An international perspective on integrated children's services

A report commissioned by CfBT Education Trust

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Executive summary

" The report identifies British, American and Norwegian evidence of the beneficial consequences of an integrated approach to Early Years provision.*"*

Almost the first act of the UK's Conservative-led government in May 2010 was to change the name of the ministry dealing with children from the Department for Children, Schools and Families, to the Department for Education. This act signalled scepticism about the previous Labour administration's focus on integrated services. Since the publication of the Every Child Matters (ECM) Green Paper in 2003 there had been a preoccupation in England with the better integration of children's services. The arrival of a new government in the UK provides a good moment for taking stock. Was the emphasis on integration a uniquely English preoccupation or is the rest of the world similarly focused on the integration of service delivery? CfBT set out to answer this question. By considering evidence from the approach of 54 jurisdictions towards integrated children's services, this review constitutes one of the most extensive studies in the field to date.

The study involved a review of the international literature on, and policies relating to, the integration of children's services. Whilst it was found that overall the evidence base for impact of integration is relatively weak, comparison is particularly difficult because measures vary so much from place to place. When looking at international research literature on the integration of children's services, the study indicates wide variation in approaches taken to assessing effectiveness. Frustratingly, most research evidence concerns the processes of integrated working, rather than the measurement of outcomes. Providers' views are sometimes used as a proxy measure for improvement, however this is surely a weak mechanism for the objective assessment of benefits. There is only limited evidence from the clients' (i.e. children and families) perspective. The most substantial body of impact appears to be in the Early Years area. The report identifies British, American and Norwegian evidence of the beneficial consequences of an integrated approach to Early Years provision. While there is some promising evidence of impact for older children the evidence base is not secure.

The findings from the policy scoping indicate that the ECM experiment is relatively unusual in international terms. It is true that of the 54 national and sub-national jurisdictions included in the review, 34 showed some degree of integrated working. However, of these only a small minority could be said to be adopting an approach broadly similar to the ECM approach adopted in England. Although a majority of countries and sub-national jurisdictions (34 of the 54 in the sample) have shown some level of commitment in policy terms to a joined-up or collaborative approach, very few have emphasised the centrality of integration along UK lines. Beyond the UK, The Netherlands, Norway, Malta, Hong Kong and the states of New South Wales in Australia and Maryland in the USA have approaches that, at least for some of their regions or services, are similar in construction to that of England. Twenty-six jurisdictions have adopted more modest approaches to integration.

The review concludes that the task of ensuring a joined-up approach to children's services remains work in progress, and questions whether now, as children's services move to a more 'mature' phase, a more locally-driven, but equally focused approach would be more likely to yield increased results for children and families. The study suggests that this is where – in the preventative approach of many other countries and in the success story of Early Years worldwide – most impact is made.

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1. Introduction to the report

> *The publication of the Every Child Matters Green Paper in 2003 resulted in a preoccupation in England with the better integration of children's services.*

The publication of the Every Child Matters Green Paper in 2003 resulted in a preoccupation in England with the better integration of children's services. An analysis of the experiences of other countries in this arena was not the basis for such a preoccupation but it is an analysis that is long overdue. CfBT's aim in commissioning this review was to redress this by looking at the policies of other countries in relation to the integration of children's services, as well as the international research on the effectiveness and impact of an integrated approach.

In Section 2, Sharon O'Donnell and her colleagues at NFER's International Information Unit scope the international policy landscape in relation to services for children to provide a current and coherent overview of children's services provision internationally. The scoping draws on data from over 50 different education jurisdictions.

In Section 3, Pippa Lord and Shona MacLeod consider empirically-based international research (published from 2003 onwards) on the integration of children's services. They discuss the evidence of countries' progress towards, and effectiveness of, integration of children's services and identify the research that demonstrates the impacts for children and young people.

The fourth section, written by David Brown, Visiting Professor at the University of Wolverhampton and a former Executive Director of Children's Services in a UK local authority, considers this evidence and makes a series of concluding remarks about the role of government, the rationale for change, the challenge of delivery, and the relationship between national policy and front-line professionalism.

2. Findings from policy

(Sharon O'Donnell, Pippa Lord, Claire Sargent, Anne Byrne, Elizabeth White and Janine Gray)

2.1 About the scoping

In England, the *Every Child Matters* Green Paper, published in 2003 (HM Treasury, 2003), proposed a range of measures to reform and improve services for children, and set out the five outcomes which matter most to children and young people as:

- Being healthy
- Staying safe
- Enjoying and achieving
- Making a positive contribution
- Achieving economic wellbeing.

The Green Paper was the basis for the *Children Act 2004* (England and Wales. Statutes, 2004), the key focus of which was to integrate services provided for children, and to centre these services more effectively around the needs of children, young people and families. *Every Child Matters: Change for Children* (HM Treasury, 2004) then set out the national framework for local change programmes to build such services and, in late 2007, *The Children's Plan: Building Brighter Futures* (DCSF, 2007) was published. This set out the Government's long-term vision for improving schools and the integrated support services available to families by 2020. Key elements of the plan include ensuring that schools are the centre of communities, and that links between parents, schools, health services and other children's services remove barriers to the learning, health and happiness of every child.

The scoping of the international policy landscape in relation to services for children aims to provide a current and coherent overview of children's services provision internationally. The scoping follows from a 2006 enquiry placed to the Eurydice Network (the information network on education in Europe) by the International Information Unit (IIU) at the National Foundation for Educational Research (NFER). This identified that few European countries had established, or were establishing, integrated children's services departments along the lines of those being developed in England following the changes introduced under Every Child Matters (ECM).

The policy scoping extends beyond the Eurydice Network countries to include those additional countries and states covered by the IIU's work on the INCA project (the International Review of Curriculum and Assessment Frameworks Internet Archive). Consequently, it covers 54 countries and states: Australia (and the states of Queensland, Tasmania and Victoria); Austria; Belgium (the separate Flemish-, French- and German-speaking communities); Bulgaria; Canada (and the provinces of Alberta, British Columbia, Ontario and Saskatchewan); Cyprus; The Czech Republic; Denmark; Estonia; Finland; France; Germany; Greece; Hungary; Iceland; Ireland; Italy; Japan; Korea; Latvia; Liechtenstein; Lithuania; Luxembourg; Malta; The Netherlands; New Zealand; Northern Ireland, Norway; Poland; Portugal; Romania; Scotland, Singapore, Slovakia; Slovenia; Spain; Sweden; Switzerland; Turkey; the USA (and the states of Kentucky, Maryland, Massachusetts and Wisconsin) and Wales.

Data was collated primarily through internet-based desk research and some liaison with in-country contacts.[1] The data collection for the factual policy scoping also identified some key policy literature, full details of which were provided to the NFER team completing the complementary literature review on international children's services provision (see Section 3, page 26).

