix B Figure B.1) and Women Offender (52 per cent) families had more younger children (aged under 4 years) compared to between 29 per cent and 42 per cent of other types of family intervention.
- They were also less likely to have older children aged over 12 years (Child Poverty: 13 per cent; Women Offender: 15 per cent) than families receiving other types of family intervention (between 27 per cent and 31 per cent of other families had children aged over 12 years).

2.3.3 Ethnicity

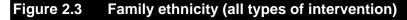
Eighty eight per cent of family members were White, slightly higher than the national average (83 per cent³³). Three per cent of family members were recorded as Black, two per cent were recorded as Asian, and seven per cent were classified as 'other or mixed race' (see Appendix B, Table B.2). The proportion of White family members has slightly declined over time (91 per cent in 2008).

The Youth Crime and Child Poverty family interventions reported slightly higher proportions of Black family members than the other intervention types (6 and 4 per cent respectively), whilst families receiving interventions focusing on Women Offenders worked with a higher proportion of White family members (96 per cent) compared to the other intervention types (Appendix B, Table B.2).

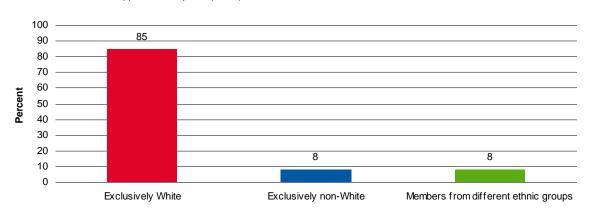
We also derived a family measure used in the analysis presented in the remaining chapters which classifies families as being exclusively White, exclusively non-White or having members from different ethnic groups (Figure 2.3). **Most families were exclusively White (85 per cent) while exclusively non-White families accounted for 8 per cent of families and the same proportion of families had members from different ethnic groups**.

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³³ http://www.guardian.co.uk/news/datablog/2011/may/18/ethnic-population-england-wales



Base: Families with a Support Plan in place (6,267)



2.3.4 Disabilities and SEN

Thirty-one per cent of family intervention families included at least one person with a physical or mental health disability. The proportion was larger for families receiving the Housing Challenge family intervention than for all the other intervention types with 38 per cent of families reported to include at least one disabled family member (see Appendix B, Figure B.2). For nine per cent of families, family intervention staff were not able to say whether the family included anyone with a disability (see Appendix B, Table B.3)³⁴.

Just under a third of families were reported to have at least one child aged 16 or under with a special educational need (SEN)³⁵ or other special need (32 per cent), although family intervention staff were unable to provide this information for 19 per cent of families (see Appendix B, Table B.4).

2.3.5 Work and financial circumstances

Three-quarters of family intervention families were classified as workless as no family member aged 16 or over was in paid employment (75 per cent)³⁶. Information was missing for seven per cent of families (see Appendix B, Table B.5). This is compared to

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³⁴ The question on the FIIS is: **Does this person have a disability (including physical or mental disabilities)?** [Note: By this we mean a longstanding illness or disability that has troubled them over a period of time or that is likely to affect them over a period of time. If you are aware of a disability but they are not registered disabled, please DO include it here]

³⁵ The question on the FIIS is: **Does this person have Special Educational Needs? (answer for people aged 16 and under only)** [Note: At the time of (*textfill current stage*), did this child have any Special Educational Need (SEN) or other special needs, including where there is a statement of SEN and/ or special needs relating to disability]. Family intervention staff were instructed that it was not necessary for a child to have a statement of SEN or special needs relating to disability in order to be classified as having SEN or other special needs.

³⁶ Family intervention staff were asked to record the main economic activity of each family member aged 16 or over. They were instructed to include any known informal and cash-in-hand work as well as formal paid work.

13 per cent of households in the general population³⁷. Looking at the economic activities of all adults aged 16 or over (rather than using families as the base), 44 per cent were unemployed with small proportions in full-time (7 per cent) or part-time (5 per cent) work (Table 2.4). Fourteen per cent of adults were looking after the home while 10 per cent were engaged in training or education.

Table 2.4 Family members' main economic act	ivities
Base: Adult members of family intervention familie	s with a Support Plan
	Total
Main economic activity	%
Unemployed	44
Looking after the home	14
In training or education	10
Full-time work (30 or more hours a week)	7
Permanently sick or disabled	5
Part-time work (1-29 hours a week)	5
Retired	1
Other	3
Don't know	11
Base	12,134
11	

Note: Percentages may add up to more than 100 due to rounding.

Eighty-two per cent of families were claiming out-of-work benefits such as Jobseekers Allowance. Information was unavailable for six per cent of families (see Appendix B, Table B.7).

Over a third of families were reported to be in debt (36 per cent), and 54 per cent had rent arrears (see Appendix B, Tables B.8 and B.9). Families receiving the Child Poverty and Housing Challenge interventions were more likely to be reported to be in debt at 49 and 48 per cent (see Appendix B, Figure B.3). More than half of families (57 per cent) had debts of £3,999 or less (see Appendix B, Table B.10).

2.3.6 Housing and tenancy status

The majority of families were living in rented accommodation, with 43 per cent renting from a LA or Arms Length Management Organisation (ALMO) and a further 24 per cent from a Registered Social Landlord (RSL) (Table 2.5). More than two-thirds of families in rented accommodation were in secure or long-term assured tenancies (69 per cent; Appendix B, Table B.11).

Workless households for areas across the UK in 2010, ONS, Released 8 September 2011 (http://www.ons.gov.uk/ons/publications/re-reference-tables.html?edition=tcm%3A77-223100)

31

Table 2.5	Families' housing tenure	
Base: All far	mily intervention families with a Support Plan	
		Total
Housing ten	ure	%
Rent: LA/AL	MO	43
Rent: RSL		24
Rent: Private	e	15
Hostel / frier	nds / temporary	4
Own propert	ty	4
Rent: HAT		2
Other accom	nmodation	1
Rent: Other		1
Rent: don't k	know type of landlord	1
Family interv	vention core block	0
Family interv	vention dispersed accommodation	1
Don't know t	type of accommodation	3
Base		6,267

2.4 Issues for family intervention families

The presenting issues and risks for families are recorded on the FIIS when the Support Plan is put in place (i.e. after they have been fully assessed). For the purposes of our analysis, a family is classified as facing a particular issue if the family intervention worker states that **at least one** family member is facing that issue at the Support Plan stage³⁸.

Families are assessed according to 12 key indicators of risk (shown in Table 2.6) which family interventions might reasonably be expected to help families address. The indicators cover five key substantive domains of interest³⁹. The analysis in this chapter is based on all families who either exited a family intervention on or before 31st March 2011 or families who were still working with a family intervention at this time.

³⁸ There are two exceptions. The first is NEET: a family is classified as NEET if <u>all</u> adults in the family (aged 16 or over) are NEET. The second relates to truancy, exclusion or bad behaviour: a family is classified as facing these issues if at least one child aged five to 15 faces these issues.

³⁹ The selection was made in order to provide summary indices of key outcomes for the purposes of statistical modelling and, through the modelling, to identify the factors associated with successful and unsuccessful outcomes for families (the results of this modelling are presented in chapter five).

Table 2.6 Outcome domains and individual indicators				
Domain	Individual Issue			
Crime and ASB involvement	Criminal activity			
	Involvement in ASB			
Education	Truancy, exclusion or bad behaviour at school			
	Poor parenting			
Family functioning	Marriage, relationship or family breakdown			
l anny functioning	Domestic violence ⁴⁰			
	Child protection issues (including neglect, emotional abuse, physical abuse and sexual abuse)			
	Mental health risk factors			
Health	Physical health (poor diet and lack of exercise)			
Ticaliii	Drug problems			
	Alcohol problems			
Employment	No adult in education, employment or training			

Details about the questions which are used for these measures are included in Appendix C.

2.4.1 Crime and ASB

Overall, **85 per cent of families were reported to have ASB or crime issues at the time when their Support Plans were put in place** (Appendix B, Table B.12). Thirty-nine per cent of families had issues with crime and 79 per cent had issues with ASB (see Appendix B, Table B.12).

Crime is considered to be an issue for a family if the family intervention worker reports that any member has been arrested for a criminal offence between the family's referral to the family intervention and the time at which their Support Plan was put in place, or if any member was on bail, probation, a tag or a conditional discharge at the Support Plan stage.

ASB is defined in the FIIS as 'acting in a manner that causes or is likely to cause harassment, alarm or distress to one or more persons not of the same household [as the family intervention family]', 41.

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⁴⁰ Whilst domestic violence could be included in the crime and ASB domain it was agreed with the DfE to include it as an indicator in the family functioning domain for the purpose of this analysis.

⁴¹ At the Support Plan stage, family intervention workers are asked to specify whether the family has been involved in any of the following anti-social behaviours: drug / substance misuse and dealing; street drinking; begging; prostitution; kerb crawling; sexual acts; abandoned cars; vehicle-related nuisance and inappropriate vehicle use; noise; rowdy behaviour; noisy neighbours; nuisance behaviour; hoax calls; animal-related problems; racial or other intimidation / harassment; criminal damage / vandalism; and litter / rubbish. Family intervention staff are also invited to specify any other behaviour the family have been involved in that they

As might be expected given the primary reasons for referral the proportions of families reported to have crime and ASB issues were substantially higher for families receiving interventions focusing on ASB (89 per cent involved in ASB, 41 per cent of families involved in crime), Youth Crime (73 per cent and 43 per cent respectively) and Women Offenders (65 per cent and 68 per cent respectively) and lower for families on the Child Poverty intervention (Figure 2.4). Similarly, by far the highest proportions of families with crime or ASB issues were those receiving the ASB intervention (92 per cent had one of these issues) and the Women Offenders intervention (95 per cent); this was also the case for the majority of families receiving the Housing Challenge (81 per cent), and Youth Crime (83 per cent) interventions (see also Appendix B, Table B.13 for more details about crime and ASB issues by intervention type).

Base: Families with a Support Plan in place (6,038) Contact w ith criminal justice system ■ ASB ■ Any crime or ASB Percent ASB Youth Crime Child Poverty Housing Women All types Challenge Offenders

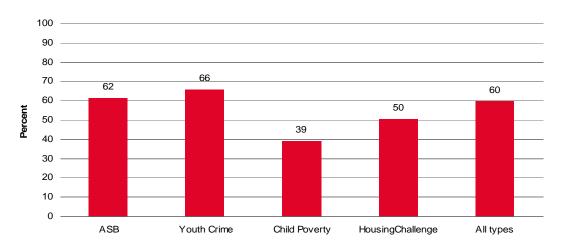
Figure 2.4 Proportion of families with crime and ASB issues at the start of the intervention

2.4.2 Education issues

Sixty per cent of family intervention families had at least one child who was truanting, excluded or behaving badly at school (Figure 2.5). Child Poverty families were less likely to have problems relating to education than other intervention families; 39 per cent of Child Poverty families had this issue at the start of the intervention, compared to between 50 per cent and 66 per cent of other intervention types. Whilst the percentage of families referred to Child Poverty interventions for children being at risk of exclusion or having attendance problems was similar to other types, the lower levels of other education issues on this indicator is consistent with these families being less likely to be referred due to their children being excluded from school. This, together with Child Poverty families typically having younger children may suggest that truancy and bad behaviour at school is less likely to be a problem for those with younger school aged children.

Figure 2.5 Education issues by type of intervention

Base: Families with a Support Plan in place (5,862 families)



Note: The figures for Women Offender families are not shown due to a small base size of 45.

2.4.3 Family functioning

Overall, 81 per cent of families were reported to have problems with family functioning at the time their Support Plan was put in place (Table 2.7).

Table 2.7 Family functioning indicators	
Base: All families with a Support Plan	
Issue	Total
	%
Poor parenting	67
Marriage, relationship or family breakdown	32
Domestic violence	30
Child protection issues	30
Any issue with family functioning	81
Base*	6,197

Note: Percentages may add up to more than 100 as the family may have more than one issue with family functioning.

Poor parenting was the most common issue with family functioning (67 per cent of families). Around a third of families experienced problems in relation to the other indicators in this domain at the Support Plan stage. Families referred to a Child Poverty intervention were most likely to experience relationship or family breakdown (39 per cent) and child protection concerns (38 per cent) as presenting issues compared to all the other intervention types (see Appendix B, Table B.14).

^{*}Note: the bases differ across the indicators due to missing values. Where the bases are different the lowest is provided.

In order to complement the evidence on family functioning we asked families to complete the Family Assessment Device (FAD)⁴².

The FAD is divided into two dimensions; the 'roles' dimension assesses issues around family organisation such as sharing household tasks and budgeting; and the 'general family functioning' dimension addresses communication, conflict and decision making within the family. For each dimension an average score is calculated where 2 or more is considered to indicate problems relating to the dimension (and overall family functioning). At the Support Plan stage intervention families were assessed by the FAD as having severe issues relating to both of these dimensions.

- Nearly all (97 per cent) intervention families had an average score of two or higher in the roles dimension, indicating that these families clearly have severe issues around family organisation such as sharing household tasks and budgeting (Table 2.8);
- The average (mean) score for families at the start of the intervention was 2.79 for the roles dimension of the FAD, with a median of 2.75;
- Just under three-quarters (72 per cent) of families had an average score of two
 or more in the general family functioning dimension, whilst this is lower than the
 roles dimension a high proportion of families still assess themselves as having a
 high level of problems around general family communication, decision making and
 conflict in the family.
- The average score for the general family functioning dimension was 2.28 with a median of 2.25.

These results, based on assessments by families receiving the interventions are consistent with the issues reported by staff working with the family.

⁴² In total 704 FADs were submitted from families at the start of the intervention. Three-quarters of these returned forms (535 forms) had complete data for all items, it is the data from these returns on which the analysis below is based. The remaining 169 forms were excluded from the analysis due to incomplete returns such as blank responses for some questions or families choosing more than one response option.

Table 2.8	Average FAD score	at the Support Plan sta	ge
Base: Famil onwards)	ies who completed the I	FAD at the Support Plan	stage (from April 2010
		FAD S	Scale
		Roles	General family
			functioning
FAD scores		Average score	Average score
Mean		2.79	2.28
Median		2.75	2.25
Average sco	ore	%	%
1 to 1.99		3	28
2 or above		97	72
Base		535	535

2.4.4 Health

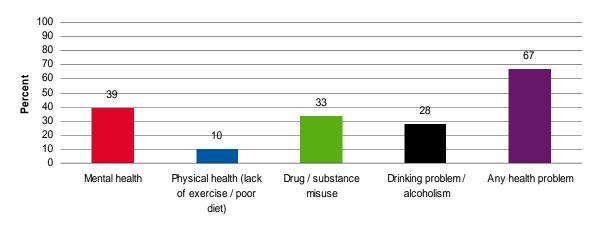
Overall, 67 per cent of families were reported to have health issues at the time when their Support Plans were put in place (Figure 2.6). This domain is based on whether family interventions recorded any of the following four issues as being problems for the family at the Support Plan stage:

- Mental health (covering anxiety / panic attacks, depression, lack of confidence, nerves / nervousness and stress);
- Lack of exercise / poor diet ('physical health');
- Drug / substance misuse;
- Drinking problem / alcoholism.

As can be seen in Figure 2.6 just under 40 per cent of family intervention families respectively faced issues associated with mental health (39 per cent), drug / substance misuse (33 per cent), drinking problems / alcohol (28 per cent), or a lack of exercise or poor diet (ten per cent) (see also Appendix B Table B.15).

Figure 2.6 Proportion of families with health issues at the start of the intervention

Base: Families with a Support Plan in place (6,140)



When looking at the health issues across the family intervention types (Table 2.9) it appears that Women Offender families were a particularly vulnerable group with substantially higher proportions of families reported to be affected by poor mental health and drug and substance misuse problems than other family types. This might have been expected given the most common reason for referral to Women Offender interventions was substance misuse (see section 2.2). However, due to the small number of families receiving this type of intervention these findings should be treated with caution. Poor mental health also appeared to be particularly evident for Child Poverty families (51 per cent). Conversely, the reverse trend was apparent for drug and substance misuse as Child Poverty families were less likely to present with these issues than families on the other types of intervention, despite around a quarter of families being referred to these interventions due to adult substance misuse problems (see section 2.2). Families assigned to the Child Poverty and Women Offenders interventions were also more likely to have physical health issues that needed addressing than other family types.

Table 2.9 Health issues by intervention type						
Base: All family intervention families with a Support Plan	ASB	YC	СР	нс	WO**	ALL
	Total	Total	Total	Total	Total	Total
Issue	%	%	%	%	%	%
Mental health	35	41	51	43	[56]	39
Physical health	9	9	20	10	[17]	10
Drug / substance misuse	33	37	23	30	[52]	33
Drinking problem / alcoholism	30	27	24	25	[44]	28
Base*	3,368	1,790	615	344	[43]	6,140

*Note: the bases differ across the indicators due to missing values. Where the bases are different the lowest is provided.

^{**}Figures in brackets to be treated with caution due to low base size.

2.4.5 Employment

Sixty-seven per cent of all family intervention families had no adult member (aged 16 or over) in employment, education or training (i.e. they were 'NEET families'; Figure 2.7). Child Poverty intervention families were most likely to be reported as having no adult in education, training or employment (76 per cent). This is not surprising given that across all interventions family worklessness was most likely to be the reason for referral to Child Poverty interventions (see section 2.2).

90 76 80 71 67 70 59 60 50 40 30 20 10 Λ

Figure 2.7 Employment by type of intervention at the start of the intervention

Base: Families with a Support Plan in place (5,862 families)

ASB

Note: The figures for Women Offender families are not shown due to a small base size of 45.

In chapter 4, we will explore the extent to which families' issues at the Support Plan stage still needed addressing by the time they exited the family intervention.

Child Poverty

HousingChallenge

All types

2.5 Families not offered a family intervention

Youth Crime

In total 3,338 families were not offered a family intervention.

- In more than half of these cases (54 per cent; Table 2.10) families were not offered an intervention because they were judged not to have met the criteria (e.g. because their ASB levels were deemed to be too low, they were not at risk of homelessness or there were no dependent children in the family);
- Thirty-eight per cent of families were not considered to be suitable because another service was either more appropriate or already making good progress with the family, or the referral was withdrawn;
- Eight per cent of families were no longer considered eligible because their circumstances had changed since their original referral, for example because the family no longer lived together, children had been taken away, they had moved away from the area or worklessness was no longer an issue.

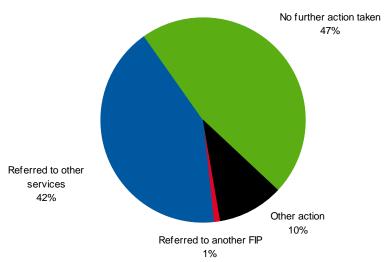
Table 2.10 Reasons families were not offered a family intervention	
Base: All families not offered a family intervention	
	Total
Reasons families were not offered an intervention	%
Family did not meet the qualifying criteria for intervention (including ASB levels were too low, not at risk of homelessness)	54
Family intervention services support not needed (e.g. other services are able to support the family)	38
Family no longer eligible (including family members no longer living together, moved away from the area)	8
Family not engaging with the intervention service or project during referral	7
Family perceived to be too dangerous	2
Family intervention capacity issues	2
Other	13

Note: Percentages may add up to more than 100 as the family may not have been offered a family intervention for more than one reason.

Information is also recorded about any actions taken for families who were not offered a family intervention⁴³. In most cases either no further action was taken (47 per cent) or the family was referred to other (non-family intervention) services (42 per cent; Figure 2.8).

Figure 2.8 Actions taken for families not offered intervention

Base: All families not offered a family intervention (2,703 familes)



Note: The base for this question is lower than the base for all families not offered the family intervention because this question was only introduced in February 2009.

We also carried out some analysis to compare families who were and were not offered the intervention to see if there were any differences in the agencies who referred families and the reasons for referral. The analysis suggests that families who were offered the

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⁴³ This question was added to the FIIS in February 2009.

intervention were referred by a similar profile of agencies but were more likely to have been referred by more than one agency (Appendix B, Table B.16).

As may have been expected, families who were offered an intervention were more likely to have been referred for problems relating to the key issues tackled by family interventions. Thirty-one per cent of families offered an intervention were referred due to poor parenting, compared to eight per cent of those not offered an intervention (Appendix B, Table B.17. Similarly, families offered the intervention were more likely to be at risk of homelessness (19 per cent compared to 5 per cent of those not offered), involved in ASB (43 per cent compared to 13 per cent respectively), have children at risk of exclusion or attendance problems (24 per cent compared to 6 per cent) and have domestic violence problems (17 per cent compared to 4 per cent).

There appeared to be no notable differences in the socio-demographic profile of families (family type, number of children and ethnicity) by whether they accepted or declined the offer of an intensive intervention (Appendix B, Table B.18).

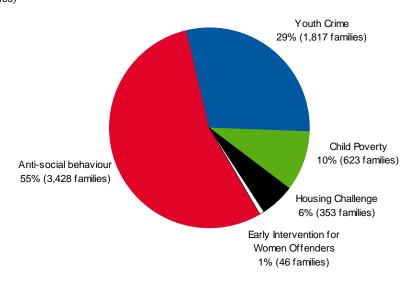
3 The family intervention

In this chapter, we consider some key aspects of the service provided by family interventions. In section 3.1, we outline the number of families that family interventions worked with in the last financial year. In section 3.2 we report on the number of hours a week that family intervention workers spend with families (which decreases during a family's intervention) and the duration of the intervention. Section 3.3 considers whether families typically work with the same key worker throughout their intervention (which was identified as an important feature of the service in the first evaluation report⁴⁴) and in section 3.4 we look at when and why families stop working with a family intervention.

As the first family interventions focused on ASB, it is not surprising that just over half (55 per cent or 3,428 families) of the 6,267 families worked with an ASB family intervention (Figure 3.1). Just under a third of families (29 per cent) worked with a Youth Crime family intervention and 10 per cent a Child Poverty family intervention. Much smaller proportions of families worked with a Housing Challenge (6 per cent) or Women Offenders (1 per cent) family intervention.

Figure 3.1 Type of family interventions received

Base: Families who are still working with or have received an intervention and completed the Support Plan stage (6,267 families)



The analysis presented in the rest of this chapter includes all family intervention families with a Support Plan in place, irrespective of the type of intervention they received.

 $^{44} \ White \ et \ al., \ 2008 \ (https://www.education.gov.uk/publications/RSG/publicationDetail/Page1/DCSF-RW047)$

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Key findings from this chapter include:

Capacity and throughput of family interventions (section 3.1)

- Since family interventions were set up a total of 12,850 families were referred up to and including 31st March 2011.
- In the financial year 2010/11, family interventions worked with a total of 5,461 families. Just over a third (2,038 families) were already working with a family intervention at the start of the financial year, while nearly two-thirds (3,423 families) began the intervention during that year.

The intensive family intervention (section 3.2 and 3.3)

- The average length of an intensive family intervention has slightly decreased from 13 months reported in 2010 to around 11 months.
- The weekly hours of direct contact with a family decreases during their intervention from an average of 9 hours between the Support Plan being put in place and the first Review to 6.6 hours between the final Review and leaving the intervention, which is similar to the average hours reported in 2010.
- 86 per cent of families had the same key worker between the Support Plan and leaving the intervention.

Leaving the family intervention (section 3.4)

- 3,675 families exited a family intervention between February 2007 and 31st March 2011:
 - 70 per cent (2,569 families) left for a successful reason;
 - 4 per cent (142 families) left for an unsuccessful reason;
 - 9 per cent (316 families) left for an inconclusive reason (i.e. one which could not be counted as successful or unsuccessful);
 - 18 per cent (648 families) were either recorded as having both successful and unsuccessful reasons for leaving, or no reason for leaving was given.

3.1 Number of families working with a family intervention in 2010/11

Since family interventions were set up a total of 12,850 families were referred to a service up to and including 31st March 2011 (see chapter two for a profile of these families).

Annual figures provide an indication of the number of families that 'pass through' a family intervention. In the financial year 2010/11, family interventions worked with a total of 5,461 families. Just over a third (37 per cent) of these families (2,038 families) were already working with a family intervention at the start of the financial year, while nearly

two-thirds (63 per cent; 3,423 families) began the intervention during that year. In the previous financial year (2009/10), family interventions worked with a total of 3,518 families.

