Evaluating Interagency Policy Strategies: experience from the Families First evaluation

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Abstract

Families First is a NSW government strategy that aims to improve the effectiveness of early intervention services to support families and communities to care for children. Area Reviews were one element of the Families First evaluation process. The review focussed on the experiences of individual Areas during the implementation of the strategy. The Area Reviews were not designed to evaluate individual services but to garner generalisable lessons for future implementation. Evaluating a set of policy principles, rather than a program, constrained the design because of the inherently ambiguous definitions within the strategy being evaluated: what were the networks, relationships and principles in the Families First strategy and how did they relate to the functioning of the whole families services system. This paper sets out four categories of implementation lessons from the Area Reviews, relating to: managing systems change; a systems approach to early intervention and prevention; family services system capacity; and Aboriginal participation. These lessons reflect the challenges faced and achievements made in each of the three Areas to improve the interagency coordination of the service network and increase the provision of services for early intervention and prevention.

Introduction

This paper analyses some of the key lessons learnt from the process evaluation of the implementation of the NSW government strategy Families First from 1999 to 2003. Families First aims to increase the effectiveness of early intervention services to support families and communities to care for their children.

The evaluation is based on reviews of the experiences of three Families First Areas with different demographic and geographic characteristics, and at different stages of implementation. South West Sydney, Orana Far West and Illawarra are respectively metropolitan, regional and remote areas. Families First has been present in South West Sydney since its inception, is in an intermediate stage of implementation in Orana Far West, and has been implemented relatively recently in Illawarra.

Families First is a multi-faceted, complex strategy. Reflecting this, a number of activities make up the evaluation of its impact and outcomes. We will concentrate here on implementation activities, on the barriers to successful implementation and on productive processes and structures. In particular, we will focus on the process achievements and lessons that will continue to enhance the capacity of the family services system to improve outcomes for children and families. Families First presents a number of challenges to the agencies and individuals responsible for its implementation, and the lessons from implementation reflect these. Because Families First is a whole of government strategy and is designed to change service delivery across government and non-government agencies, implementation requires management of systems change. Because Families First is an early intervention and prevention strategy, recalibration of service delivery towards these ends is critical to implementation. This is especially difficult in the context of unmet needs for crisis and chronic services. Because Families First combines prescribed changes to service delivery, such as home visits to new mothers, with scope for locally-designed service models, planning and management structures have a great deal of responsibility for the shape of Families First in individual areas.

The lessons learnt from the Area Reviews and outlined here focus on the management processes and structures adopted in each of the areas studied. They do not reflect the impact of Families First in terms of outcomes for families and children, nor do they assess the claims made on behalf of the research behind Families First.

The Area Reviews of South West Sydney, Orana Far West and Illawarra were not designed to evaluate individual services but to garner generalisable lessons for future implementation. Consequently, individual areas will not be identified. In the next section, we provide a brief outline of Families First, followed by an account of its state and local structures and planning processes. The section following that describes the key lessons and findings from the Area Reviews.

Background to Families First

Families First is concerned with the welfare of young children and the implications of early childhood experiences for long-term outcomes in health, education and social development in childhood and adult life. Using a prevention and early intervention approach, the program framework is based on developing regional linkages between specialised health, community welfare, educational and other services to ensure a coordinated approach to initial intervention, follow-up visits and other forms of support.

Since many future problems stem from influences in the child's environment, Families First is concerned with the factors affecting the biological and social development of children. Operationally, Families First contains a number of separate but interdependent elements. The strategy combines the elements of universal services and screening to targeted services, with an emphasis on service integration and networking, community outreach via services such as home visiting by early childhood nurses and volunteers and community development. Each of these is described briefly below.

The early intervention approach. Studies both internationally and in Australia have shown that support for families during infancy and early childhood helps create a healthy environment that fosters children's lifetime development, educational attainment, minimises the risk of abuse or neglect, and reduces the likelihood of future criminality and addiction (Provence and Naylor, 1983; Weikart and Schweinhart, 1993; Johnson and Walker, 1987; Miller and Whittaker, 1988; Oates et al, 1995; National Crime Prevention Authority, 1999; McCain and Mustard, 1999). It has been estimated by one researcher that the financial

benefits of taking early preventative steps outweighs the costs of providing remedial and custodial programs later by a ratio of 7:1 (Barnett, 1993).