In collating the data, information specialists from the NFER's IIU examined countries':

- moves towards integration of provision, that is, structural and organisational similarities to Every Child Matters (ECM), with education, social and health services collaborating to ensure children's and young people's wellbeing
- policy moves towards similar outcomes to the five pillars of ECM (being healthy, staying safe, enjoying and achieving, making a positive contribution, and achieving economic wellbeing).

The research remit did not extend to an examination of the inspection regimes in place in other countries and their potential influence on the development of integrated services.

The review which follows includes a summary of the findings on other countries' moves towards integrated provision and the introduction of similar outcomes to the five ECM pillars; an overview of the types of outcome categories that countries appear to be working toward; and the conclusions from the factual policy scoping and their importance for the linked review of the international literature. Detailed country 'fiches' were also collated but are not published here.

The policy scoping determined that countries can be categorised into two main types:

1. Those whose policy documents reflect some degree of integration in the provision of services for children and their families (education, health and social services), and/or who are working towards a range of outcomes similar to those expressed in Every Child Matters (ECM) in England (Section 2.2. Some integration of provision and/or outcomes similar to ECM).

2. Countries for whom policy documents provide little evidence of either a focus on integrated children's services provision, or of a range of similar outcomes to those expressed in ECM (Section 2.3. Little or no integrated children's services provision).

These categories are reflected in the following table (Table 1) and then commented on in further detail.

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[1] Through its work as the Eurydice Unit for England, Wales and Northern Ireland (Eurydice at NFER – http://www.nfer.ac.uk/eurydice) in the Eurydice information network on education in Europe, and its work in updating, managing and developing the International Review of Curriculum and Assessment Frameworks (INCA) Internet Archive (http://www.inca.org.uk), the International Information Unit (IIU) is well placed to make use of its international networks of contacts.

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Table 1. Findings: country categories

	Some integration of provision and/or outcomes similar to ECM	Little or no integration of children's services provision or similar outcomes to ECM
Home countries	Ireland	
	Northern Ireland	
	Scotland	
	Wales	
Europe	Czech Republic	Austria
	Estonia	Flemish-speaking Belgium
	Finland	French-speaking Belgium
	Germany	German-speaking Belgium
	Hungary	Bulgaria
	Italy	Cyprus
	Lithuania	Denmark
	Luxembourg	France
	Malta	Greece
	Netherlands	Iceland
	Norway	Latvia
	Poland	Liechtenstein
	Portugal	Slovenia
	Romania	Sweden
	Slovakia	Switzerland
	Spain	Turkey
Rest of world	Australia	Canada
	Australia – Queensland	Canada – Saskatchewan
	Australia – Tasmania	Korea
	Australia – Victoria	USA – Kentucky
	Canada – Alberta	
	Canada – British Columbia	
	Canada – Ontario	
	Japan	
	New Zealand	
	Singapore	
	USA	
	USA – Maryland	
	USA – Massachusetts	
	USA – Wisconsin	

NB. Australia, Canada, and the USA appear nationally and as individual states scoped by the study to reflect the differences in state and national policy.

2.2 Policy from countries with some integration and/or outcomes similar to ECM

Of the 54 countries and states included in the desk research, 34 have some form of integrated provision for children's services and/or a range of outcomes to achieve for children and young people which bear some resemblance to the Every Child Matters (ECM) outcomes in England. Of these, a minority, including the other UK constituent countries of Northern Ireland, Scotland and Wales, appear currently to be providing a similar form of integrated provision of children's services (education, health and social services) to that in England and to be working towards a similar range of outcomes to those expressed in ECM. Also included in this minority are Alberta and Ontario in Canada, Malta, The Netherlands, and the state of Maryland in the United States.

A minority offer very similar provision

In Northern Ireland, Scotland and Wales, policy and provision is very much in line with that in place in England. In **Northern Ireland**, for example, the lead on children's services is taken by the Children and Young People's Unit (CYPU) within the Office of the First Minister and Deputy First Minister. The Supporting and Safeguarding Children Division, within the Department of Education (DE), works closely with this Unit and other agencies on the health and wellbeing strategy for the education sector; on policy on children at risk; on pupils' emotional health and wellbeing; and on pastoral guidance. *Our Children and Young People – Our Pledge. A Ten Year Strategy for Children and Young People in Northern Ireland 2006–2016* (Northern Ireland. OFMDFM, 2006) sets out a ten-year plan to improve the lives of all children and young people in Northern Ireland, and to narrow the gap between those who do best and those who do worst. This strategy aims to deliver improved outcomes linked to six key areas. A Commissioner for Children and Young People has also been appointed to lead the implementation of the strategy.

In **Scotland**, the Getting it Right for Every Child (GIRFEC) programme, stimulated (amongst others) by the 2001 *For Scotland's Children: Better Integrated Children's Services* report (Scottish Executive, 2001), is the equivalent to ECM. The Scottish Government continues to affirm its commitment to the integrated GIRFEC approach, which was recently described by the Minister for Children and Early Years as the 'golden thread through all policy, strategy and delivery for children and young people' (Scottish Government, 2008a). An important development since 2002 has been the commitment to roll out the 'integrated community school' approach to all Scottish schools. This approach aims to raise standards and promote social inclusion. Whilst there is no single model for integrated community schools, integration of services is the key feature, bringing several existing schools together to work as a cluster, with a team of professionals providing a range of services including education, social work, family support and health education.

In **Wales**, local authorities are required to develop a partnership of agencies providing services to children and young people, across the age range 0–25 years and, as in England, recent policy developments have focused on promoting better outcomes for children and young people through improved services and collaborative working.

In **Alberta** (Canada), the *Alberta Children and Youth Initiative* (ACYI) (Children and Youth Services Alberta, 2009) has similar outcomes to Every Child Matters and, although there are different departments covering education and children's services, high importance is given to taking a collaborative approach across departments in the province to achieve the ACYI outcomes. Introduced in 1998, ACYI recognises that children and youth issues cross many government ministries, and that collaborative partnership and co-ordinated government-wide effort is critical for the effective and efficient support of children, young people and their families. In **Ontario** similarly, *Realizing Potential: Our Children, Our Youth, Our Future* (Ontario Ministry of Children and Youth Services, 2008) (the Ministry

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of Children and Youth Services' Strategic Framework for 2008–2012) is driven by the core objectives of providing better outcomes and better service experiences to children and young people. In it, the Ministry of Children and Youth Services has identified five key goals to enhance the impact of its ongoing work (see below), as well as to provide a foundation for future reforms. To achieve these outcomes, and develop and implement future policies and programmes and a service system, the Ministry works with other ministries and community partners.

In **Malta**, the Ministry of Education, Culture, Youth and Sport offers a range of services to support the holistic development of children, in terms not only of their education, but also in support of child safety, safe schools, the school social work service and education medical services. Whilst there is a separate Ministry of Social Policy, which oversees child protection services and the work of Malta's Commissioner for Children, agencies co-operate to deliver services.

