

Making child well-being data work hard *what is possible?*

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Presentation recognised by the
Kamerman & Khan Award (ISCI 2011)





- £42m investment in prevention and early intervention services in the largest local authority in Europe
- Prudential borrowing investment predicated on returns of £101m over a ten year period
- Randomised trials of four evidence-based interventions
 - PATHS
 - INCREDIBLE YEARS
 - TRIPLE P
 - NURSE FAMILY PARTNERSHIP

The End-Point



- Collected data on child outcomes and risk & protective factors
- Instruments comprised of standardised measures
- Measure behavioural, emotional, social, physical and educational outcomes
- HDOC: community-based survey of parents children aged 0-6 years
- (n = 500)
- HDOS: School-based self-report survey for children aged 7-18
- (n = 5,000 to 20,000).

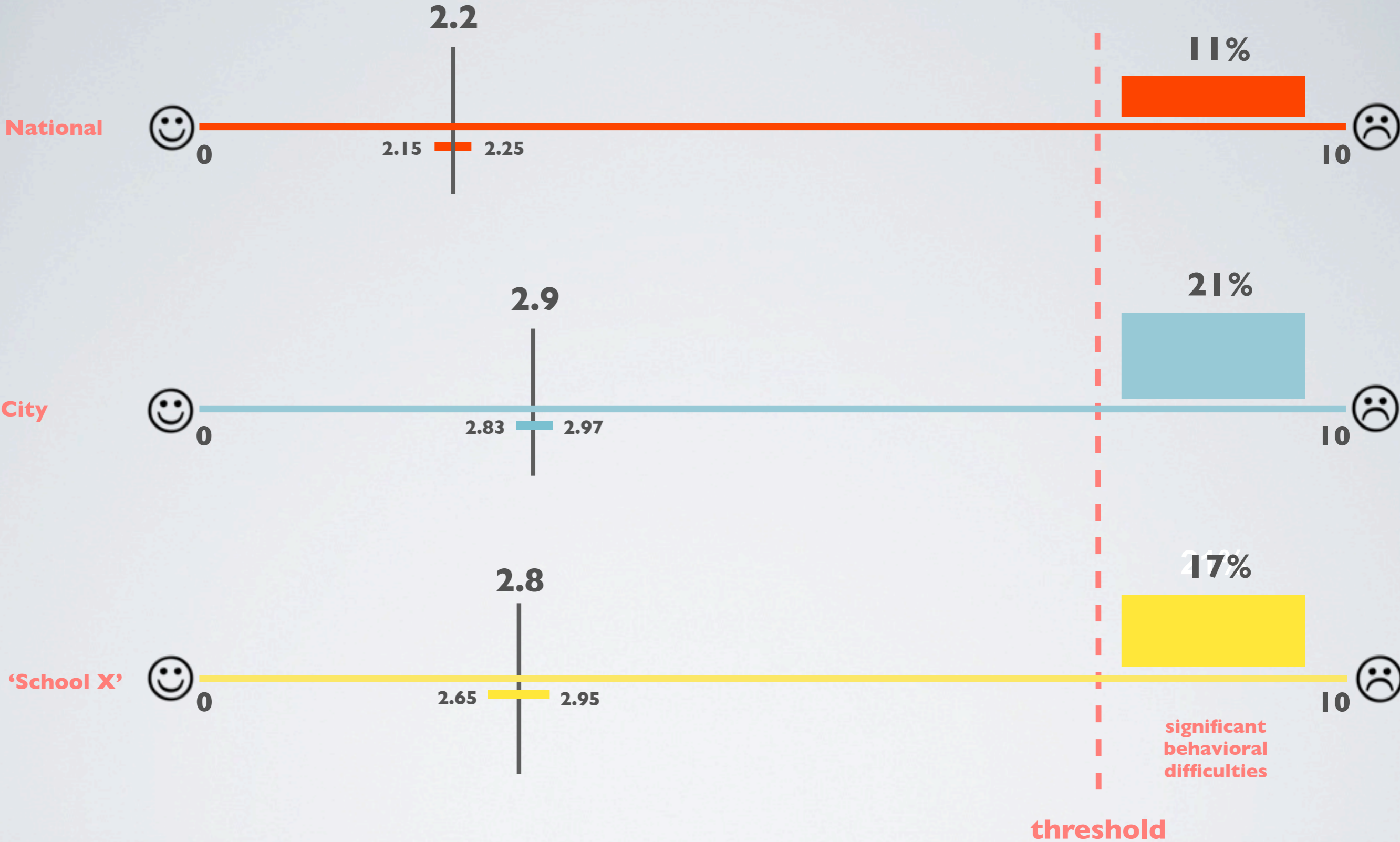
(Axford & Hobbs, 2010; Axford, Hobbs & Jodrell, 2010)