Screening and referral. It has been argued that the development of effective screening instruments in the early postnatal period, and their use to enhance and streamline the referral process, will assist in the targeting of services to meet the specific support needs of the families. For example, prior to Families First it was evident that many of the parents of children in need of support did not regularly attend Early Childhood Clinics. Research has shown that home visiting programs comprehensively designed and targeted at families where there are certain vulnerability factors such as low income; young parents; or single parents, were likely to achieve positive outcomes when delivered by well-trained professional staff. It was also noted that flexibly designed contact enabling families to establish a trusting relationship with the visitor and the visitors to understand the families needs was also important (Olds et al, 1997).

Service integration and networking. Families First emphasises the coordination of existing specialist service providers into an integrated network, pooling information, eliminating duplication and maximising the effectiveness of existing resources by making appropriate referrals and through effective collaborative arrangements for follow-up support of client families over time. Improved coordination of services has the potential to enhance the effectiveness and efficiency of service delivery and to help provide cost-effective solutions within the levels of existing resources (O'Looney, 1993; Fine, 1997). However, research suggests that improving the coordination of otherwise independent services, particularly those from different sectors (health, welfare, education etc) is generally more difficult in practice than is anticipated (Bruner, 1992; Harbert, Finnegan and Tyler, 1997; Fine and Pancharatnam, 1999). The benefit is that groups that consciously collaborate with each other are more effective at providing a complex array of services than the same organisations can when operating independently (Provan and Milward, 2001).

Community development. The social context in which families live has been recognised as an important influence on human development over the life span. According to Bronfenbrener's (1979) theory of human ecology the way in which parents care for their children is influenced by structural characteristics and the interactions between families, social networks, neighbourhoods, communities and cultures. More recent research emphasises the interaction of interpersonal relationships and environmental factors, and the impact of both of these forces on families (Tomison and Wise, 1999; Gabrarino and Abramowitz, 1992). One of the long term aims of Families First is to enhance strengths in the community, develop relationships and reconnect communities so that those communities can better support families and children.

Families First applies this research to a policy framework with a focus on four Fields of Activity: supporting parents who are expecting or caring for a new baby; supporting families who are caring for infants or small children; supporting families who need extra support; and strengthening the communication between families and communities.

Methodology

A triangulated methodology was used in the Area Reviews. This involved multiple qualitative and quantitative data collection techniques including documents reviews, observation studies, interviews, focus groups and surveys. Using multiple data to explore the experiences of a variety of stakeholders from different perspectives overcomes the limitations of using only one method (Dockrell, 1995; Sarantakos, 1993). The methods used are outlined below. Figures given are the total across the three areas:

Table 1: Summary of Data Collection Methods

Area Review component	$n =$	Description
Document review		Analysis of documents relating to Families First at a local and central level
Questionnaire for service managers/coordinators	118	A detailed survey of organisations directly involved in Families First on service inputs, aspects of the service network and service outputs
Observations and site visits	20	Site observation to observe the processes of service delivery and connections with other services
Regional Officers Group and key personnel interviews	34	Interviews discussing the process of managing Families First, the perceived impact and barriers implementation
The Cabinet Office interviews	2	Interviews discussing the management of Families First at the State level, perceived impact and barriers to implementation
Project Leader interview	3	Interviews reviewing the development of Families First, the achievements and barriers to implementation
Interviews with middle managers	39	Interviews reviewing the development of Families First, the achievements and barriers to implementation
Fieldworker interviews	113	Interviews exploring their experience with Families First, differences between process goals and practice.
Family interviews	77	Interviews with families in each sector to explore their experience of the service process and network

Program logic (Department of Finance, 1994) and program theory (Bickman, 1996) are the theoretical tools that were applied in the evaluation data analysis. Analysis through program logic involves identifying and taking into account the presumed logical and causal relationships between inputs, processes, outputs and outcomes. Program theory analyses two aspects of the program. First, the program implementation is assessed by examining whether the program inputs are in place as planned. Second, the program theory is investigated by considering whether the implementation occurs in the way it was envisaged and whether the outcomes are as predicted (Bickman, 1996).