3.2 Contact time and intervention duration

The average (mean) duration of a family intervention, between the date they were referred to when they exited, has decreased from 13 months (reported in 2010) to 11 months (352 days), with a mid point (median) of 9 months (304 days). The actual duration of an intensive family intervention ranged from just over 3 weeks to just over 5 years. We don't know why the duration of the intervention has decreased but it may point to services delivering shorter, even more focused interventions, it may reflect a fall in the level of family need or a result of service reorganisation.

Family intervention staff record the average number of hours they spend with families each week. This information is available for three time periods a) between the Support Plan being put in place and the first Review, b) an average based on the hours between the first Review and last Review, and c) between the final Review and the Exit.

The average hours spent with a family decreases over time, suggesting that families require less intensive support towards the end of their intervention. As shown in Table 3.1, the average (mean) number of hours per week staff spent in direct contact with a family was 9 hours in the early stages of the intervention (i.e. between the time a Support Plan was put in place and the first Review), decreasing to 8 hours during the Review stages and 6.6 hours during the final stages of the intervention (i.e. between the final Review stage and the Exit). The mid point (median) was 6 hours in the early stages, reducing to 5.3 hours in the Review stages and 4 hours in the final stages of the intervention.

This reduction in contact hours over time echoes the qualitative findings of White et al. (2008), who found that the number of home visits key workers made declined over the course of the intervention – which is as it might be hoped, if families are addressing their problems and starting to take more responsibility and control of their lives.

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Table 3.1 Typical number of weekly hours of direct contact time with a family						
Base: All families with a Support P	Base: All families with a Support Plan in place who are not in core unit accommodation ⁴⁵					
Typical number of weekly hours Reference time period						
	Average based					
	Support Plan to	on first formal				
	first formal	Review to last	Final formal			
	Review	formal Review ^a	Review to Exit ^a			
	%	%	%			
1 - 5	47	54	65			
6 - 10	37	31	25			
11 or more	16	15	9			
Don't know	0	0	+			
	Number of hours	Number of hours	Number of hours			
Mean weekly hours	9.0 ^b	8.0 b	6.6 ^b			
Median weekly hours	6.0	5.3	4.0			
Base	4,655	1,801	2,935			

a. These figures are based on families that have exited an intervention.

3.3 Key worker consistency

Previous research on family interventions has shown that having the same key worker for the duration of an intervention is important for achieving success (White et al., 2008). Table 3.2 illustrates that the levels of key worker consistency continue to be very high. Ninety-two per cent of families had the same key worker between the Support Plan stage and their first Review and 95 per cent had the same key worker between their Final Review and Exit stage (compared to 91 per cent and 95 per cent respectively in 2010). Overall, 86 per cent of families had the same key worker for the duration of their intervention; from the time their Support Plan was put in place to exiting the intervention.

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b. Family intervention workers were able to put in a high number of hours to accommodate core block families and those needing high levels of support. We had a higher than expected level of high values suggesting that maybe some family intervention workers had misread the question. When run with hours capped (conservatively) at 20 hours this reduces to 6.4 hours, 5.9 hours and 4.9 hours respectively.

⁴⁵ The base for these figures is families receiving dispersed tenancy or outreach/floating support. The one per cent of families residing in family intervention core units are not included due to the different nature of that intervention which makes contact hours harder to define.

Table 3.2 Key worker consistency						
Base: All family intervention famili	es with a Support Pla	an				
	Reference time period					
	Support Plan to	Support Plan to				
Whether same key worker at	first formal	Final formal	Support plan to			
beginning and end of period	Review	Review to Exit ^a	Exit ^a			
	%	%	%			
Yes	92	95	86			
No	8	5	14			
Base	4,790	3,492	3,559			

a. These figures are based on families that have exited an intervention.

3.4 Leaving a family intervention

The FIIS requires family intervention workers to record information at the point a family leaves a family intervention and the reason/s for this⁴⁶. To make sense of the analysis these reasons have been grouped into three categories:

- Families who complete their intervention and whose outcomes have improved (successful reason);
- Families who either refuse the intervention or fail to engage at some point whilst working with a family intervention (unsuccessful reason);
- Families who leave before completing their intervention as a result of their circumstances changing and as a consequence are no longer eligible or suitable for a family intervention (inconclusive - neither successful or unsuccessful reason).

Table 3.3 shows the classification of reasons for leaving a family intervention.

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⁴⁶ The list of reasons from which family intervention workers can select for ASB family interventions is slightly different to the list for Child Poverty and Youth Crime family interventions.

Table 3.3 Classification of re	easons for leaving a family	/ intervention				
Families who received an ASB or Housing Challenge family intervention						
Successful The intervention was successful	Inconclusive - cannot be counted as successful or unsuccessful	Unsuccessful				
	High risk case – unsuitable for family intervention staff to visit	ramily refused intervention>				
Support Plan goals were satisfied	Family moved away from the area	Family not engaging with the project>				
Family nominated to move back onto council housing list	as a family unit					
Formal actions in place against family lifted	Children taken into care***					
Family no longer eligible for family intervention* >	Family referred to another family intervention					
Family no longer at risk of homelessness	Family will be referred to another (non-family intervention) service					
ASB levels reduced						
Worklessness no longer an issue**						
Families who received a Chil	d Poverty, Youth Crime or W intervention	-				
Support Plan goals were satisfied	High risk case - unsuitable for family intervention staff to visit****	Family refused intervention				
Family nominated to move back onto council housing list	Family moved away from the area	Family not engaging with the project				
Formal actions in place against family lifted	Family members no longer live together as a family unit					
Family no longer at risk of homelessness	Children taken into care***					
ASB levels reduced	Family referred to another family intervention					
Worklessness no longer an issue	Family referred to other non- family intervention service(s)					
Youth crime no longer an issue						
Intervention successful for another reason * This code is no longer offered in the	FIIC at Davious etc.					

^{*} This code is no longer offered in the FIIS at Review stage

Family intervention workers can select more than one reason for a family to leave. This has resulted in some families being reported as having both successful and unsuccessful reasons for leaving. We have prioritised successful and unsuccessful reasons over other reasons in order to arrive at a single classification for each family. So:

^{**} This code was added to the FIIS in July 2009

> In January 2009 these codes were removed for families leaving at Exit stage, meaning that there were no longer any unsuccessful reasons for leaving an ASB family intervention at the Exit stage.

^{***} i.e. children taken into local authority / foster care

^{****} i.e. unsafe for family intervention staff to continue visits

- If one or more reasons were successful and any other(s) were inconclusive then the family was classified as having left for a successful reason;
- If one or more reasons were unsuccessful and any other(s) were inconclusive then the family was classified as having left for an unsuccessful reason;

Of the total number of 3,675 families who exited a family intervention by 31st March 2011, 82 per cent (3,027 families⁴⁷) left for a reason which was either successful, unsuccessful, or inconclusive:

- 85 per cent (2,569 families) left for a successful reason;
- 5 per cent (142 families) left for an unsuccessful reason;
- 10 per cent (316 families) left for an inconclusive reason.

When all the 3,675 families were included in this analysis:

- 70 per cent left for a successful reason;
- 9 per cent left for an inconclusive reason;
- 4 per cent left for an unsuccessful reason;
- 18 per cent of families were recorded as having both successful and unsuccessful reasons for leaving, or no reason for leaving was given.

Of the 3,675 families who exited a family intervention, 1,806 families exited a family intervention in the financial year 2010/11. Of these 85 per cent (1,531 families) were classified as having a reason for leaving:

- 80 per cent (1,219 families) left for a successful reason
- 7 per cent (101 families) left for an unsuccessful reason
- 14 per cent (211 families) left for an inconclusive reason.

When all the 1,806 families who exited a family intervention in the financial year 2010/11 are included in this analysis:

- 67 per cent left for a successful reason;
- 12 per cent left for an inconclusive reason;
- 6 per cent left for an unsuccessful reason;
- 15 per cent of families were recorded as having both successful and unsuccessful reasons for leaving, or no reason for leaving was given.

The average (mean) duration of interventions for families that left an intervention for a successful reason was 12 months, with a median of 10 months and a range of about 3 weeks to 5 years. This is compared to a mean of 11 months for all families and a median

⁴⁷ It was not possible to classify the reason(s) for leaving for the remaining 648 families (18 per cent) as family intervention workers did not provide this information or they had provided both successful and unsuccessful reasons for leaving.

of 9 months (see section 3.2). Chapters 4 and 5 report the outcomes achieved for families and consider whether the length of an intervention is associated with success.

4 Outcomes for families

This chapter explores the successful and unsuccessful outcomes achieved by family intervention families. The analysis of outcomes is based on a comparison of the nature and number of issues families have at the Support Plan stage (the 'before' measure, or baseline) with those at the Exit stage (the 'after' measure).

The outcomes analysis provides further understanding of the levels of success achieved by family intervention services reported in chapter 3 (section 3.4). We begin the chapter by reporting the overall reduction figures for each of the indicators in the five domains of interest and presenting the prevalence of the indicator at the start and end of the intervention (section 4.1). Section 4.2 considers the percentage of families who achieved successful outcomes for each of the 12 indicators in the five domains of interest while section 4.3 examines the level of success in each domain.

A 'successful outcome' in relation to a given indicator results if any family member is identified as having an issue (e.g. being involved with ASB) at the Support Plan stage and no longer have this issue when they exit. An 'unsuccessful outcome' is recorded when a family has an issue at the Support Plan stage and still has it when they exit. For example, an unsuccessful outcome would result if any family members were reported as being involved in ASB or criminal activity at the beginning and end of their intervention.

Key findings from this chapter include:

Family intervention outcomes (section 4.1)

- There was a considerable decline in the percentage of families who were involved in crime and ASB and had educational, family functioning and health risks between the start and end of their intervention.
- There was, on average, a 50 per cent reduction in the proportion of families involved in crime and ASB:
 - Crime (a 41 per cent reduction, from 35 per cent of families involved in crime to 20 per cent, representing a 14 percentage point reduction based on unrounded percentages)
 - ASB (a 58 per cent reduction, from 81 per cent of families involved in ASB to 34 per cent, representing a 47 percentage point reduction).
- There was a 53 per cent reduction in the percentage of families with education risks.
 At the start of the intervention 58 per cent of families had a school age child who was truanting, excluded or behaving badly at school, compared to 28 per cent at the end of the intervention (representing a 31 percentage point reduction based on unrounded percentages).
- There was, on average, a 47 per cent reduction in the proportion of families

experiencing risks associated with poor family functioning including poor parenting, marriage, relationship or family breakdown, domestic violence or child protection.

- This includes a 34 per cent reduction in the number of families with child protection issues (including neglect, emotional abuse, physical abuse and sexual abuse), from 27 per cent at the start of the intervention to 18 per cent at the end.
- There was, on average, a 34 per cent reduction in the proportion of families with health risks including mental or physical health and drug or alcohol problems.
- There was a 14 per cent reduction in the proportion of workless families (i.e. with no adult aged over 16 in education, employment or training) - from 68 per cent of families with the issue at the start of the intervention to 58 per cent at the end of the intervention.

Successful and unsuccessful outcomes (section 4.2)

- At least half of family intervention families who were reported to have the following problems at the Support Plan stage achieved a successful outcome (i.e. they no longer had this problem when they left):
 - poor parenting (53 per cent);
 - marriage, relationship or family breakdown (56 per cent);
 - domestic violence (65 per cent);
 - involvement in crime (65 per cent) and/or ASB (60 per cent);
 - lack of exercise or poor diet (52 per cent);
 - drug or substance misuse (50 per cent);
 - alcohol misuse (55 per cent);
 - truancy, exclusion or bad behaviour at school (57 per cent).
- Just under half (49 per cent) of families with child protection issues at the Support Plan stage no longer had this problem at the end of their intervention.
- Families were least likely to have achieved a successful outcome in relation to mental health (40 per cent) and worklessness (20 per cent).

Level of success at the end of the intervention (section 4.3)

- The 12 indicators used in section 4.1 were categorised into five domains; family functioning, crime and ASB, education, employment, and health. For each of these domains we looked at the degree of success achieved by family intervention families.
- 64 per cent of families had some success in reducing the number of risks
 associated with family functioning including poor parenting, marriage, relationship or
 family breakdown, domestic violence or child protection issues between the Support
 Plan stage and leaving the intervention.

- 48 per cent of families with any risk of family functioning no longer had this risk when they left the family intervention.
- 74 per cent of families partially or completely addressed their involvement in crime and ASB activities between the Support Plan being put in place and leaving the family intervention.
- 57 per cent of families that were involved in crime and ASB at the Support Plan stage were no longer involved when they exited.
- 57 per cent of families with educational risks (truancy, exclusion, or bad behaviour at school) at the Support Plan stage no longer had these risks when they left the intervention.
- Families experienced less success in the domains of health (55 per cent had any success and 39 per cent no longer had these risks when they left the intervention), and employment (20 per cent achieved success).

4.1 Family intervention outcomes

We begin the chapter by reporting the overall reduction figures for each of the indicators in the five domains of interest presenting the prevalence of the indicator at the start and end of the intervention. The analysis for the crime and ASB, family functioning, education, employment and health domains are taken from the Official Statistics outcomes measures which were published on 14th September 2011⁴⁸. The percentage reduction rates reported below are based on unrounded proportions.

It is important to acknowledge that the outcomes achieved by families may not be directly attributable to the intervention as some change amongst families would be expected to occur 'naturally' over time or because of other services or interventions families received. The impact study presented in chapter 7 provides some indication that the improvements in outcomes for crime and ASB can be attributed to a family intervention; however, more research is required to assess the overall impact of family interventions.

The indicators and risk factors are classified under the following five domains⁴⁹:

- Crime and ASB
- Education
- Employment
- · Family functioning
- Health.

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⁴⁸ http://www.education.gov.uk/rsgateway/DB/STR/d001021/index.shtml

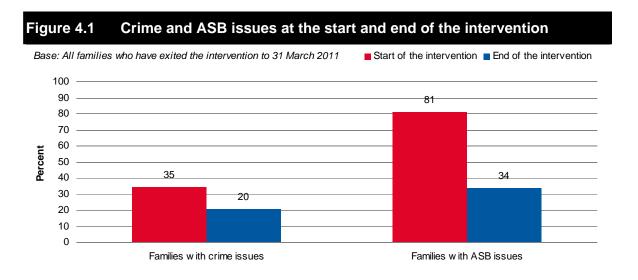
⁴⁹ For more information about the issues in each domain please see section 2.4, and for the questions in the FIIS from which these measures are drawn please see Appendix C.

4.1.1 Crime and ASB

The prevalence of crime and ASB amongst families who have exited an intervention has decreased considerably between the beginning and the end of the intervention (Table 4.1; Figure 4.1). There was, on average, **a 50 per cent reduction** in the proportion of families involved in crime and ASB. The measure is an un-weighted average of the percentage reduction in:

- Crime: a 41 per cent reduction in the number of families involved in crime from 35 per cent of families at the start of the intervention to 20 per cent at the end of the intervention (a 14 percentage point reduction);
- ASB: a 58 per cent reduction in the number of families involved in ASB from 81 per cent of families at the start of the intervention to 34 per cent at the end of the intervention (a 47 percentage point reduction).

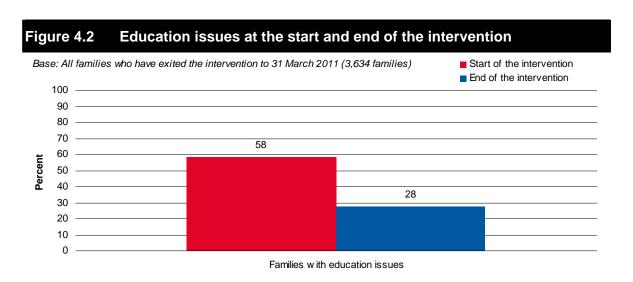
Table 4.1	Prevalence of critintervention	me and ASB	issues at t	he start and	end of the
Base: All fam	nily intervention familie	es who had ex	kited a family	intervention	
		Start of in	tervention	End of int	ervention
		Number of		Number of	
		families	%	families	%
Crime issues		1,269	35	748	20
No crime issu	ıes	2,406	65	2,927	80
Total number	r of families	3,675	100	3,675	100
ASB issue		2,908	81	1,216	34
No ASB issue	е	685	19	2,374	66
Total number	r of families	3,593	100	3,590	100



4.1.2 Educational risks

There has also been a decrease in the prevalence of educational risks (Table 4.2; Figure 4.2). Fifty-eight per cent of families had a school aged child who was either truanting, excluded or behaving badly at school at the start of intervention while at the end of the intervention this reduced to 28 per cent, representing **a 53 per cent reduction** (a 31 percentage point reduction based on unrounded percentages⁵⁰). However, it is important to note that this measure does not take into account the change in families who no longer have school aged children at the end of the intervention.

Table 4.2	Prevalence of intervention	education iss	sues at the	start and	end of the
Base: All fan	nily intervention fam	nilies who had e	xited a family	intervention	
		Start of in	tervention	End of int	ervention
		Number of		Number of	
		families	%	families	%
Any truancy,	exclusion or bad				
behaviour iss	sues	2,125	58	1,000	28
No truancy, e	exclusion or bad				
behaviour iss	sues	1,512	42	2,634	72
Total number	r of families	3,637	100	3,634	100



4.1.3 Family functioning

There has also been a decrease in the prevalence of family functioning risks (Table 4.3; Figure 4.3). There was, on average, **a 47 per cent reduction** in the proportion of families experiencing risks associated with poor family functioning including poor parenting, marriage, relationship or family breakdown, domestic violence or child protection issues.

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⁵⁰ When this is restricted only to families with valid before and after data there is a 39 per cent reduction (from 32 per cent of families with the issue to 20 per cent which is a 13 percentage point reduction based on unrounded percentages).

The measure is an un-weighted average of the percentage reduction figures for:

- Poor parenting: a 49 per cent reduction in the number of families with parenting problems from 67 per cent of families to 34 per cent (a 33 percentage point reduction);
- Marriage, relationship or family breakdown: a 47 per cent reduction in the number of families with relationship issues – from 30 per cent of families to 16 per cent (a 14 percentage point reduction⁵¹);
- Domestic violence between any members of the family: a 57 per cent reduction in the number of families with the issue - from 28 per cent of families to 12 per cent (a 16 percentage point reduction);
- Child protection issues including neglect, emotional abuse, physical abuse and sexual abuse: a 34 per cent reduction in the number of families with these issues from 27 per cent of families with the issue to 18 per cent (a 9 percentage point reduction) 82 per cent of families did not have any of these child protection issues at the end of the intervention.

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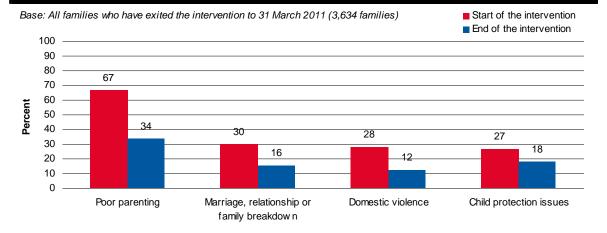
⁵¹ When this is restricted only to families with valid before and after data there is a 46 per cent reduction (from 30 per cent of families with the issue to 16 per cent which is a 14 percentage point reduction based on un rounded percentages).

Table 4.3 Prevalence of family functioning issues at the start and end of the intervention

Base: All family intervention families who had exited a family intervention

	Start of intervention		End of intervention	
	Number of		Number of	
	families	%	families	%
Poor parenting issues	2,426	67	1,237	34
No poor parenting issues	1,211	33	2,397	66
Total number of families	3,637	100	3,634	100
Marriage, relationship or family				
breakdown	1,084	30	574	16
No marriage, relationship or				
family breakdown	2,553	70	3,060	84
Total number of families	3,637	100	3,634	100
Domestic violence	1,027	28	443	12
No domestic violence	2,610	72	3,191	88
Total number of families	3,637	100	3,634	100
Child protection issues	984	27	649	18
No child protection issues	2,653	73	2,985	82
Total number of families	3,637	100	3,634	100

Figure 4.3 Family functioning issues at the start and end of the intervention



4.1.4 Health

The health risks reported for families have also decreased but less than for other indicators (Table 4.4; Figure 4.4). There was, on average, **a 34 per cent reduction** in the proportion of families with health risks including mental or physical health and drug or alcohol problems.

From a list of risk factors, family intervention workers were asked to record factors they were certain were an issue for the family. Mental health conditions included anxiety and/or panic attacks, depression, lack of confidence, nerves and/or nervousness and stress. For physical health, the types of issues that were included were poor diet and lack of exercise.

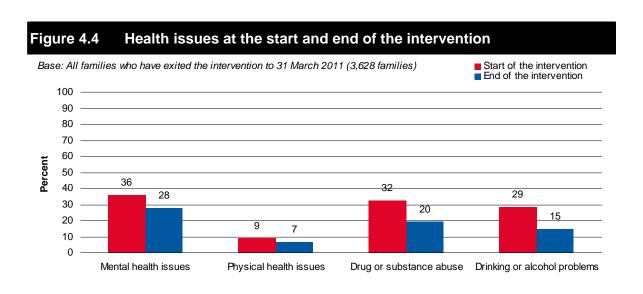
The measure is an un-weighted average of the percentage reduction figures for:

- A 23 per cent reduction in the number of families with mental health issues from 36 per cent to 28 per cent (an 8 percentage point reduction);
- A 26 per cent reduction in the number of families with physical health issues from 9 per cent to 7 per cent (a 2 percentage point reduction);
- Drug or substance misuse: a 40 per cent reduction in the number of families with either of these issues - from 32 per cent to 20 per cent (a 13 percentage point reduction⁵²);
- Drinking or alcohol problems: a 48 per cent reduction in the number of families with this issue from 29 per cent to 15 per cent (a 14 percentage point reduction).

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When this is restricted only to families with valid before and after data there is a 39 per cent reduction (from 32 per cent of families with the issue to 20 per cent which is a 13 percentage point reduction based on unrounded percentages).

Table 4.4 Prevalence of health issues at the start and end of the intervention					
Base: All family intervention families who had exited a family intervention					
	Start of intervention		End of intervention		
	Number of		Number of		
	families	%	families	%	
Mental health issues	1,309	36	1,018	28	
No mental health issues	2,319	64	2,630	72	
Total number of families	3,628	100	3,648	100	
Physical health issues	338	9	250	7	
No physical health issues	3,306	91	3,407	93	
Total number of families	3,644	100	3,657	100	
Drug or substance misuse issues	1,178	32	712	20	
No drug or substance misuse					
issues	2,459	68	2,922	80	
Total number of families	3,637	100	3,634	100	
Drinking problem / alcoholism					
issues	1,040	29	538	15	
No drinking problem / alcoholism					
issues	2,597	71	3,096	85	
Total number of families	3,637	100	3,634	100	

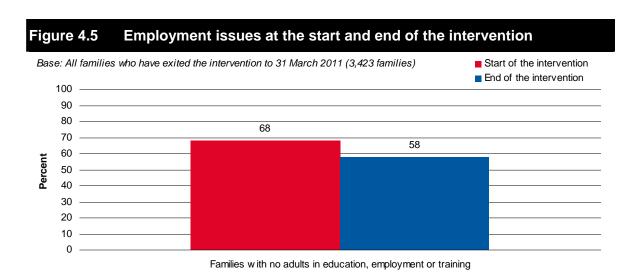


4.1.5 Employment

Family intervention workers were also asked whether adults (aged over 16) in the family were not in education, employment or training. There has been considerably less reduction in the prevalence of worklessness amongst families who have exited the

intervention than the other domains of interest. There was a 14 per cent reduction in the proportion of families with no adult in education, employment or training, from 68 per cent of families with the risk at the start of the intervention to 58 per cent at the end of the intervention (a 10 percentage point reduction; Table 4.5; Figure 4.5).

Table 4.5 Prevalence of employment issues at the start and end of the intervention Base: All family intervention families who had exited a family intervention					
		Start of intervention		End of intervention	
		Number of		Number of	
		families	%	families	%
Family not in	work	2,319	68	2,052	58
Any family m	embers in work	1,104	32	1,486	42
Total number	r of families	3,423	100	3,538	100



4.1.6 Housing enforcement actions

In addition to the five outcome domains we have also included analysis of housing enforcement actions as this is a key indicator for family interventions⁵³.

