

# Early Years, Parenting and Family Relationships Conference

‘Early Intervention in the early years of life: Latest evidence on what works in local application’

Tuesday, 12 July 2016



In partnership with



Public Health  
England



# Welcome, introduction and purpose

Mark Rogers,  
Chief Executive,  
Birmingham City Council

#EIFEarlyYears  
@theEIFoundation  
[eif.org.uk](http://eif.org.uk)



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# Progress to date on evidence and implementation

Carey Oppenheim,  
Chief Executive,  
Early Intervention Foundation

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# Starting the journey in 2011



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## Early Intervention: The Next Steps

An Independent Report to Her Majesty's Government  
Graham Allen MP





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- Growing research on case for early intervention drawing on research from – psychology, economics, neuroscience and social research.
- Strong evidence for a number of specific programmes implemented internationally esp. in the US - Family Nurse Partnership introduced in UK
- Lack of evidence for programmes in UK context
- Activity in local areas: Sure Start Children's centres, childcare, school based activity, early intervention grant, parenting programmes, Family Intervention Project, Troubled Families, health visitors commitment
- The Early Intervention Foundation created in 2013 with all-party support



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# Planting the seeds

- 20 Early Intervention Pioneering Places
- Key evidence reviews on:
  - *The Best Start At Home*
  - *Social and Emotional Learning – Skills for Life and Work*
  - *High risk: Domestic Violence, Gang and Youth Violence*
- Guidebook of programmes – based on ratings made by others
- Costs of late intervention



**An independent charity and a 'What Works' Centre:  
we support effective early intervention for children so  
every child can fulfil their potential. Focus on:**

- Children with signals of risk
- Most effective responses
- Cashable savings/effective use of resources

Early Intervention: targetted support to children with signals of risk before problems become entrenched and costly

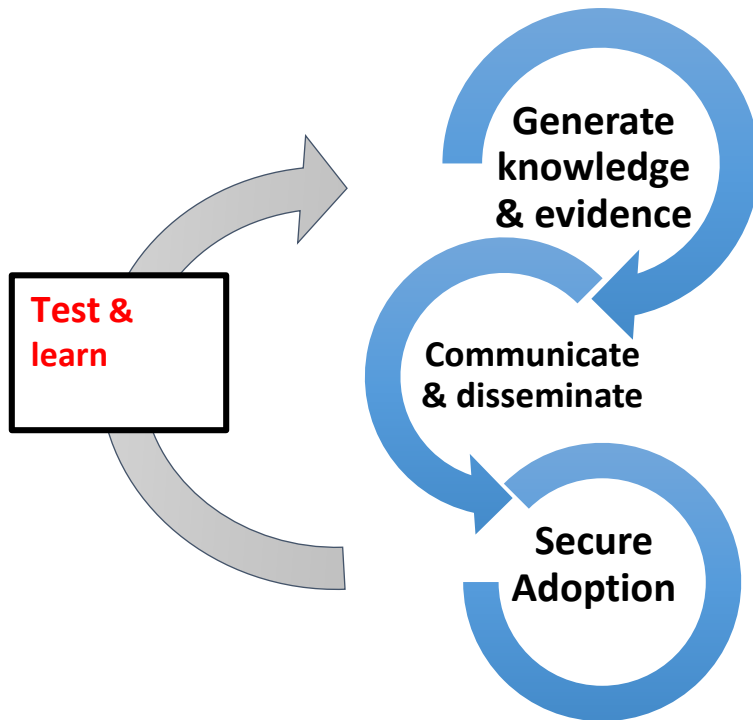






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# How do we work?



-  Pioneering places
-  Better Start areas
-  Additional areas
-  Police leaders



# Foundations of Life, What Works to support parent child interaction in the early years

- Represents the next stage in the Allen Review
- Creating foundations for a UK evidence base for Early Intervention
- Use EIF's own ratings, approach, cost scale
- Drawing on expertise of partners
- Focus on *relationships* – parent and child and parent and parent



# Foundations for Life: What Works to support parent-child interaction in the early years

- A period of momentous change
- A baby grows into a child who can walk, talk and relate to others
- Parents and carers help lay the foundations for a child's life chances and life skills
- 3 primary outcomes: attachment, behavioural, cognitive development
- Report provides insight into the overall research underpinning these outcomes
- Assessed the evidence of 75 programmes available in the UK



# What works to enhance the inter-parental relationships and improve outcomes for children? University of Sussex, DWP, EIF

- How parents relate to each other as a couple is a primary influence on children's mental health and long-term life chances.
- Children exposed to frequent, intense and poorly resolved inter-parental conflict are at risk of a range of negative outcomes: mental health, attainment, social and emotional skills.
- Parenting interventions in the presence of frequent, severe and unresolved inter-parental conflict – without addressing that conflict – are unlikely to be successful in improving child outcomes.
- Assessed evidence and cost scale of 15 interventions in the UK.





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# A more sophisticated understanding of evidence and implementation

- What works for whom, when, where
- Big Lottery - Better Start – example of new funding to test and learn
- Developing a UK evidence base, focus on an evidence journey
- Invest not only in evidenced based programmes, but also innovation where there are gaps
- Implementation is as important as evidence
- Whole system approaches balancing universal Healthy Child Programme, targeted and specialist services
- Champions for early intervention across services
- Monitoring and evaluation as you go along

# Early years, Parenting and Family Relationships Conference



- Bringing together the insights from 2 reviews: one focused on parent child relationship, the other on the relationship *between* parents
- A family focused approach to tackle inter-generational disadvantage
- The first event in a major programme of workshops, events, exchanges to support good commissioning – evaluating impact
- Creating a new partnership between national government, local commissioners and developers to generate greater knowledge about What Works
- Drawing on our and your knowledge of how you turn knowledge into practice and make a difference to children and family lives





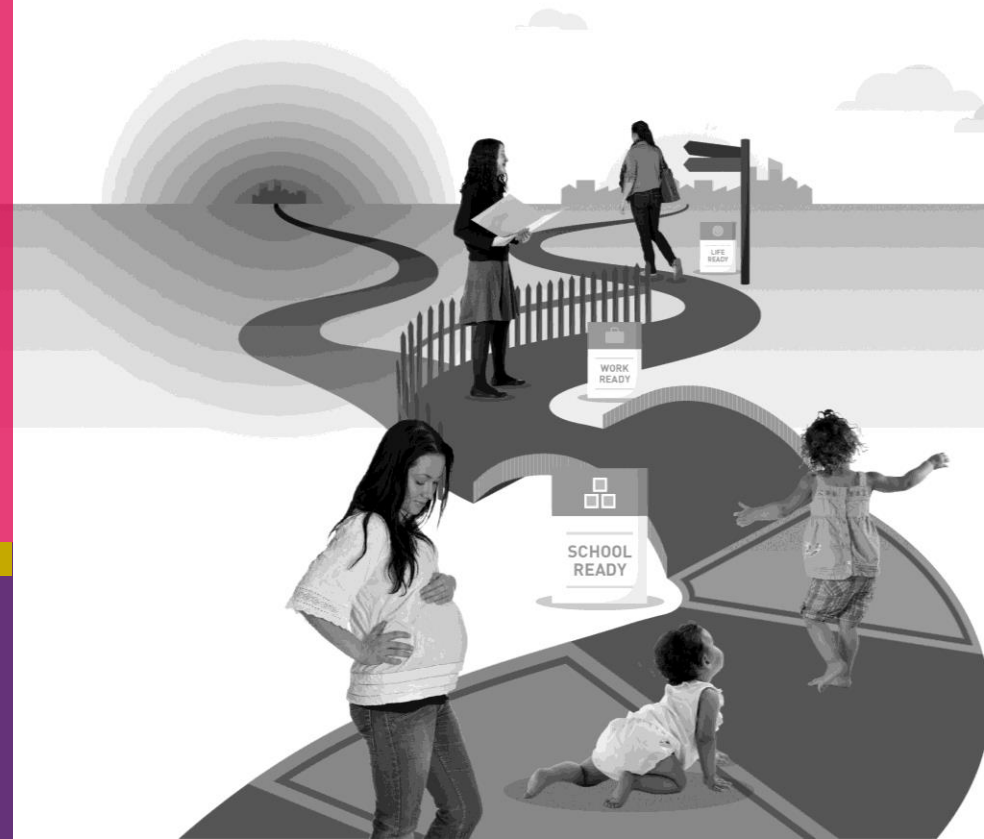
# Keynote address

**Jane Ellison MP,**  
Parliamentary Under  
Secretary of State for Public  
Health

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# Using evidence to change services: opportunities and challenges over the next 5 years