Implementation Structures

From July 2004 the structure of Families First has changed with the shift of the Office of Children and Young People from the Cabinet Office (TCO) to the Department of Community Services. Before proceeding to the lessons learnt from the Area Reviews, a brief discussion of Families First implementation structures at a statewide level and in each Area in place at the time research was conducted is necessary.

Although the overall aims and objectives of Families First are quite straightforward, the structure that supports its implementation is complex. Families First operates at the State, Regional and local level. Within each of these levels, specific structures have been put in place to guide the overall direction of Families First and to ensure that processes the establishment of processes to facilitate its implementation. At the time of the research, the State structures responsible for Families First were comprised of an Expert Group, chaired by the Commissioner for Children and Young People and three sub groups: Communication, Research and Evaluation and Head Office Groups.

The implementation of Families First is the responsibility of the five Human Services agencies: the Departments of Community Services (DoCS), Ageing, Disability and Home Care (DADHC), Education and Training (DET), Housing and NSW Health through Area

Health Services; and non-government agencies funded by Government to support families. Human Services Directors-General decide key issues in the implementation of Families First using information from project management and implementation groups (TCO, 2002).

The State structure developed to support the implementation of Families First at the time of the research consisted of a number of elements. The Directors-General of the five Human Services Agencies are jointly responsible for the overarching management of Families First at a State level. They are also responsible for setting directions on key strategic issues and approving the regional implementation plans.

Between 1997 and 2003, TCO played a pivotal role in the management and implementation of Families First. At the State level, TCO was responsible for the daily management of Families First. TCO acted on behalf of the Directors-General to facilitate the coordination and development of individual implementation plans for each Families First Area. That role is now taken by DoCS.

Project Leaders appointed by TCO worked in each Area to facilitate the coordination and implementation of Families First. Project Officers are appointed for each region to provide secretariat support and facilitate processes on behalf of the regional management groups and TCO centrally. Project Leaders also assist in communicating information from the SAG to the regional level.

Regional management groups are comprised of Chief Executive Officers, senior officers or other managers of the State Government Departments responsible for the implementation of Families First. In some Areas agencies such as the Aboriginal and Torres Strait Islander Commission, Land Councils and other government departments are also represented on these regional groups. They are responsible for determining the broad priorities and approaches for effective implementation of the Families First and other state-wide strategies, ensuring integrated planning and management of these strategies and determining the Area Plans and budgets for Families First.

Operating below this level is another management group who is responsible for the operational implementation of the Families First Area Plans. Membership of this group, in all three Areas comprised senior personnel in the Government Agencies. In one Area this group also included Peak Groups, Local Government, and the Division of General Practice.

The regional management structure of some Areas is flatter than others. Some Areas devolve responsibility for the implementation of strategies across a number of groups; others centre responsibility primarily on one or two groups.

A number of Areas convene local network groups, comprising State Government Agencies, local government, NGOs and community representatives. These interagency implementation groups coordinate the planning for human services at the local level.

Each Families First Area develops its own implementation plan to take account of the specific characteristics of the Area and its needs. Area Plans are devised at local or regional level for a given time period. They describe the overall approach to implementing Families First in that Area, the budget, key outcomes and actions and time frame required. Area Plans are ratified at Area level before being approved at State level by directors-general.

Findings and Lessons from the Area Reviews.

The four categories of implementation lessons for Families First derived from application of data to the framework for analysis relate to: managing systems change; a systems approach to

early intervention and prevention; family services system capacity; and Aboriginal participation. The following outlines each of these areas and presents the key lessons learnt for further implementation. These lessons emerge from each of the three Areas reviewed, and reflect both successful strategies and recommendations for strategies different from those that have been adopted.

Managing Systems Change

Managing systems change includes considerations of participation and communication; planning and implementation structures; and the incorporation of Families First principles into core business, each described in this section.

Participation and communication

Families First aims to effect change in the planning and operation of the child and family services system and the way parts of the system work together. The process for managing that change is integrated into the operation of agencies and relationships between agencies. It requires continued active management and communication of these relationships. Good examples of this observed in the Area Reviews were structures that included senior, middle and local participation; senior management support, leadership and champions; staff training; resourced local participation for representation from throughout the service system; and multiple forms of communication within the management structures and into the family services community.