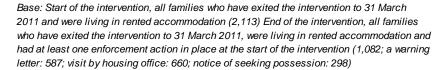
The number of housing enforcement actions reported decreased considerably during the intervention (Figure 4.6). Fifty-nine per cent of families had one or more housing enforcement actions against them at the start of the intervention, with 26 per cent of these families still having at least one enforcement action against them at the end of their intervention.

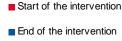
⁵³ Please note that the base for this analysis is different to the previous sections. This section focuses on families who had housing enforcements in place at the beginning of their intervention and whether these are

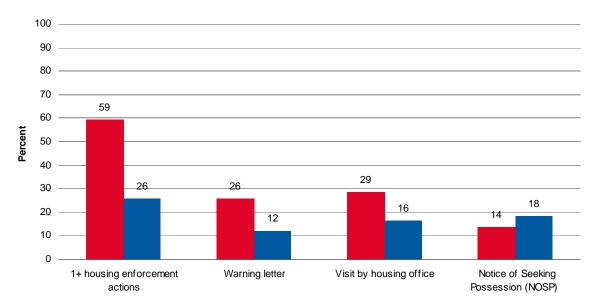
still in place at the end of the intervention.

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Figure 4.6 Housing enforcement actions at the start and end of the intervention







Of the 26 per cent of families who had received a warning letter from their housing provider at the beginning of their intervention 12 per cent still had this action in place at the end of their intervention. Similarly, of the 29 per cent of families who were visited by a housing officer at the beginning of their intervention 16 per cent still had this action in place at the end of their intervention. A Notice of Seeking Possession was reported for 14 per cent of families at the beginning of the intervention, 18 per cent of these families still had a Notice of Seeking Possession in place at the end of their intervention.

4.2 Successful and unsuccessful outcomes

In this final section of the chapter we show how successful families were in resolving their problems between the start and end of their intervention. A family is regarded as successfully resolving a problem if this problem was present at the start of the intervention but not at the end of the intervention (e.g. families who were involved in crime or ASB at the start of the intervention but not at the end of the intervention).

Looking just at the families who were identified as having issues in each of the five domains of interest we can see the extent to which families were successful in reducing risk and resolving their problems when they left the intervention (Table 4.6). For example, 53 per cent of the 2,402 families with parenting problems at the start of their intervention were reported by their key worker as not having these problems when they exited.

For nine out of the 12 individual indicators, at least half of the families who were identified as having this problem or issue by their key worker at the Support Plan stage no longer

had this problem or issue when they left the family intervention (a successful outcome). Families were most likely to achieve a successful outcome in relation to domestic violence (65 per cent), crime (65 per cent) and ASB (60 per cent), and truancy, exclusion or bad behaviour (57 per cent). They were least likely to achieve a successful outcome in relation to mental health (40 per cent) and worklessness (20 per cent).

These findings are very similar to those reported in 2010 when families were also most likely to achieve success relating to domestic violence (64 per cent), crime and ASB (59 per cent for both) and education (59 per cent).

Table 4.6 Successful outcomes at Exit stage				
Base: All family intervention families who each issue at Support Plan stage	had exited a family inter	vention and who faced		
	No longer had issue at			
	end of intervention			
Issue faced at Support Plan stage	(successful outcome)	Base ¹		
	%			
Crime and ASB				
Crime	65	886		
ASB	60	2,860		
Education (truancy / exclusion / bad				
behaviour at school)	57	2,103		
Family functioning				
Poor parenting (by either or both				
parents)	53	2,402		
Marriage, relationship or family				
breakdown	56	1,068		
Domestic violence (between any family				
members including parent to child, child				
to child, and child to parent)	65	1,018		
Child protection issues (of any kind,				
including neglect, emotional, physical or				
sexual abuse, and child protection	40	07/		
orders)	49	973		
Health				
Mental health	40	1,303		
Physical health	52	337		
Drug or substance misuse	50	1,165		
Drinking problem / alcoholism	56	1,028		
Employment (NEET family)	20	2,314		

Please note that the bases in this table related to the number of families who had a given issue at the Support Plan stage and for whom there was valid data at the Exit Stage and therefore vary between indicators.

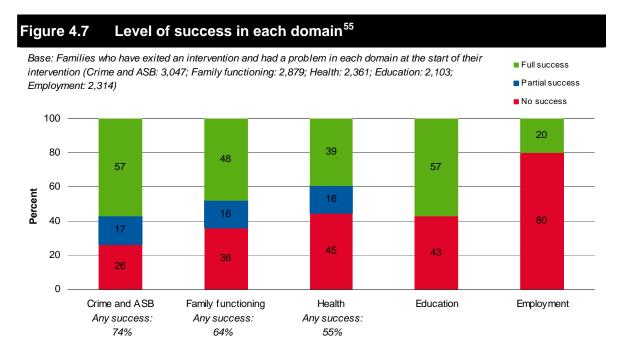
4.3 'Some' and 'full' success

The previous section reported on the families who completely resolved an issue or problem, we now compare the level of success families have achieved within each domain by categorising each family as having achieved full success, partial success or no success. As previously described, families that have achieved full success address all their risks and problems by the time they exit the intervention. Families that achieved partial success address and resolve some, but not all of their risks and problems in a given domain. For example, if a family was involved in both crime and ASB at the start of the intervention but was only involved in crime (and not any ASB) at the end of their intervention they are considered to have achieved a partially successful outcome. However, if the family was still involved in crime and ASB when they exited the intervention they would be classified as having achieved no success⁵⁴.

Figure 4.7 shows the level of success achieved in each domain. For example in the crime and ASB domain, 26 per cent of the 3,047 families involved in these activities at the start of the intervention (i.e. the Support Plan stage) were still involved in these activities when they left the family intervention (i.e. they did not improve at all and have been classified as having no success in this area). Seventeen per cent of these 3,047 families reduced the number of problems they had in this domain while working with a family intervention but were still involved in crime or ASB (partial success). The remaining 57 per cent of the 3,047 families completely addressed their problem/s in this area when they left the intervention (full success).

Families were most likely to achieve full or partial success in the domains of crime and ASB (74 per cent achieved any full or partial success), family functioning (64 per cent) and education (57 per cent; Figure 4.7). Families were least likely to achieve success in the employment domain; a fifth (20 per cent) of families improved by having at least one adult in education, employment or training at the end of their intervention whilst in the remaining 80 per cent of families this was still an issue for families when they left the intervention. These results are also very similar to those reported last year, except for the crime and ASB domain where a higher proportion of families have achieved any success (i.e. partial or full success) this year (74 per cent compared to 64 per cent in 2010). Whilst the proportions of families achieving full success in this domain are similar (57 per cent this year and 54 per cent in 2010) there has been an increase in the proportion of families achieving partial success, from 10 per cent to 17 per cent this year.

⁵⁴ This analysis focused on specific issues the family faced at the Support Plan stage and does not take into account new issues recorded at later stages of the intervention.



In the health domain 39 per cent of families achieved full success, 16 per cent were partially successful and 45 per cent had no success. The lower levels of success in relation to health outcomes are similar to those reported since these projects were set up in 2006 and are very similar to results reported in 2010. The lower performance on health may, to some degree, reflect the intransigence of health problems, such as drug and substance misuse, anxiety and depression as well as other chronic physical and mental health conditions.

Lower levels of success were also achieved in relation to employment with a fifth of families achieving success in this domain. The original evaluation of FIPs (White et al., 2008) gives an insight into the relatively disappointing results for the indicator on employment, and the lack of improvement on the number of families who continue to be workless. While family interventions prioritised getting young people into work, education or training, the qualitative findings showed that tackling these issues with parents tended not to be a primary focus of their work, at least in the early stages of the family intervention:

"Training and job opportunities did not seem to have been discussed with parents. When asked about the possibility of returning to work, parents generally said they had other issues that needed to be addressed first, such as drug and alcohol problems and their children's behavioural problems. However, on occasion parents said they had discussed the possibility of looking into training courses and work at a later date with their key worker. There were also parents who, when prompted, said they would like to get back into work, but reported that they had not been asked about this by their key worker. Exceptionally parents seemed unaware that this would be something their key worker could help them with." (White et al. 2008, pp88-89)

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⁵⁵ Please note that due to the education and employment domains only being comprised of one indicator it is not possible to achieve partial success in these domains.

This means that while improvement may be occurring amongst young people from family intervention families, unless problems in this area are addressed for adults too, the measures used in the employment and education domain will not identify any improvements in this area. Improving families' employment has also become more challenging in the current economic climate. Recently there have also been a number of new (or extended) funding programmes which try and address low employment, particularly amongst families with many complex problems and intergenerational worklessness. These programmes include Working Families Everywhere, Community Budget Exemplars, the European Social Fund and the Government's new Work Programme. In the current economic climate there is also a focus on measuring interim outcomes such as the steps families take to become 'work ready' such as preparing CVs, improving job search skills, practising interview skills and getting work experience through volunteering or other short-term work placements.

In the next chapter, we explore the factors associated with successful and unsuccessful outcomes for families in each of these domains.

4.4 Outcomes for young people and mothers

At the request of the Home Office (who partly funded the Youth Crime family interventions) and the Ministry of Justice (who partly funded the Women Offender family interventions) we were asked to undertake some analysis to look at the outcomes achieved by family interventions for young people and mothers involved in crime or ASB. This analysis is presented in sections 4.4.1 and 4.4.2.

4.4.1 Young people involved in crime or ASB

A total of 2,209 families (60 per cent of all families who had exited the intervention) had at least one young person aged 10 to 17 years who was involved in crime or ASB at the beginning of a family intervention. There was, on average, a 59 per cent reduction in the proportion of families with young people involved in crime and ASB.

The measure is an un-weighted average of the percentage reduction figures for:

- Crime: a 50 per cent reduction in the number of families with a young person involved in crime - from 27 per cent to 14 per cent (Table 4.7; a 14 percentage point reduction based on unrounded percentages);
- ASB: a 68 per cent reduction in the number of families with a young person involved in ASB - from 56 per cent to 18 per cent (Table 4.7; a 38 percentage point reduction).

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Table 4.7 Prevalence of families with young people with crime and ASB issues at the start and end of the intervention

Base: All family intervention families who had exited a family intervention

	Start of in	tervention	End of int	ervention
	Number of		Number of	
	families	%	families	%
Crime issues	996	27	498	14
No crime issues	2,679	73	3,177	86
Total number of families	3,675	100	3,675	100
ASB issue	2,069	56	672	18
No ASB issue	1,606	44	3,003	82
Total number of families	3,675	100	3,675	100

4.4.2 Mothers involved in crime or ASB

In 1,406 families (38 per cent of all families that had exited the intervention) the mother was involved in crime or ASB at the beginning of the intervention. There was, on average, a 53 per cent reduction in the proportion of families with a mother involved in crime and ASB.

The measure is an un-weighted average of the percentage reduction figures for:

- Crime: a 62 per cent reduction in the number of families where the mother has this issue- from 34 per cent to 13 per cent (Table 4.8); a 21 percentage point reduction);
- ASB: 43 per cent reduction in the number of families where the mother has this issue from 11 per cent to 6 per cent; a 5 percentage point reduction).

Table 4.8	Prevalence of far the start and end			crime and AS	SB issues at
Base: All fan	nily intervention fami	lies who had ex	ited a family ii	ntervention	
		Start of in	tervention	End of int	ervention
		Number of		Number of	
		families	%	families	%
Crime issues	3	1,249	34	472	13
No crime iss	ues	2,426	66	3,203	87
Total numbe	er of families	3,675	100	3,675	100
ASB issue		414	11	235	6
No ASB issu	ie	3,261	89	3,440	94
Total numbe	er of families	3,675	100	3,675	100

5 Factors associated with outcomes

In this chapter, we investigate the factors associated with the successful and unsuccessful outcomes for families described in the previous chapter. The analysis presented in this chapter allows us to:

- Identify the socio-economic characteristics of families who seem to have particularly good outcomes resulting from a family intervention, and conversely those families that do not do so well. This will enable us to identify whether some families might need different levels of support to others.
- Identify whether two features of the family intervention model (the duration and intensity of an intervention) affect the resulting outcomes. Duration is measured in weeks between start and end and intensity is measured in terms of weekly hours of support. This may help to inform practice decisions about the length of time family interventions work with families and the amount of contact time that family intervention staff spend with families

This analysis uses statistical modelling (logistic regression) to identify the characteristics of families and the interventions they received that are predictive of positive outcomes. The models include all possible predictors simultaneously so we are able to distinguish between factors that genuinely do predict outcomes after taking all other observed factors into account. In cases where two factors appear to be strongly predictive of a successful outcome but are also strongly related to each other, the model will suggest which of the two factors has the stronger association with the outcome.

The regression models used for the analysis in this chapter allow us to explore associations between a range of family characteristics, features of a family intervention and the outcomes observed for families. It is important to bear in mind throughout this chapter, however, that the models identify predictors of successful outcomes and not necessarily direct causal factors.

In the models presented we have taken into account the number of problems a family has at the start of their intervention as this could have a bearing on the degree of success that family interventions have (as it may be easier to solve a problem and 'achieve some success' with families who have multiple problems). It is important to acknowledge that a statistical phenomenon known as 'regression to the mean' may have a bearing on the level of success family interventions report. Essentially if regression to the mean occurs then this would suggest that families with multiple problems at the beginning of the intervention (i.e. they have a large number of problems) are likely to improve to some degree at the outcome stage, independent of whether the family intervention has an effect – because the natural course of events will mean that extreme values or circumstances are unlikely to be sustained over time.

The bases for the analyses presented in this chapter are all families who exited on or before 31st March 2011 and who were identified as having the specific problem when their Support Plan was put in place. This means that the bases vary for the different domains and individual measures.

In section 5.1, we explore the factors associated with the five key outcome domains:

- Crime and ASB
- Education
- Family functioning
- Health
- Employment.

These were described in more detail in chapters 2 and 4. In section 5.2, we consider the factors associated with the individual indicators comprising each domain. Section 5.3 draws some broad conclusions from the analysis conducted in this chapter.

Key findings from this chapter include:

- The duration of the family intervention was associated with successful outcomes for every individual indicator or problem across the domains.
- There was also an association between the length of the intervention and achieving success in all of the five domains: crime and ASB, family functioning, employment, education and health. The longer families worked with a family intervention there was a slightly greater chance that they achieved a successful outcome in these domains.
- The analysis also identified a number of socio-economic characteristics associated with an increased chance of success in the five domains which help us identify where families might need differing levels of support to others.
- Non-white families and workless families were less likely to achieve full success in the family functioning domain. Whereas families who were in debt at the beginning of the intervention were more likely to achieve success in this domain.
- Families with younger children appeared to have an increased chance of success
 addressing problems connected with crime and ASB at the start of the intervention.
 Whereas families with at least one child subject to a child protection plan were less
 likely to achieve success on crime and ASB, education, employment and health.
- Families with a greater number of children were less likely to achieve full success in relation to family functioning, education and employment.
- Families with older children were more likely to achieve success in getting at least one adult in the family into work, however these families were less likely to achieve

success relating to health.

- Families being supported by a family intervention focused on reducing child poverty were less likely to achieve success relating to health.
- Families with at least one disabled person and those with nobody (aged 16 or over) in education, employment or training were less likely to achieve success in the health domain.

5.1 Factors associated with progress in the four domains

As explained in chapter 4, a successful outcome for a given domain is calculated by comparing the number of problems or issues a family was recorded as having at the beginning of the intervention (at the Support Plan stage) with the number they had at the end of the intervention.

We created two sets of models to explore the factors associated with successful and unsuccessful outcomes in each of the five key domains. The first set of models identifies the predictors of families achieving partial success by comparing families who achieved partial success in the domain (i.e. they resolved some but not all of their problems in that domain) with families who achieved no success. The second set of models identifies the predictors of families achieving full success by comparing families who achieved full success in the domain (i.e. resolved all of their problems in that domain) with those who achieved no success. The statistically significant results from both sets of models are described and discussed below.

In each domain the number of problems reported for a family at the Support Plan stage was positively associated with partial success. That is, families who started with more problems were found to be more likely to have reduced their number of problems at the point of Exit than families starting with fewer problems. As previously explained this may be because it is easier to solve at least one of a number of problems for a family who has a large number of problems, and therefore achieve partial success. However, it may also be due to regression to the mean.

5.1.1 Crime and ASB

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The logistic regression models for successful and unsuccessful outcomes in the domain of crime and ASB produced the following significant results (see Appendix B, Table B.19 for full details of the odds ratios⁵⁶):

Results from the logistic models are expressed as odds ratios. Odds ratios describe the chances of a given outcome for one category of families as compared to another 'reference' or comparator category of families. So for example the reference category could be a "working household" and the odds ratio for a "workless household" is the chances of a workless household achieving the given outcome compared to the reference category which is a working household. An odds ratio greater than 1 means that the category of family is associated with an *increased* likelihood of the outcome compared to the reference category. Similarly, an odds ratio of less than 1 means that the category of family is associated with a *reduced* likelihood of the outcome compared with the reference category. Some of the predictors in the models are continuous

Families were more likely to achieve success relating to crime and ASB if they:

- Were involved in higher levels of crime or ASB at the beginning of the intervention (full success only; odds ratio per issue increase: 1.91);
- Had a longer family intervention (full success only; odds ratio per month increase: 1.04).

Families were less likely to achieve success on crime and ASB if they:

- Had a greater number of risk factors⁵⁷ at the Support Plan stage (full success only; odds ratio: 0.93);
- Had any children subject to a child protection plan (full success only; odds ratio: 0.49);
- Received more hours of support per week (full success only; odds ratio per hour increase: 0.99).

5.1.2 Education

The logistic regression models for successful and unsuccessful outcomes in the domain of education produced the following significant results (see Appendix B, Table B.20 for full details of the odds ratios):

Families were *more likely* to achieve success relating to education when they:

- Had fewer children (odds ratio: 0.90 per child aged under 18 years);
- Received a longer intervention (odds ratio: 1.04 per month increase).

Families were *less likely* to achieve success relating to education when they had at least one child subject to a child protection plan (odds ratio: 0.34).

5.1.3 Family functioning

As described in chapter 2, the domain of family functioning comprises poor parenting (by either or both parents), marriage, relationship or family breakdown, domestic violence and child protection issues (of any kind, including neglect, emotional, physical or sexual abuse, and child protection orders).

The logistic regression models for successful and unsuccessful outcomes in the domain of family functioning produced the following significant results (see Appendix B, Table B.21 for full details of the odds ratios):

(e.g. the number of children in the family) rather than binary (e.g. producing a yes or no answer). In these cases, odds ratios represent the chances of the outcome in question being associated with a one-unit increase in the factor (e.g. an increased likelihood associated with each additional child).

⁵⁷ This refers to a specific question about certain issues the family faced at the Support Plan stage, which were considered to put them at particular risk of ASB and other key behaviours and difficulties targeted by family interventions. These issues are listed in Appendix A, under the heading 'Support Plan stage'.

Families were *more likely* to achieve success relating to family functioning when they:

- Had more issues relating to family functioning at the start of the intervention (partial success only; odds ratio: 3.43);
- Were in debt at the start of the intervention (full success only; odds ratios: 1.32);
- Had a longer intervention (the odds of partial or full success increase by a factor of 1.07 and 1.08 respectively for every extra month of intervention).

Families were less likely to achieve success relating to family functioning when they:

- Were from a non-White ethnic background (full success only; odds ratio: 0.65);
- Had a greater number of children aged under 18 (full success only; odds ratio: 0.91 per child increase);
- Included no adult who was working (full success only; odds ratio: 0.63).

5.1.4 Health

The logistic regression models for successful and unsuccessful outcomes in the domain of health produced the following results (see Appendix B, Table B.22 for full details of the odds ratios):

Families were more likely to achieve success in the health domain when they:

- Had more health issues at the start of the intervention (odds ratio for partial success: 7.64, full success: 1.22);
- Were in debt at the start of their intervention (partial success only; odds ratio: 1.77);
- Received a longer intervention (odds ratio per month increase: 1.07 for partial success and 1.06 for full success).

Families were less likely to achieve success in the health domain when they:

- Had at least one child was subject to a child protection plan (odds ratio: 0.37 for partial success and 0.40 for full success);
- Had at least one family member with a disability (full success only; odds ratio: 0.76);
- Included nobody aged 16 or over in education, employment or training (full success only; odds ratio: 0.57);
- Worked with a Child Poverty family intervention (compared to those working with ASB interventions) (full success only; odds ratio: 0.54).

5.1.5 Employment

The logistic regression models for successful and unsuccessful outcomes in the employment domain produced the following significant results (see Appendix B, Table B.23 for full details of the odds ratios):

Families were more likely to achieve success relating to employment when they:

- Were from a non-White ethnic background (odds ratio: 1.78);
- Had older children (odds ratio: 1.14 per year increase in age of youngest child);
- More children (odds ratio: 1.24 per child aged under 18 years);
- Had a longer intervention (odds ratio: 1.08 per month increase).

Families were *less likely* to achieve success relating to employment when they had at least one child subject to a child protection plan (odds ratio: 0.42).

5.2 Factors associated with outcomes for individual issues or problems

Turning now to consider the factors associated with the individual indicators comprising each domain (reported in section 5.1), we created a series of regression models. These models compare families who, for each indicator, still had the problem when they exited the family intervention (those with an unsuccessful outcome) with those who had completely resolved the problem at Exit (those with a successful outcome).

The duration of the family intervention was associated with successful outcomes for every individual problem across the domains.

The other factors associated with successful or unsuccessful outcomes in relation to each individual problem are discussed in the remainder of this section.

5.2.1 Crime and ASB

The logistic regression models for outcomes in relation to individual measures in the domain of crime and ASB produced the following significant results (see Appendix B, Tables B.24 and B.25 for full details of the odds ratios):

Families involved in crime were *more likely* to achieve success when they:

- Were from a mixed white and non-white ethnic background (compared to all-white families; odds ratio: 1.98);
- Had a longer intervention (odds ratio per month increase: 1.04).

Families involved in crime were less likely to achieve success when they:

- Had at least one child subject to a child protection plan (odds ratio: 0.55);
- Received a Youth Crime intervention, compared to families receiving an ASB intervention (odds ratio: 0.57).

Families involved in ASB were *more likely* to achieve success when they:

- Received a longer intervention (odds ratio per month increase: 1.04).
- Had more contact hours each week towards the end of the intervention (odds ratio of 0.99 per hour increase per week).

Families involved in ASB were less likely to achieve success when they:

- Had older children (odds ratio per one year increase in the age of the youngest child: 0.96);
- Had at least one child subject to a child protection plan (odds ratio: 0.51);
- Were involved in crime at the start of the intervention (odds ratio: 0.62);
- Faced a greater number of risk factors⁵⁸ at the Support Plan stage (odds ratio per one-factor increase: 0.94);
- Received a Child Poverty or Housing Challenge intervention, compared to an ASB family intervention (odds ratios: 0.62 and 0.59 respectively).

5.2.2 Family functioning

The logistic regression models for outcomes in relation to individual measures in the domain of family functioning produced the following significant results (see Appendix B, Tables B.26 to B.29 for full details of the odds ratios):

Families with **poor parenting** were *more likely* to achieve success if they received a longer intervention (odds ratio per month increase: 1.05).

Families with poor parenting were less likely to achieve success when they:

- Had at least one child subject to a child protection plan (odds ratio: 0.31);
- Included no adult in education, work or training (odds ratio: 0.68);
- Were facing a greater number of risks at the start of the intervention (odds ratio per one-factor increase: 0.95).

Families with relationship problems were *more likely* to achieve success if they received a longer intervention (odds ratio 1.07 per month increase).

Families with at least one child subject to a child protection plan were *less likely* to achieve a successful outcome for relationship and family breakdown problems (odds ratio: 0.44).

Families with domestic violence issues were much more likely to achieve success if they received a longer intervention (odds ratio per month increase: 1.12).

Families where there were **domestic violence** issues were *less likely* to achieve success when they had at least one:

- Child subject to a child protection plan (odds ratio: 0.33).
- Person involved in crime at the start of the intervention (odds ratio: 0.64).

⁵⁸ This refers to a specific question about certain issues the family faced at the Support Plan stage, which were considered to put them at particular risk of ASB and other key behaviours and difficulties targeted by family interventions. These issues are listed in section 1.3, under the heading 'Support Plan stage'.