In **The Netherlands**, the Ministry for Youth and Families was created in 2007 as an 'umbrella' ministry under which four other ministries – the Ministry of Health, Welfare and Sport; the Ministry of Justice; the Ministry of Education, Culture and Science; and the Ministry of Social Affairs and Employment – co-operate. The Ministry was established in response to growing reports of child abuse in The Netherlands, and increasing evidence of children with behavioural problems, the unhealthy lifestyle of some youngsters, the number of children who attend neither school nor work, and an increase in anti-social behaviour among the young. The principle behind the Ministry's creation is the belief that a concerted and collaborative close working relationship between ministries, the municipal and provincial authorities, youth care institutions, schools and other stakeholders is the only real way to tackle such problems. The Ministry for Youth and Families has no civil servants of its own; staff working for the Ministry remain formally employed by one of the four collaborating ministries, but receive their instructions from the Minister for Youth

and Families and the Director-General for Youth and Families.

Every Opportunity for Every Child: Youth and Family Programme 2007–2011 (Netherlands. Ministry for Youth and Families, 2007), which guides the work of the Ministry for Youth and Families in The Netherlands, has very similar outcomes to ECM. It aims to recognise the rightful place of the family in society and focus on prevention. It also defines clear aims for the childhood and upbringing of all children, regardless of their cultural background or physical capabilities.

In addition, a similar concept to that of the extended school has been introduced in The Netherlands. Established in the late 1990s, the *Brede School* initiative, which literally means the 'more broadly-based school' or 'community school', is an initiative whereby municipal authorities work with schools and other services including the police, health and welfare services, and sports and cultural institutions to enhance pupils' opportunities for development.

Created in 2005, the Governor's Office for Children (GOC) and the Children's Cabinet in the state of **Maryland** in the **USA** were established to:

• provide a co-ordinated, comprehensive, interagency approach to the development of a continuum of care that is family- and child-oriented and that emphasises prevention, early intervention, and community-based services for all children and families, with special attention to at-risk populations

• work collaboratively to create and promote an integrated, community-based service delivery system for Maryland's children, young people and families, and to improve the wellbeing of all Maryland's children.

Integrated delivery is ensured by representatives of all 'child-serving' agencies, including Maryland State Department of Education, participating in the Children's Cabinet.

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More are increasing collaboration, developing integration and establishing outcomes frameworks

Although only a minority (eight) of the countries/states in this factual policy scoping appear currently to be providing integrated services and outcomes for children and young people in a similar way to England, more (16) seem to be moving towards increased collaboration, integration, and 'joined-up' thinking in the provision of services, and/or moving towards similar outcomes to those expressed in Every Child Matters.

At national level in **Australia**, for example, although the lead department with responsibility for affairs relating to children and their education is the Department of Education, Employment and Workplace Relations (DEEWR), the Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) plays a significant role in assuring similar Australia-wide outcomes to those expressed in ECM.

There are also some moves towards integration of services, particularly in the area of provision in the early years. The Communities for Children Initiative (CfC), for example, is one of the strands in the Stronger Families and Communities Strategy 2004–2009 that came about as a result of Australia's National Agenda for Early Childhood. Forty-five communities have been targeted by FaHCSIA to achieve better outcomes for children from birth to five years and their families. Targets include: better school readiness through a collaborative approach to early child and maternal health; early learning and care; child-friendly communities; supporting families and parents; and working together in partnerships. Partners in these collaborations include: three tiers of government; non-government organisations; service providers; and most importantly, families and children. Supported by researchers and academics, partners work collaboratively to ensure school readiness.

In addition, the Australian Research Alliance for Children and Youth (ARACY) – a national organisation with members based across Australia – was founded in reaction to increasingly worrying trends in the wellbeing of Australia's young people. ARACY asserts that by working together, rather than working in isolation, solutions to the problems affecting children and young people are more likely to be uncovered. ARACY has two primary goals:

- To promote collaborative research and agenda setting for children and young people.
- To promote the application of research to policy and practice for children and young people.

The ARACY vision is to foster collaborative capacity by creating the opportunities and environment for people to work together across traditional barriers, and find practical solutions to issues affecting the development and wellbeing of young Australians. ARACY seeks to join up the efforts of researchers, practitioners and policy makers across all fields to improve the wellbeing of children and young people.

In **Queensland** (Australia), individual departments, for example the Department of Education, Training and the Arts; the Department of Child Safety; the Department for Health; and the Department for Disability Services are all expected to contribute towards achieving the Queensland Government's autumn 2008 vision for the state. This vision for 2020 (Queensland Government, 2008) is framed around five ambitions which bear similarities to Every Child Matters. There are also moves towards more integrated organisational and structural provision, particularly in the early years, with the establishment of an Office for Early Childhood Education and Care. This will take lead responsibility for children's early development and bring responsibility for early education and childcare services into one agency. The new Office will also be aligned with the Department of Education, Training and the Arts.

In **Tasmania** also, although the departments are separate and the structure different, there are some parallels between the various programme goals (such as those of the *Tasmania Together 2020* programme (Tasmania Together Progress Board, 2006))

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> *The programme also aims to cross administrative borders; to promote multi-disciplinary co-operation at a local level; to improve co-operation between sectors; and to co-ordinate issues related to children, young people and families.*

and ECM. In addition, the Department of Health and Human Services (DHHS) is responsible for delivering integrated services to maintain and improve the health and wellbeing of individual Tasmanians and the Tasmanian community as a whole. Amongst the principal responsibilities of the Department are statutory responsibilities relating to vulnerable children and young people in relation to child protection and juvenile justice; and the provision of a wide range of community services for children and their families, including early intervention, family support services and child health services.

In the Australian state of **Victoria**, where the corporate priorities of the Department of Education and Early Childhood Development (DEECD) also reflect outcomes similar to those of ECM, there is, in addition, a clear priority to integrate services for children and families. A major part of this priority is achieving greater integration between schools and other early childhood services to ease transition. The Action Plan Framework in **British Columbia** (Canada) – *Strong, Safe and Supported: A Commitment to B.C.'s Children and Youth* (British Columbia. Ministry of Children and Family Development, 2008), which is led by the Ministry of Children and Family Development, also contains some similar goals and outcomes to ECM and involves some inter-departmental collaboration.

The social programmes in the Education Department within the Ministry of Education, Youth and Sport in **The Czech Republic** bear some similarity to the outcomes set out in Every Child Matters. There is also an element of co-operation between ministries and agencies to deliver services to young people.