Successful implementation also depends on the acknowledgement and recognition of existing structures. This is both positive, in terms of strengths of the system; and a potential point of inertia in terms of entrenchment of existing processes and service models. These structures affected the degree of local engagement and the level of understanding of Families First.

An implementation strategy of Families First was generally not to brand it as a separate strategy. The intention was to focus on developing systems change, and develop commitment to the principles of Families First. However, some of its key concepts, such as system planning processes and service networks, are complex and difficult to communicate. Some Families First key personnel faced difficulties in balancing the need to communicate these concepts with the need to ensure demands made of participants, and the knowledge required for participation, remained reasonable. In addition, some of the key personnel expressed concern that the promotion of Families First had raised expectations that it did not have the capacity to meet.

Lessons learnt indicate that focusing on the areas of relationships, local governance, leadership and clarity were effective strategies for communication and participation. Briefly, effective processes had the following characteristics.

- They were built on the strengths and particularities of existing networks and services; ensured that time was allowed for the building of relationships; and facilitated the presence of advocates who will champion Families First.

- They were devolved over both regional and local structures; and ensured the participation of all agencies providing support to families and children, including NGOs.

- Leaders at regional, local and network levels were identified and supported. The strong commitment of champions for Families First and its principles, involved at all levels of the implementation, helped sustain the momentum needed for change.

- Communication strategies were in place to ensure the dissemination and reception of information about Families First. These strategies clarify how Families First is distinct from, and complementary to, both what is already in place in an Area and any other new strategies being introduced. Effective communication was also directed at encouraging the participation of key family service system agencies in the planning and implementation of Families First.

- Differences in organisational size, power and capacity to participate in Families First planning, implementation and network enhancement were addressed through facilitated support and multiple forms of participation. This required the development and resourcing of strategies to promote and facilitate the active involvement of all relevant agencies.

Planning and implementation

The second part of systems change attempted by Families First is in planning and implementation processes. Planning for Families First is a significant activity because it is an opportunity for visibility in the family services system. Decisions around the planning and priorities for service network development and service delivery have an impact on understandings of Families First.

Lessons learnt indicate that effective planning and implementation was locally responsive and transparent. Successful planning and implementation were characterised by the following.

- Planning, funding and management of network development and new services reflected a locally relevant, strength-based approach, focusing on early intervention and prevention. Planning for Families First funded services was based on local knowledge and needs, not standard models.

- Communication within and across all relevant agencies of Families First management processes. Clearly defining the role of and processes by which network groups and other interagency groups link into the planning and implementation of Families First will increase the level of engagement of a broad range of agencies.

Core Business

A successful systems change strategy observed in the implementation was the adaptation of agencies' core business to the principles of Families First. A stronger, more coordinated service network was visible where agencies had explicitly incorporated Families First principles into their core business. This enabled them to build a greater capacity to focus on early intervention and prevention. For example, some agencies had incorporated Families First principles into their business plans and written it into their job descriptions, performance indicators and service agreements. Support from management, review of organisational structures and staff training were crucial facilitators in this process. Without this, service providers struggled to integrate Families First into standard working practices.

In summary, integration of Families First into the core business of organisations and networks was expedited when integration processes were visible throughout the organisation, led by key personnel, specific and resourced. Organisations that had effectively incorporated Families First had the following characteristics.

- Early intervention and prevention principles and service coordination were incorporated into the core business and management practices of agencies at all levels. The principles were sometimes included in job descriptions, performance indicators, orientation

packages and training. Managers and other key personnel were responsible for initiating and managing the changes in processes necessary to adopt Families First as core business.

- Families First was adopted as new core business and was connected to reallocation and relabelling of processes, resources and activities. While the Families First principles of early intervention and coordinated service are present in many organisations, explicit adoption of these principles worked more effectively than regarding Families First as confirmation of extant organisational strategies.

- Time, training and other resources were allocated to adopt Families First into core business. Ongoing resources were provided to ensure Families First was maintained as core business.

Systems Approach to Early Intervention and Prevention

Generally there was support for the Families First principles of early intervention and prevention and developing a more coordinated service system. However, we found debate about the boundaries to early intervention and prevention and their relationship to Families First.