Mark Rogers, Chief Executive,  
Birmingham City Council

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# Foundations for Life: What Works to Support Parent Child Interaction in the Early Years

**Professor Leon Feinstein,**  
Director of Evidence,  
Early Intervention Foundation

**Dr Kirsten Asmussen,**  
Evidence Analyst,  
Early Intervention Foundation

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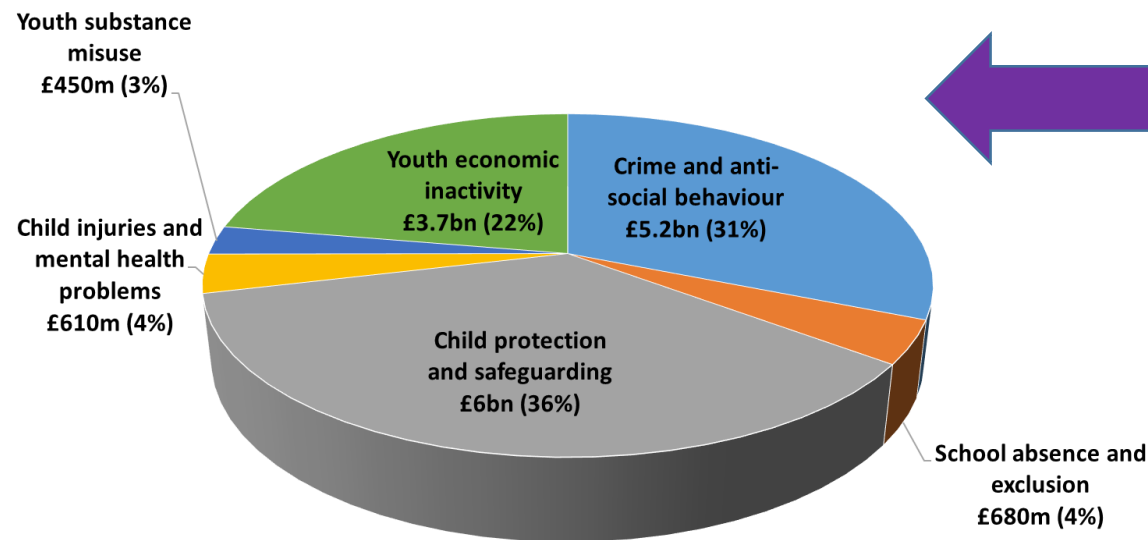


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# Action to deliver cashable savings

## Late intervention costs



## The EIF Guidebook

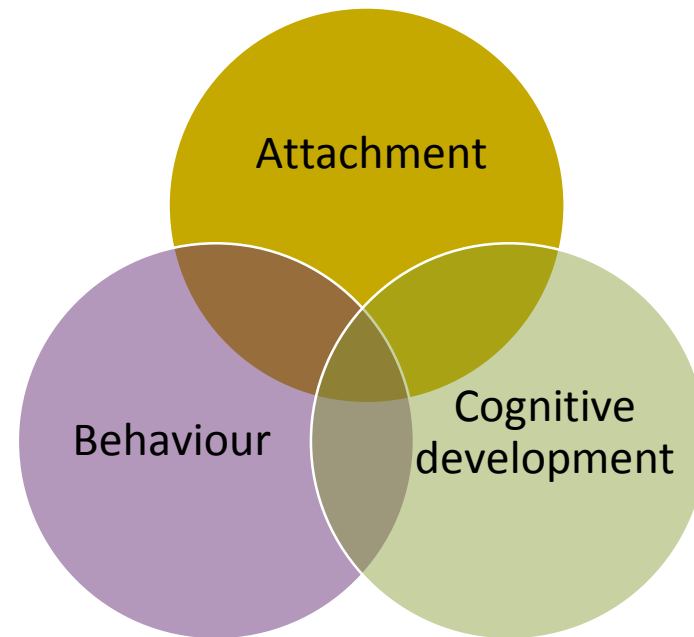
### 1 What outcomes do you want to improve?

<div>The family and the home</div> <div></div>	<div>Positive early child development</div> <div></div>
<div>Support children's mental health &amp; well-being</div> <div></div>	<div>Prevent child maltreatment</div> <div></div>
<div>Enhance school achievement &amp; employment</div> <div></div>	<div>Prevent crime, violence &amp; antisocial behaviour</div> <div></div>
<div>Prevent substance misuse</div> <div></div>	<div>Prevent risky sexual behaviour &amp; teen pregnancy</div> <div></div>
<div>Prevent obesity &amp; promote healthy physical development</div> <div></div>	<div>SEE ALL PROGRAMMES</div> <div></div>



# Why parent-child interactions?

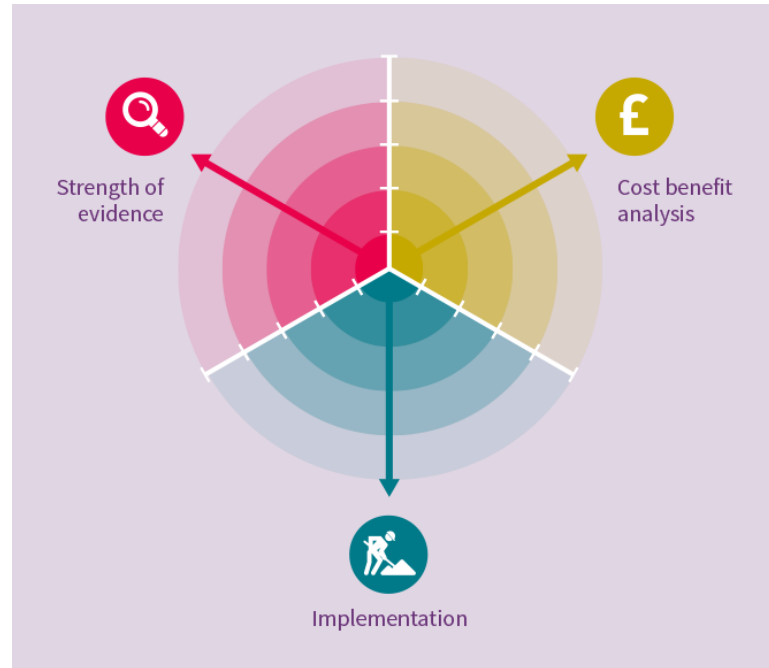
- Parents and carers provide the context for child development and so support and shape it.
- Learning and development within these three domains takes place through interactions between parent or carer and child
- These dynamic interactions have important impacts on life chances





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# 3 ASPECTS OF COMMISSIONING

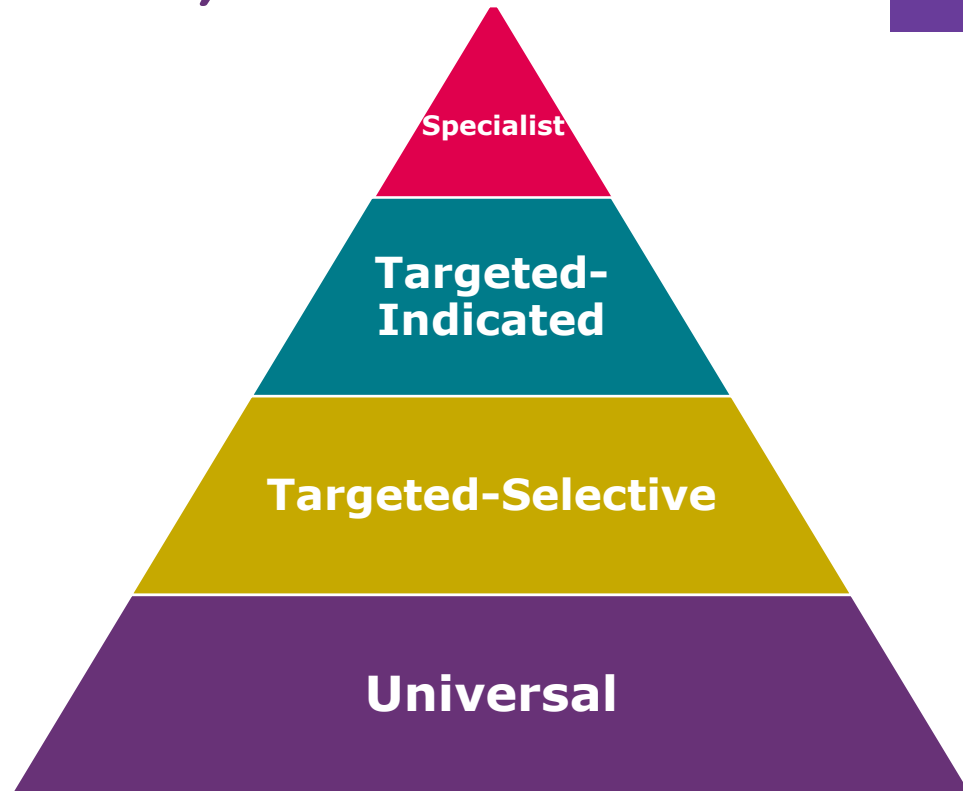




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# What works for whom, when...