Although, in **Finland**, services and provision for children as such do not appear to be integrated in the way that they are in England, the cross-sectoral Policy Programme for the Wellbeing of Children, Youth and Families (*The Finnish Government's Child and Youth Policy Programme 2007–2011* (Finland. Ministry of Education, 2008)), which is led and co-ordinated by the Ministry of Education, contains similar aims, objectives

and outcomes to those expressed in Every Child Matters. The programme also aims to cross administrative borders; to promote multi-disciplinary co-operation at a local level; to improve co-operation between sectors; and to co-ordinate issues related to children, young people and families. The programme's impetus is cited as being the formidable challenge Finland faces as a result of changes in population structure, and the belief that survival requires a nation of people who are self-assured, trust each other and are willing to share responsibility. The foundation of such social policy is considered to be found in growth, in educational communities, and in the wellbeing of children and young people.

In **Hungary**, although there have been no general moves to provide services in an integrated manner, an increasing amount of attention is being paid, at central and local level, to the wellbeing, safety, social care, healthcare and education of children, and particular efforts are being made in the area of children's rights, disadvantaged children, the most vulnerable children, and ethnic minorities. The 'Biztos Kezdet' programme, for example, is based on the Sure Start programme in England and is a programme of early development which aims to stop the cycle of poverty in socially disadvantaged areas of Hungary. It is funded under the Hungarian National Development Plan and involves inter-sectoral co-operation at local and departmental levels.

The Department of Health and Children is taking the lead in the drive towards integrating services for children in **Ireland**, whilst the Department of Education and Science is particularly concerned with equality and social inclusion in education and works in collaboration with other agencies to achieve this. The National Children's Strategy Implementation Team in the Department of Health and Children is currently looking at an integrated policy for early education and child care in Ireland; a recreation policy for the over 12s; and a policy to advance and support the development of the integrated delivery of services for children at the local level. It is also responsible for support and

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oversight of Ireland's national play policy; youth homelessness; the *Children Act 2001* (Ireland. Statutes, 2001) (co-ordinating cross-departmental aspects); progress on *The National Children's Strategy* (Government of Ireland, 2000); and supporting the work of the National Children's Advisory Council.

In **Norway**, the Ministry of Education and Research and the Ministry of Children and Equality collaborate closely, and work with the county and municipality administrations towards the aims and programmes of both Ministries, which contain parallels to the Every Child Matters outcomes. There have also been recent moves towards ensuring improved collaboration and integration of services. In 2006, for example, responsibility for the administration of kindergartens for pre-school children was moved from the Ministry of Children and Family Affairs to the Department of Early Childhood Education and Care within the Ministry of Education and Research. This was with a view to ensuring a more comprehensive and cohesive education for children and young people. It appears, however, that, although early childhood education and care have been consolidated within education services, services are not integrated – in the sense that the Department does not have additional responsibilities in the area of health and/or for families, for example.

The Polish *National Action Plan for Children 2004–2012* (Ministry of Education Poland, 2004) and the *Polish Youth Strategy* (Ministry of National Education and Sport Poland, 2003) are co-ordinated by the National Ministry of Education and Sport. The executors are other ministries, regional authorities, non-governmental organisations and other relevant institutions. In **Poland** also, the four main areas of the *National Action Plan for Children* reflect similar outcomes and priorities to ECM.

Youth strategy particularly in **Singapore** appears to reflect some of the Every Child Matters outcomes. Led by the Ministry of Community Development, Youth and Sports (MCYS), the strategy is achieved by MCYS working with various government and non-government partners – such as the Ministry

of Education, the National Youth Council, the National Council for Social Services, the National Volunteer and Philanthropy Centre and various other agencies – to set and review national youth policy, as well as to implement and co-ordinate programmes and initiatives. Similarly in **Slovakia**, the Concept of State Policy Towards Children and Youth bears some similarities to ECM. The Department of Children and Young People is based in the Ministry of Education; as a result, there is some degree of integration. However, youth policy in Slovakia focuses largely on children and young people in their free time and in non-formal settings.

Reflecting some similarities with the situation in England and the ECM programme, **Spain's** *National Strategic Plan for Childhood and Adolescence 2006–09* (Spain. Ministry of Labour and Social Affairs, 2006) was developed by the Ministry of Labour and Social Affairs, with the participation of other ministries, institutes, federations and associations, the Autonomous Communities and non-governmental organisations. It is a tool for the promotion and protection of children's rights and represents Spain's first efforts at planning and co-ordinating policies for children between different levels of government (national, regional and local). The aim is also to promote a culture of co-operation between public and private institutions involved in supporting and safeguarding children and young people, as a response to the new challenges arising related to their wellbeing.

In the **United States**, although education is the responsibility of the individual states and, at national level, there are separate federal Departments of Education and of Health and Human Services focusing individually on outcomes similar to those expressed in ECM, there are some national programmes aiming to ensure integrated provision of services. These programmes are particularly evident in the area of early years education and care, where they seek to prepare economically disadvantaged young and very young children and their families for the future. The federal Head Start and Early Head Start programmes aim to

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ensure the joined-up provision of educational, health, nutritional, social and other services. The Sure Start programme in England bears similarities to these programmes.

In **Massachusetts** (USA), although there is no evidence of an integration of provision in that different departments within the same Executive Office (either the Office of Education or the Office of Health and Human Services) have responsibility for different sectors and for a range of initiatives and programmes relating to, for example, compulsory education, children and families, early education and care, and youth services, there is some evidence of a recent desire to ensure increased co-ordination of service provision. This is reflected, for example, in the establishment in 2008, of the Executive Office of Education, with the explicit mission of 'fostering strong and seamless connections between the myriad state agencies and departments responsible for providing students with a public education' (Massachusetts. Executive Office of Education, 2009), and in policy moves to ensure more joined-up provision in the field of early years education and care.

Others are setting out on the journey towards increased collaboration and/or considering outcomes frameworks

There is a further 'tranche' of countries which appear to be beginning to develop outcomes frameworks which bear some similarities to Every Child Matters, and/or considering increased collaboration in service provision. In **Estonia**, for example, although the current policy focus seems to be on lifelong learning as a means to ensure the future economic success of the country, some of the aims of the *Education Act* (Estonia. Statutes, 1992) loosely parallel some of the ECM outcomes. There is also some evidence of a desire to create more 'joined-up' services, particularly in the area of social policy. As long ago as 1993, for example, the Ministry of Social Affairs was created from an amalgamation of the former Ministries of Health Care, Social Welfare, and Labour.

In **Germany**, although there are a plethora of 'non-integrated' agencies working in the areas of education; services for children, young people and families; health; and social care, in addition to separate federal and Länder Ministries in the various areas, this wide range of organisations does appear to cover some similar outcomes to ECM and to seek to ensure some collaboration.