A longer duration of family intervention was the only factor associated with a successful outcome in relation to **child protection** (odds ratio 1.07 per month increase).

5.2.3 Health

The logistic regression models for outcomes in relation to mental health, physical health, drug or substance and alcohol misuse produced the following significant results (see Appendix B, Tables B.30 to B.33 for full details of the odds ratios):

Families with **mental health** conditions were *less likely* to achieve success when they had:

A longer duration of family intervention was associated with a successful mental health outcome (odds ratio: 1.03 per month increase).

- Older children (odds ratio per one year increase in the age of the youngest child: 0.95);
- At least one child subject to a child protection plan (odds ratio: 0.56);
- At least one family member with a disability, compared to families with no disabilities (odds ratio: 0.75);
- Nobody aged 16 or over in education, employment or training (odds ratio: 0.58).

Families with **physical health** conditions were *more likely* to achieve success when:

- The youngest parent was aged 26 to 39 years, compared to families where the youngest parent was aged 19 to 25 years (odds ratio: 3.65);
- Had a longer family intervention (odds ratio: 1.15 per month increase).

Families with physical health conditions were less likely to achieve success when they:

- Had at least one child subject to a child protection plan (odds ratio: 0.26);
- Were involved in crime at the start of the intervention (odds ratio: 0.34).

A longer duration of family intervention was associated with a successful outcome in relation to drug or substance misuse (odds ratio 1.04 per month increase).

Families where at least one child was subject to a child protection plan were *less likely* to achieve a successful outcome in relation to **drug or substance misuse** (odds ratio: 0.42).

The chances of achieving a successful outcome in relation to alcohol misuse increased with the length of intervention received (odds ratio per month increase: 1.05).

Families were less likely to achieve success relating to alcohol misuse when:

- The younger parent was aged 40 or over, compared to when the younger parent was aged 16 to 25 years (odds ratio: 0.47);
- At least one child was subject to a child protection plan (odds ratio: 0.29).

6 Sustainability of successful outcomes

We now have a strong body of evidence illustrating the success family interventions can have at the point families exit. This chapter looks at the degree to which these successful outcomes are sustainable in the longer term. In order to explore this we built in a follow-up stage to assess whether families are still facing similar issues nine to 14 months after exiting a family intervention. At this point family intervention workers are asked to complete another round of questions on the FIIS. This information may be obtained through their own continued contact with the family or via other agencies. Inevitably, family intervention workers may have lost contact with families and cannot track their progress or provide information at this stage. However, there are enough data available to draw some cautious conclusions about the extent to which outcomes achieved during the course of the family intervention have been sustained over time and these are reported in this chapter. A comparison of families for whom this data was available, and those for whom this was not provided, showed that families for whom no data were available were less likely to achieve successful outcomes on some indicators during the intervention.

Key findings from this chapter include:

- Post-intervention data were available for 470 families⁵⁹, providing information about whether they have sustained the outcomes they achieved during the intervention nine to 14 months after leaving and building on the 2010 analysis which was based on 283 families.
- Despite efforts to stay in touch with families and keep informed of their progress (via other agencies), family intervention workers are not always able to provide data after families have left a family intervention.
- Families who were not followed up tended to have achieved less successful outcomes, particularly relating to involvement in ASB, poor parenting; marriage, relationship or family breakdown.
- Despite the data leaning towards families with more positive experiences of the family intervention we can draw some cautious conclusions.

Sustainability of outcomes (section 6.1)

Families were more likely to sustain a successful outcome in the family functioning, crime and ASB, and education domains:

• 84 per cent of the families followed up sustained their outcomes in the family

 $^{^{59}}$ This is out of a total of 775 families that were eligible for the Post-intervention stage.

functioning domain nine to 14 months after leaving a family intervention;

- 71 per cent of the families followed up sustained their outcomes in the crime and ASB domain nine to 14 months after leaving the intervention;
- 89 per cent of the families followed up sustained their outcomes relating to education;
- A lower proportion of families had sustained their outcomes in the health domain (61 per cent);
- Results from the families followed up in relation to employment indicate that outcomes are sustained (84 per cent), however this should be treated with caution due to the small number of families for whom these data were available.

Post-intervention data was submitted for a total of 470 families, building on the analysis of 283 families in the 2010 report⁶⁰. Before running the main analysis to look at the sustainability of outcomes we carried out some analysis based on a sample of 305 families who were eligible for the follow-up stage, but for whom no data were available. This allows us to assess whether there are any systematic differences between the 470 families that were followed up after exiting with the 305 additional families that intervention workers were unable to provide information about (i.e. to see whether the sample who were followed up are biased in any way). This analysis showed that:

- There were very few differences between the two samples of families in terms
 of their characteristics or the problems they presented with at the Support Plan
 stage;
- At the Exit stage families who were not followed up were less likely to have achieved successful outcomes in relation to certain indicators. Specifically, they were significantly less likely to have achieved a successful outcome in relation to ASB and marriage, relationship or family breakdown.

These results may not be especially surprising, as we might have predicted that families with poorer outcomes would be less likely to keep in touch with family interventions. Nevertheless, it is important to bear in mind when interpreting the findings in this chapter that families with more positive experiences of family interventions are over-represented in the sample analysed.

Families were included in the analysis if they achieved full success in at least one domain when they exited a family intervention (i.e. they had resolved all problems at Exit in a domain where they had at least one problem at the Support Plan stage). The relatively small sample of families eligible for analysis in this chapter limits the power of the statistical tests undertaken. Therefore, the modelling described in section 6.2 is likely only to highlight the most dominant associations between potentially predictive factors and outcomes.

 $^{^{60} \ \}text{NatCen, November 2010 } \\ (\underline{\text{https://www.education.gov.uk/publications/eOrderingDownload/DFE-RR044.pdf}}).$

6.1 Which successful outcomes were sustained

Table 6.1 shows the proportions of families who sustained successful outcomes⁶¹ nine to 14 months after exiting a family intervention in relation to the five domains of family functioning; crime and ASB; health;education; and employment. In 2010 we looked at the sustainability of outcomes for the first time and found more success relating to family functioning (84 per cent of families had sustained success) and crime and ASB (71 per cent). Lower proportions of families had sustained their outcomes in the health (63 per cent), and education and employment (34 per cent) domains⁶². It is important to note that due to the relatively small base sizes for these measures of sustainability we would expect to see some changes in these figures compared to last year.

The domains in which families were most likely to have sustained a successful outcome in 2011were education (89 per cent) and family functioning (84 per cent), followed by crime and ASB (71 per cent) and health (61 per cent). Due to the small number of families included in the base for employment (65 families) the level of sustained success (82 per cent) should be treated with caution for this domain. However, as explained in the introduction to this chapter the families for whom this follow-up data were available were more likely to have achieved successful outcomes. The pattern of these findings are broadly similar to the results reported in 2010 for family functioning (84 per cent in 2010), crime and ASB (71 per cent) and health (63 per cent).

Table 6.1	Whether successful outcomes sustained 9-14 months after end of a family intervention				
Base: All family intervention families who achieved full success in each domain at the point of Exit and for whom data was entered into the FIIS 9-14 months later					
		Sustained successful			
Domain		outcome	Base		
		%			
Crime and A	SB	71	311		
Education		89	149		
Family funct	ioning	84	259		
Health		61	143		
Employmen	t	82	65		

⁶¹ A family is classified as having sustained success in a given domain if they faced at least one issue in that domain at Support Plan stage; no issues in that domain at the point of Exit; and continued to face no issues in that domain nine to 14 months after Exit. In other words, for the purposes of this analysis, this is sustained 'full success', as defined in section 4.2. However, please note that the Post-intervention question about health is less specific than that asked at other stages which may mean the sustainability of health outcomes is underestimated.

⁶² Education and employment were in one domain in the 2010 report.

6.2 Factors associated with sustainability

We carried out statistical modelling (logistic regression analysis) to try and identify which factors recorded at the Support Plan stage were associated with families sustaining successful outcomes at the Post-intervention stage. The potential factors tested are shown in Table 6.2.

Table 6.2 Factors included in sustainability of outcomes models

The number of individual measures in the relevant domain that the family were experiencing difficulties with at the Support Plan stage

Whether they are a lone parent or two-parent family

Whether all family members are white; all family members are non-white; or the family includes both white and non-white members

The age of the youngest child

The age of the youngest parent (25 or under; 26-39; or 40+)

The number of family members aged under 18

Whether anyone in the family has SEN or other special needs, with or without a statement

Whether anyone in the family has a disability

Whether all adults aged 16 or over in the family are NEET

Whether the household is workless

Whether the family are in debt

The number of risk factors faced by the family at the Support Plan stage (as measured by a specific question in the FIIS about number of risk factors⁶³)

The average weekly contact hours between the family intervention and the family

The length of time the family intervention worked with the family

This analysis identified few significant associations between predictor factors and sustained success. This may be due to a generally low level of variability between families, and the small sample sizes for some domains. The results from the analysis are summarised here; full details of the odds ratios can be found in Appendix B (Tables B.34-B.37).

- In the family functioning domain families with children who had Special Educational Needs (SEN) were much less likely to have sustained success (odds ratio: 0.19).
- In the crime and ASB domain families with at least one person with a disability were more likely to have sustained a successful outcome than other families (odds ratio: 2.52).

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⁶³ This refers to a specific question about certain issues the family faced at the Support Plan stage, which were considered to put them at particular risk of ASB and other key behaviours and difficulties targeted by family interventions. These issues are listed in Appendix A, under the heading 'Support Plan stage'.

- In the health and education domains no factors were significant predictors of sustained success, probably because information was only provided for a small number of families limiting the power of statistical tests⁶⁴.
- In the employment domains there were too few families (65) to carry out this analysis.

 $^{^{\}rm 64}$ 84 families and 91 families for health and education respectively.

7 Impact assessment

Until now the effectiveness of family interventions has been assessed by comparing outcomes at the start and the end of the intervention, showing which outcomes have improved (e.g. families presenting with ASB problems reduced by 60 per cent). However, some change (either better or worse) would be expected to occur without a family intervention; so a control or comparison group is needed to judge what would have happened in these circumstances. Information about how this control group fare without an intervention enables us to establish how much of the improvement observed for families working with family interventions is really due to the intervention and not some other factor (i.e. the 'net impact'). In the example above the 'gross impact' on ASB families is 60 per cent; if we knew that for similar families that didn't get the intervention, reductions in ASB improved slightly - say by 10 per cent - we could say that the net impact is actually that the reduction in families presenting with ASB is 50 per cent. That comparison also enables us to estimate accurately the net savings to local partners that are directly attributable to the intervention.

This chapter reports on the first impact study of family interventions – specifically the impact of FIPs that focus on ASB rather than the other variants. It is based on a small number of comparison families as it was not possible to track a larger number throughout the study. The families were matched by using characteristics of the comparison sample to match back to the family intervention population (a bigger study could have matched from family intervention population to the comparison sample, as is usually done). There were also some differences in the profile of comparison families (e.g. the comparison sample includes a higher proportion of families who own their home).

Despite these issues, the study provides clear, statistically significant, evidence of the net impact of ASB FIPs on families involved in crime or ASB. Around two-thirds of 'FIP families' successfully reduced their criminal or anti-social behaviour, compared to around a third in the comparison group of families. With a larger sample, we are reasonably confident that the robustness of the results relating to education and employment would be significant as well.

With this new impact assessment, the quality of the evaluation moves up from level 2 to a strong level 3 on the (five level) Maryland Scale. This is about as high as we could get without using a larger sample size (and therefore more statistical matching, as at level 4) or a randomised control trial (level 5).

Key findings from this chapter include:

- This impact study provides clear evidence that ASB FIPs reduce crime and ASB amongst the families they work with.
- There is also evidence, albeit not statistically significant, that ASB FIPs help reduce education and employment problems amongst families.
- There is however limited evidence that ASB FIPs generate better outcomes than other non-FIP interventions on family functioning or health issues, although FIPs do appear to be at least as effective as these alternatives.

This chapter presents an overview of the methods used for the assessment (Section 7.1), the key findings (Section 7.2) and discusses the possible explanations for the findings (Section 7.3), based on a small number of interviews with staff who provided the non-FIP comparison data. Section 7.4 includes further discussion of how the results should be interpreted.

7.1 Impact assessment design

In 2009 11 LAs that were not running an ASB FIP agreed to identify, and provide data on, a sample of families in their authority who would have been eligible for an 'ASB FIP', to act as our comparison group (comparison families). Tracking these families over time allows us to assess how families would fare under 'non-FIP' conditions. Comparing change over time for these non-FIP families with the change over time experienced for similar FIP families has allowed us to estimate the added value of the FIP. The study was restricted to 'ASB FIP eligible' families as this was the only FIP variant that was well established at the time this study was carried out.

The comparison families were tracked at two points in time: at the identification stage (i.e. baseline), and again around nine months later. The data were collected in a paper questionnaire and covered a range of questions about the family characteristics and presenting risks and issues, replicating key data from the FIIS at the Support Plan and Exit stages.

Baseline data were collected for a total of 93 families from eight LAs. There was however considerable loss to the sample 65 at the nine-month follow up stage and data were returned for 56 of the original 93. Where follow-up questionnaires were returned not all questions were completed. Feedback from staff in the comparison areas suggested that this was because detailed information about families was not available in one central place and staff had problems collating the data on our behalf. In each of our analyses we have restricted the sample just to those cases where we have complete data, on the

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⁶⁵ There were a number of reasons for this but staff changes within the local authority was a key one.

grounds that this is the approach least likely to introduce bias. For more information about how this part of the study was conducted please see Appendix D.

7.2 Key findings

In line with the 2010 report the impact analysis focuses on the four domains of interest (the education and employment domain was subsequently separated for the analysis in this report, resulting in five domains) (see Table 7.1). Each of these domains is, in turn, made up of a number of indicators, or 'issues' relating to the key outcome domain of interest⁶⁶. The outcome per domain is defined as a three-category variable: no improvement since baseline, partial improvement, full improvement. Full improvement is achieved if all issues are resolved between the Support Plan and Exit stages; partial improvement is achieved if the number of issues is reduced but at least one of the issues is still identified as a problem for the family. 'No improvement' means that the family starts and ends with the same number of issues in the domain.

⁶⁶ Please note that the domains in this chapter are based on those used in the 2010 evaluation report (Dixon et al., 2010) and so look at outcomes for education and employment within one domain.

Table 7.1 Domains of interest and individual indicators			
Domain	Individual Issue		
Crime and anti-social	Criminal activity		
behaviour involvement	Involvement in ASB		
	Truancy, exclusion or bad behaviour at school		
Education and			
employment	No adult in education, employment or training		
	Poor parenting		
Family functioning	Marriage, relationship or family breakdown		
	Domestic violence		
	Child protection issues		
	Mental health risk factors		
	Physical health risks in the form of poor diet and		
Health	lack of exercise		
	Drug problems		
	Alcohol problems		

In order to control for the differences observed on key characteristics between the comparison group and ASB FIP families we matched the 56 comparison families to FIP families⁶⁷ who have the same distribution of characteristics and presenting problems at the baseline stage. This gives a much fairer estimate of the impact of the FIP by providing an estimate of how much better (or worse) the outcomes for the 56 comparison families would have been *if* they had worked with a FIP⁶⁸. The matching process is described in detail in Appendix D. Having matched the FIP and comparison families, a comparison of outcomes suggests, very clearly, that ASB FIPs reduce crime and ASB issues amongst the families they work with. In addition, within our sample, education and employment outcomes are notably, although not statistically significantly, better for a FIP. However, there is little evidence that ASB FIPs generate better outcomes than 'non-FIP' interventions on family functioning or health issues. The following sections present the detailed findings for each domain.

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⁶⁷ There were 2,630 ASB FIP families included in this analysis.

This is a different approach to a standard intervention versus comparison group study. Under the standard model each member of the intervention group would be matched to one or more members of the comparison group, and the aggregate matched comparison group would then give an estimate of the outcomes for the whole of the intervention group in the absence of the intervention. But this approach is only possible if all (or at least most) of the intervention group can be matched to at least one individual in the comparison group. In the current study, the comparison group of 56 is far too small to generate suitable matches for the whole of the FIP intervention group so, instead, we have turned the impact question around to ask what would the outcomes of the comparison group be if they had had the FIP intervention. This involves finding a match (or matches) for each of the 56 from the much larger pool of over 2000 FIP cases, which is relatively straightforward.

7.2.1 Impact on crime and ASB involvement

Table 7.2 presents the outcomes for the comparison sample (column 1) alongside the outcomes for the matched FIP sample (column 2). This second column represents what we estimate the outcomes for the non-FIP group would have been had these families worked with a FIP. The difference, in the final column, gives the estimated impact of a FIP in percentage point terms. The sample for the comparison group is just 45 (rather than the full non-FIP sample of 56) because it is restricted to those families who, at the baseline stage, were known to be involved in criminal or ASB behaviour and for whom we have full follow-up information on their criminal and ASB outcomes.

What the figures suggest is that without a FIP, around one third (33 per cent) of the comparison families show full or partial success on ASB and crime issues over a period of around nine months. The remaining two-thirds (67 per cent) do not appear to resolve these issues and so have achieved no success. With an ASB FIP however, the percentage showing improvement (full or partial success) is around 30 percentage points higher at 63 per cent. In other words, with a FIP, 30 per cent of families show improvement who otherwise would not. Even on this small sample size this is a statistically significant difference (p=0.004 approximately).

Table 7.2 Impact of FIP on crime and ASB outcomes					
	Outo	Outcome			
	Comparison	Matched FIP			
	families	group			
Level of success	%				
Full success	[29]	59	+30		
Partial success	[4]	4	0		
No success	[67]	-30			
Base	[45]	226			

7.2.2 Impact on education and employment outcomes

The evidence of the impact of a FIP on education and employment outcomes is more ambiguous than the findings for the other three domains. There appears to be a fairly large, and positive, impact of FIPs on this domain, with just 30 per cent of comparison families showing improvement on this domain, and with a rise in this figure to 51 per cent with a FIP. However, because the sample size of comparison families in this analysis is so small, at 33, there is a possibility that this difference is random variation in the data rather than a genuine FIP impact. The p-value for the difference is estimated at 0.07, so not below the standard 0.05 cut-off for statistical significance. Given the magnitude of the impact estimate and given that the p-value is relatively small albeit above the normal threshold, we conclude that there is *likely* to be an impact of a FIP on this domain. Our best estimate of this impact is about 20 percentage points, but a larger study would be needed to confirm the finding.

Table 7.3 Impact of FIP on education and employment outcomes						
	Outc	Outcome				
	Comparison families	Matched FIP group				
Level of success	%	%				
Full success	[27]	37	+10			
Partial success	[3]	14	+11			
No success	[70]	49	-21			
Base	[33]	176				

7.2.3 Impact on family functioning

The impact of FIPs on family functioning is considerably smaller than for crime and ASB. Although in our sample we estimate that with an ASB FIP a high percentage of families would show improvement (column 2: 61 per cent full success, 13 per cent partial success), these improvement figures are not much higher than the level of success reported for our comparison sample (column 1: 55% full success, 19% partial success). It appears that FIPs are more likely to generate 'full' rather than 'partial' success, but the sample size for this analysis, at just 31 cases, is far too small to draw any firm statistical inference. The difference is not statistically significant and a much larger study would be needed to test this.

The explanations for how the comparison families managed to achieve almost the same level of success as the FIP families are addressed in section 7.3.

Table 7.4 Impact of FIP on family functioning outcomes						
	Outc	Outcome				
	Comparison families	Matched FIP group				
Level of success	%	%				
Full success	[55]	61	+7			
Partial success	[19]	13	-6			
No success	[25]	27	+1			
Base	[31]	272				

7.2.4 Impact on health outcomes

The sample of comparison families who were identified at baseline as having health-related problems or risk factors is extremely small at just 20, and there is very little expectation of being able to detect a FIP impact with a sample of this size. Taking the 'impact' column of the table below at face value, ASB FIPs slightly reduce the prevalence of health-related problems, but by no more than around five percentage points. This difference is again far from statistically significant and is very probably just random variation. The safer conclusion to draw is that we have no good evidence from this study that ASB FIPs are better at dealing with health issues than more standard interventions.

Table 7.5 Impact of FIP on health outcomes					
	Outo	Outcome			
	Comparison	Matched FIP			
	families	group			
Level of success	%	%			
Full success	[45]	38	-7		
Partial success	[10]	22	+12		
No success	[45]	40	-5		
Base	[20]	161			

7.3 Explaining the findings

In order to help explain the pattern of impacts emerging from the study, we interviewed the key contact person from 4 of the participating comparison group areas. These interviews aimed to address:

- What happened to families that we were unable to follow up so we can compare whether their outcomes were better or worse than the families for whom outcome data was returned:
- What interventions the selected families received in lieu of an ASB FIP.

The first of these questions was included as a bias-check. If the families for whom we did not receive follow-up data achieved much better outcomes, then their exclusion would underestimate the rate of improvement amongst non-FIP families, and over-estimate the impact of ASB FIPs. In practice the response we have from the interviews suggests that the data was missing as the respondent did not have access to the relevant records (either because the family had moved or for other, less clear, reasons). The contacts described some families with missing outcome data as probably still having considerable issues so the concern that *all* or most of these cases would be 'improved families' seems unfounded. Although there is still a risk of bias because of the missing data, it appears unlikely that this bias is very severe. The direction of any such bias remains somewhat unclear.

The interviewees were able to contribute considerably more on the nature of the interventions that the non-FIP families received in lieu of a FIP. The range of alternative interventions / workers named included parenting programmes, Prospects, youth support, Multi Systemic Therapy, Intensive Supervision and Surveillance Programme (ISSP), ESCAPE parenting programme, the work of Education Welfare and Reintegration Officers, home school family workers, as well as engagement with social services and other statutory agencies. Two themes were particularly striking:

 Although the interviewees described some interventions targeted at youth ASB, it was noted that these interventions work with individuals rather than the whole family. This may explain the relative success of the ASB FIPs on this domain. • It appears (although we cannot put a figure on this) that a number of the comparison families took up parenting programmes over the study period. This, combined with the other interventions received by these families, seems the most plausible explanation as to the high levels of improvement around family functioning reported for the non-FIP families. If the 'success' of FIPs around family functioning outcomes is largely attributable to the parenting work and programme included in the intervention then it is understandable that a non-FIP group undertaking similar programmes will show similar levels of success.

The interviews did not generate any strong explanations as to why FIPs appear to have an impact on education and employment outcomes, although a key difference is likely to be the actual physical presence of an intervention worker at the family home when the children are due for school, helping to reduce rates of truancy. Nor do we have a strong explanation for the lack of impact on health outcomes.

7.4 Conclusions

We recommend that the estimates of impact we have presented in this chapter be treated as approximations rather than exact representations for the following reasons:

- The very small sample size of the comparison group, especially for some of the domains of interest. The study was intended to be considerably larger but gaining the co-operation of LAs proved more difficult than anticipated.
- The large percentage of families for whom we don't have any follow-up data. The
 problems of potential bias that this presents are described above, and while we have
 some reassuring evidence that the risk of bias is not high, the risk of some bias still
 remains.
- We cannot be entirely sure about the accuracy of reported outcomes. Staff in the
 comparison areas completed the data on outcomes as well as they were able to, but
 there were some reports of uncertainty about exactly how far families had progressed.
 The role that a FIP key worker plays coordinating the involvement of different services
 engaging with individual families is, of course, one of the advantages that the family
 intervention model offers, so the problem is far less acute for the FIP families.
- And finally, there has been criticism about the subjective nature of some of the
 outcome measures on the FIIS which may encourage FIP workers to exaggerate good
 outcomes for families. In order to minimise this risk of this, family intervention workers
 are instructed to only provide information about issues or risks facing families for
 which they have specific evidence but this may result in overestimating the impact
 results presented in this report.

Although we have identified a large number of potential problems, the study nevertheless represents the first serious attempt to detect the impact of ASB FIPs, distinguishing between change in outcomes for families that is attributable to this intervention from

change that would have occurred under a non-FIP model. The pattern and magnitude of impacts we have found is plausible, and fits well with expectations of what FIPS can and should try to achieve. A larger study that addresses some of the problems listed above would give more definitive estimates, but in the absence of that, the analysis in this chapter gives a useful first approximation of impact.