Preschool
Toddlerhood
Infancy
Perinatal
Antenatal





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# Evidence Panel



**PROFESSOR JANE  
BARLOW, UNIVERSITY OF  
WARWICK**



**PROFESSOR GORDON  
HAROLD, UNIVERSITY OF  
SUSSEX**



**PROFESSOR ANN PHOENIX,  
INSTITUTE OF EDUCATION**



**DAVID P. FARRINGTON,  
O.B.E., UNIVERSITY OF  
CAMBRIDGE**



**PROFESSOR VIVETTE GLOVER,  
IMPERIAL COLLEGE LONDON**



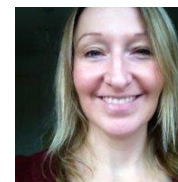
**NICK AXFORD, SOCIAL  
RESEARCH UNIT**



**PROFESSOR KATHY  
SYLVA, UNIVERSITY OF  
OXFORD**



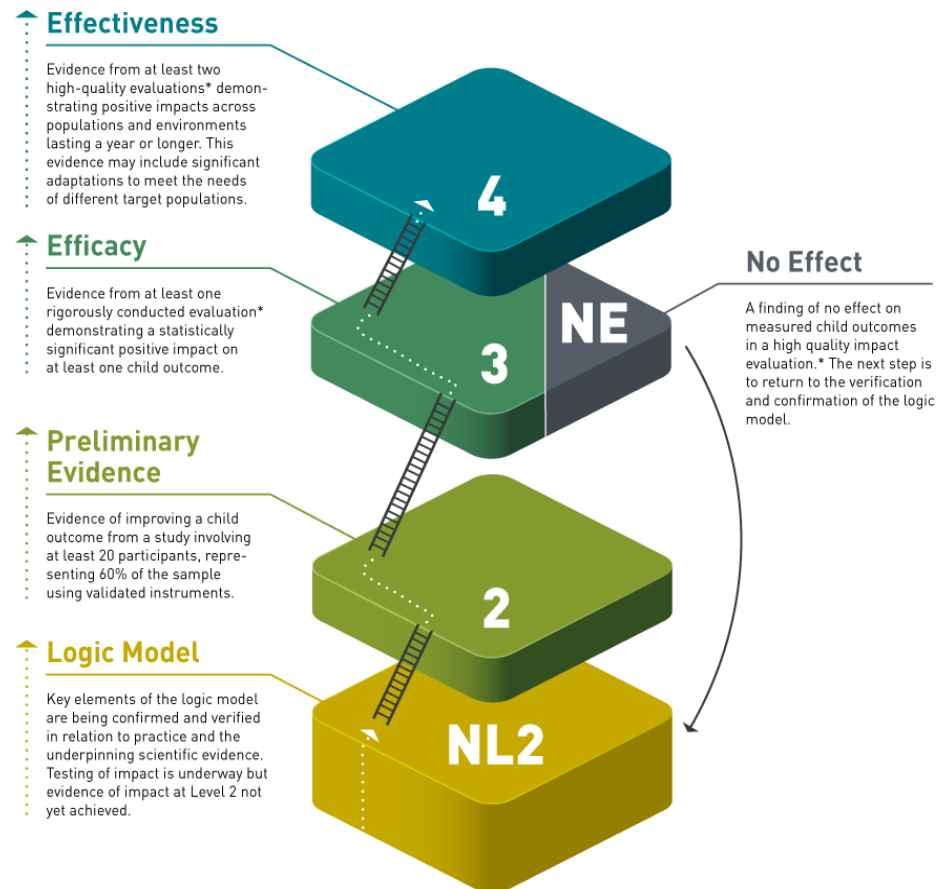
**PROFESSOR STEPHEN  
SCOTT, KING'S COLLEGE  
LONDON**



**DR SHIRLEY WOODS-  
GALLAGHER, GREATER  
MANCHESTER PUBLIC SERVICE  
REFORM**



# The EIF strength of evidence rating



\*High quality evaluations do not need to be randomised control trials if a relevant and robust counter-factual can be provided in other ways.



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# EIF intervention cost rating scale

	1	2	3	4	5
Description of cost to set-up and deliver	Low cost		Medium cost		High cost
Indicative Range (Estimated unit cost range per child participant)	<£100	£100-£499	£500-£999	£1,000-£2,000	>£2,000

## This is not a rating of market prices/fees.

The rating summarises a wide variety of data about **how resource-intensive a programme is to deliver**. This can include market prices, but will also take into account a programme's training, implementation and staffing requirements, as well as the length of intervention dose and the size of the treatment unit.

# A Programme Report

Programme Description			
Brief Description – Based on the version of the programme evaluated in its best evidence.			
Primary outcome domain:	Behaviour	Delivery Model:	Group
Child Age:	Infancy, Toddlerhood	Level of Need:	Universal
Full Description - Based on information agreed with the programme developer, this section describes the programme more generally in terms of recommended or typical implementation.			
Example programme description			
Ratings Summary			
Strength of Evidence of Child Outcomes			3
Placeholder text			
Programme Costs			1
Placeholder text			
Impact			
Placeholder text			

Implementation Summary		
Based on information provided by the programme developer, this section describes the programme more generally in terms of recommended or typical implementation.		
Example text		
In Detail		
Level of need	Low need	✓
	Moderate need	✓
	High need	X
Classification	Universal	✓
	Targeted: Selective	✓
	Targeted: Indicated	✓
Programme requirements		
Format	Example format	
Sessions	15 sessions of 3 hours duration each	
Number of practitioners required	2	
Practitioner requirements		
Job Title of Practitioner – 1st	Family support worker	
Qualification Level – 1st	Recommended QCF 2	
Programme training – 1st	32 hours	
Supervision requirements		
Number of supervisors	2	
Type of supervisor – 1st	Host-agency supervisor providing case-management supervision	
Qualification level – 1st	Recommended QCF 6	
Host agency requirements		
Licensing fee	No	



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# Headline findings 1

There are a range of effective and proven programmes, differing by approach and rationale.





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# Headline findings 2

Overall, the evidence is strongest for programmes that target based on early signals of risk in child development.