Japan's first National Youth Development Policy was formulated at a time when the country was suffering from a long-term economic slump. It was developed in response to a widening income gap in society; a decline in the educational role of the family; the diversification of employment patterns; and the number of 'job-hopping' part-timers and young people not in employment, education or training ('NEETs'). Against this background, and combined with concerns in more recent years regarding serious crime committed by young people, an increasingly unstable work situation, economic hardship faced by parents, adolescents feeling isolated, Japan's commitment to the United Nations *Convention on the Rights of the Child* (OHCHR, 1989), the *National Youth Development Policy* has been revised (Japan. Headquarters for Youth Development, 2008). This policy defines young people as those ranging in age from birth to 30 and focuses on: giving primary consideration to the position of young people; providing young people with support so that they can develop in good health, achieve social independence and live in harmony with others; and providing personalised support appropriate to the circumstances of each young person. Delivery mechanisms for the policy are not yet clear.

In **Italy**, some of the objectives of the Division for Students, Integration, Participation and Communication in the Ministry of Education, Universities and Research are similar to some of the outcomes expressed in Every Child Matters, and there appears to be an increasing emphasis on inter-ministerial co-operation for the Division's policy portfolio. Elsewhere, the Ministry of Work, Health and Social Policy takes the lead on child protection issues, whilst the Ministry of Youth takes the lead on

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> " *In Portugal, where there is no integrated programme for the provision of children's services as such, there are various public and private institutions which have responsibilities for children's services, their rights and protection.* "

youth policy and also on skills and vocational training for young people.

In **Lithuania**, although the provision of services is not integrated as such, there are some parallels between the overarching aims for education and the aims of the programme of government for 2006–2008 and Every Child Matters. There is also evidence of some collaborative working across ministries and other governmental institutions and agencies.

Although in **Luxembourg** different departments cover education and children's services, outcomes similar to the ECM outcomes of 'enjoying and achieving' and 'making a positive contribution' appear to guide policy in education particularly. In addition, in terms of integration, in the field of youth policy there is a clear desire to take account of the trans-sectoral nature of any policy in this area when planning provision. A Committee for Children's Rights has also been established.

In **New Zealand** also, although provision of services is not integrated, some of the principles and outcomes expressed in the statements of intent and annual reports of the Ministry of Education and the Ministry of Social Development reflect some of those in Every Child Matters. In addition, all ministries are expected to contribute towards the Government's five key goals (economic transformation, national identity, families, sustainable development, and Schools Plus).

In **Portugal**, where there is no integrated programme for the provision of children's services as such, there are various public and private institutions which have responsibilities for children's services, their rights and protection. There are also a number of initiatives relating to children's rights, child protection and children's services, with a range of outcomes which parallel those in ECM. There is, for example, a programme which integrates various different services with a view to promoting pupils' health and wellbeing specifically.

Although the priority in the Romanian education system appears to be modernisation to make **Romania** more economically competitive, to achieve internationally comparable standards of education and to adapt the system to meet EU requirements, there is an element of assuring equal access to education for all children regardless of their social background, and of ensuring extra help for the disadvantaged. There is also an Inter-ministerial Council for Education, Culture, Research, Youth, Sport and Minorities which has a hand in formulating youth policy, and is composed of various ministries and agencies and local public authorities.

The Department of Children and Families in **Wisconsin** (USA) focuses on child welfare and early childhood education and care and appears to have no specific remit to ensure collaborative provision with the Department of Public Instruction. The two departments do, however, seek to achieve some similar outcomes to those expressed in Every Child Matters.

2.3 Policy from countries with little or no integrated services provision

Although more than half of the countries/states included in the study (34) seem to be beginning to focus some aspect(s) of policy or provision for children on similar outcomes, or systems and structures, to those linked to the Every Child Matters programme in England, 20 countries/states appear to be making no explicit specific moves towards more joined-up or integrated provision, or towards a range of similar outcomes. These countries include **Austria**; the **Flemish**-, **French-** and **German-speaking communities of Belgium**; **Bulgaria**; **Canada** at the national level and the province of **Saskatchewan**; **Cyprus**; **Denmark**; **France**; **Greece**; **Iceland**; **Korea**; **Latvia**; **Liechtenstein**; **Slovenia**; **Sweden**; **Switzerland**; **Turkey**; and the state of **Kentucky** in the **USA**.

For some European countries, such as **Bulgaria**, **Cyprus**, **Slovenia** and **Turkey**, priorities focus on reforming and modernising

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> *… outcome categories included health and emotional wellbeing; education and achievement; young people's voice/participation/rights; economic wellbeing; and children and young people's resilience and safety.*

the education and training system to 'upskill' the population; strengthen the economy; meet the needs of the labour market; and begin to bring the system more in line with that in other more established European Union countries, or with EU educational priorities (such as those expressed in the Lisbon agenda). The Bulgarian education system does, however, contribute in some way towards shaping social policy, through its efforts to tackle school disengagement and assimilate minorities, and there is a very new policy of beginning to open medical surgeries in schools.

Although there is a Children's Services branch within the Ministry of Education in **Saskatchewan (Canada)** (the other main ministry in this area is the Ministry of Social Services), this branch has a specific remit to provide 'support for learning' services. This includes special education and intensive support; programmes to support diversity, caring and respectful schools; provincial alternative special needs schools; programmes for young people in custody; support for early school entrance; early childhood intervention programming; and English as an additional language initiatives.

Although in **Greece** there is no programme of integrated provision of children's services, a variety of services is provided by local authorities to children and young people in a non-integrated way. Examples of the types of services provided include information centres and clubs for young people, and a network of youth counselling centres.

2.4 Outcome categories

Where policy documents provided evidence of countries working towards a range of specific outcomes for children and young people, many of these outcomes reflected parallels with those in Every Child Matters. Although sometimes expressed in different language to the ECM outcomes, or in the level of detail in the language, these outcome categories included health and emotional wellbeing; education and achievement; young people's voice/participation/rights; economic wellbeing; and children and young people's resilience and safety. The table which follows provides a preliminary mapping of the outcomes expressed in the policy documents located against the five ECM outcomes. More detailed commentary then follows.