8 Conclusions

A network of Family Intervention Projects (FIPs) was set up in January 2006 to work with challenging and anti-social families. The initial focus of these projects was to address their anti-social behaviour so as to prevent them becoming homeless and their children being taken into care. Subsequently the model was rolled out to target families who were living in poverty and who were affected by inter-generational unemployment and families with children at risk of offending. In March 2011 there were 117 ASB family interventions, 149 Youth Crime family interventions, 43 Child Poverty family interventions, 60 Housing Challenge family interventions and 16 Women Offender family interventions across England that had submitted data about families in the online monitoring system.

This report has provided further evidence of how effectively family interventions are helping some of the most troubled families to improve their circumstances and achieve positive, sustained outcomes in many areas. The evidence is based on very detailed monitoring data which family intervention staff record at different stages of a family intervention.

In this final chapter we reflect on the key messages from this report.

8.1 Key findings

By 31st March 2011, 12,850 families had been referred to a family intervention. Of these, 69 per cent were either currently working with a family intervention or had previously completed an intervention, two per cent were placed on a waiting list and three percent refused to work with a family intervention. The remaining 26 per cent of referrals were not offered a family intervention, either because they did not meet the referral criteria or a family intervention was not needed.

8.1.1 Profile of families receiving the intervention

Family interventions continue to work with very disadvantaged families. The majority are headed by a lone parent (64 per cent) and are considerably larger in size than the general population (just over half have three or more children under the age of 18). Three-quarters of families have no adult aged 16 or over in paid employment and 82 per cent of families were claiming out-of-work benefits.

Family interventions are intended to target families with multiple problems, who need joined up intensive family focused solutions to address their complex and interlocking needs. The profile of presenting risk factors for families at the beginning of the intervention clearly suggests that family interventions are working with families with very complex needs:

 The majority of families (81 per cent) had problems with their family functioning including poor parenting skills (67 per cent of families), risk of relationship or family breakdown (32 per cent), domestic violence (30 per cent) and child protection issues (30 per cent).

- Seventy-nine per cent were reported to have engaged with some form of ASB and 39
 per cent were in contact with the criminal justice system as a result of their criminal
 activities (for example a family member was arrested, on bail, probation, a tag or a
 conditional discharge at the time of the Support Plan).
- Just over two-thirds of families were in poor health including mental health conditions, a poor diet or lack of exercise and substance or alcohol misuse.
- Just over two-thirds of families had no adult member in employment, education or training while 60 per cent of families had at least one child with problems at school (i.e. truancy, exclusion, or bad behaviour at school).

Our evidence does not enable us to assess whether family interventions are reaching all their intended beneficiaries, but it does suggest that they are targeting families with multiple and complex needs. More than half (54 per cent) of families who were turned down for an intervention were not judged as meeting the referral criteria (e.g. they were assessed as not needing the support because their ASB levels were not high enough) and 38 per cent were turned down because other services were more appropriate to support the family.

8.1.2 The family intervention

The monitoring evidence provides a very limited picture of the actual nature of a family intervention as it is focused on a number of quantitative indicators. These tell us that the average time spent in direct contact with a family decreases over time, suggesting that families require less intensive support towards the end of their intervention. The average (mean) number of hours per week staff spent in direct contact with families was 9 in the early stages of the intervention (i.e. between the time the Support Plan was put in place and the first Review), decreasing to 8 hours during the review stages and 6.6 hours during the final stages of the intervention (i.e. between the penultimate stage and the Exit).

Previous research on family interventions highlighted the importance of working with the same key worker throughout the intervention for achieving success. It is evident that the majority of families worked with the same key worker from the time their Support Plan was put in place to the time they exited the intervention (86 per cent).

The average (mean) duration of a family intervention has declined from 13 months (as reported in 2010) to 11 months (with a median length of nine months). This may indicate that services are delivering shorter, more focused interventions or it could be due to reductions in the level of family need or be a result of service reorganisation.

8.1.3 Outcomes achieved by families

Eighty-five per cent of families were recorded by staff as successfully completing their family intervention and achieving a positive outcome. Five per cent of families refused to engage with an intervention while the remaining 10 per cent of families were no longer eligible for an intervention as their circumstances had changed.

In order to assess success, the performance of family interventions was judged according to five key outcome domains (family functioning, crime and ASB, education, employment and health) and a number of specific indicators within each domain. Results for the 3,675 families who left an intervention provide positive evidence of their success in most areas of their work:

- At least half of family intervention families had addressed the following problems at exit: poor parenting (53 per cent), relationship or family breakdown (56 per cent), domestic violence (65 per cent), involvement in crime (65 per cent) or ASB (60 per cent), lack of exercise or poor diet (52 per cent), drug or substance misuse (50 per cent), alcohol misuse (56 per cent), and truancy, exclusion or bad behaviour at school (57 per cent).
- Families were least likely to have achieved a successful outcome in relation to mental health (40 per cent) and worklessness (20 per cent).

These high levels of success are similar to those reported in 2010 despite a decrease in the average length of a family intervention. Indeed, in the case of crime and ASB there has been an increase in the proportion of families achieving success.

That said there were still a considerable proportion of families who had no success in each of the five domains at exit: employment (80 per cent), health (45 per cent), education (43 per cent), family functioning (36 per cent), and crime and ASB (26 per cent).

Further analysis of factors predicting success identified a number of socio-economic characteristics that may be important for informing how best to target support for families in the most efficient way and also help to identify areas for further development of family interventions:

- Non-white families and workless families were less likely to resolve all their family functioning problems. Families who were in debt at the beginning of the intervention were *more* likely to address any problems with family functioning;
- Families with younger children appeared to have an increased chance of success addressing their involvement with crime and ASB;
- Families with at least one child subject to a child protection plan were less likely to achieve success on crime and ASB, education, employment and health;
- Larger families were less likely to achieve full success in relation to family functioning, education and employment;

- Families with older children were more likely to achieve success in getting at least one adult in the family into work, however these families were *less* likely to address health risks and problems;
- Families with at least one family member with a disability, or who had no family members aged 16 or over in education, employment or training were less likely to address their health problems;
- There was little evidence that the number of contact hours affects outcomes;
- The longer the intervention the greater the chance of achieving success in all five
 of the domains (crime and ASB, family functioning, education, employment and
 health). This finding needs to be considered in the context of the reported decline
 in the average duration of a family intervention (from 13 to 11 months) as this may
 affect performance in the future.

8.1.4 Sustainability of outcomes

Assessing the sustainability of outcomes after families exit an intervention has been tracked in the very short term – nine to 14 months later. Despite practice guidance encouraging staff to stay in touch with families it is clear that this is not always possible. Families for whom this data is not available tend to achieve less successful outcomes during the intervention relating to ASB, poor parenting and relationship or family breakdown. However, despite the data being skewed towards those families with more positive outcomes it is possible to draw some cautious conclusions.

Overall, families were more likely to sustain a successful outcome in the family functioning, crime and ASB, and education domains than in the other domains:

- 84 per cent of families sustained their outcomes in the family functioning domain nine to 14 months after leaving a family intervention;
- 71 per cent of families sustained their outcomes in the crime and ASB domain nine to 14 months after leaving the intervention;
- 89 per cent of families sustained their outcomes relating to education;
- Just under two-thirds of families sustained their outcomes in the health domain (61 per cent).

Whilst the majority of families do sustain their positive outcomes nine to 14 months after exiting the intervention a significant minority do not do so, particularly in relation to health (39 per cent).

8.1.5 Impact assessment

For the first time we have assessed the impact of family interventions, this impact assessment provides clear evidence of the impact of ASB FIPs. We estimated impact by comparing what happened to a sample of 56 comparison families with ASB FIP families on key outcomes.

There is clear evidence that ASB FIPs do reduce levels of crime and ASB amongst the families they work with. We have also presented some evidence, albeit not statistically significant, that FIPs help reduce education and employment problems amongst families.

However, there is little evidence to suggest that ASB FIPs can achieve a greater impact on family functioning or health problems than other interventions offered by LAs (such as parenting programmes), although FIPs do appear to be at least as effective as these alternatives. The very small sample size and level of follow-up data not received for the comparison families means that the impact estimates should be treated with caution.

8.1.6 Concluding remarks

There is now compelling evidence endorsing the role and value of family interventions. The outcomes reported at the point of exit have remained consistently high since the projects were first set up despite the much larger number of families being worked with. In the current economic climate it is very encouraging that family interventions appear to be achieving a similarly impressive set of results in a shorter time duration (from 13 months in 2010 to 11 months in 2011). However, as there is link between the length of intervention and success we will need to wait to assess the impact of a shorter duration of intervention in the longer term. We also need to investigate why the length of interventions has reduced over time as this could reflect that family interventions are actually working with families who need lower levels of support.

The findings from the impact assessment go some way to address an important gap in the evidence base and provide the first indication that the positive outcomes achieved by families can be attributed to a family intervention. There is also further encouraging evidence that the outcomes are sustained nine to 14 months after leaving an intervention.

That said, there are still a significant number of families who do not have a successful outcome. We also need to continue to monitor and assess the impact of family interventions as the models evolve and develop, to address the Early Intervention agenda. In tandem with this, future research needs to assess the degree to which outcomes are sustained in the even longer term (beyond 14 months) and undertake further value for money assessments to inform the evidence on payment by results. We also need to know how the outcomes vary as family interventions develop different delivery models to work with an even wider range of families with different thresholds of risk and crisis in order to achieve the Prime Minister's commitment to helping the 120,000 most troubled families.

The analysis in chapter 5 highlighted some interesting associations between the outcomes achieved and a range of socio-economic characteristics including the number of children, family ethnicity and work status, as well as features of the intervention such as the duration.

Family worklessness was associated with unsuccessful outcomes in relation to family functioning and health. These results suggest that difficulties making progress with workless families can act as a barrier to addressing family functioning problems and health risks. It may be that workless families share certain characteristics that constrain their ability to overcome these issues or that there is a complex relationship between characteristics such as poor health, substance misuse, level of family functioning and worklessness.

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Recent policy initiatives have targeted help for troubled families to specifically overcome their barriers to work such as the Working Families Everywhere programme, the European Social Fund and the Government's new Work Programme. In order to be able to assess interim outcomes and work readiness it is vital that appropriately sensitive measures are included in any monitoring activities so we can measure how far families are developing skills which will help them find and prepare for work (e.g. job search skills, writing CVs). Our evidence suggests that shorter work focused interventions may only be successful once families have resolved other crucial barriers to working. This suggests that very troubled families are likely to need to engage with a family intervention for a considerable period of time before they are ready to consider work focused solutions.

One of the other key findings reported was the association between families having any children who are subject to a child protection plan and achieving less success. This may suggest that families with child protection issues may require additional or different support to help overcome the problems they face.

Finally the evidence clearly points to the importance of the length of a family intervention. It shows that the longer a family intervention the greater chances of achieving successful outcomes across most of the domains and almost all the individual indicators of key interest. This finding is consistent with our previous evidence although as acknowledged the average length of an intervention has declined from 13 to 11 months.

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Appendix A Information collected at stages of the family intervention

This section summarises the nature of the information collected at each key stage of a family's progress through the family intervention.

Referral stage

Family intervention staff are asked to provide some initial details when a family has been referred to a family intervention. At this stage there is typically an initial assessment of the family's circumstances and, based on this, we ask family intervention staff to provide data on family size, composition and demographic profile, as well as information about why the referral was made. We also establish whether a family was actually offered the family intervention following their referral, and if not, the reasons why a family intervention was not offered. For families who are offered the intervention, we ask family intervention staff to provide an initial indication of the type of family intervention that the family will receive (ASB, Child Poverty, Youth Crime, Housing Challenge or Women Offender). The same information about referral is provided for all families irrespective of type of intervention offered.

Support Plan stage

After a full assessment of the family's circumstances has been completed and a decision made about the initial support package they should be offered, a formal Support Plan for the family is put in place. At this stage, family intervention staff are asked to confirm the type of intervention the family will receive. They are also asked to update the information provided at the Referral stage in case there have been any changes. Information is collected on whether the family is at risk of eviction or has been evicted; ASB perpetrated by the family; enforcement or pre-enforcement actions, convictions and arrests; child protection arrangements; what benefits the family receives; employment and work status. Questions about whether family members are registered with a GP and a dentist and whether children have had their immunisations were also subsequently added to the FIIS and are first asked at the Support Plan stage. Data collected at this stage provide a 'baseline' against which to measure the family's progress over the course of the intervention.

Risk factors

One key question at the Support Plan stage asks about the risk factors that family intervention staff have identified for the family. Risk factors are issues that are considered especially likely to place families at risk of ASB and other key behaviours and problems targeted by family interventions. Family intervention staff are asked to say whether the family faces any of the following risk factors:

Health

- Drinking problem / alcoholism
- · Drugs or substance misuse
- Mental health problems (including stress and depression)
- Physical health problems

Education and employment

- Truancy, exclusion or bad behaviour at school
- Low educational attainment
- Lack of basic numeracy and literacy
- Lack of positive activities for children
- Difficulty with daily tasks (e.g. getting up, going out, managing daily tasks and so on)

Discrimination and crime

- Victims of racial discrimination
- Victims of sexual discrimination
- Victims of ASB
- Victims of other crimes

Family issues

- Domestic violence (this could be between any members of the family, e.g. parent to child, child to child, child to parent and so on)
- Inappropriate peer group
- Poor parenting
- Teenage pregnancy
- Child protection issues (including all types of Child Protection issues, including neglect, emotional abuse, physical abuse and sexual abuse)
- Marriage, relationship or family breakdown
- Family debt (this may include rent arrears, credit card bills, utility bills and so on).

In chapter 5, we explore whether a range of possible predictive variables are associated with successful and unsuccessful outcomes for families by the end of the family intervention. The number of risk factors from this list that the family faced at the Support Plan stage is one of the potential predictive factors we consider.

Review stage(s)

Family intervention staff carry out regular formal Reviews of families' progress and at these stages we ask staff for an update on key family outcomes, such as with regard to their involvement in ASB and their status in relation to the list of risk factors. At the first Review we also ask for information about the type and amount of support provided directly by the family intervention worker and other agencies, and about any involvement that family intervention staff have had in putting in place enforcement actions. Family interventions are only asked to provide information on the support they delivered directly or actively facilitated. Because family intervention staff carry out Reviews at different intervals, the FIIS does not prescribe how frequently the family interventions should enter this information.

Exit stage

Family intervention staff are asked at the beginning of each Review stage whether they are still working with the family. If they say 'no' they do not complete the rest of the Review stage and instead are asked to enter information about the family's circumstances at Exit by completing the Exit stage. In earlier versions of the FIIS, family intervention staff who said that they were no longer working with the family at a Review stage were not always directed to complete the Exit stage. The original design of the FIIS assumed that, in such cases, the family must have disengaged from the intervention, meaning that the family intervention worker would not have up-to-date information on them. However, as the family interventions have developed, it became clear that in some cases where family intervention workers do not implement what was originally conceived of as a 'Planned Exit' process, families may still have achieved positive outcomes and an Exit at one of the Reviews can nonetheless represent an agreed end to the intervention. Equally, some families who have disengaged from the family intervention may still agree to a closure interview as part of a Planned Exit. For these reasons, the FIIS has now been amended so that family intervention workers are now asked to complete the Exit stage regardless of when or how the Exit occurs. For families who exited at a Review stage before this amendment, for whom there is no Exit stage data, data on outcomes has been taken from the family's final formal Review and treated as Exit stage data for the family.

The information gathered at the Exit stage covers the nature of support the family received in the period between the Exit and the immediately preceding Review; the reasons for closing the case; who decided to close it and whether a lead agency has been nominated to continue to provide or coordinate support for the family. Data is also collected regarding outcomes for the family, by which we mean the issues still faced or no longer needing addressing by the time the family Exit the intervention.

Post-intervention stage

Family intervention workers are also asked to enter some selected information about the family at a follow-up, Post-intervention stage, nine to 14 months after the family has exited the family intervention. These questions were introduced as part of the FIIS in August 2009 (originally only for ASB family interventions as they are the longest running, but they are now asked of all family intervention types). The aim of collecting follow-up data of this sort is to explore the sustainability of progress made and the longer-term outcomes for families who have worked with family interventions. Questions therefore focus on the issues the family are (or are not) facing after exiting the family intervention. However, it is important to note that family intervention staff have varying levels of contact with and knowledge of families after they stop working with them and, as a result, data cannot be provided for all families. As part of the analysis of the Post-intervention data (chapter 6), we explore whether families for whom data was provided were systematically different to families for whom data was not provided. This analysis found that this information was more readily available for families who had experienced more successful interventions. Therefore, families with more positive outcomes are over-represented in this stage.

The Family Assessment Device (FAD)

The FAD is a standardised form, originally designed as a screening tool for families to complete, which identifies problems in family functioning based on the principles of the McMaster Model of Family Functioning (Epstein et al., 1983). The original FAD, as described by Epstein et al., is a paper questionnaire comprised of 53 statements which are grouped into seven dimensions: problem solving, communication, roles, affective responsiveness, affective involvement, behaviour control and general functioning. For each of these statements family members are asked to select 1 of 4 responses: strongly agree, agree, disagree or strongly disagree.

In order to measure the family functioning of intervention families we decided to use the scales measuring general family functioning and roles as these were most relevant to the issues intervention families were expected to exhibit. From April 2010, key workers are prompted to ask all families to complete this at the time a Support Plan is put in place, and at the time of Exit. The FAD is voluntary, so if the parent has refused, this is also recorded.

In total 704 FADs were submitted at the beginning of the intervention (at the time the Support Plan was put in place) and 307 were completed at the time of exit. Data were collected from 74 families at both the start and end of their intervention, however, in some cases the returned FADs have a number of missing responses.

Returning families

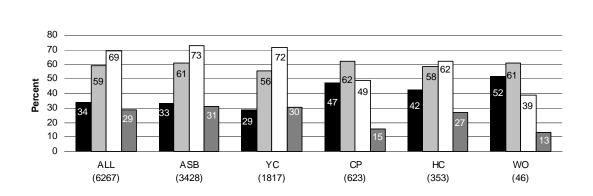
There are a small number of families who have been referred to a family intervention on more than one occasion (554 families), and therefore have been entered in the FIIS two or more times. We have treated these 'returning families' as follows in this report:

- For data collected at the Referral stage (presented in chapter 2, sections 2.1 and 2.2), each of these families is included every time they are referred, so they will count as two families if referred twice, or three families if referred three times (no family has yet been referred more than three times). This is to give a true picture of the total number of referrals, and show how the reasons for referral may have changed between first and subsequent referrals.
- For data collected at the Support Plan stage and beyond (presented throughout the rest of the report), each of these families is only counted once (irrespective of the number of times they have returned), with data taken from the first Support Plan. In chapters 4 and 5, where we explore outcomes for families, these are based on data from the family's first Support Plan which is compared with data from their last Exit from a family intervention.

Appendix Table B. 1 Family type			
Base: All family intervention families with a Support Plan			
	Total		
Family type	%		
Lone parent	64		
Two parent	36		
Base	6,267		

Appendix Figure B. 1 Ages of children by type of family intervention

■ 0-4



□ 5-11

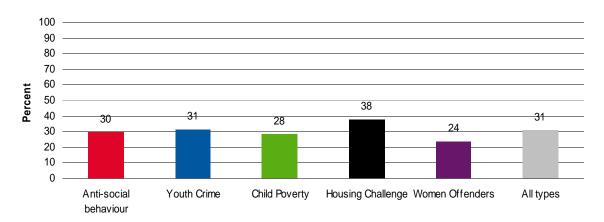
□ 12-16

■ 17 or over

Appendix Table B. 2 Ethnicity of family members						
Base: All members of family intervention families with a Support Plan	ASB	YC	СР	НС	WO	AII
	Total	Total	Total	Total	Total	Total
Ethnicity	%	%	%	%	%	%
White	90	84	85	90	96	88
Black	2	6	4	2	2	3
Asian	2	3	2	2	0	2
Other / Mixed race	6	7	8	7	2	7
Base	15,960	8,465	2,726	1,552	178	28,881

Appendix Figure B. 2 Families with at least one person who is disabled

Base: Families with a Support Plan in place (6,267)



Appendix Table B. 3 Family disability status		
Base: All family intervention families with a Support P	lan	
	Total	
Whether anyone in the family has a disability	%	
No	61	
Yes	31	
Don't know	9	
Base	6,267	

Appendix Table B. 4 Special Educational Needs (SEN): family level				
Base: All family intervention families with a Support Plan, which include one or more children aged 16 or under				
	Total			
Whether any children have SEN	%			
No	49			
Yes	32			
Don't know	19			
Base	6,206			

Appendix Table B. 5 Family work status	
Base: All family intervention families with a Support Plan	
	Total
Work status	%
Workless family	75
One or more family members in work	18
No information about family's work status	7
Base	6,267

Appendix Table B. 6 Family members' main economic activities										
Base: Adult members of family intervention families with a Support Plan	Family intervention type									
	ASB	Youth Crime	Child Poverty	Housing Challenge	Women Offenders					
Main economic activity	Total	Total	Total	Total	Total					
	%	%	%	%	%					
Unemployed	45	41	52	43	61					
Looking after the home	14 12 17 21 1									
In training or education	10 12 7 9 7									
Full-time work (30 or more hours a week)	6									
Permanently sick or disabled	5	4	5	5	1					
Part-time work (1-29 hours a week)	4	6	5	6	5					
Retired	1	1	1	1	3					
Other	2	4	2	3	0					
Don't know	13	11	6	6	5					
Base	6,623	3,743	1,051	641	76					

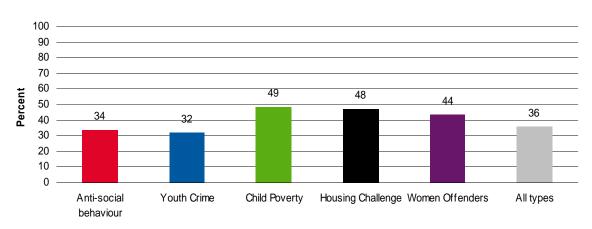
Appendix Table B. 7 Family benefit status	
Base: All family intervention families with a Supp	ort Plan
	Total
Benefit status	%
Claiming out-of-work benefits	82
Not claiming out-of-work benefits	12
Don't know	6
Base	4,004

Appendix Table B. 8 Whether family in debt	
Base: All family intervention families with a Support Plan	
	Total
Whether in debt	%
Yes	36
No	63
Don't know	1
Base	6,267

Appendix Table B. 9 Whether family debt includes rent arrears								
Base: All family intervention families with a Support Plan identified as being in debt								
	Total							
Whether family debt includes rent arrears	%							
Yes	54							
No	31							
Don't know	14							
Do not collect this information	1							
Base	2,303							

Appendix Figure B. 3 Proportion of families in debt by intervention type

Base: Families with a Support Plan in place (6,267)



Appendix Table B. 10 Level of family debt Base: All family intervention families with a Support Plan who were identified as being in debt Total Level of debt £999 or less £1000 to £3999 £4000 to £7999 £8000 or more Do not collect this information Don't know at this stage Base 223

Appendix Table B. 11 Families' tenancy status	
Base: All family intervention families with a Support Plan who rente a LA, ALMO, HAT, RSL or private landlord	ed accommodation from
	Total
Tenancy status	%
Secure Tenancy or Secure / Fully Assured or Assured Tenancy	69
Introductory / Starter Tenancy or Assured Shorthold Tenancy	12
Non-Secure Demoted Tenancy or Demoted / Demoted Assured Shorthold or Regulated Tenancy	5
Family Intervention tenancy	+
Other	4
Don't know	10
Don't collect this information	1
Base	5,314

Appendix Table B. 12 Issues with crime and	ASB
Base: All family intervention families with a Sup	port Plan
	Total
Issue	%
Contact with criminal justice system	39
ASB	79
Any crime or ASB issue	85
Base	5,634

Note: the bases differ for the crime and anti-social behaviour indicators due to missing values. Where the bases are different the lower of the two are provided

Appendix Table B. 13 Issues	with crime	and ASB			
Base: All family intervention families with a Support Plan	ASB	YC	СР	HC	WO
	Total	Total	Total	Total	Total
Issue	%	%	%	%	%
Contact with criminal justice system	41	43	22	37	[68]
ASB	89	73	42	76	[65]
Base	3,068	1,737	595	334	[38]

Note: the bases differ for the crime and anti-social behaviour indicators due to missing values. Where the bases are different the lower of the two are provided.