How we got there: Methods

- Prioritise outcomes, risk and protective factors
- Estimate realistic magnitude of change
- Support mix of universal and targeted services
- Identifying size and characteristics of target groups
- Ensure match between need and service provision
- Link to data on resource allocation



How we got there: Functions of Data

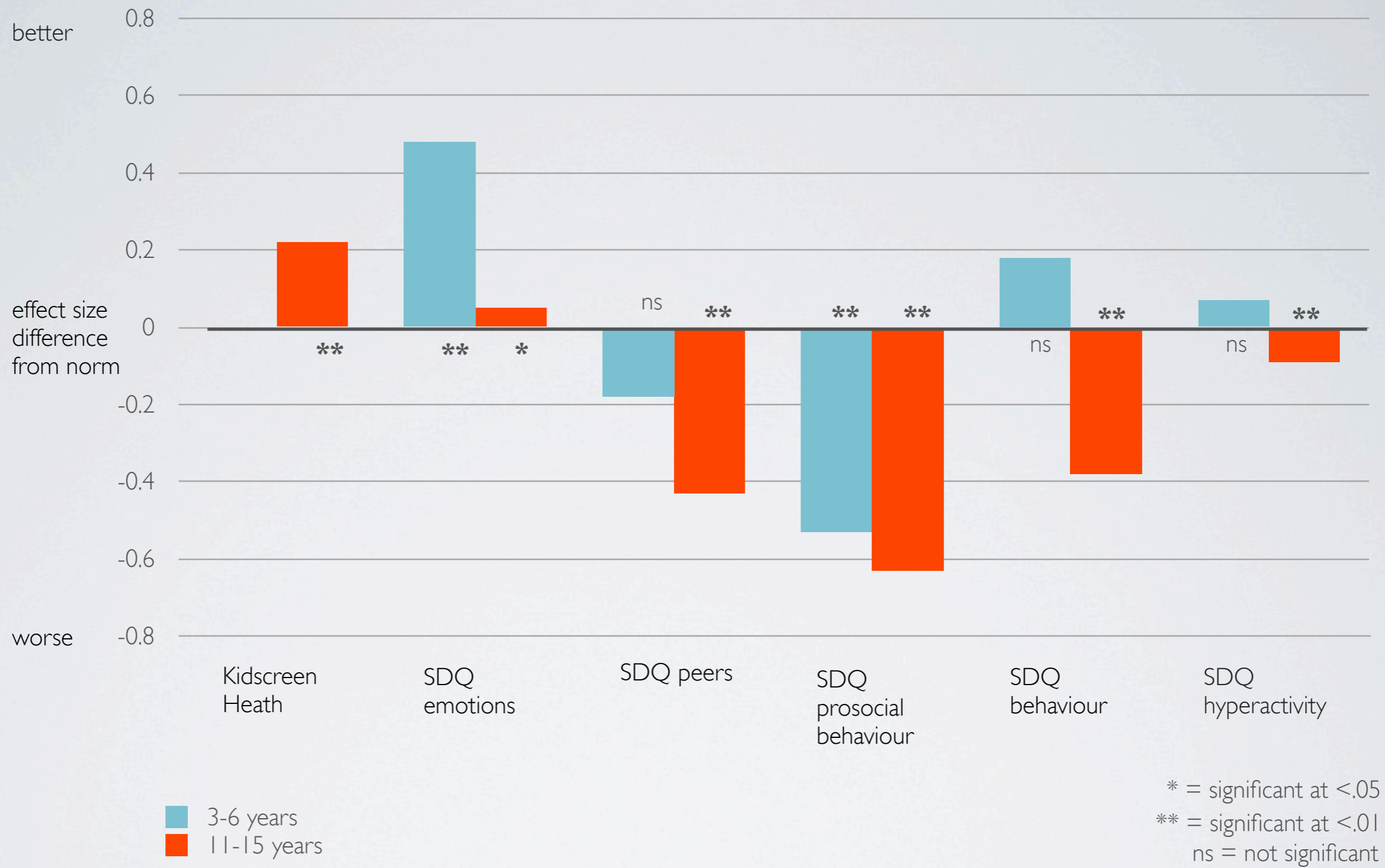


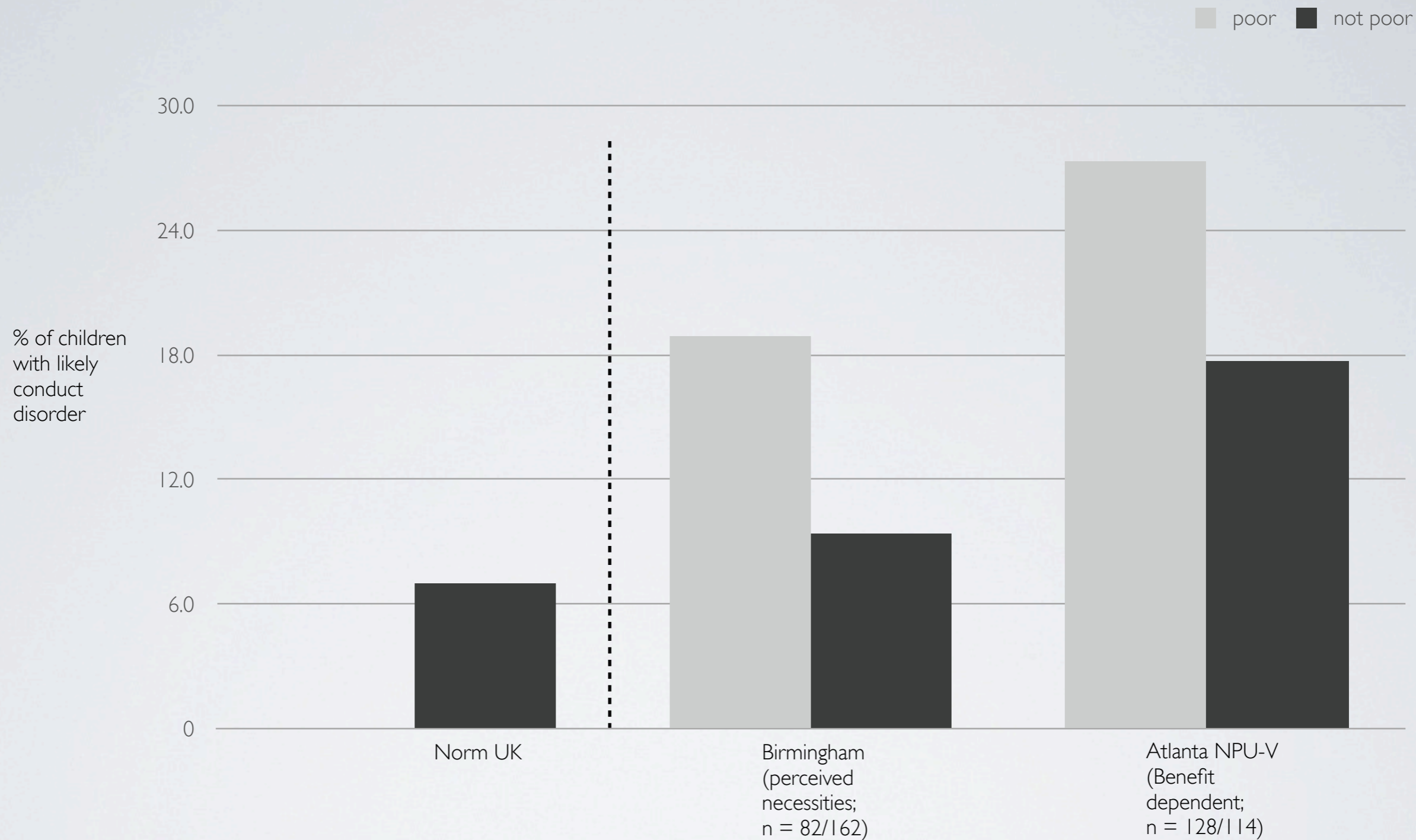