# Headline findings 3

Available programmes which focus on children's behavioural development tend to have better evidence of effectiveness than those focused on attachment or cognitive development





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## Headline findings 4

Although the case for early intervention is very well made, the overall evidence base for the programmes available now in the UK needs further development





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**Professor Leon Feinstein,**  
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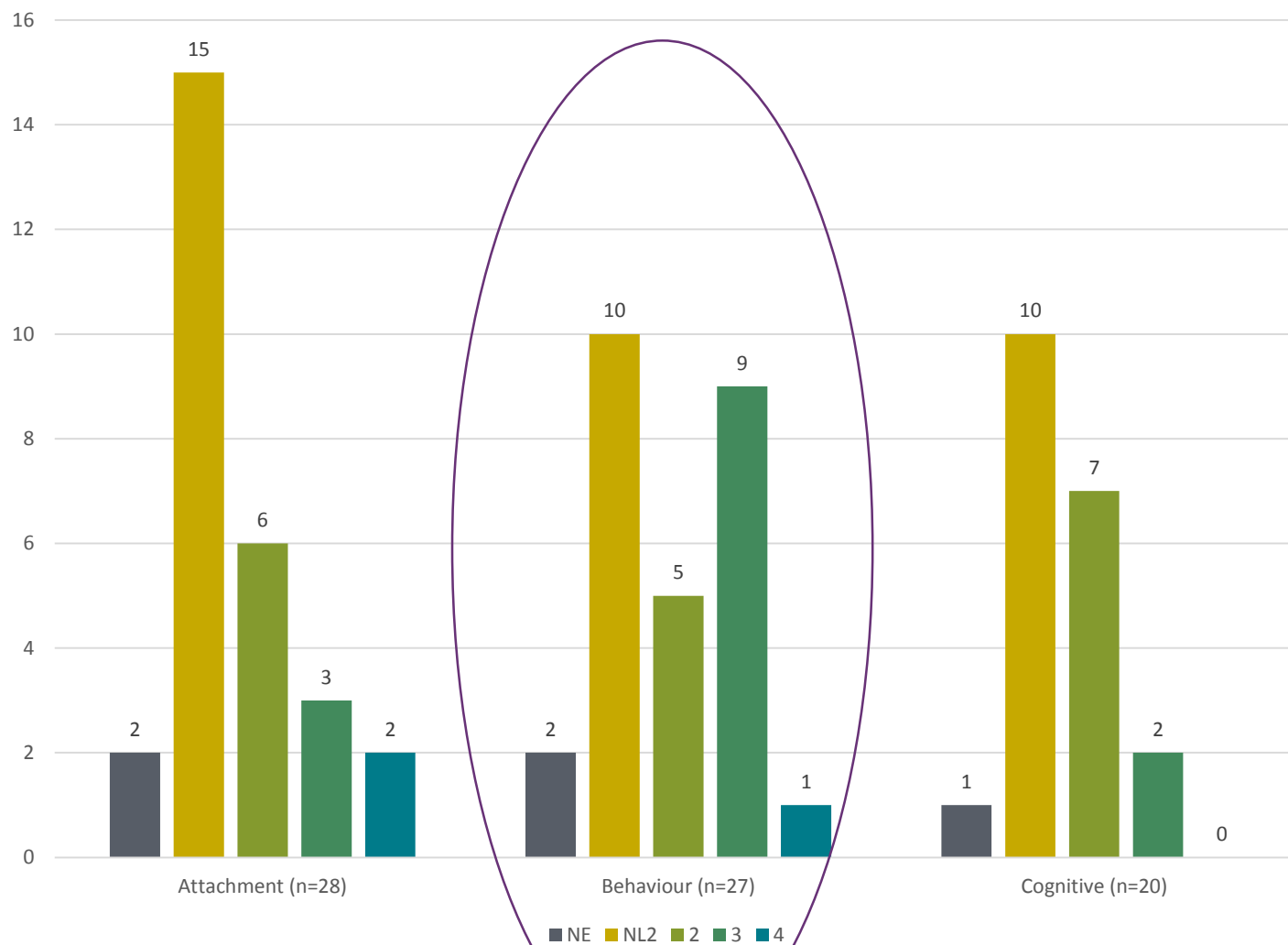


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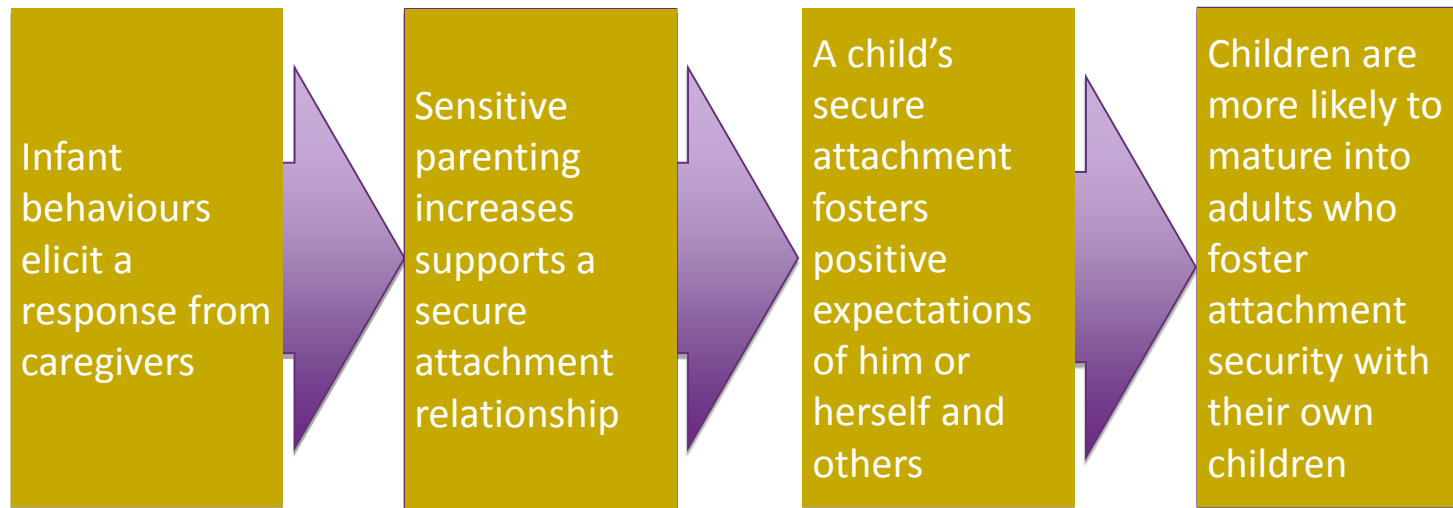
# Attachment Security



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The majority of parents are able to support attachment security in their children

A minority will struggle. Factors that interfere with parents' ability to respond sensitively to their child include:



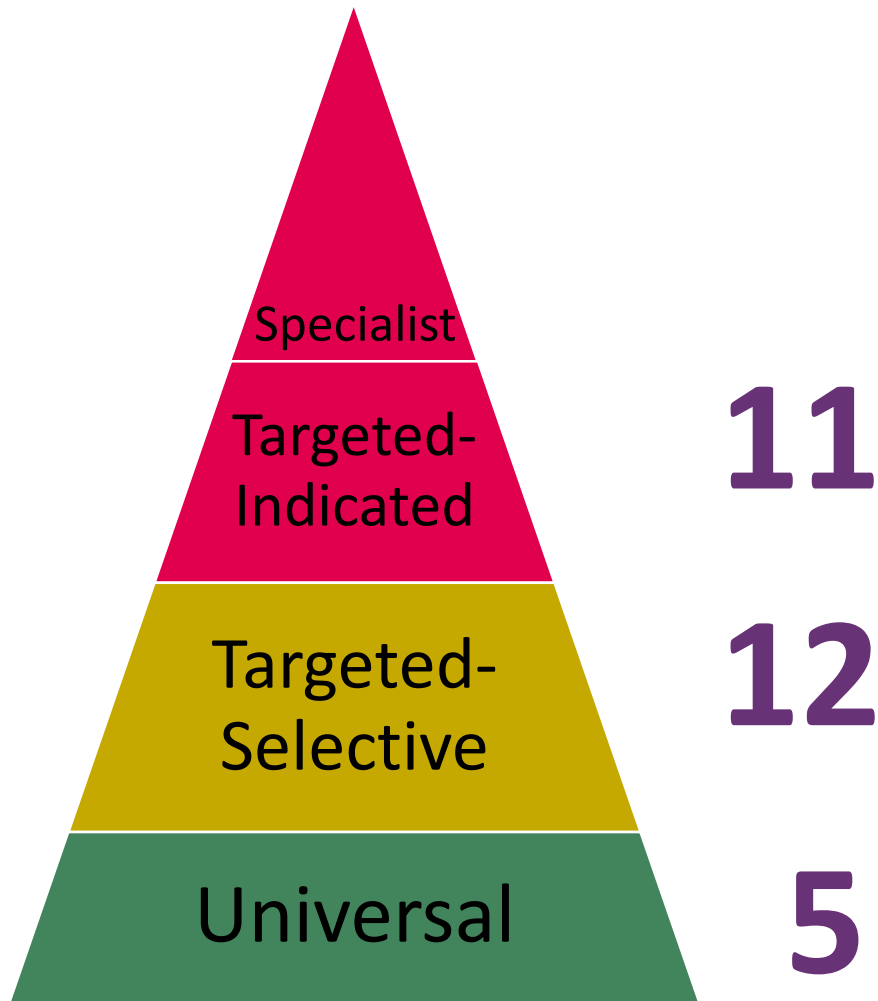
Social Disadvantage  
Single Parenthood  
Unwanted pregnancy