Appendix Table B. 14 Issues with family functioning and risk								
Base: All family intervention families with a Support Plan	ASB	YC	СР	HC	WO			
	Total	Total	Total	Total	Total			
Issue	%	%	%	%	%			
Poor parenting	68	66	65	65	[54]			
Marriage, relationship or family breakdown	29	34	39	33	[35]			
Domestic violence	28	32	34	31	[37]			
Child protection issues	28	29	38	32	[33]			
Base	3,386	1,790	623	352	[46]			

Please note that due to the low base size for Women Offender intervention families these figures should be treated with caution.

lan
Total
%
39
33
28
10
67
6,140*

^{*}Note: the bases differ across the indicators due to missing values. Where the bases are different the lowest is provided.

Appendix Table B. 16 Referral agencies by intervention status Base: Families referred to a family intervention Whether offered intervention Not Referral agency offered Offered Housing % % Housing Department or Arms Length Management Organisation (ALMO) 8 Housing Association housing office 2 6 Registered Social Landlord (RSL) 1 5 Housing Action Trust (HAT) + + The Homeless Department + + Health Health professional 1 3 Adults drugs or alcohol agency + 1 Young peoples drugs or alcohol agency 1 + Children's Disability Team 0 + Environmental Health / Environmental Services 0 + Community Mental Health Team + + Child and Adolescent Mental Health Services (CAMHS) 2 + Education 2 8 School Education Department / LEA 1 3 Special Educational Needs Team 1 + 1 Alternative Education Settings + Children's Centre or other early years setting + 1 Offending and crime 9 Local ASB Team 2 Police 3 8 Youth Offending Service or Youth Offending Team (YOT) 2 9 YISP (Youth Inclusion Support Panel) 2 + 2 **Probation Services** + Domestic Violence Team 1 + Noise Nuisance Team 0 + Social, voluntary or community organisations Social Services (including Children and Young People's Services) 6 18 Voluntary / community organisation 1 + Adult Community Care Team 0 0 Neighbourhood Management Team 0 + Citizen's Advice Bureau (CAB) 0 0 Other The family referred themselves + CAF Panel + 1 Family support agency 1 + Connexions + + Other family intervention team + + JobCentre Plus + +

Neighbour of the family

Multi-agency Panel

Fire service

Other

Base

0

0

+

2

3,345

0

0

1

5

9,515

Appendix Table B. 17 Referral reasons by intervention status

Base: Families referred to a family intervention

Base: Families referred to a family intervention	=	
		er offered ervention
	Nat	
Reasons for referral	Not offered	Offered
Housing Issues	%	%
Family at risk of becoming homeless	5	19
Housing enforcement actions taken against family	1	9
Family has poor housing conditions	3	11
Family is homeless	0	2
ASB, offending and crime issues		
ASB of family members	13	43
Criminal convictions of family members / ex-offender	2	12
ASB enforcement actions taken against family	1	8
Children are at risk of offending	5	21
Children are offending	5	18
Adult is offending	1	6
Prolific and other Priority Offender (PPO)	0	2
School exclusion / attendance problems		
Children at risk of school exclusion / serious attendance problems	6	24
Children excluded from school	1	6
Parenting and care issues		
Poor parenting	8	31
History of social care referrals	2	14
Relationship breakdown	4	15
Children at risk of going into care	1	8
Child Protection Plan is in place	1	8
Family includes a young person carer	1	3
Domestic violence, substance misuse, and mental health issues		
Family has domestic violence problems	4	17
At least one adult in the family has substance misuse problems	3	15
At least one adult in the family has mental health problems	3	11
At least one child in the family has substance misuse problems	2	8
At least one child in the family has mental health problems	1	5
Employment, education, debt		
Family is without paid employment	3	21
Family has serious issues with debt	2	8
Intergenerational worklessness	0	4
Other	2	4
Base	2,709	7,672

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Appendix Table B. 18 Family profile by intervention status Base: Families offered a family intervention Whether offered intervention Offered and Offered and family declined Family profile accepted Family type % % 63 64 Lone parent Couple in household 33 31 None 4 5 Number of children No children under 18 8 6 Small family (1 to 3 children) 68 65 Large family (4+ children) 26 26 **Employment status** 20 20 In work Not in work (Unemployed / Looking for work / Sick / Disability / 80 80 Retired / Looking after home / Other) Base 5,655 202

Appendix Table B. 19 Logistic regression model										
Base: All families who have exited an intervention and had cr	Partial success in crime and ASB					Full success in crime and ASB				
			confidence i			95% confidence interval				
	Freq	Odds ratio	Lower	Upper	Overall p-value	Freq	Odds ratio		Upper	Overall p-value
Number of issues in Domain (per 1 issue increase)	540					1,121				
2	333	128.27	72.40	227.26	0.00***	617	1.91	1.45	2.53	0.00***
Couple parent household	164					224				
Lone parent	709	0.75	0.46	1.23	0.25	1,514	1.07	0.84	1.36	0.58
Ethnicity of family (All white)	743				0.47	1,527				0.44
All non-white	60	0.95	0.39	2.29	0.91	96	0.77	0.49	1.21	0.25
Mixed white and non-white	70	1.67	0.72	3.86	0.23	115	0.86	0.56	1.34	0.51
Age of youngest child (per one year increase)	873	1.05	0.99	1.12	0.09	1,738	0.97	0.94	1.00	0.06
Age of youngest parent (16-25 years)	87	0.00	0.00	0.00	0.05	195	0.00	0.00	0.00	0.65
26-39 years	465	0.43	0.17	1.07	0.07	970	0.97	0.63	1.47	0.87
40 years or over	321	0.71	0.27	1.88	0.49	,573	0.86	0.54	1.37	0.53
Number of children under 18 (per one child increase)	873	1.14	0.95	1.36	0.16	1738	0.95	0.87	1.04	0.26
Any children subject to child protection plan (no)	709					1,514				
Yes	164	0.90	0.50	1.63	0.72	224	0.49	0.36	0.66	0.00***
Anyone in the family has SEN (no or not known)	608					1,217				
Yes	265	1.04	0.63	1.73	0.87	521	1.19	0.93	1.53	0.17
Anyone in the family has a disability (no or not known)	608					1,217				
Yes	265	0.67	0.40	1.11	0.12	521	1.00	0.78	1.28	0.97
NEET family (no)	297					574				
Yes	576	1.27	0.66	2.44	0.47	1,164	1.07	0.77	1.48	0.69
Workless family (no)	168					332				
Yes	705	1.00	0.45	2.19	1.00	1,406	0.98	0.67	1.43	0.90
Family is in debt (no)	552					1,129				
Yes	321	1.05	0.63	1.73	0.86	609	1.04	0.81	1.32	0.78
Number of risk factors (per one risk factor increase)	873	0.94	0.87	1.02	0.14	1,738	0.93	0.89	0.97	0.00**
Family intervention type (ASB intervention)	535	0.00	0.00	0.00	0.61	1,139	0.00	0.00	0.00	0.38
Youth crime family intervention	236	1.14	0.67	1.95	0.62	429	0.96	0.74	1.25	0.78
Child poverty family intervention	57	1.09	0.40	2.94	0.87	96	0.75	0.47	1.18	0.21
Housing challenge family intervention	36	0.46	0.15	1.34	0.15	62	0.66	0.38	1.15	0.14
Women offender family intervention	9	1.05	0.13	8.23	0.97	12	0.54	0.16	1.80	0.31
Average number of contact hours per week	873	0.99	0.97	1.01	0.41	1,738	0.99	0.98	1.00	0.03*
Length of intervention (months)	873	0.99	0.96	1.03	0.61	1,738	1.04	1.02	1.06	0.00***
Base (families)	873	0.00	0.00	0.00	0.00	1,738	2.24	0.00	0.00	0.01

Appendix Table B. 20 Logistic regression model predictors of education Base: All families who have exited an intervention and had education issues at the Support Plan stage Education 95% confidence interval Odds ratio Overall p-value Frea Lower Upper Couple parent household (mother / father, parents partner, ex-partner) 985 534 1.09 0.48 Lone parent 0.86 1.38 Ethnicity of family (All white) 1,322 All non-white 90 0.91 0.58 1.42 0.67 Mixed white and non-white 107 0.93 1.40 0.61 0.72 Age of youngest child (per one year increase) 1.00 1.519 0.97 0.94 0.10 Age of youngest parent (16-25 years) 60 26-39 years 895 0.82 0.45 1.47 0.50 40 years or over 564 0.64 0.35 1.17 0.14 Number of children under 18 (per one child increase) 0.98 1.519 0.90 0.82 0.02*Any children subject to child protection plan (no) 1.322 0.00*** 197 0.34 0.25 0.48 Anyone in the family involved in crime (no) 931 588 0.81 0.65 1.01 0.06 Anyone in the family has SEN (no or not known) 946 573 0.81 0.64 1.02 0.07 Anyone in the family has a disability (no or not known) 1.046 473 1.01 1.29 0.92 0.80 **NEET family (no)** 540 0.79 Yes 979 0.58 1.08 0.14 Workless family (no) 315 1.204 0.82 1.18 0.28 0.56 Family is in debt (no) 984 535 1.04 0.81 1.32 0.78 1,519 Number of risk factors (per one risk factor increase) 1.00 0.96 1.04 0.96 Family intervention type (ASB intervention) 955 Youth crime family intervention 405 0.89 0.69 1.15 0.37 Child poverty family intervention 1.09 0.71 1.68 0.68 108 Housing challenge family intervention 1.65 0.88 0.47 0.69 45 Women offender family intervention 6 0.00 0.00 1.00 Average number of contact hours per week 1,519 0.99 0.98 1.00 0.06 1,519 0.00*** Length of intervention (months) 1.04 1.02 1.06 Base (families) 1.519

Appendix Table B. 21 Logistic regression model pro	edictors	of the	family func	tioning dor	nain					
Base: All families who have exited an intervention and had										
	Pa		iccess in fam		ng	Full success in family functioning				
	ļ		5% confidence		,	95% confidence interval				
	Freq	Odds	Lower	Upper	Overall	Freq		Lower	Upper	Overall p-
	1.000	ratio	0 =0		p-value		ratio	2.22		value
Number of issues in Domain (per 1 issue increase)	1,062	3.43	2.76	4.25	0.00***	1,737	1.01	0.88	1.15	0.93
Couple parent household	407		2.22		0.00	639	4.40			2.11
Lone parent	655	1.17	0.82	1.66	0.39	1,098	1.18	0.95	1.48	0.14
Ethnicity of family (All white)	917					1,502				
All non-white	75	0.87	0.48	1.58	0.64	108	0.65	0.43	0.98	
Mixed white and non-white	70	0.98	0.52	1.86		127	1.15		1.70	
Age of youngest child (per one year increase)	1,062	1.03	0.98	1.07	0.26	1,737	0.99	0.96	1.01	0.34
Age of youngest parent (16-25 years)	130					200				
26-39 years	575	1.10	0.62	1.93		967	1.33	0.92	1.91	0.13
40 years or over	357	0.92	0.49	1.74		570	1.03	0.68	1.55	
Number of children under 18 (per one child increase)	1,062	1.01	0.89	1.14	0.92	1,737	0.91	0.84	0.99	0.03*
Anyone in the family involved in crime (no)	657					1,098				
Yes	405	0.84	0.61	1.17	0.30	639	0.85	0.69	1.05	0.12
Anyone in the family has SEN (no or not known)	723					1,164				
Yes	339	1.08	0.76	1.54	0.67	573	1.24	0.99	1.56	0.06
Anyone in the family has a disability (no or not known)	725					1,215				
Yes	337	0.89	0.62	1.28	0.54	522	0.87	0.69	1.09	0.23
NEET family (no)	301					550				
Yes	761	1.11	0.68	1.81	0.68	1,187	1.02	0.75	1.39	0.88
Workless family (no)	160					322				
Yes	902	0.80	0.44	1.46	0.47	1,415	0.63	0.43	0.90	0.01*
Family is in debt (no)	658					1,104				
Yes	404	1.15	0.81	1.62	0.43	633	1.32	1.05	1.65	
Number of risk factors (per one risk factor increase)	1,062	1.05	0.97	1.13	0.22	1,737	0.95	0.91	1.00	0.06
Family intervention type (ASB intervention)	592					1,022				
Youth crime family intervention	302	1.11	0.77	1.61	0.58	476	1.04	0.82	1.31	0.78
Child poverty family intervention	117	1.08	0.64	1.82	0.76	161	0.92	0.64	1.32	
Housing challenge family intervention	40	0.52	0.20	1.35		65	0.96	0.57	1.62	
Women offender family intervention	11	0.14	0.01	1.37		13	0.28		1.03	
Average number of contact hours per week	1,062	0.99	0.98	1.00		1,737	0.99		1.00	
Length of intervention (months)	1,062	1.07	1.04	1.10	0.00***	65	1.08	1.06	1.10	0.00***
Base (families)	1,062					1,737				

Appendix Table B. 22 Logistic regression model p				omain						
Base: All families who have exited and had health issues at the	Suppo							 		
			tial success					ull success i		
			5% confidence		0			5% confidence		O
	Freq	Odds ratio	Lower	Upper	Overall p-value	Freq	Odds ratio		Upper	Overall p- value
Number of issues in Domain (per 1 issue increase)	284					451				
2	742	7.64	5.59	10.45	0.00***	986	1.22	1.02	1.47	0.03*
Couple parent household	201					236				
Lone parent	825	0.91	0.61	1.35	0.64	1,201	0.87	0.68	1.10	0.25
Ethnicity of family (All white)	903					1,263				
All non-white	57	1.33	0.61	2.88	0.47	75	1.01	0.61	1.66	0.98
Mixed white and non-white	66	0.83	0.39	1.79	0.64	99	1.12	0.73	1.73	0.61
Age of youngest child (per one year increase)	1,026	0.98	0.93	1.03	0.43	1,437	0.96	0.93	0.99	0.02*
Age of youngest parent (16-25 years)	109					170				
26-39 years	542	1.76	0.86	3.60	0.12	776	1.12	0.75	1.68	0.57
40 years or over	375	1.72	0.80	3.67	0.16	491	0.91	0.58	1.42	0.68
Number of children under 18 (per one child increase)	1,026	1.05	0.90	1.23	0.50	1,437	0.99	0.90	1.09	0.88
Any children subject to child protection plan (no)	825					1,201				
Yes	201	.370	.221	.619	.000***	236	.403	.292	.556	.000***
Anyone in the family involved in crime (no)	619					883				
Yes	407	0.78	0.54	1.13	0.19	554	0.90	0.72	1.13	0.38
Anyone in the family has SEN (no or not known)	691					974				
Yes	335	1.18	0.78	1.77	0.43	463	1.02	0.79	1.32	0.86
Anyone in the family has a disability (no or not known)	667					974				
Yes	359	0.87	0.59	1.28	0.48	463	0.76	0.59	0.97	0.03*
NEET family (no)	284					451				
Yes	742	1.26	0.72	2.21	0.42	996	0.57	0.41	0.79	0.00***
Workless family (no)	161					250				
Yes	865	0.84	0.42	1.67	0.61	1,187	1.33	0.89	1.97	0.16
Family is in debt (no)	582					884				
Yes	442	1.77	1.22	2.58	0.00**	553	1.07	0.84	1.35	0.60
Number of risk factors (per one risk factor increase)	1,026	0.96	0.88	1.04	0.29	1,437	0.97	0.93	1.02	0.27
Family intervention type (ASB intervention)	583					821				
Youth crime family intervention	266		0.65			404				0.20
Child poverty family intervention	120		0.33			142				0.00**
Housing challenge family intervention	46		0.17	1.33		57			1.11	0.11
Women offender family intervention	11	0.24	0.04	1.32	0.10	13			1.86	0.33
Average number of contact hours per week	1,026		0.97	1.09	0.24	1,437	1.00		1.01	0.51
Length of intervention (months)	1,026	1.07	1.04	1.09	0.00***	1,437		1.04	1.08	0.00***
Base (families)	1,026					1,437				

Appendix Table B. 23 Logistic regression model predictors of employment

Base: All families who have exited an intervention and had employment issues at the Support Plan stage

			Employment		
		95%	confidence int	erval	
	Freq	Odds ratio	Lower	Upper	Overall p-value
Couple parent household (mother / father, parents partner, ex-partner)	1,173				
Lone parent	579	0.77	0.58	1.02	0.07
Ethnicity of family (All white)	1,521				
All non-white	103	1.78	1.08	2.93	0.02*
Mixed white and non-white	128	0.94	0.57	1.54	0.81
Age of youngest child (per one year increase)	1,752	1.14	1.10	1.19	0.00***
Age of youngest parent (16-25 years)	255				
26-39 years	1,009	0.75	0.46	1.23	0.26
40 years or over	488	0.77	0.45	1.33	0.35
Number of children under 18 (per one child increase)	1,752	1.24	1.11	1.37	0.00***
Any children subject to child protection plan (no)	1,459				
Yes	293	0.42	0.27	0.64	0.00***
Anyone in the family involved in crime (no)	1,139				
Yes	613	1.07	0.82	1.39	0.62
Anyone in the family has SEN (no or not known)	1,212				
Yes	540	1.24	0.94	1.63	0.13
Anyone in the family has a disability (no or not known)	1,227				
Yes	525	0.94	0.71	1.25	0.66
Family is in debt (no)	1,118				
Yes	634	1.12	0.85	1.49	0.42
Number of risk factors (per one risk factor increase)	1,752	1.02	0.97	1.07	0.42
Family intervention type (ASB intervention)	1,044				
Youth crime family intervention	410	0.74	0.53	1.04	0.08
Child poverty family intervention	207	1.22	0.80	1.87	0.36
Housing challenge family intervention	77	0.67	0.29	1.54	0.35
Women offender family intervention	14	0.00	0.00 .		1.00
Average number of contact hours per week	1,752	1.00	0.99	1.01	0.88
Length of intervention (months)	1,752	1.08	1.06	1.10	0.00***
Base (families)	1,752				

Appendix Table B. 24 Logistic regression model predictors of crime in the crime and ASB domain

Base: All families who have exited an intervention and had crime issues at the Support Plan stage

			Crime		
			confidence i	nterval	
	Freq	Odds ratio	Lower	Upper	Overall p-value
Couple parent household (mother / father, parents partner, ex-partner)	536				
Lone parent	357	1.02	0.72	1.44	0.90
Ethnicity of family (All white)	759				
All non-white	57	1.22	0.63	2.34	0.55
Mixed white and non-white	77	1.98	1.03	3.80	0.04*
Age of youngest child (per one year increase)	893	1.02	0.98	1.07	0.29
Age of youngest parent (16-25 years)	104				
26-39 years	480	0.63	0.35	1.13	0.12
40 years or over	309	0.79	0.41	1.51	0.48
Number of children under 18 (per one child increase)	893	1.07	0.94	1.21	0.32
Any children subject to child protection plan (no)	766				
Yes	127	0.55	0.36	0.85	0.01**
Anyone in the family has SEN (no or not known)	598				
Yes	295	1.13	0.79	1.61	0.52
Anyone in the family has a disability (no or not known)	647				
Yes	246	0.77	0.53	1.10	0.15
NEET family (no)	302				
Yes	591	1.40	0.89	2.20	0.14
Workless family (no)	166				
Yes	727	0.92	0.54	1.57	0.76
Family is in debt (no)	577				
Yes	316	1.15	0.80	1.65	0.45
Number of risk factors (per one risk factor increase)	893	0.97	0.91	1.03	0.32
Family intervention type (ASB intervention)	542				
Youth crime family intervention	257	0.57	0.40	0.82	0.00**
Child poverty family intervention	53	0.73	0.37	1.43	0.36
Housing challenge family intervention	32	0.66	0.29	1.49	0.31
Women offender family intervention	9	1.29	0.25	6.56	0.76
Average number of contact hours per week	893	1.00	0.98	1.02	0.89
Length of intervention (months)	893	1.04	1.01	1.06	0.01*
Base (families)	893				

Appendix Table B. 25 Logistic regression model predictors of ASB in the crime and ASB domain

Base: All families who have exited an intervention and had ASB issues at Support Plan stage

			AS	В	
				ence interval	
	Freq	Odds ratio	Lower	Upper	Overall p-value
Couple parent household (mother / father, parents partner, ex-partner)	1,265				•
Lone parent	691	1.04	0.84	1.28	0.75
Ethnicity of family (All white)	1,700				
All non-white	114	0.76	0.51	1.13	0.18
Mixed white and non-white	142	0.80	0.55	1.15	0.22
Age of youngest child (per one year increase)	1,956	0.96	0.93	0.98	0.00**
Age of youngest parent (16-25 years)	205				
26-39 years	1,077	1.10	0.75	1.60	0.63
40 years or over	674	0.91	0.61	1.37	0.67
Number of children under 18 (per one child increase)	1,956	0.93	0.86	1.01	0.08
Any children subject to child protection plan (no)	1,684				
Yes	272	0.51	0.39	0.68	0.00***
Anyone in the family involved in crime (no)	1,192				
Yes	764	0.62	0.51	0.76	0.00***
Anyone in the family has SEN (no or not known)	1,306				
Yes	650	1.14	0.92	1.41	0.24
Anyone in the family has a disability (no or not known)	1,369				
Yes	587	1.04	0.84	1.30	0.70
NEET family (no)	662				
Yes	1,294	0.98	0.74	1.30	0.88
Workless family (no)	380				
Yes	1,576	1.00	0.72	1.40	0.99
Family is in debt (no)	1,268				
Yes	688	1.09	0.88	1.36	0.43
Number of risk factors (per one risk factor increase)	1,956	0.94	0.90	0.97	0.00***
Family intervention type (ASB intervention)	1,327				
Youth crime family intervention	452	1.02	0.80	1.29	0.89
Child poverty family intervention	96	0.62	0.40	0.96	0.03*
Housing challenge family intervention	67	0.59	0.35	0.99	0.05*
Women offender family intervention	14	0.35	0.11	1.09	0.07
Average number of contact hours per week	1,956	0.99	0.98	1.00	0.01**
Length of intervention (months)	1,956	1.04	1.03	1.06	0.00***
Base (families)	1,265				

Appendix Table B. 26 Logistic regression model predictors of poor parenting in the family functioning domain

Base: All families who have exited an intervention and had poor parenting issues at Support Plan stage

			Poor par	renting	
		!	95% confide		
	Freq	Odds ratio	Lower	Upper	Overall p-value
Couple parent household (mother / father, parents partner, ex-partner)	1,098				•
Lone parent	634	1.02	0.81	1.27	0.88
Ethnicity of family (All white)	1,498				
All non-white	112	0.72	0.48	1.08	0.11
Mixed white and non-white	122	0.95	0.64	1.41	0.81
Age of youngest child (per one year increase)	1,732	0.98	0.96	1.01	0.25
Age of youngest parent (16-25 years)	170				
26-39 years	985	1.05	0.71	1.56	0.80
40 years or over	577	0.82	0.53	1.26	0.37
Number of children under 18 (per one child increase)	1,732	0.93	0.85	1.01	0.07
Any children subject to child protection plan (no)	1,446				
Yes	286	0.31	0.23	0.41	0.00***
Anyone in the family involved in crime (no)	1,088				
Yes	644	0.92	0.75	1.13	0.43
Anyone in the family has SEN (no or not known)	1,142				
Yes	590	1.13	0.91	1.41	0.28
Anyone in the family has a disability (no or not known)	1,207				
Yes	525	0.91	0.72	1.14	0.41
NEET family (no)	533				
Yes	1,199	1.08	0.80	1.47	0.61
Workless family (no)	303				
Yes	1,429	0.68	0.47	0.98	0.04*
Family is in debt (no)	1,046				
Yes	686	1.20	0.96	1.49	0.11
Number of risk factors (per one risk factor increase)	1,732	0.95	0.91	0.98	0.01**
Family intervention type (ASB intervention)	1,047				
Youth crime family intervention	456	1.07	0.84	1.36	0.58
Child poverty family intervention	158	1.03	0.71	1.48	0.89
Housing challenge family intervention	60	0.80	0.46	1.41	0.45
Women offender family intervention	11	0.31	0.08	1.24	0.10
Average number of contact hours per week	1,732	0.99	0.99	1.00	0.19
Length of intervention (months)	1,732	1.05	1.03	1.07	0.00***
Base (families)	1,732				
Note: *n<0.05 ** n<0.01 ***n<0.001					