significant behavioral difficulties

threshold

SDQ
 National: n = 2885
 City: n = 3293

comparisons: behaviour /conduct disorder

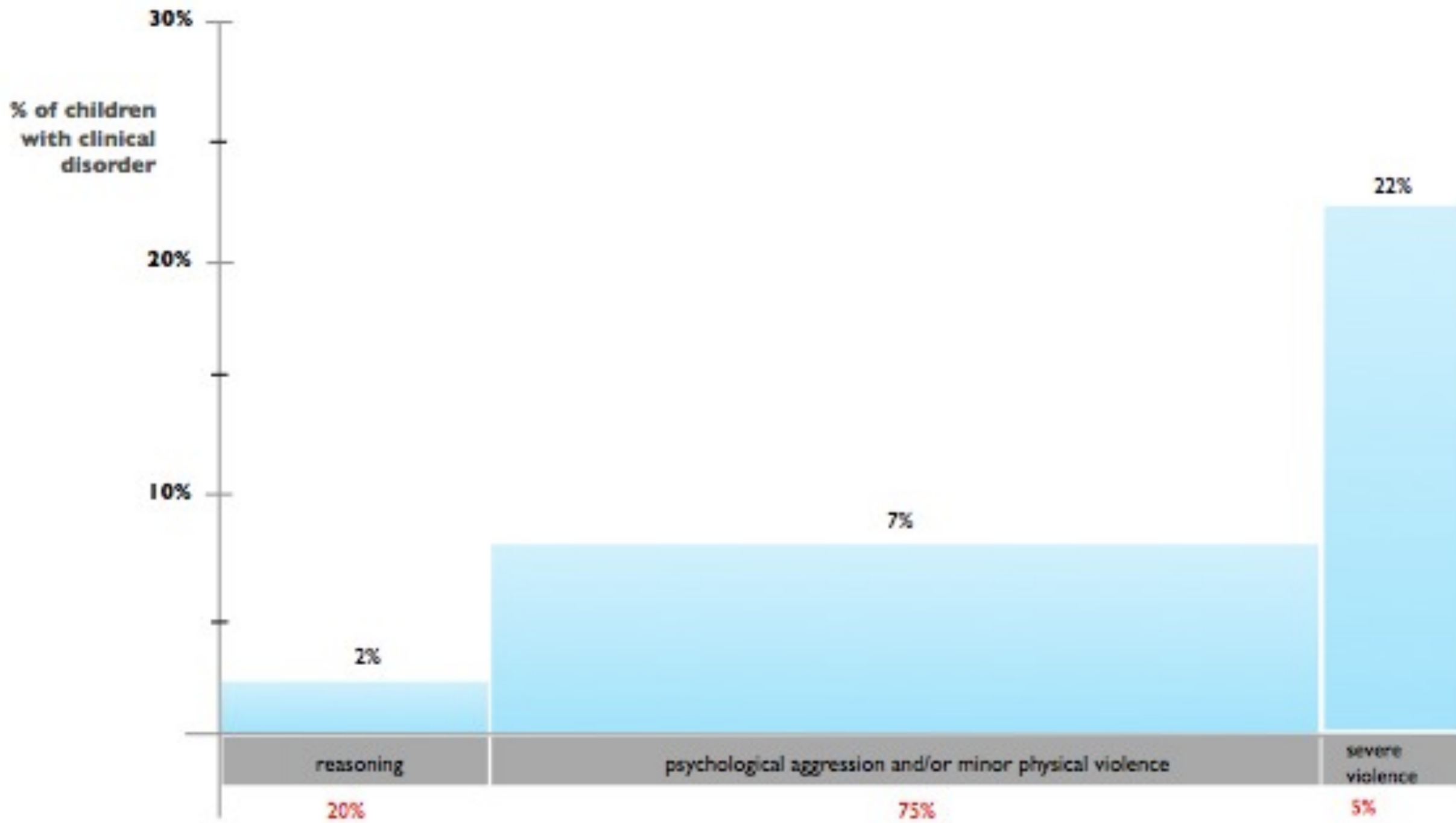