Age  
Relationships problems  
Mental health

# Attachment Security



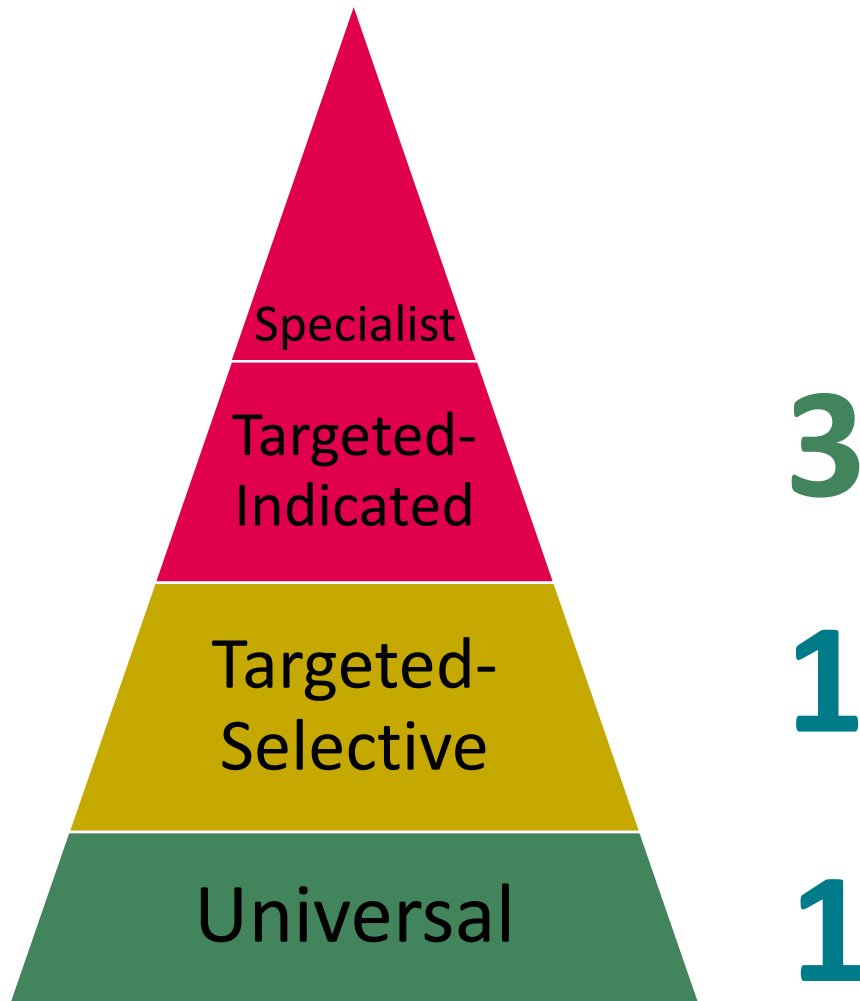
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# Attachment Security



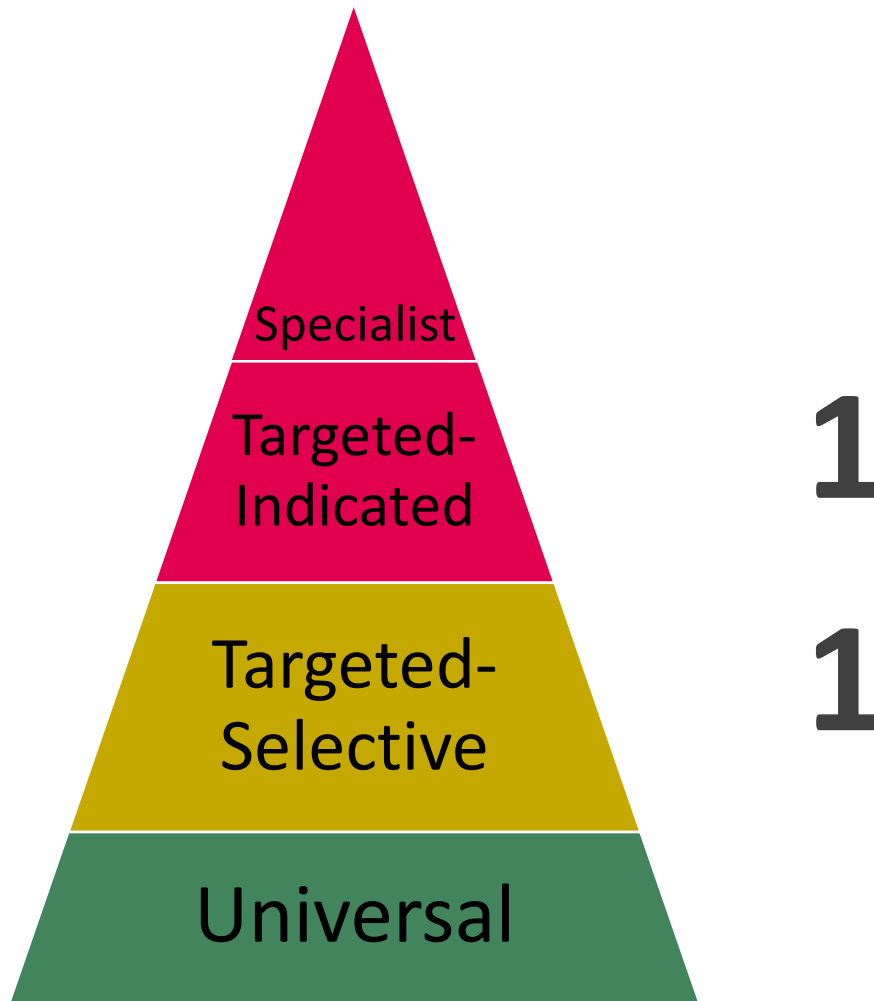
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# Attachment Security



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# Attachment Security



There is a high need for Targeted-Selective and Targeted-Indicated interventions that support infant and children's early attachment relationship starting during the perinatal period and infancy

5 interventions with good or established evidence were identified

- 3 Targeted-Indicated Child/parent psychotherapy
- 1 Targeted-Selective (Family Nurse Partnership)
- 1 Universal (Family Foundations)

Programmes with no effect suggest that programmes are likely to be more effective for highly vulnerable families if offered for a longer period of time to most vulnerable families