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Table 2: Outcome categories compared with the Every Child Matters outcomes

Country	Being healthy	Staying safe	Enjoying and achieving	Making a positive contribution	Achieving economic wellbeing	Other outcomes	Policy document
Northern Ireland	Being healthy	Living in safety with stability	Enjoying learning and achieving	Contributing positively to community and society (Living in a society which respects children's rights)	Experiencing economic and environmental wellbeing	Living in a society which respects children's rights	Ten Year Strategy for Children and Young People
Scotland	Healthy Active	Safe (Nurtured) (Respected)	Achieving (Nurtured)	Responsible (Respected) (Included)		Respected (Included) (Nurtured)	Ministerial Vision for Scotland's Children
Wales	Enjoy the best possible physical and mental, social and emotional health, including freedom from abuse and victimisation	A safe home and community that support physical and emotional wellbeing (Enjoy the best possible physical and mental, social and emotional health, including freedom from abuse and victimisation)	Access to a comprehensive range of education, training and learning opportunities, including acquisition of essential personal and social skills Access to play, leisure, sporting and cultural activities Have a flying start in life and the best possible basis for future growth and development	Are listened to, treated with respect, and able to have their race and cultural identity recognised	Are not disadvantaged by child poverty	Are listened to, treated with respect, and able to have their race and cultural identity recognised	7 Core Aims for Children
Finland						Child-oriented society Wellbeing of families with children Prevention of social exclusion	Policy Programme for the Wellbeing of Children, Young People and Families

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Country	Being healthy	Staying safe	Enjoying and achieving	Making a positive contribution	Achieving economic wellbeing	Other outcomes	Policy document
Ireland		An Ireland where all children are cherished and supported by family and the wider society	An Ireland where children enjoy a fulfilling childhood and realise their potential	An Ireland where children are respected as young citizens with a valued contribution to make and a voice of their own			National Children's Strategy 2000–2010
Netherlands	A healthy upbringing	A safe upbringing	Developing talents and having fun	Contributing to society	Being properly prepared for the future	Being properly prepared for the future	Youth and Families Programme
Poland	Promoting a healthy lifestyle	Protecting children from harassment, violence and exploitation	Ensuring high quality education			Supporting families	National Action Plan for Children 2004–2012
Australia: Queensland	Healthy: to make Queenslanders Australia's healthiest people	Fair: to support safe and caring communities	Smart: to deliver world class education and training	Green: to protect Queenslanders' lifestyle and environment	Strong: to create a diverse economy powered by bright ideas	Green: to protect Queenslanders' lifestyle and environment	Toward Q2: Tomorrow's Queensland
Australia: Victoria			Every Victorian *thrives, learns and develops* to enjoy a productive, rewarding and fulfilling life while contributing to their local and global communities	Every Victorian thrives, learns and develops to enjoy a productive, rewarding and fulfilling life while *contributing to their local and global communities*	Every Victorian thrives, learns and develops to *enjoy a productive, rewarding and fulfilling life* while contributing to their local and global communities		Vision for the Department of Education and Early Childhood Development

Country	Being healthy	Staying safe	Enjoying and achieving	Making a positive contribution	Achieving economic wellbeing	Other outcomes	Policy document
Canada: Alberta	Children are born healthy Children and young people practise healthy behaviour	Children and young people are safe and free from abuse or neglect	Children are ready to learn when they start school Children and young people succeed in school			Resources are provided to meet the needs of all children Aboriginal children and young people receive support that is responsive to their cultural needs Young people are successful in their transition to adulthood	Alberta Children and Youth Initiative (ACYI)
Canada: Ontario		Every child and young person is resilient	Every young person graduates from secondary school Every child and young person receives personalised services	Every child and young person has a voice Everyone involved in service delivery contributes to achieving common outcomes		Every child and young person is resilient Every child and young person receives personalised services Everyone involved in service delivery contributes to achieving common outcomes	Realising Potential: Our Children, Our Youth, Our Future

Country	Being healthy	Staying safe	Enjoying and achieving	Making a positive contribution	Achieving economic wellbeing	Other outcomes	Policy document
New Zealand			Schools Plus: the Government's policy for all young people to be in education, skills or other structured learning, relevant to their abilities and needs, until they reach the age of 18	National identity Sustainable development	Economic transformation	Families – young and old National identity Sustainable development	Government goals towards which all Ministries are expected to contribute
USA	Healthy	Safe	Engaged Challenged			Supported	Association for Supervision and Curriculum Development (ASCD) 'Whole Child Petition'

> *These strategic objectives are supported by 15 national outcomes, which describe in more detail the Government's aims. Progress on these outcomes is measured through 45 national indicators and targets.*

Countries' outcome categories

Perhaps unsurprisingly, Table 2 reflects considerable similarity in outcomes in Northern Ireland, Scotland and Wales with the Every Child Matters outcomes in England. The parallels with the ECM outcomes reflected in the *Youth and Family Programme 2007–2011* in The Netherlands (Netherlands. Ministry for Youth and Families, 2007) and Toward Q2 (Queensland Government, 2008) in Queensland (Australia) are also significant, whilst policies and programmes in Ireland, Poland, Victoria (Australia) and the provinces of Alberta and Ontario in Canada in particular also show some interesting similarities.

In **Northern Ireland**, *Our Children and Young People – Our Pledge. A Ten Year Strategy for Children and Young People in Northern Ireland 2006–2016* (Northern Ireland. OFMDFM, 2006) sets out a ten year plan to improve the lives of all children and young people in the country, and to narrow the gap between those who do best and worst. This strategy aims to deliver improved outcomes linked to six key areas:

- Being healthy
- Enjoying, learning and achieving
- Living in safety and with stability
- Contributing positively to community and society
- Experiencing economic and environmental wellbeing
- Living in a society which respects children's rights.

In **Scotland**, the specific outcomes for children established under *The Vision for Scotland's Children* (Scottish Government, 2008b), are framed within a bigger picture and vision for Scotland, which includes five core strategic objectives, the aim of which is to create a country which is:

- Wealthier and fairer
- Healthier
- Safer and stronger
- Smarter
- Greener.

These strategic objectives are supported by 15 national outcomes, which describe in more detail the Government's aims. Progress on these outcomes is measured through 45 national indicators and targets. Among the national outcomes by which the Government's performance is measured, the following have particular relevance to the work of the education/social care group of directorates and agencies. They are that Scotland:

- Is better educated, more skilled and more successful and renowned for its research and innovation.
- Has young people who are successful learners, confident individuals, effective contributors and responsible citizens.
- Gives its children the best start in life so that they are ready to succeed.
- Tackles the significant inequalities in Scottish society.
- Improves the life chances of children, young people and families at risk.
- Has high quality public services which are continually improving, efficient and responsive to local people's needs.

Against this background, *The Vision for Scotland's Children* (Scottish Government, 2008b), the outcomes of which are described in Table 2, outlines the broad needs of all children and young people in Scotland. The language in which these needs is expressed is consistent with the UN *Convention on the Rights of the Child* (OHCHR, 1989) and sets out the intended outcomes for all policies and all services concerned with children and families. The specific outcomes are that children are:

- Safe: protected from abuse, neglect or harm at home, at school and in the community.
- Healthy: having the highest attainable standards of physical and mental health, access to suitable healthcare, and support in learning to make healthy and safe choices.
- Achieving: being supported and guided in their learning and in the development of their skills, confidence and self-esteem at home, at school, and in the community.

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- Nurtured: having a nurturing place to live, in a family setting with additional help if needed or, where this is not possible, in a suitable care setting.

- Active: having opportunities to take part in activities such as play, recreation and sport which contribute to healthy growth and development, both at home and in the community.