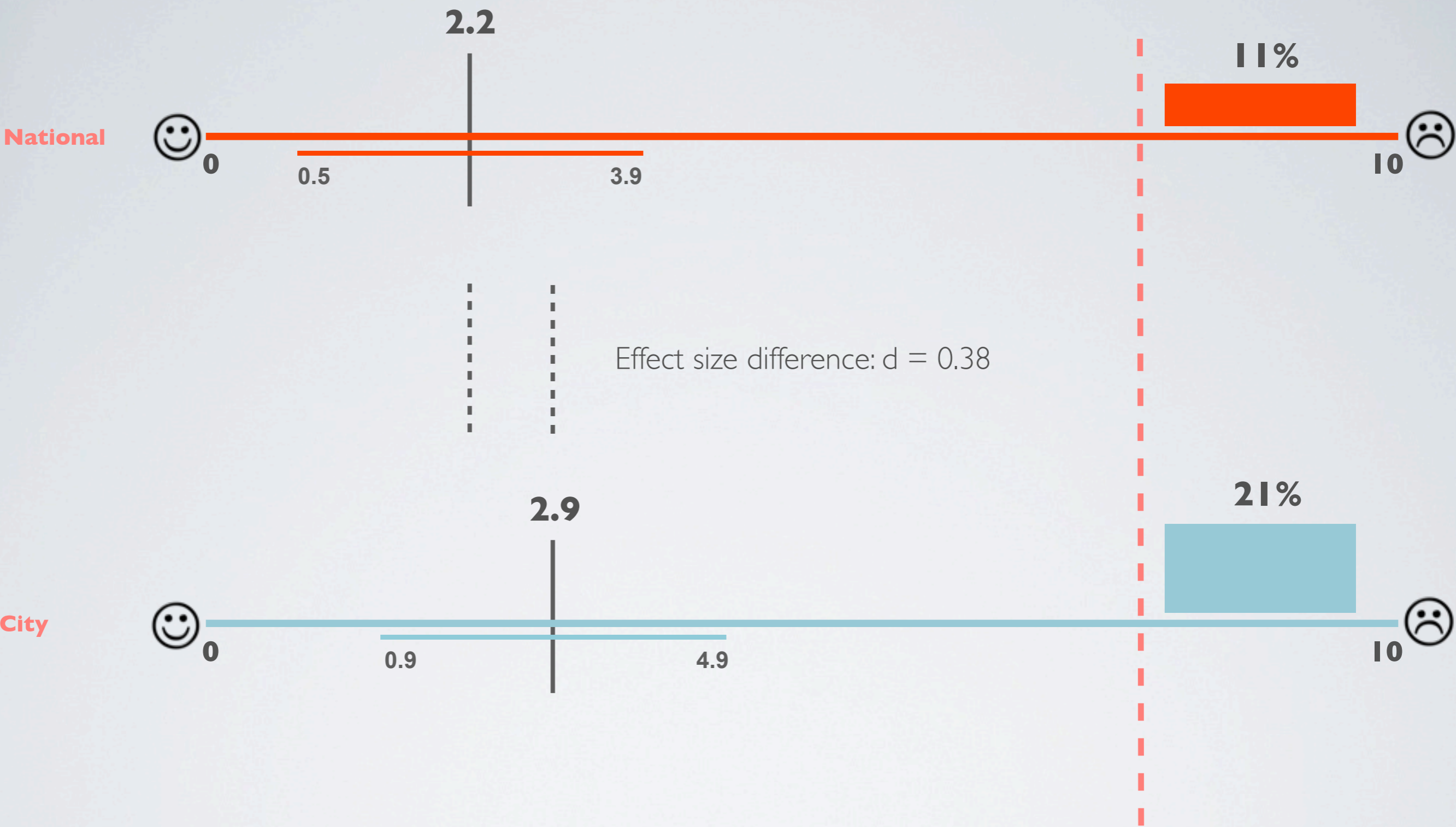


SDQ

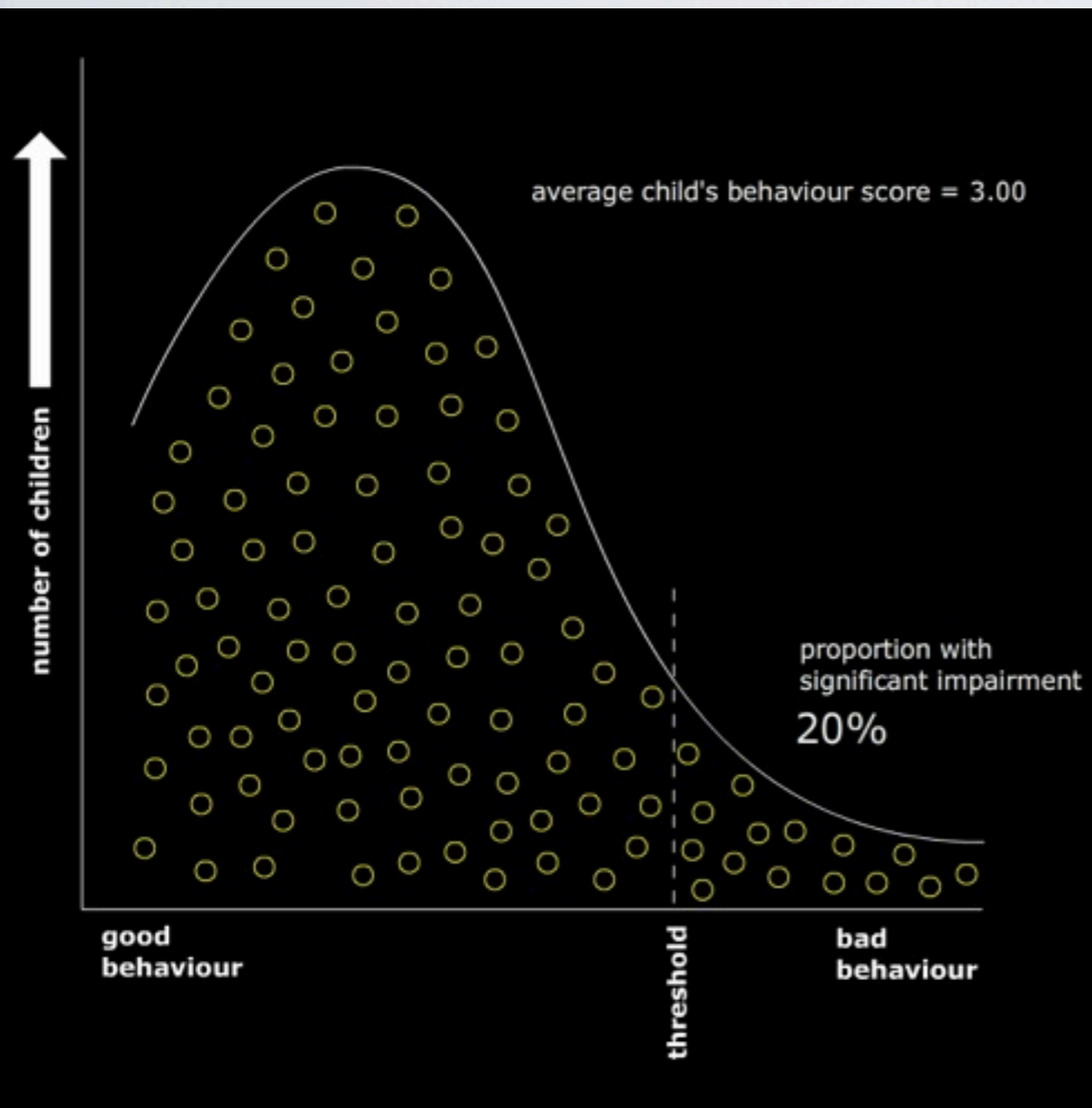
Comparison: Great Britain national data (n = 2885)