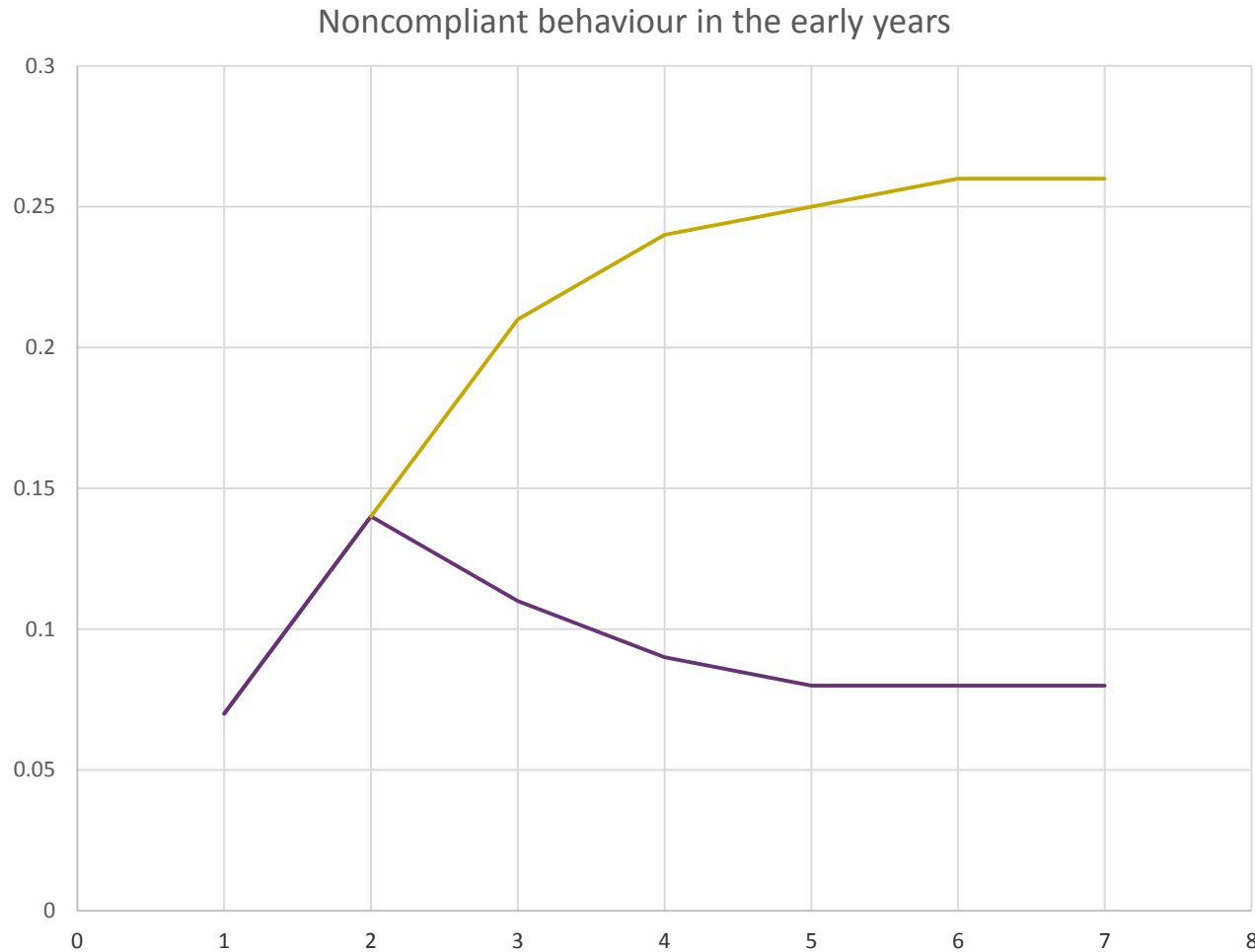
Effective programmes tend to be **high cost**, but can provide **high impact** – including increased attachment security, reduced risk of child maltreatment and improved parental mental health



# Behavioural self-regulation



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# Behavioural self-regulation



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The majority of parents will learn how to manage their child's non-compliant behaviour

Some will struggle. Factors that increase the likelihood of non-compliant behaviour include:

- Child temperament

- Language delays

- Coercive parenting behaviours

Interventions that aim to improve children's behaviour therefore aim to teach parents effective strategies for replacing coercive parenting behaviours

# Behavioural self-regulation



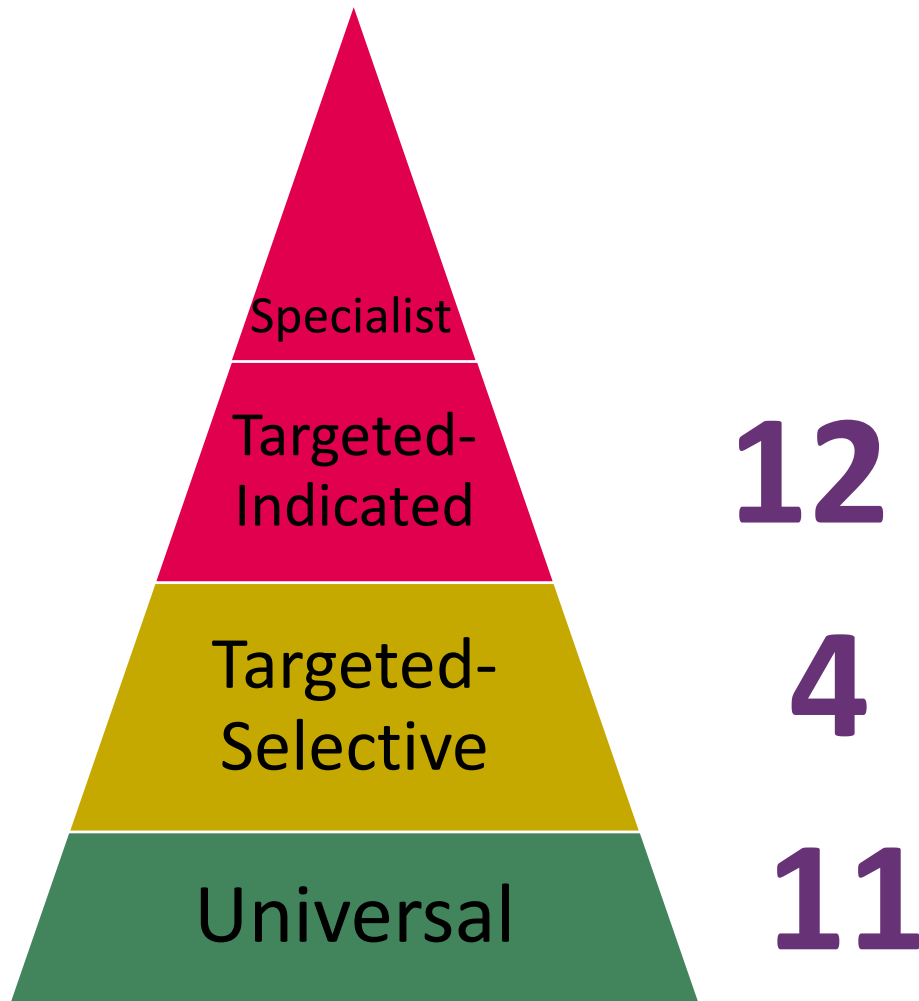
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# Behavioural self-regulation



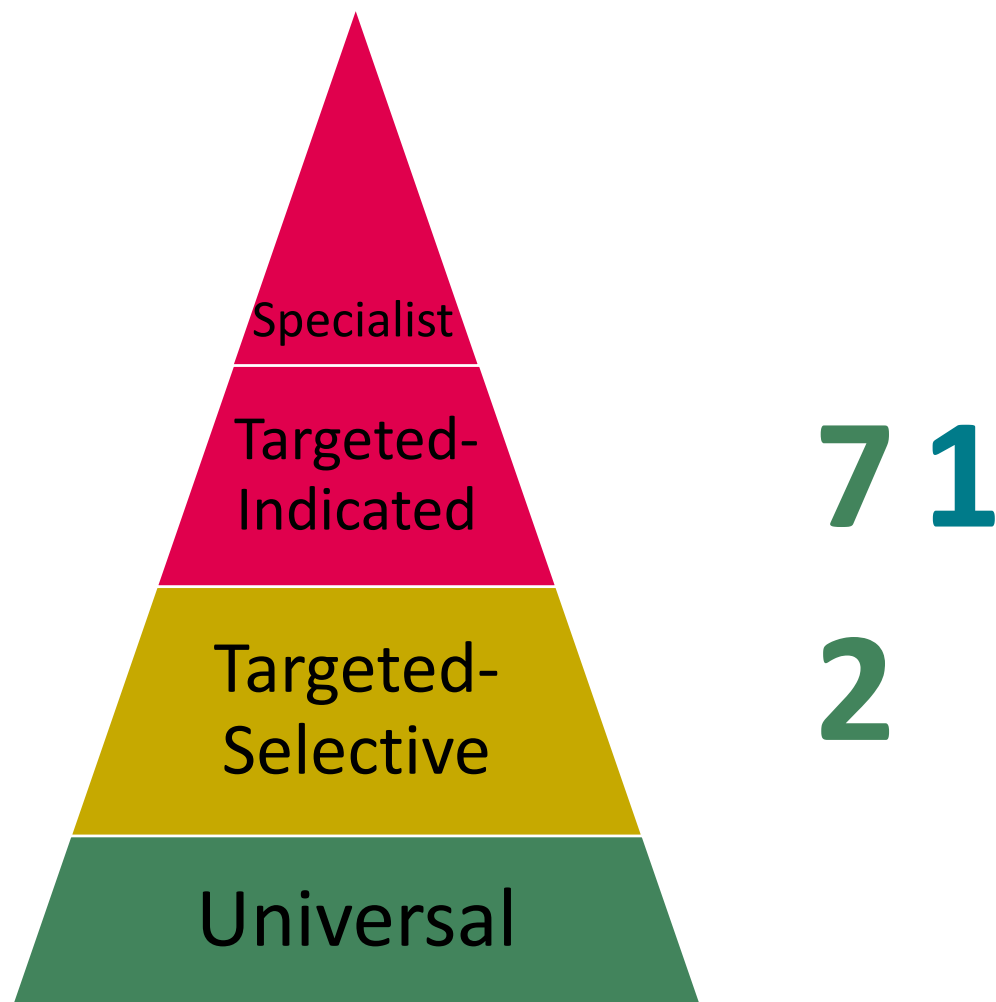
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# Behavioural self-regulation