Stakeholders saw the aims and objectives of Families First as logical and linked to evidence-based practice. They appreciated that Families First was an opportunity for agencies and the community to come together in a coordinated systems approach to early intervention and prevention. However, the research found some people understood Families First as a funding source rather than principles of practice and system change. The process of Families First implementation had not successfully clarified this for all stakeholders, including in some cases, government agencies.

Adding to this confusion was that some agencies viewed themselves as already practising in a manner consistent with Families First principles and thought their practice was unrecognised. Other agencies were unclear how their services related to Families First and felt excluded from the implementation process.

Stakeholders held conflicting views about the boundaries between early intervention and crisis intervention, which raised difficulties in the implementation process. The boundary between preventing and intervening early versus support when problems were already embedded was highly contested. A system that cannot meet current demands exacerbates this issue. Resource shortages also created gaps in the support network for particular groups, such as families experiencing domestic violence or where there was concern about neglect, as they fell between the boundaries of early intervention and crisis service practice.

Changes in the relationship of the service system and all families are the first goal of Families First. It is difficult to measure changes to the perceived place of families within the family services system; and to what extent that system is organised around the centrality of families' needs. As a whole of government strategy Families First is constructed in part by the regulatory and surveillance functions of government agencies, and making families' needs central to service delivery is difficult in this context. While Families First is not intended to replace or obviate the need for these functions, operationalising Families First principles requires that changed models of service delivery be introduced alongside them.

In summary, successful integration of early intervention and prevention principles in service networks required education and training and the continuous circulation of information. Examples of successful integration had the following characteristics.

Ongoing education and training strategies to increase knowledge of the research basis and philosophical framework of Families First. Specific priority was given to the differences between applying principles within an organisation and within the families services system.

Providing information and feedback about the implementation processes and achievements in Families First Areas was an effective way of increasing the understanding and commitment of agencies to the strategy. In doing so, it acknowledged the historical strengths upon which the achievements have developed and the multifarious strategies that contribute to them.

Family services system capacity

Families First operates in a system where broad socio-economic determinants, such as employment, income and poverty play a pivotal role in the health and wellbeing outcomes for families and children. It also operates in the context of the capacity of the family services system in terms of available services; available staff, professional skills and understanding of their place in a service system; and service networks at the professional, interagency and planning levels. Although Families First attempts to enhance each of these aspects of capacity, it can only do so within its own capacity and contribution in the system. Factors such as service availability, demographics, distance, current and past political environment and expectations acted as barriers to implementation if they were not considered in the planning process. Concerns about the capacity of agencies and the service network to meet current demands and to introduce changes also affected the implementation process.

All Areas have existing service networks independent of Families First. Successful examples of network development built on these structures and extended them towards early intervention and prevention and system planning. The Area Reviews identified a number of challenges to the development and expansion of service networks. Many service providers recognised the potential benefits of collaboration but lacked the resource required to undertake it. As the implementation of Families First rests on a few key shoulders, a sense of 'implementation fatigue' was experienced among some key stakeholders. Other challenges included resource sharing, distance and size.

Some locations have less robust networks than others in terms of sustainability, inclusion and systems approaches. The capacity and robustness of the pre-existing service network to meet current demands and to introduce changes significantly impacts on the Families First implementation process.

The Area Reviews found universal support for the principles of prevention and early intervention. However, translating these principles into practice raised a number of difficulties relating to unmet demand in chronic and critical intervention and a gap between early intervention and chronic support. Network blockages as a result of unmet demand inhibited the capacity of networks to intervene early.

Although Families First is intended to reduce the demand on crisis services in the long-term, it does not expect to eliminate the need for them. It was evident that the Families First implementation was occurring within the context of crisis and chronic support services being unable to meet current demand. Planning for Families First implementation needs to be able to take account of that context. Where the wider family service system was unable to meet these needs, it caused conflict and resentment towards resource allocation to families using Families First services.

Some practitioners could not accept that families with more intense problems were excluded from the early intervention and prevention services. A number of the services funded under

the Families First strategy were not accessible to families who were notified to DoCS, while families suffering domestic violence were ineligible for home-based services because of safety reasons.

In the context of unmet demand for other services, conflict over access to limited support appears to be an inevitable problem for Families First that should be addressed in planning and communication about Families First.