subgroup analysis





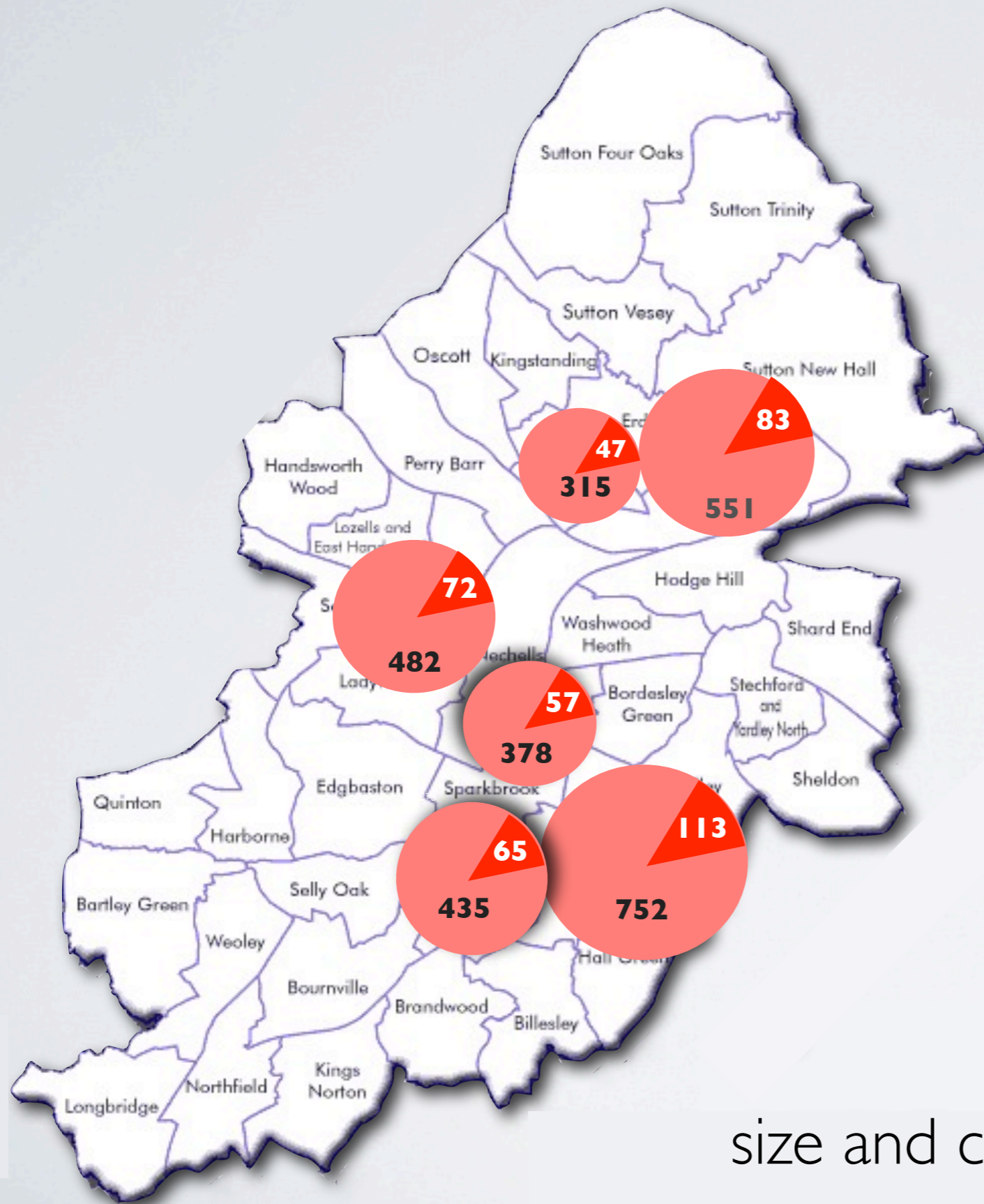
realistic magnitude of change: effect size differences