Appendix Table B. 27 Logistic regression model predictors of marriage, relationship and family breakdown in the family functioning domain

Base: All families who have exited an intervention and had relationship breakdown at the Support Plan stage

base. All fairlines who have extend arr intervention and heathorismp breakdow				nd family brea	kdown
			5% confidence		
	Freq	Odds ratio	Lower	Upper	Overall p-value
Couple parent household (mother / father, parents partner, ex-partner)	521				
Lone parent	284	1.18	0.85	1.65	0.32
Ethnicity of family (All white)	700				
All non-white	51	0.85	0.46	1.57	0.61
Mixed white and non-white	54	0.80	0.44	1.44	0.45
Age of youngest child (per one year increase)	805	0.98	0.94	1.02	0.38
Age of youngest parent (16-25 years)	83				
26-39 years	446	1.61	0.93	2.79	0.09
40 years or over	276	0.97	0.52	1.79	0.91
Number of children under 18 (per one child increase)	805	0.92	0.81	1.04	0.18
Any children subject to child protection plan (no)	661				
Yes	144	0.44	0.29	0.66	0.00***
Anyone in the family involved in crime (no)	523				
Yes	282	0.95	0.69	1.30	0.75
Anyone in the family has SEN (no or not known)	548				
Yes	257	1.03	0.73	1.45	0.86
Anyone in the family has a disability (no or not known)	567				
Yes	238	1.06	0.75	1.50	0.76
NEET family (no)	245				
Yes	560	0.70	0.43	1.13	0.14
Workless family (no)	153				
Yes	652	1.14	0.65	2.01	0.64
Family is in debt (no)	454				
Yes	351	1.22	0.88	1.69	0.23
Number of risk factors (per one risk factor increase)	805	0.98	0.93	1.04	0.57
Family intervention type (ASB intervention)	440				
Youth crime family intervention	233	0.96	0.68	1.37	0.84
Child poverty family intervention	97	0.82	0.50	1.32	0.41
Housing challenge family intervention	26	1.38	0.59	3.20	0.46
Women offender family intervention	9	0.11	0.01	0.96	0.05*
Average number of contact hours per week	805	0.99	0.98	1.00	0.22
Length of intervention (months)	805	1.07	1.04	1.09	0.00***
Base (families)	805				

Appendix Table B. 28 Logistic regression model predictors of domestic violence in the family functioning domain

Base: All families who have exited an intervention and had domestic violence issues at the Support Plan stage

			Domestic \	/iolence	
		9	5% confiden	ce interval	
	Freq	Odds ratio	Lower	Upper	Overall p-value
Couple parent household (mother / father, parents partner, ex-partner)	453				
Lone parent	308	1.19	0.83	1.72	0.34
Ethnicity of family (All white)	671				
All non-white	37	1.50	0.66	3.39	0.33
Mixed white and non-white	53	1.31	0.65	2.64	0.45
Age of youngest child (per one year increase)	761	0.98	0.94	1.03	0.45
Age of youngest parent (16-25 years)	123				
26-39 years	418	1.34	0.77	2.31	0.30
40 years or over	220	1.01	0.54	1.89	0.97
Number of children under 18 (per one child increase)	761	0.95	0.83	1.08	0.44
Any children subject to child protection plan (no)	607				
Yes	154	0.33	0.22	0.49	0.00***
Anyone in the family involved in crime (no)	473				
Yes	288	0.64	0.45	0.90	0.01*
Anyone in the family has SEN (no or not known)	523				
Yes	238	1.05	0.72	1.55	0.79
Anyone in the family has a disability (no or not known)	547				
Yes	214	0.77	0.53	1.14	0.20
NEET family (no)	219				
Yes	542	0.94	0.56	1.59	0.83
Workless family (no)	124				
Yes	637	0.81	0.43	1.53	0.52
Family is in debt (no)	469				
Yes	292	1.39	0.96	2.02	0.08
Number of risk factors (per one risk factor increase)	761	0.96	0.90	1.03	0.23
Family intervention type (ASB intervention)	424				
Youth crime family intervention	219	1.27	0.86	1.89	0.23
Child poverty family intervention	84	0.95	0.55	1.65	0.85
Housing challenge family intervention	28	1.00	0.43	2.33	1.00
Women offender family intervention	6	0.41	0.07	2.58	0.34
Average number of contact hours per week	761	1.01	0.99	1.02	0.46
Length of intervention (months)	761	1.12	1.08	1.51	0.00***
Base (families)	761				

Appendix Table B. 29 Logistic regression model predictors of child protection in the family functioning domain

Base: All families who have exited an intervention and had family functioning issues at the Support Plan stage

			Child protec	tion	
		95	% confidence	interval	
	Freq	Odds ratio	Lower	Upper	Overall p-value
Couple parent household (mother / father, parents partner, ex-partner)	441				
Lone parent	301	0.96	0.69	1.34	0.81
Ethnicity of family (All white)	647				
All non-white	46	0.69	0.36	1.32	0.26
Mixed white and non-white	49	1.32	0.71	2.48	0.38
Age of youngest child (per one year increase)	742	1.03	0.99	1.08	0.16
Age of youngest parent (16-25 years)	131				
26-39 years	422	1.15	0.71	1.87	0.57
40 years or over	189	1.02	0.56	1.84	0.95
Number of children under 18 (per one child increase)	742	0.91	0.81	1.02	0.10
Anyone in the family involved in crime (no)	454				
Yes	288	0.87	0.63	1.19	0.38
Anyone in the family has SEN (no or not known)	493				
Yes	249	1.33	0.94	1.88	0.11
Anyone in the family has a disability (no or not known)	512				
Yes	230	0.93	0.66	1.33	0.71
NEET family (no)	167				
Yes	575	0.77	0.46	1.28	0.31
Workless family (no)	90				
Yes	652	0.74	0.38	1.42	0.36
Family is in debt (no)	423				
Yes	319	1.31	0.94	1.83	0.11
Number of risk factors (per one risk factor increase)	742	0.96	0.90	1.01	0.13
Family intervention type (ASB intervention)	438				
Youth crime family intervention	178	0.96	0.66	1.39	0.81
Child poverty family intervention	97	0.89	0.55	1.43	0.63
Housing challenge family intervention	25	0.61	0.25	1.50	0.28
Women offender family intervention	4	1.12	0.15	8.54	0.92
Average number of contact hours per week	742	1.00	0.99	1.01	0.81
Length of intervention (months)	742	1.07	1.04	1.10	0.00***
Base (families)	742				

Appendix Table B. 30 Logistic regression model predictors of mental health issues in the health domain

Base: All families who have exited an intervention and had mental health issues at the Support Plan stage

	ies who have exited an intervention and had mental health issues at the Support Plan stage						
			Mental heal				
			% confidence				
	Freq	Odds ratio	Lower	Upper	Overall p-value		
Couple parent household (mother / father, parents partner, ex-partner)	640						
Lone parent	360	0.83	0.62	1.12	0.22		
Ethnicity of family (All white)	872						
All non-white	54	1.02	0.57	1.83	0.95		
Mixed white and non-white	58	1.44	0.83	2.49	0.19		
Age of youngest child (per one year increase)	258	0.95	0.91	0.98	0.00**		
Age of youngest parent (16-25 years)	101						
26-39 years	547	1.40	0.85	2.30	0.19		
40 years or over	336	1.31	0.76	2.27	0.33		
Number of children under 18 (per one child increase)	984	0.99	0.89	1.11	0.90		
Any children subject to child protection plan (no)	814						
Yes	170	0.56	0.39	0.82	0.00**		
Anyone in the family involved in crime (no)	638						
Yes	346	1.04	0.79	1.38	0.78		
Anyone in the family has SEN (no or not known)	641						
Yes	343	0.97	0.72	1.31	0.84		
Anyone in the family has a disability (no or not known)	616						
Yes	368	0.75	0.56	1.00	0.05*		
NEET family (no)	285						
Yes	699	0.58	0.39	0.87	0.01**		
Workless family (no)	151						
Yes	833	1.20	0.73	1.96	0.48		
Family is in debt (no)	523						
Yes	461	0.89	0.68	1.18	0.43		
Number of risk factors (per one risk factor increase)	984	1.00	0.95	1.05	0.93		
Family intervention type (ASB intervention)	540						
Youth crime family intervention	266	1.27	0.92	1.75	0.14		
Child poverty family intervention	129	0.67	0.43	1.03	0.07		
Housing challenge family intervention	38	0.87	0.42	1.80	0.71		
Women offender family intervention	11	0.40	0.08	1.94	0.25		
Average number of contact hours per week	984	0.96	0.98	1.01	0.38		
Length of intervention (months)	984	1.03	1.01	1.05	0.00**		
Base (families)	984						

Appendix Table B. 31 Logistic regression model predictors of physical health issues in the health domain

Base: All families who have exited an intervention and had physical health issues at Support Plan stage

base. All families who have exited an intervention and had physical health issue			Physical h	nealth	
		9:	5% confidence		
	Freq	Odds ratio	Lower	Upper	Overall p-value
Couple parent household (mother / father, parents partner, ex-partner)	157	0 0 0 0 1 0 1 0		орро.	Cro.a p raido
Lone parent	101	1.25	0.66	2.36	0.49
Ethnicity of family (All white)	226				
All non-white	17	0.94	0.29	3.05	0.92
Mixed white and non-white	15	0.90	0.26	3.16	0.89
Age of youngest child (per one year increase)	258	0.93	0.86	1.01	0.10
Age of youngest parent (16-25 years)	26				
26-39 years	127	3.65	1.15	11.53	0.03*
40 years or over	105	2.23	0.69	7.15	0.18
Number of children under 18 (per one child increase)	258	8.28	0.65	1.06	0.13
Any children subject to child protection plan (no)	206				
Yes	52	0.26	0.12	0.59	0.00**
Anyone in the family involved in crime (no)	157				
Yes	101	0.34	0.18	0.64	0.00**
Anyone in the family has SEN (no or not known)	156				
Yes	102	1.30	0.71	2.39	0.40
Anyone in the family has a disability (no or not known)	141				
Yes	117	0.78	0.43	1.40	0.40
NEET family (no)	66				
Yes	192	0.45	0.18	1.12	0.09
Workless family (no)	31				
Yes	227	2.18	0.66	7.19	0.20
Family is in debt (no)	119				
Yes	139	1.16	0.63	2.14	0.64
Number of risk factors (per one risk factor increase)	258	1.04	0.92	1.17	0.53
Family intervention type (ASB intervention)	147				
Youth crime family intervention	53	1.32	0.63	2.76	0.46
Child poverty family intervention	47	0.97	0.42	2.22	0.94
Housing challenge family intervention	8	0.70	0.12	4.28	0.70
Women offender family intervention	3	4.53	0.32	64.80	0.27
Average number of contact hours per week	258	0.99	0.97	1.01	0.26
Length of intervention (months)	258	1.15	1.09	1.22	0.00***
Base (families)	258				

Appendix Table B. 32 Logistic regression model predictors of drug misuse in the health domain

Base: All families who have exited an intervention and had drug misuse issues at the Support Plan stage

			Drug misu	ise	
		95	% confidence	interval	
	Freq	Odds ratio	Lower	Upper	Overall p-value
Couple parent household (mother / father, parents partner, ex-partner)	504				•
Lone parent	326	1.11	0.81	1.52	0.50
Ethnicity of family (All white)	728				
All non-white	44	0.73	0.39	1.38	0.33
Mixed white and non-white	58	0.59	0.33	1.05	0.07
Age of youngest child (per one year increase)	830	0.99	0.96	1.03	0.68
Age of youngest parent (16-25 years)	94				
26-39 years	451	0.91	0.54	1.53	0.72
40 years or over	285	0.90	0.50	1.60	0.71
Number of children under 18 (per one child increase)	830	1.10	0.98	1.24	0.12
Any children subject to child protection plan (no)	699				
Yes	131	0.42	0.28	0.64	0.00***
Anyone in the family involved in crime (no)	420				
Yes	412	0.90	0.68	1.20	0.47
Anyone in the family has SEN (no or not known)	586				
Yes	244	0.84	0.60	1.17	0.29
Anyone in the family has a disability (no or not known)	598				
Yes	232	0.98	0.70	1.17	0.91
NEET family (no)	260				
Yes	570	0.81	0.52	1.25	0.34
Workless family (no)	147				
Yes	683	1.31	0.79	2.19	0.29
Family is in debt (no)	483				
Yes	347	1.23	0.91	1.68	0.18
Number of risk factors (per one risk factor increase)	830	0.99	0.94	1.04	0.62
Family intervention type (ASB intervention)	500				
Youth crime family intervention	236	1.16	0.83	1.63	0.39
Child poverty family intervention	56	0.60	0.33	1.10	0.10
Housing challenge family intervention	26	0.62	0.26	1.48	0.28
Women offender family intervention	12	0.79	0.23	2.67	0.70
Average number of contact hours per week	830	1.00	0.99	1.01	0.68
Length of intervention (months)	830	1.04	1.02	1.06	0.00**
Base (families)	830				

Appendix Table B. 33 Logistic regression model predictors of drinking problems in the health domain

Base: All families who have exited an intervention and had drinking issues at the Support Plan stage

			Drinking pro	blem	
		95	% confidence	interval	
	Freq	Odds ratio	Lower	Upper	Overall p-value
Couple parent household (mother / father, parents partner, ex-partner)	444				
Lone parent	289	1.07	0.75	1.53	0.70
Ethnicity of family (All white)	666				
All non-white	19	0.94	0.37	2.44	0.91
Mixed white and non-white	48	1.04	0.56	1.96	0.90
Age of youngest child (per one year increase)	733	0.97	0.93	1.02	0.19
Age of youngest parent (16-25 years)	80				
26-39 years	388	0.74	0.39	1.38	0.34
40 years or over	265	0.47	0.24	0.92	0.03*
Number of children under 18 (per one child increase)	733	0.94	0.82	1.07	0.35
Any children subject to child protection plan (no)	617				
Yes	116	0.29	0.18	0.45	0.00***
Anyone in the family involved in crime (no)	412				
Yes	321	1.04	0.76	1.43	0.79
Anyone in the family has SEN (no or not known)	528				
Yes	208	1.42	0.98	2.05	0.06
Anyone in the family has a disability (no or not known)	522				
Yes	211	1.03	0.72	1.47	0.87
NEET family (no)	245				
Yes	488	0.75	0.47	1.17	0.20
Workless family (no)	134				
Yes	599	0.96	0.55	1.66	0.87
Family is in debt (no)	417				
Yes	316	0.97	0.70	1.36	0.87
Number of risk factors (per one risk factor increase)	733	1.01	0.95	1.07	0.76
Family intervention type (ASB intervention)	455				
Youth crime family intervention	183	1.37	0.93	2.01	0.11
Child poverty family intervention	60	0.85	0.48	1.52	0.59
Housing challenge family intervention	28	0.53	0.22	1.25	0.15
Women offender family intervention	7	0.49	0.08	2.89	0.43
Average number of contact hours per week	733	1.00	0.99	1.02	0.83
Length of intervention (months)	733	1.05	1.03	1.08	0.00***
Base (families)	733				

Appendix Table B. 34 Logistic regression model predictors for sustained success in family functioning

Base: Families who had achieved full success on family functioning when they exited an intervention

	Family Functioning				
	95% confidence interval				
	Freq	Odds ratio	Lower	Upper	Overall p-value
Number of issues in domain	160	0.706	0.357	1.397	0.32
Couple parent household (mother / father, parents partner, ex-partner)	111				
Lone parent	49	0.47	0.16	1.42	0.18
Ethnicity of family (All white)	139				
Some non-white members	21	0.82	0.20	3.33	0.78
Age of youngest child (per one year increase)	160	0.92	0.80	1.06	0.25
Number of children under 18 (per one child increase)	160	0.75	0.51	1.09	0.13
Anyone in the family involved in crime (no)	94				
Yes	66	0.90	0.35	2.53	0.94
Anyone in the family has SEN (no or not known)	113				
Yes	47	0.19	0.07	0.54	0.02*
Anyone in the family has a disability (no or not known)	123				
Yes	37	0.44	0.16	1.22	0.11
NEET family (no)	43				
Yes	117	1.19	0.29	4.92	0.81
Workless family (no)	24				
Yes	136	1.39	0.24	8.09	0.71
Family is in debt (no)	96				
Yes	64	0.77	0.25	2.31	0.63
Number of risk factors (per one risk factor increase)	160	1.19	0.93	1.53	0.16
Average number of contact hours per week	160	1.00	0.94	1.07	0.94
Length of intervention (months)	160	0.95	0.90	1.00	0.00**
Base (families)	160				

Appendix Table B. 35 Logistic regression model predictors of sustained success on crime and ASB

Base: Families who had achieved full success on crime and ASB when they exited an intervention

	Crime and ASB				
	95% confidence interval				
	Freq	Odds ratio	Lower	Upper	Overall p-value
Number of issues in domain	183	1.203	0.597	2.242	0.61
Couple parent household (mother / father, parents partner, ex-partner)	120				
Lone parent	63	0.83	0.39	1.78	0.64
Ethnicity of family (All white)	159				
Some non-white members	24	2.23	0.67	7.45	0.19
Age of youngest child (per one year increase)	183	0.99	0.90	1.09	0.89
Age of youngest parent (16-25 years)	22				
26-39 years	110		0.39	5.32	0.59
40 years or over	51	1.02	0.23	4.55	0.98
Number of children under 18 (per one child increase)	183	1.00	0.76	1.31	0.97
Any children subject to child protection plan (no)	163				
Yes	20	0.96	0.33	2.79	0.94
Anyone in the family has SEN (no or not known)	124				
Yes	59	0.58	0.26	1.30	0.19
Anyone in the family has a disability (no or not known)	131				
Yes	52	2.52	1.06	5.97	0.04*
NEET family (no)	51				
Yes	132	1.02	0.35	3.01	0.97
Workless family (no)	28				
Yes	155	0.47	0.11	1.94	0.30
Family is in debt (no)	119				
Yes	64	2.02	0.89	4.61	0.09
Number of risk factors (per one risk factor increase)	183	0.89	0.78	1.03	0.12
Average number of contact hours per week	183	1.00	0.98	1.02	0.77
Length of intervention (months)	183	1.00	0.95	1.04	0.82
Base (families)	183				

Appendix Table B. 36 Logistic regression model predictors of sustained success on education

Base: Families who had achieved full success on education when they exited an intervention

	Education				
	95% confidence interval				
	Freq	Odds ratio	Lower	Upper	Overall p-value
Couple parent household (mother / father, parents partner, ex-partner)	58				
Lone parent	33	1.89	0.16	21.92	0.61
Ethnicity of family (All white)	79				
Some non-white members	12	0.53	0.04	7.01	0.63
Age of youngest child (per one year increase)	91	1.23	0.91	1.66	0.18
Age of youngest parent	91	1.51	0.31	7.47	0.61
Number of children under 18 (per one child increase)	91	0.92	0.48	1.77	0.81
Anyone in the family involved in crime (no)	52				
Yes	39	13.68	0.97	192.33	0.05
Anyone in the family has SEN (no or not known)	56				
Yes	35	0.11	0.01	1.10	0.06
Anyone in the family has a disability (no or not known)	66				
Yes	25	1.14	0.14	9.48	0.91
NEET family (no)	31				
Yes	60	4.00	0.14	116.00	0.42
Workless family (no)	20				
Yes	71	0.57	0.02	18.45	0.75
Family is in debt (no)	63				
Yes	28	3.83	0.16	91.74	0.41
Number of risk factors (per one risk factor increase)	91	1.14	0.75	1.73	0.55
Average number of contact hours per week	91	1.01	0.97	1.05	0.78
Length of intervention (months)	91	0.92	0.80	1.05	0.22
Base (families)	91		_		

Appendix Table B. 37 Logistic regression model predictors of sustained success in relation to health

Base: Families who had achieved full success on health when they exited an intervention

			Health		
		95%	confidence i	nterval	
	Freq	Odds ratio	Lower	Upper	Overall p-value
Number of issues in domain	86	0.509	0.226	1.147	0.10
Couple parent household (mother / father, parents partner, ex-partner)	58				
Lone parent	28	1.37	0.44	4.30	0.59
Ethnicity of family (All white)	77				
Some non-white members	9	0.37	0.07	2.07	0.26
Age of youngest child (per one year increase)	86	1.06	0.91	1.24	0.47
Age of youngest parent (16-25 years)	8				
26-39 years	59	0.75	0.08	6.09	0.73
40 years or over	19	0.60	0.04	8.35	0.70
Number of children under 18 (per one child increase)	86	1.10	7.16	1.68	0.67
Any children subject to child protection plan (no)	76				
Yes	10	0.64	0.13	3.05	0.58
Anyone in the family involved in crime (no)	52				
Yes	34	1.04	0.37	2.89	0.94
Anyone in the family has SEN (no or not known)	62				
Yes	24	1.00	0.29	3.43	1.00
Anyone in the family has a disability (no or not known)	61				
Yes	25	1.31	0.44	3.92	0.63
NEET family (no)	24				
Yes	62	2.62	0.62	11.07	0.19
Workless family (no)	7				
Yes	79	0.57	0.08	4.32	0.59
Family is in debt (no)	48				
Yes	38	1.05	0.36	3.05	0.94
Number of risk factors (per one risk factor increase)	86	1.15	0.89	1.49	0.28
Average number of contact hours per week	86	1.02	0.99	1.05	0.25
Length of intervention (months)	86	0.96	0.90	1.03	0.29
Base (families)	86				

Appendix C Questions used in the five domains

The domain measures were agreed with the DfE and use the following questions in the FIIS. The domains are listed with the question references and the detailed questions (to which the references pertain) from the FIIS included further on in the Appendix.

Education

E3 (code 5)

Employment

• C10

Health

- E3 (codes 1-2)
- E3 (code 3) + E12 (routed through E5) (codes 5, 11, 14, 15, 22, 23)
- E3 (code 4) + E14 (routed through E5) (codes 19 and 20)

Family functioning and risk

• E3 (codes 14, 16, 18 and 19)

Crime and ASB

- E99 (ASB and YC family interventions) and E53 (CP family interventions) are used to determine whether anyone in the family is on bail, tag probation or conditional discharge.
- E25 (ASB and YC family interventions) and E53 (CP family interventions) determined whether anyone in the family has been arrested.
- C30 (more than one issue recorded)

E3.

At Support Plan stage

The next few questions are about the risk factors that the family intervention has identified for the family. As far as the family intervention staff were aware, which of these issues needed addressing at the Support Plan stage? [note: think about all members of the family when answering this question; when thinking about children, please include issues that occurred in school as well as out of school]

Please only include factors which you are certain are an issue for this family. Do not include factors for which there is no specific evidence. Please include information from multiagency Review meetings, where available.

Please scroll down to see complete list.

Select all that apply

At Review or Exit

The next few questions are about the risk factors that the family intervention has identified for the family. As far as the family intervention staff were aware, which of these issues needed addressing at (textfill – current stage)[note: think about all members of the family when answering this question; when thinking about children, please include issues that occurred in school as well as out of school] Please only include factors which you are certain are an issue for this family. Do not include factors for which there is no specific evidence. Please include information from multi-agency Review meetings, where available.

Please scroll down to see complete list.

Select all that apply

Health

- 1. Drinking problem / alcoholism
- 2. Drugs or substance misuse

- 3. Mental Health problems (stress depression confidence anxiety nerves)
- 4. Physical health problems

Education and employment

- 5. Truancy, exclusion or bad behaviour at school
- Low educational attainment
- 7. Lack of basic numeracy and literacy
- 8. Lack of positive activities for children
- 9. Difficulty with daily tasks [note: e.g. difficulty getting up, going out, managing daily tasks and so on]

Discrimination and crime

- 10. Victims of racial discrimination
- 11. Victims of sexual discrimination
- 12. Victims of ASB
- 13. Victims of other crimes

Family issues

- 14. Domestic violence [note: this could be between any members of the family e.g.
- parent to child, child to child, child to parent and so on]
- 15. Inappropriate peer group
- 16. Poor parenting
- 17. Teenage pregnancy
- 18. Child protection issues [note: this should include all types of Child Protection issues, including neglect, emotional abuse, physical abuse and sexual abuse]
- 19. Marriage, relationship or family breakdown
- 20. Family debt [note: this may include rent arrears, credit card bills, utility bills and so on]
- 21. Don't know at this stage (if this is chosen, no others can be selected)
- 22. Other (please specify)
- 23. The same risk factors apply (*mutually exclusive category*)
- 24. None (*mutually exclusive category*)

There is then a follow-up question if truancy, poor parenting, physical health problems, mental health problems and/or drugs or substance misuse are selected:

E4. At [the time the Support Plan was put in place /Review Stage 1 / Planned Exit stage] who did these issues apply to? We may not ask you about all the risk factors identified.