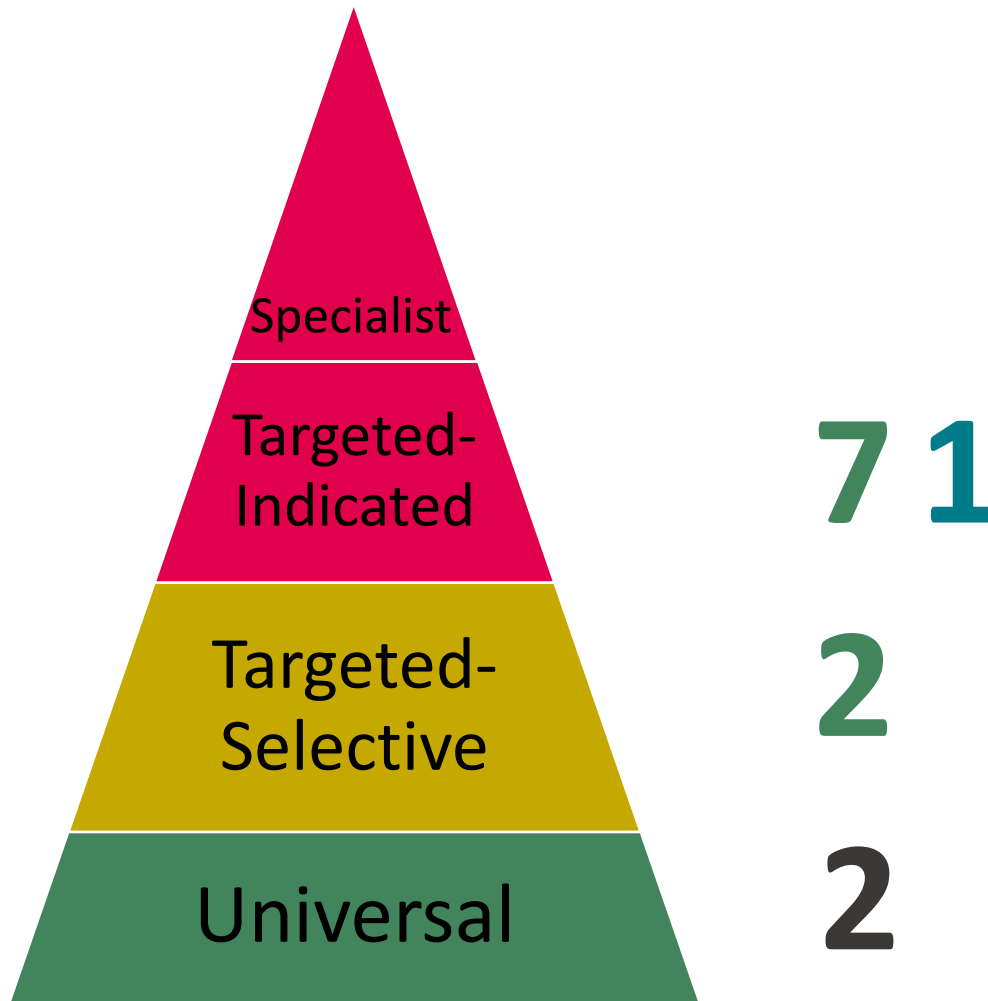
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# Behavioural self-regulation



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# Behavioural self-regulation

There is a high need for Targeted-Indicated interventions that help parents manage difficult child behaviour

10 interventions with good or established evidence were identified

- 8 were available at the Targeted-Indicated level. One of these programmes had good evidence of improving children's behaviour for ten years or longer
- 2 were available at the Targeted-Selective 1
- 2 Universal interventions had evidence of **no effect** on any measured EIF child outcome

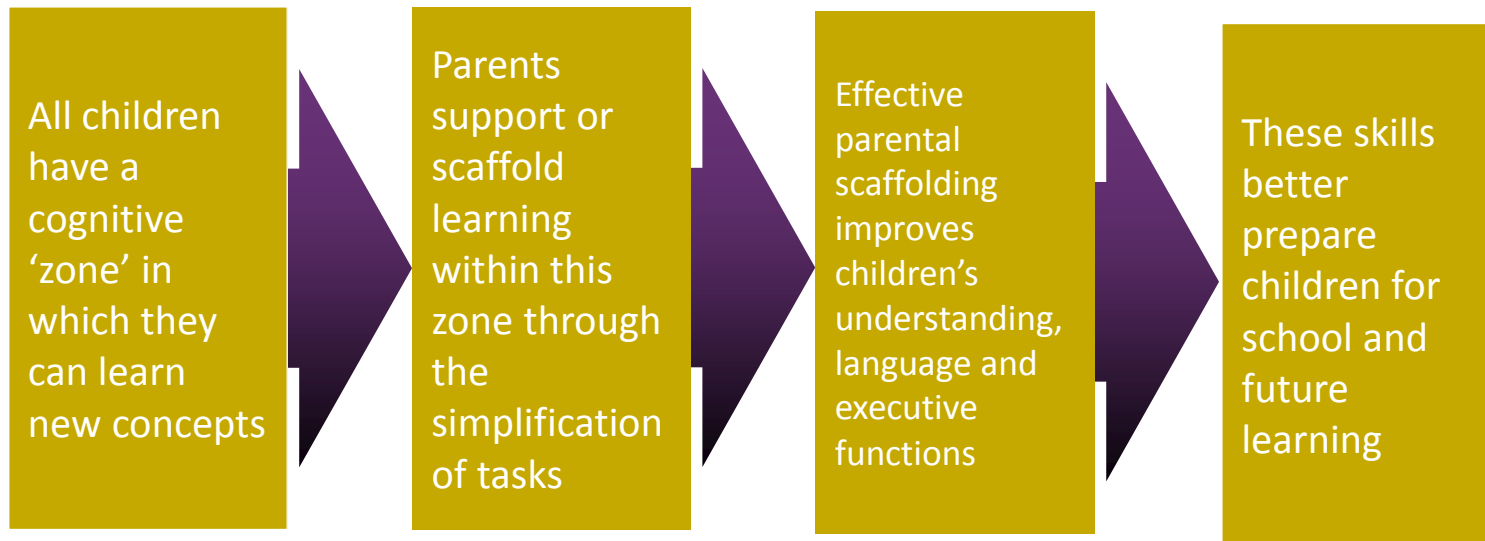
Non-compliant behaviour problems may be difficult to prevent. This may be because not all children will remain non-compliant and parents likely need to practice effective strategies

Effective programmes tend to be **low to low-medium** cost. These programmes appear to have good short term impact, but longer term impact remains unknown.