Universal vs. Targeted

realistic magnitude of change: effect size differences

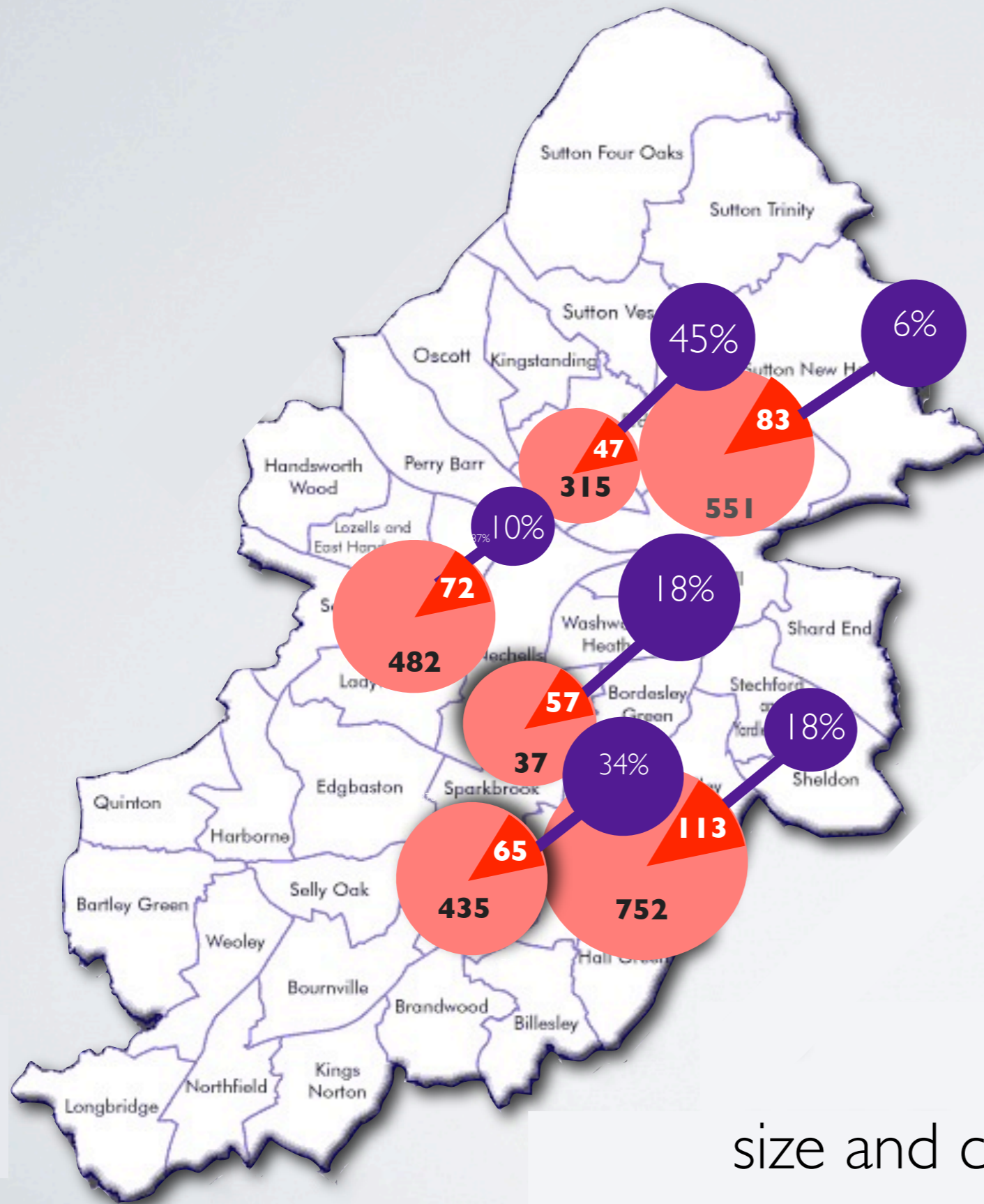
Size and characteristics of target group



Estimated # of children in Children's Centre catchment area eligible for IY

size and characteristic of target group

Size and characteristics of target group



% of eligible children identified

size and characteristic of target group

Fund maps to document current spend on children's services

- balance of spend of prevention vs treatment
- spend on evidence-based intervention
- opportunities to redirect funds

Data on **cost-benefit** of evidence-based intervention

Summary of Benefits and Costs (2003 Dollars)			
Dollars Per Youth (PV lifecycle)	Benefits	Costs	B - C
Early Childhood Education	\$16,658	\$7,301	\$9,357
Nurse Family Partnership	\$26,298	\$9,118	\$17,180
Functional Family Therapy	\$16,455	\$2,140	\$14,315

(Washington State Institute for Public Policy, 2004)

Linking data on outcome and spending

Work in progress includes:

- Updated instrumentation
- Linking data directly to a database of evidence-based interventions
- Collecting these same data from children in contact with public agencies
- Area-based analysis
- Analytical epidemiology
- Measuring service use
- Linkages between outcomes and outputs

Making the data work harder still.....