Staff recruitment and retention presented another challenge in building the service network, enacting service change within existing services and developing new services. In addition to problems finding sufficient skilled staff, the demands of the Families First approach required new skills in facilitating strengths-based approaches to supporting families. Providers identified difficulties in recruiting, retraining and retaining staff as recurring barriers to effective implementation.

Agencies highlighted health services and early childhood education as struggling to find sufficient appropriately trained and experienced staff. They described their capacity for building networks and coordination as limited in the absence of long-term staff.

The capacity of smaller agencies and NGOs to become directly involved in Families First is also affected by the type and size of their organisational skills base. These services may also be ill equipped to accommodate the additional obligations that Families First funding or other involvement brings.

In summary, effective implementation of Families First negotiated existing systems capacity and worked to improve it through funds, staff, identification of needs, planning and network development. Examples of successful implementation shared the following characteristics.

- Families First funds were used to develop and manage service change and to instigate innovative service delivery models to identify and fill gaps. Increasing the total capacity of the service network is fundamental to meeting the support needs of families earlier.

- Dedicated resources for the implementation process of Families First, such as the presence of project leaders and other key personnel, facilitated the planning and implementation processes.

- Families First infrastructure was used to identify gaps and service shortages in core human service agencies and transport for the purpose of allocation and reallocation of core human service funding.

- The professional skills base, and skills development opportunities, was considered in the development of Area Plans.

- Families First management structures supported the development of networks as well as complementary services.

Aboriginal Participation and Access in Families First Processes

The engagement of Aboriginal people in the planning, management and implementation of Families First is acknowledged as crucial to its success. Improved service delivery to Aboriginal families and communities is identified as a priority for Families First.

We found that many of the forces that affect the overall implementation of Families First are relevant to Aboriginal communities. Local management structures and processes foster increasing recognition of Families First throughout organisations and communities, and smaller as well as larger organisations should be supported towards sustained participation in

these structures. We also found factors that are particular to Aboriginal communities' experience of Families First.

Flexibility in planning, coordination and delivery are crucial to the successful implementation of services to the Aboriginal families and communities. Commitment to the sustained engagement of elders, community representatives and others as appropriate in the management of planning and implementation is critical. Another key element in Aboriginal and non-Aboriginal collaboration is a commitment to the time it takes to build and maintain relationships and trust.

In summary, the involvement of Aboriginal communities in Families First was fostered through engagement, time, respect for difference and collaboration. Successful strategies were characterised by the following.

- The continued involvement of key individuals, including local elders, community representatives and others in the management of the strategy. Aboriginal elders and other community representatives hold knowledge about the needs of Aboriginal communities and the best ways to address these needs, and this knowledge should be respected and acted on. This may require a different approach to service provision than is usually taken.

- Aboriginal engagement in Families First was achieved when time, energy and resources are invested in building and maintaining relationships between Aboriginal and non-Aboriginal people and organisations.

- Recognition that Aboriginal communities are not homogeneous. Differences of opinion and views occur between individuals and communities, and the implementation of any new strategy must negotiate and work through these differences. It is important that all views are taken into account when working with Aboriginal people and their communities.

- Collaborative service delivery between Aboriginal and non-Aboriginal organisations built on the accessibility of Aboriginal organisations and groups (such as peak bodies and steering committees) to Aboriginal people and communities.

Conclusion

Overall Families First has made significant gains towards developing structures and processes to support and extend the service network system that is coordinated and focused on prevention and early intervention support for families and children.

The findings of the Area Reviews identified a number of challenges that extend beyond the capacity of Families First processes into the broader context of the family services system continuum. At the one end of the system, where support is targeted to families with higher needs, including crisis intervention, it is difficult for practitioners to determine where the boundaries between prevention, early intervention and crisis support begin and end. This becomes a problem when these parts of the system have high, unmet demand.

At the upper end of the family services system are efforts to develop child friendly societies and sustainable communities, including universal service support for all families with young children. At this end, there remains limited understanding of a systems approach to coordinated planning and delivery of support to all children and families. Some people and organisations still understand Families First as only being another funding program for particular services.

The challenge for Families First is to be recognised as a set of process principles that underpin effective system planning and delivery of support and intervention with all families. When all participants in the family services system understand and apply the principles of prevention, early intervention and service coordination to their practice in this way, we can expect improvements in outcomes for children and families.

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