Please only include factors which you are certain are an issue for this family. Do not include factors for which there is no specific evidence.

Include this text if poor parenting selected: When thinking about 'poor parenting' please tell us the parent(s) who has/have the poor parenting skills.

Select all [individuals] that apply

Respondents are provided with a family grid and invited to select which members the issues apply to.

E12. If **Mental Health issues selected as Risk factor**, the key worker is asked to choose which of these mental health issues (diagnosed and undiagnosed problems) the individual has.

- 1. ADHD
- 2. Alcoholism
- 3. Angelman Syndrome
- 4. Anorexia nervosa
- 5. Anxiety, panic attacks
- 6. Asperger Syndrome
- 7. Autism/Autistic
- 8. Bipolar Affective Disorder or manic depression
- 9. Catalepsy
- 10. Concussion syndrome
- 11. Depression
- 12. Drug addiction Dyslexia
- 13. Hyperactive child
- 14. Lack of confidence
- 15. Nerves/ nervousness

- 16. Nervous breakdown, neurasthenia, nervous trouble
- 17. Phobias
- 18. Schizophrenia
- 19. Self-harming
- 20. Senile dementia, forgetfulness, gets confused
- 21. Speech impediment, stammer
- Stress
- 23. Suicidal thoughts

E14. If physical health selected as Risk Factor, the key worker is asked to choose which of these physical health issues the individual has.

- 1. Arthritis
- 2. Back problems
- 3. Blood disorders [note: includes: Haemophilia, Anaemia]
- Diabetes
- 5. Digestive system problems [note: e.g. Stomach uclers, hernia, bowel problems]
- 6. Ear complaints / hearing difficulties
- 7. Epilepsy / fits
- 8. Eyesight problems / cataracts / blindness
- 9. Genito-urinary problems [note: e.g. kidney complaints, urinary tract infection, reproductive system disorders]
- 10. Heart attack / Angina
- 11. Infections [note: including HIV/AIDS, Tetanus, TB]
- 12. Joints / bones / muscle problems
- Migraine / headaches Nervous system problems [note: includes Multiple Sclerosis (MS), Alzheimer's, Sciatica, Myalgic Encephalomyelitis (ME) Cancer Varicose veins / embolisms
- 14. Respiratory complaints [note: e.g. Bronchitis, Asthma, Hayfever] Skin complaints [note: includes: Eczema, acne, warts] Stroke
- 15. Difficulty seeing a GP
- 16. Difficulty getting and taking medication
- 17. Frequent accidents
- 18. Frequent emergency hospital admissions
- 19. Lack of exercise
- 20. Poor diet
- 21. Poor sexual health
- 22. Obesity

C10. Adult work and education status (answer for people aged 16 or over only)

[Note: Please tell us the MAIN activity at the (*textfill current stage*) [time of Referral / the Support Plan was put in place / time of Review 1 / 2 / etc]. If more than one applies, select the first one from the top. Please include informal or cash-in-hand work in PT or FT work, as appropriate. Select the **first** that applies

- 1. Full-time work i.e. 30 or more hours a week
- 2. Part-time work i.e.1-29 hours a week
- 3. In training or education
- 4. Unemployed [note: include those looking for work and those not looking for work]
- 5. Permanently sick or disabled
- 6. Retired
- 7. Looking after the home
- 8. Other (please specify)
- 9. Don't know

E99. Which, if any, members of the family were on bail, probation, a tag or a conditional discharge at (textfill stage) [the time of the Referral / the time the Support Plan was put in place / Review 1/ Review 2/ etc]?

Select all that apply

None of these (mutually exclusive.)

- on bail/remand [note: A suspect who has been arrested or charged with an offence is released by the police or court on condition that they report back at a certain date and time. Sometimes the suspect has to keep to certain conditions, such as living in a particular place, or not going near witnesses]
- on probation/ community order [note: These include drug or alcohol treatment and testing, electronic monitoring (tagging), curfew, living at a specified address, unpaid work, doing or refraining from doing certain things or entering certain places, or attending certain offending behaviour programmes
- on a tag/ electronic monitoring
- on a conditional discharge
- Don't know (mutually exclusive for each person)

E53. Do any of the following apply to any family members?

[only one option can be ticked for each statement]

- Family member was arrested for criminal offences between (textfill last stage) was put in place and the time the (textfill current stage) was put in place
- Family member has been convicted for criminal offences in the year prior to Referral
- Family member served a custodial sentence (i.e. been in prison or a young offenders institution) at any point in the past
- Family member had formal actions in place (Textfill "...at the time the Support Plan was put in place"/"at the time of Review"/"at the time of Planned Exit"...)
- Family member was on bail (textfill current stage "...at the time the Support Plan was put in place"/"at the time of Review"/"at the time of Planned Exit"...)
- Family member was on probation (textfill current stage "...at the time the Support Plan was put in place"/"at the time of Review"/"at the time of Planned Exit"...)
- Family member was on a tag (*textfill current stage* "...at the time the Support Plan was put in place"/"at the time of Review"/"at the time of Planned Exit"...)
- Family member was on a conditional discharge (textfill current stage "...at the time the Support Plan was put in place"/"at the time of Review"/"at the time of Planned Exit"...)
- 1. Yes
- 2. No
- 3. Don't know
- 4. Don't collect this information

C30. Which of these were an issue for the family at the time (textfill current stage) [the Support Plan was put in place / Review 1/ Review 2/ the Planned Exit etc]?

[note: think about all members of the family when answering this question when thinking about children, please include issues that occurred in school as well as out of school. The issues you selected at the last stage are shown here]

Please record issues which most closely match the anti-social behaviour shown by the family. This list is not exhaustive. Please only include behaviours which you are certain have been shown by the family. Do not include anything for which there is no specific evidence.

Anti-social behaviour is acting in a manner that caused or was likely to cause harassment, alarm or distress to one or more persons not of the same household as (the defendant). You will be asked about crimes the family committed and risk factors you have identified for the family later on. Please only include behaviour and acts listed below. If there is an anti-social behaviour shown by the family that is not listed, please use the 'other' category.

Select all that apply.

Please scroll down to see the complete list

If you don't know which issues the family has, please tick 'Other' and write 'Don't know' in the box that appears.

(If Review of Planned Exit) If all the same issues apply, please choose 'All the same issues apply' to move on.

Misuse of public space

- 1. Drug/substance misuse and dealing (This includes taking drugs, sniffing volatile substances, discarding needles/drug paraphernalia, running a crack house, and dealing).
- Street drinking
- Begging
- 4. Prostitution (This includes soliciting, placing cards in phone boxes).
- 5. Kerb crawling (This includes loitering, pestering residents).
- 6. Sexual acts (This includes inappropriate sexual conduct, indecent exposure)
- 7. Abandoned cars
- 8. Vehicle-related nuisance and inappropriate vehicle use (This includes inconvenient/illegal parking, car repairs on the street/in gardens, setting vehicles alight, joy-riding, racing cars, off-road motorcycling, cycling/skateboarding in pedestrian areas/footpaths.)

Disregard for community / personal well-being

- 9. Noise (This includes noisy cars/motorbikes, loud music, alarms (persistent ringing/malfunction).
- 10. Rowdy behaviour (This includes shouting and swearing, fighting, drunken behaviour, hooliganism/loutish behaviour).
- 11. Noisy neighbours
- 12. Nuisance behaviour (This includes urinating in public, setting fires (not directed at specific persons or property), inappropriate use of fireworks, throwing missiles, climbing on buildings, impeding access to communal areas, games in restricted/ inappropriate areas, misuse of air guns, letting down tyres).
- 13. Hoax calls (This includes false calls to emergency services)
- 14. Animal-related problems (This includes uncontrolled animals).

Acts directed at people

- 15. Racial Intimidation/harassment (This includes groups or individuals making racially motivated threats, verbal abuse, bullying, following people, pestering people,
- voyeurism, sending nasty/offensive letters, obscene/nuisance phone calls, menacing gestures).
- 16. Other Intimidation/harassment (This can be on the grounds of sexual orientation,
- gender, religion, disability, age or on other grounds. This includes groups or individuals making threats, verbal abuse, bullying, following people, pestering people, voyeurism, sending nasty/offensive letters, obscene/nuisance phone calls, menacing gestures)

Environmental Damage

- 17. Criminal damage/vandalism (This includes graffiti, damage to bus shelters, damage to phone kiosks, damage to street furniture, damage to buildings, damage to trees/plants/hedges).
- 18. Litter/rubbish (This includes dropping litter, dumping rubbish, fly-tipping, fly-posting).
- 19. Other (please specify
- 20. Don't Know
- 21. All the same issues apply (*mutually exclusive category*)
- 22. None (mutually exclusive category)

Appendix D

Impact assessment methods and comparison of the baseline characteristics of the 56 non-FIP families with FIP families

Selection of the non-FIP areas and the FIP-eligible families within areas

In 2009 11 local authorities (LAs) that were not running an ASB FIP agreed to identify, and provide data on, a sample of families in their authority who would have been judged as eligible for an 'ASB FIP', to act as our comparison group. Tracking these families over time allows us to assess how the families who, if living in a FIP LA would automatically be assigned to a FIP, would fare under 'non-FIP' conditions. Comparing change over time for these non-FIP families, with the change over time experienced for similar FIP families has allowed us to estimate the added value of the FIP.

The LAs approached to take part were all relatively urban and relatively deprived, the aim being to mimic as far as possible the same skew in the profile of LAs operating an ASB FIP at that time. The LAs agreeing to take part were asked to apply strict, but realistic, criteria to their selection of 'FIP-eligible' families. These criteria were that families should meet at least one of four conditions:

- The family was at risk of eviction because of ASB;
- One or more members of the family were subject to enforcement actions for ASB;
- The family were excluded from mainstream housing and had a history of homelessness due to ASB;
- A child or young person from the household was at risk of being taken into care because of ASB.

The study was restricted to 'ASB FIP eligible' families as this was the only FIP variant that was well established at the time this part of the study was carried out.

Data collection and sample numbers

For the families identified in LAs not operating an ASB FIP and who would have been eligible for an ASB FIP, data was requested at two points in time: at the identification stage (i.e. baseline), and again around nine months later. The data was collected in a

paper questionnaire and covered a range of questions about the family's characteristics and issues, replicating key data from the FIIS at Support and Exit stage.

Baseline data were collected for a total of 93 families from 8 LAs. There was considerable loss to the sample at the nine-month follow-up stage for a number of reasons (staff changes within the LA being a key one), but follow-up data were finally returned for 56 of the original 93.

Where possible the reason for the lack of follow-up data was recorded. For 13 of the missing 37 cases the outcomes for the family were not known to the member of staff responsible for returning the data; for a further 5 the family had subsequently been assigned to a FIP because the LA had now introduced an ASB or other FIP and the family was still perceived to be FIP-eligible. For the residual 19 families no reason for the lack of data was given.

Even for those cases where follow up questionnaires were returned not all questions were completed. Our conversations with the staff in the comparison areas suggest that this was because, in the absence of an ASB FIP, detailed information about families is often not available in one central place and the staff had problems with collating the data on our behalf. In each of our analyses we have restricted the sample just to those cases where we have complete data, on the grounds that this is the approach least likely to introduce bias.

Follow-up interviews with key contact staff

For 4 of the 8 participating non-FIP LAs, the key contact member of staff was interviewed towards the end of the study on how their selected families had progressed. The interview focused on the reasons why no data was returned for some families, and for the families whose outcomes had improved over the nine month period of the study, how this improvement had occurred. This provided contextual information to help with the interpretation of our statistical findings. In particular, these interviews provided some insight into:

- Whether the loss of follow-up data for a significant number of the original 93 families was likely to bias our estimates
 - This might happen, for instance, if families with improved outcomes were no longer known to our key contact;
- · What interventions the selected families had in lieu of a FIP
 - In practice we found that many of the families in the study were reported to have improved outcomes over the nine-month study period so this addresses the question of how these improvements might have occurred.

Data analysis

Inevitably the 56 non-FIP families for whom we have before-after data do not, between them, entirely replicate the profile of ASB FIP families on the FIP information system. The tables below (D.1 to D.13) compare the 56 families with the 2,630 ASB families on the FIIS as at 31st March 2010⁶⁹. Although the 56 comparison families very clearly qualify as ASB FIP eligible, they are skewed in certain respects compared to the much larger group of families who had actually worked with the ASB FIP. They are, for instance, more likely to be owner-occupiers (13 per cent where tenure known; 7 per cent of the 56 comparison families) than the FIP group (at just 2 per cent), and to have fewer children on average (2 per cent of the comparison group families have five or more children compared to 21 per cent of the ASB FIP families).

The mismatches between the 56 non-FIP group and the 2,630 FIP group means that a simple comparison between the outcomes for the two groups may give a biased estimate of the 'added value' or impact of the FIP. For approximate unbiasedness, the group of 56 has to be compared to their equivalent or matched 'FIP families', who have, between them, the same profile as the 56. That is, the 56 comparison families have to be matched to FIP families who have the same distribution of characteristics and presenting problems at the baseline stage. Once these FIP 'matches' have been identified then a comparison of outcomes between the non-FIP and matched FIP families gives a much fairer estimate of the impact of the FIP. In essence, this method provides an estimate of how much better (or worse) the outcomes for the 56 non-FIP families would have been *if* they had all been through a FIP⁷⁰. The matching process is described in the next section.

Family type

Appendix Table D. 1 Family type		
Base: All FIP families with a Support Plan by	March 2010 and comp	parison group families
	Comparison group	
Family type	families	FIP families
	%	%
Lone parent	73	67
Two parent	27	33
Base	55	2,630

-

⁶⁹ Data was used up to 31st March 2010 as this most accurately mirrored the time frame for data collection for the comparison families.

This is a different approach to a standard intervention versus comparison group study. Under the standard model each member of the intervention group would be matched to one or more members of the comparison group, and the aggregate matched comparison group would then give an estimate of the outcomes for the whole of the intervention group in the absence of the intervention. But this approach is only possible if all (or at least most) of the intervention group can be matched to at least one individual in the comparison group. In the current study, the comparison group of 56 is far too small to generate suitable matches for the whole of the FIP intervention group, so, instead, we have turned the impact question around to ask what would the outcomes of the comparison group be if they had had the FIP intervention. This involves finding a match (or matches) for each of the 56 from the much larger pool of over 2,000 FIP cases, which is relatively straightforward.

Family size

Appendix Table D. 2 Family size						
Base: All FIP families with a Support Plan by	Base: All FIP families with a Support Plan by March 2010 and comparison group families					
	Comparison group	CID formilian				
Number of children aged under 18	families	FIP families				
	%	%				
None	13	2				
1–2	46	36				
3–4	39	41				
5 or more	2	21				
Base	56	2,630				

Disabilities and SEN

Appendix Table D. 3 Disabilities (physical and mental)					
Base: All FIP families with a Support Plan by March 2010 and comparison group families					
Whether anyone in the family has a	Comparison group	CID familias			
disability	families	FIP families			
	%	%			
No	34	61			
Yes	18	30			
Don't know	48	9			
Base	56	2,630			

Appendix Table D. 4 Special Educational Needs (SEN): family level					
Base: All FIP families with a Support Plan by March 2010 and comparison group families, which include one or more children aged 16 or under					
	Comparison group	FIP families			
Whether any children have SEN	families	FIF Idililles			
	%	%			
No	[33]	37			
Yes	[24]	42			
Don't know	[43]	21			
Base	[49]	2630			

Work and benefit status

Appendix Table D. 5 Family work status					
Base: All FIP families with a Support Plan by March 2010 and comparison group families					
	Comparison group	CID familias			
Work status	families	FIP families			
	%	%			
Workless family	34	76			
One or more family members in work	32	17			
No information about family's work	34	7			
status		1			
Base	56	2,630			

Appendix Table D. 6 Family benefit status						
Base: All FIP families with a Support Plan by March 2010 and comparison group families						
Benefit status	Comparison group families	I FIP families				
	%	%				
Claiming out-of-work benefits	48	81				
Not claiming out-of-work benefits	13	12				
Don't know	39	7				
Base	56	2,630				

Housing and tenancy status

Appendix Table D. 7 Families' housing tenure				
Base: All FIP families with a Support Plan by March 2010 and comparison group families				
Housing tenure	Comparison group families	FIP families		
	%	%		
Rent LA/ALMO	23	51		
Rent RSL	25	24		
Rent Private	16	12		
Hostel / friends / temporary	0	5		
Own property	13	2		
FIP Dispersed accommodation	0	2		
Rent: Other	0	1		
Rent: HAT	0	1		
FIP Core Block	n.a	1		
Other accommodation	2	1		
Rent: don't know landlord	0	+		
Don't know type of accommodation	21	1		
Base	56	2,630		

Housing enforcement actions

Appendix Table D. 8 Housing enforcement actions against the family

Base: All FIP families with a Support Plan by March 2010 and comparison group families

	Comparison group	FIP families
Housing enforcement actions	families	rir iamilles
	%	%
Visit by housing office	14	35
Warning letter	32	32
Notice of Seeking Possession (NOSP)	14	18
Notice of Demotion of Tenancy	4	5
Postponed / Suspended Possession Order granted by court	2	3
Injunction against unlawful use of premises	0	3
Injunction under protection from harassment act	0	1
Demotion Order granted by court	2	1
Outright Possession Order granted by court	0	1
Bailiff warrant issued	2	+
Served notice to quit	7	+
Eviction	n.a.	+
Threat / eviction proceedings	n.a.	+
Warning meeting / interview	n.a.	+
Private landlord seeking possession	0	0
Right To Buy Suspension Order	0	0
Other	7	3
None	25	33
Don't know	29	7
Base	56	2014

Appendix Table D. 9 Number of housing enforcement actions against the family Base: All FIP families with a Support Plan by March 2010 and comparison group families Number of housing enforcement Comparison group FIP families families actions % % 33 25 None 23 31 14 19 4 5 29 Don't know Base 56 2,014

Anti-social behaviour issues

Appendix Table D. 10 Anti-social behaviour issues Base: All FIP families with a Support Plan by March 2010 and comparison group families Comparison group FIP families families % % Disregard for community / personal 67 77 well-being Nuisance behaviour 40 51 50 Rowdy behaviour 53 39 Noise 23 Noisy neighbours 21 27 Animal-related problems 6 6 0 Hoax calls Misuse of public space 54 49 29 Drug / substance misuse & dealing 38 Street drinking 21 15 Vehicle-related nuisance & 12 9 inappropriate vehicle use 9 Sexual acts Prostitution 2 0 Begging 0 Abandoned cars 0 Kerb crawling 42 55 Environmental damage 51 32 Criminal damage / vandalism Litter / rubbish 8 19 31 Acts directed at people 37 29 27 Other intimidation / harassment Racial intimidation / harassment 13 9 Other 13 None* 5 10 5 Don't know Base 56 2630

Appendix Table D. 11 Number of anti-social behaviour issues

Base: All FIP families with a Support Plan by March 2010 and comparison group families

	Comparison group families	
	%	%
None	6	16
1	15	17
2	27	17
3	13	14
4+	40	34
Don't know	0	2
Base	56	2,630

Appendix Table D. 12 Enforcement actions in place

Base: All FIP families with a Support Plan by March 2010 and comparison group families

	Comparison group families	FIP families
	%	%
Pre-court		
Contracts and agreements	33	31
Warnings	35	16
Pre-court juvenile specific	14	12
Seizure of property	0	1
Fixed Penalty notices and penalty notices for disorder	4	3
Abatement notices	0	2
Court-related		
Juvenile specific orders	24	24
Court orders	10	14
Other enforcements	8	8
Other kind of formal action	16	7
None	24	29
Don't know	9	4
Base	51	1,676
<u></u>	 	

The base is lower for FIP families for this question because this was only asked in this way at the Support Plan stage from the end of February 2009.

Appendix Table D. 13 Risk factors

Base: All FIP families with a Support Plan by March 2010 and comparison group families

	Comparison group	FIP families
	families	i ii iaiiiiles
	%	%
Education / Learning	68	83
Truancy, exclusion or bad behaviour at school	55	61
Lack of positive activities for children	30	53
Low educational attainment	32	51
Lack of basic numeracy and literacy	25	27
Difficulty with daily tasks	11	27
Physical / Mental health	41	71
Mental Health problems	29	41
Drugs or substance misuse	23	33
Drinking problem / Alcoholism	21	30
Physical health problems	7	23
Poor parenting	54	69
Inappropriate peer group (where children in the family, are considered to be socialising with inappropriate friends)	41	48
Family Debt (including rent appears, credit card bills, utility bills)	9	33
Marriage, relationship or family breakdown	23	28
Domestic violence	27	27
Child protection issues	18	26
Crimes against the family	9	16
Family members victims of ASB	7	11
Family members victims of other crimes	7	6
Family members victims of racial discrimination	+	3
Family members victims of sexual discrimination	+	+
Teenage pregnancy	+	5
Other	2	3
None*	13	2
Don't know	n.a.	1
Base	56	2,630

Matching the non-FIP and FIP families

To isolate the impact of ASB FIPs the non-FIP group has been matched to individuals in the much larger FIP sample with similar family characteristics and similar identified issues at the identification or Support Plan stage.

The exact details of the matching of non-FIP to FIP families differs depending on the outcome being considered. For the ASB and crime outcome, for instance, the two groups of families have been matched on the range of ASB and crime issues the families presented with, plus a small number of other baseline characteristics known from other analysis to be predictive of outcomes. Whereas, for the family functioning outcome, the families have primarily been matched on the family functioning issues they presented with (e.g. child protection, family breakdown, poor parenting and domestic violence). Please see lists below.

For some of the 56 non-FIP families there is only one 'equivalent' family in the FIP sample. In these instances the outcome for the single matched FIP family is imputed to the non-FIP family. For others of the 56 there are several 'equivalent' FIP families per non-FIP family. In these cases, the imputed 'with-FIP' outcome is the average of the outcome for the matched FIP families. This gives 56 'imputed' FIP values (one per non-FIP family). The imputed values are then summed across the whole group of 56 to give the overall 'with FIP' estimate of outcome.

The table below lists the baseline variables used to match the non-FIP families to one or more families from the much larger FIP sample. The lists are ordered: where a matched family could not be found with exactly the same characteristics across all variables, the variables from the bottom of the list were dropped one by one until a match could be found.

Matching variables for ASB and crime

Type of ASB affecting family: Misuse of public space
Type of ASB affecting family: Acts directed at people
Type of ASB affecting family: Environmental damage
Type of ASB affecting family: Disregard for community / personal well-being
Risk Factors: Poor parenting
Risk Factors: Domestic violence
Risk Factors: Physical / mental health
Family type
Family ethnicity- all white, all non white or mixed white and non white
Number of children (under 18) - grouped

Risk Factors: Education / learning

Age of youngest child (grouped)

Type of ASB affecting family: Misuse of public space

Type of ASB affecting family: Environmental damage

Risk Factors: Child protection

Family work status

Risk Factors: Domestic violence

Risk Factors: Teenage pregnancy

Risk Factors: Inappropriate peer group

Number of children (under 18)

Matching variables for family functioning and risk

Risk Factors: Poor parenting
Risk Factors: Child protection
Risk Factors: Domestic violence
Risk Factors: Marriage / relationship breakdown
Risk Factors: Physical health
Type of ASB affecting family: Environmental damage
Type of ASB affecting family: Disregard for community / personal well being
Family type
Family ethnicity- all white, all non white or mixed white and non white
Number of children (under 18)

Matching variables for health outcome

Risk Factors: Mental health

Risk Factors: Physical health

Risk Factors: Child protection

Type of ASB affecting family: Environmental damage

Type of ASB affecting family: Misuse of public space

Type of ASB affecting family: Acts directed at people

Type of ASB affecting family: Disregard for community / personal well being

Risk Factors: Teenage pregnancy

Family type

Number of children (under 18) - grouped

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