# Cognitive development



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# Cognitive development



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The majority of middle and upper middle-income families are able to provide their children with a suitably rich learning environment – no intervention is needed

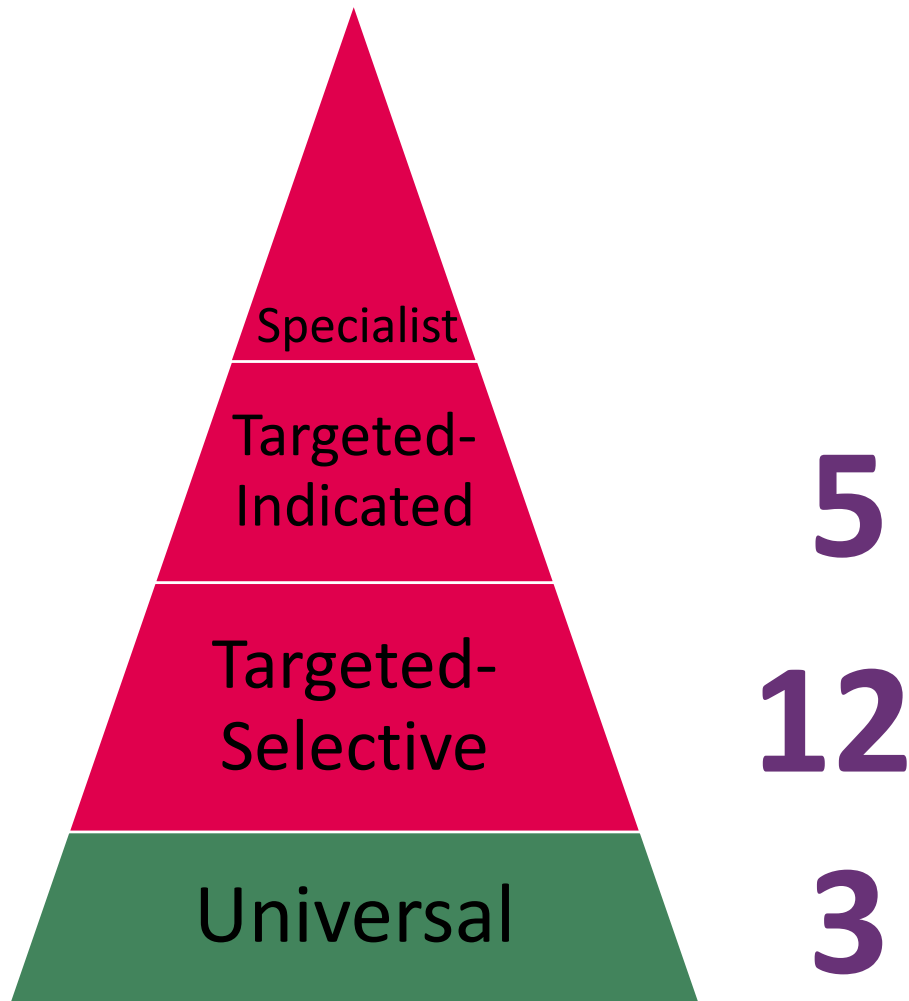
A strong and persistent gap exists between lower and middle-income families in children's early learning

Language delays are also apparent in children in lower, middle and upper middle income families

# Cognitive development



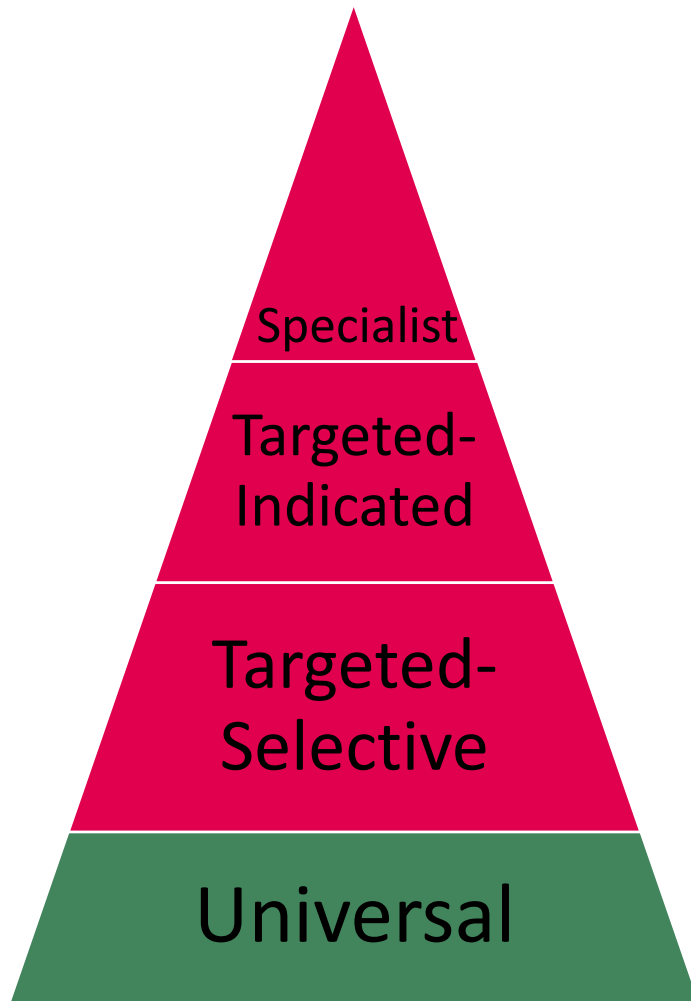
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# Cognitive development



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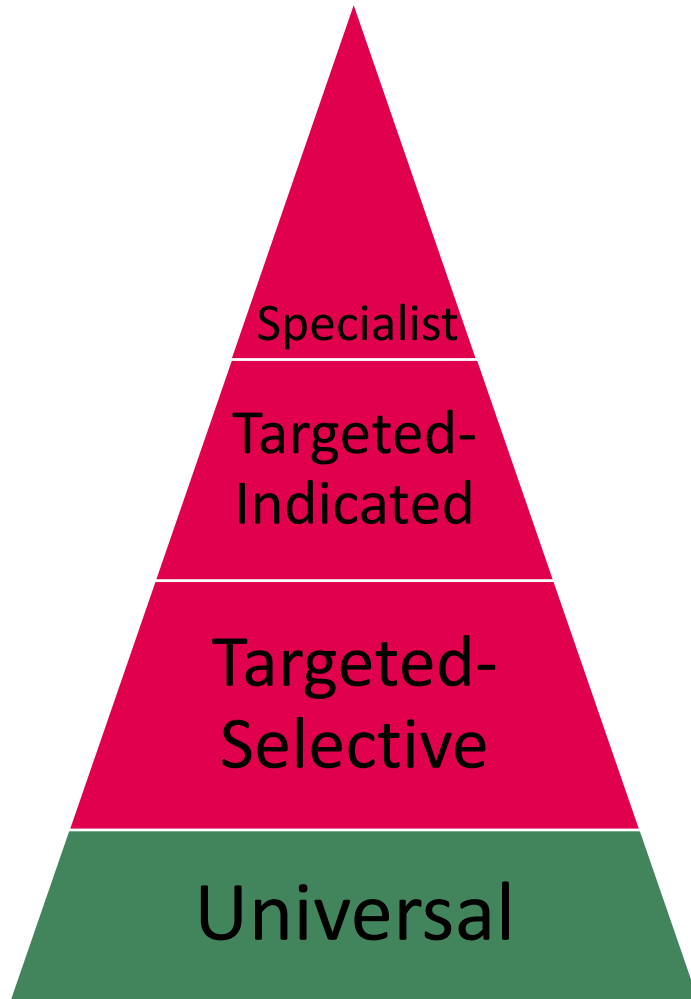


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# Cognitive development



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**3** home visiting interventions also had evidence of improving early learning outcomes

# Cognitive development

There is a high need for Targeted-Selective interventions to support the early learning of children living in disadvantaged community

There is a high need for Targeted-Indicated interventions for children who demonstrate early speech difficulties

2 interventions with good evidence were identified. Both were Targeted-Selective interventions for children living in disadvantaged communities.

Both interventions made use of home visiting lasting a year or longer. Three other home visiting interventions were also identified with good evidence of support children's early language.

Effective programmes tend to be **medium** to **high cost**. Evaluation evidence involving programmes developed in the United States also suggest they have the potential to provide high impacts in the short and long term.

# Key messages

The evidence and cost of 75 interventions were assessed. 17 interventions were identified as evidence-based.

This represents a range of interventions with good evidence of supporting young children's attachment security, behavioural self-regulation and early cognitive development

There is already **good choice** of effective Targeted-Indicated interventions addressing children's noncompliant behaviour. There is good evidence to suggest that if offered at age 2.5 or later, they may reduce the likelihood of persistent non-compliant behaviour. These programme are low cost.

There is **less choice** of programmes addressing children's attachment security. More research is necessary to develop more programmes, especially in families where maternal mental health is an issue. These programmes are likely to be **high cost**.

There is **less choice** of evidence-based interventions that support children's early learning through parent child interaction. This represents a huge gap where more development is necessary. These programmes should be offered in addition to centre-based programmes and are likely to be **medium to high cost**.