- Respected: having the opportunity, along with carers, to be heard and involved in decisions which affect them.

- Responsible: having opportunities and encouragement to play active and responsible roles in their schools and communities and where necessary, having appropriate guidance and supervision.

- Included: having help to overcome social, educational, physical and economic inequalities and being accepted as part of the community in which they live and learn.

In **Wales**, the Welsh Assembly Government's seven core aims for children and young people (*Our Aims for Children* (WAG, 2009)) aim to ensure that all children and young people:

- Have a flying start in life and the best possible basis for their future growth and development.

- Have access to a comprehensive range of education, training and learning opportunities, including acquisition of essential personal and social skills.

- Enjoy the best possible physical and mental, social and emotional health, including freedom from abuse, victimisation and exploitation.

- Have access to play, leisure, sporting and cultural activities.

- Are listened to, treated with respect, and are able to have their race and cultural identity recognised.

- Have a safe home and a community that supports physical and emotional wellbeing.

- Are not disadvantaged by child poverty.

The five ECM outcomes in England have provided a basis for policy for children and young people in **The Netherlands**, which now uses a similar five-pillar structure for its programme framework, applied and adapted to the particularities of the Dutch situation. The five outcomes defined in the *Youth and Family Programme* (Netherlands. Ministry for Youth and Families, 2007) are:

- A healthy upbringing

- A safe upbringing

- Contributing to society

- Developing talents and having fun

- Being properly prepared for the future.

The **Queensland** Government's vision for 2020 (*Toward Q2*, Queensland Government, 2008) is also framed around five ambitions. These too bear significant similarities to Every Child Matters but are for the whole of Queensland and its population (rather than children and young people specifically):

- Strong: to create a diverse economy powered by bright ideas.

- Green: to protect Queenslanders' lifestyle and environment.

- Smart: to deliver world-class education and training.

- Healthy: to make Queenslanders Australia's healthiest people.

- Fair: to support safe and caring communities.

The *National Children's Strategy* (Government of Ireland, 2000) in **Ireland** contains three core objectives which are for children to:

- Be cherished and supported by family and the wider society.

- Enjoy a fulfilling childhood and realise their potential.

- Be respected as young citizens with a valued contribution to make and a voice of their own.

> *... every young Victorian thrives, learns and develops, to enjoy a productive, rewarding and fulfilling life, while contributing to their local and global communities.*

In **Poland**, the four main areas of the *National Action Plan for Children 2004–2012* (Ministry of Education Poland, 2004) are: promoting a healthy lifestyle; ensuring high quality education; supporting families; and protecting children from harassment, violence and exploitation.

Beneath the overarching vision of the Department of Education and Early Childhood Development (DEECD) in **Victoria** (Australia) of ensuring that 'every young Victorian thrives, learns and develops, to enjoy a productive, rewarding and fulfilling life, while contributing to their local and global communities', further specific outcomes for children are set out by age range. For children from birth to age eight, for example, they include that children should:

• Have the best start in life to achieve optimal health, development and wellbeing.

• Acquire the basic skills for life and learning.

• Have access to affordable, quality early childhood education in the years before schooling.

For children aged eight to 16, they include that children are engaged in and benefiting from schooling; are meeting expected literacy and numeracy standards; and excel by national and international standards. Whilst, for young people aged 16 and over, the specific outcome is for them to make a successful transition from school to further education and/or work that provides further training opportunities.

The collaborative partnership of government ministries in **Alberta** (Canada), which works towards the *Alberta Children and Youth Initiative* (Children and Youth Services Alberta, 2009), aims to ensure that children are safe, healthy and ready to learn. This is regarded as the most important goal of any society; investing in families and communities through services that support healthy child and youth development to create the foundation for a strong society and economy.

The expected outcomes of this collaborative approach are that:

• Children are born healthy.

• Children and young people are safe and free from abuse or neglect.

• Resources are provided to meet the needs of children.

• Aboriginal children and young people receive support that is responsive to their cultural needs.

• Children are ready to learn when they start school.

• Children and young people succeed in school.

• Children and young people practise healthy behaviours.

• Young people are successful in the transition to adulthood.

The Strategic Framework for 2008–2012 of the Ministry of Children and Youth Services in **Ontario** (Canada) (*Realizing Potential: Our Children, Our Youth, Our Future* (Ontario Ministry of Children and Youth Services, 2008)) identifies five key goals to enhance the impact of its ongoing work, as well as to provide a foundation for future reforms. These are that:

• Every child and young person has a voice.

• Every child and young person receives personalised services.

• Everyone involved in service delivery contributes to achieving common outcomes.

• Every child and young person is resilient.

• Every young person graduates from secondary school.

In **Finland**, the Government's cross-sectoral Policy Programme for the Wellbeing of Children, Young People and Families (*The Finnish Government's Child and Youth Policy Programme 2007–2011*, Finland. Ministry of Education, 2008) has three key objectives – each of which includes a range of more detailed aims and indicators. The key objectives are to create a child-friendly society; assure the welfare and wellbeing of families; and prevent social exclusion.

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> " *… in Queensland, the Government's vision for 2020 (Queensland Government, 2008) includes an ambition to be 'Green: to protect Queenslanders' lifestyle and environment'; whilst the Government's goals in New Zealand include one for sustainable development.* "

All government ministries in **New Zealand** are expected to contribute towards the Government's goals of economic transformation, national identity, families – young and old, sustainable development, and Schools Plus (the Government's policy for all young people to be in education, skills or other structured learning, relevant to their abilities and needs, until they reach the age of 18). There appears also to be a particular emphasis on economic wellbeing.

Although there are no national level outcomes in the **United States** which bear a similarity to the ECM outcomes, in early 2009, the Association for Supervision and Curriculum Development (ASCD) launched a 'Whole Child Petition' (see http://www.wholechildeducation. org/). In this, it encouraged members to sign up to request their state board of education to support policies and practices to ensure that every student is healthy, safe, engaged, supported and challenged.

Outcome categories compared

This initial mapping of policy documents evidences some interesting parallels and differences in outcomes, and some additional outcomes not included or framed in that way in England. Parallels, differences and/or 'new' outcomes are evidenced in:

- The way in which countries refer to 'wellbeing'
- Green and sustainable outcomes
- Being nurtured
- Children's rights and voice
- The importance of cultural identity
- Transition
- Enjoyment
- Narrowing the gap.

References to wellbeing

Some countries'/states' plans (Finland's, for example) include outcomes for wellbeing which are quite general or generic, while others refer specifically to physical wellbeing (as in Victoria – 'have the best start in life to achieve optimal health, development and wellbeing'), to economic wellbeing (England, New Zealand, Northern Ireland), to emotional wellbeing (Wales), or to environmental wellbeing (Northern Ireland).

References to green and sustainable outcomes

Other countries may not refer specifically to environmental wellbeing, but do include some outcomes which relate to sustainability or 'being green'. Creating a country which is 'greener' is, for example, a key strategic outcome in Scotland; and in Queensland, the Government's vision for 2020 (Queensland Government, 2008) includes an ambition to be 'Green: to protect Queenslanders' lifestyle and environment'; whilst the Government's goals in New Zealand include one for sustainable development. Where outcomes do refer to the environment, however, these are usually outcomes expressed in governments' more high level or general strategies rather than in any specific strategy relating to outcomes for children and young people. In Scotland, for example, the 'being greener' outcome is one of the overarching aims for the Scottish Government; it does not feature explicitly in the more specific aims for children and young people expressed in *The Vision for Scotland's Children* (Scottish Government, 2008b).

Being nurtured

Scotland's Vision for Children also includes an outcome for children to be 'nurtured'. This is reflected in the aim in Ireland for young people to be 'cherished'. Other countries and states use language which relates more specifically to keeping children safe and protected, and free from abuse or neglect (Alberta, The Netherlands, Northern Ireland, Poland, Queensland and Wales). The nurturing and cherishing outcomes in Scotland and Ireland specifically highlight the important role of family. Finland, New Zealand and Poland also have specific outcomes focusing on the importance of the family and governmental support for that role.

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> *In Northern Ireland, which includes the outcome of 'contributing positively to community and society', there is the additional outcome of 'living in a society which respects children's rights'.*

Children's rights and voice

Some policy documents have specifically worded outcomes relating to children's rights, respect for children, and children and young people's voice ('Making a positive contribution' in England). *The Vision for Scotland's Children* (Scottish Government, 2008b), for example, includes explicit outcomes for children and young people to be 'respected', 'responsible' and 'included'. In Northern Ireland, which includes the outcome of 'contributing positively to community and society', there is the additional outcome of 'living in a society which respects children's rights'. Documents in Ireland and Ontario refer to giving young people a voice, whilst in Victoria young people are expected to contribute to their local and global communities. In Wales, the seven core aims for children and young people include the aim that the young are 'listened to, treated with respect, and .... able to have their race and cultural identity recognised'.

The importance of cultural identity

Like Wales, Alberta explicitly recognises cultural identity and intercultural understanding in its policy document for children and young people, which aims to ensure that 'Aboriginal children and young people receive support that is responsive to their cultural needs'. In New Zealand, national identity is a key outcome towards which all government departments are expected to work. It is noticeable that such cultural outcomes have only been found to be expressly stated in policy documents in countries or states with an indigenous population or with a second official language.

Transition

Whilst most of the policy documents on transition refer to early years and school readiness (which links having a good start in life, to pre-school, and then to early years education), a few countries focus on transition into adulthood. Where the states of Victoria (Australia) and Alberta (Canada), for example, refer explicitly to ensuring successful transition for children and young people, these outcomes relate particularly to older children in making a successful transition from school to further education and/or work that provides further training opportunities (Victoria) or a successful transition to adulthood (Alberta).

Enjoyment

Enjoyment is explicitly referred to in few policy documents encapsulating outcomes for children and young people (England, Northern Ireland), although The Netherlands refers to 'developing talents and having fun', and Scotland and Wales refer clearly to the importance of play, leisure, sporting or cultural activities. It is interesting that enjoyment is not focused on specifically in other countries' outcomes, and also that, where it is mentioned explicitly in England, The Netherlands and Northern Ireland, it is expressly linked to achievement.

Narrowing the gap

Two other strands running through the policy documents are outcomes referring to preventing social exclusion/narrowing the gap for the disadvantaged and enabling all children and young people to achieve their full potential.

This initial analysis of policy documents and the outcomes expressed in them has really only begun to scratch the surface with regard to the similarities, differences and apparent levels of importance and priority given to some areas over others in a given country. This is an area which could benefit from more in-depth analysis at some future stage via, for example, a more detailed mapping of outcomes (and aims and indicators where these also exist); an analysis of the level of detail expressed in the outcomes and of any clear priority areas in the outcomes; and/or an analysis of the language used – whether it is more passive or active, for example, and what this might indicate about the outcomes.

> *The agenda has a strong emphasis on connecting with schools to ensure all Australian children are fully prepared for learning and life. It also emphasises that investment in the health, education, development and care of children benefits children and their families, communities and the economy…*

2.5 Integration in the early years and the importance of the rights of the child

It became clear when completing the desk research that some countries have a specific concern to integrate provision and join up policy in the particular area of Early Years education and care. This was most evident in Australia and the United States.

At national level, the Australian Government's agenda for early childhood education and child care focuses on providing Australian families with high-quality, accessible and affordable integrated early childhood education and childcare. The agenda has a strong emphasis on connecting with schools to ensure all Australian children are fully prepared for learning and life. It also emphasises that investment in the health, education, development and care of children benefits children and their families, communities and the economy, and is critical to lifting workforce participation and delivering the Government's productivity agenda. The state of Queensland is also now initiating moves in this area with the establishment of an Office for Early Childhood Education and Care and, in Victoria, there is a clear priority to integrate services particularly relating to schools and other early childhood services.

At national level in the United States, the federal Head Start and Early Head Start programmes, run by the Administration for Children and Families (ACF) in the Department of Health and Human Services, seek to prepare economically disadvantaged very young children and their families for the future, by the joined-up provision of educational, health, nutritional, social and other services. The Sure Start programme in England bears similarities to these programmes. There is also evidence of a desire to ensure joined-up provision in the field of Early Years education and care in the states of Massachusetts and Wisconsin in the USA.

The importance of the rights of the child

Even where countries do not appear to be moving towards any form of integrated provision of services for children, young people and their families, nor to be considering co-ordinating policy or strategy in this area, children's rights appear to be of considerable importance to government and policy makers. Indeed, the vast majority of countries and states included in the study have policies and initiatives in place in support of children's rights. These countries include Austria, the French-speaking community in Belgium, Alberta, British Columbia and Ontario in Canada, Finland, France, Germany, Hungary, Italy, Lithuania, Luxembourg, Malta, The Netherlands, Northern Ireland, Poland, Portugal, Scotland, Singapore, Spain, Switzerland, and Wales.

Many countries make explicit reference to the principles of the UN *Convention on the Rights of the Child* (OHCHR, 1989) as providing part of the impetus for their policies on integrated children's services provision. Part of the catalyst for the establishment of Spain's *National Strategic Plan for Childhood and Adolescence 2006–09* (Spain. Ministry of Labour and Social Affairs, 2006), and for the setting up of Spain's Centre for Children, is evidenced as being the Convention, for example, and the framework for the activities of The Netherlands Youth Institute, launched in 2007, is cited as being the UN Convention. In Scotland also, the language of *The Vision for Scotland's Children* (Scottish Government, 2008b), which outlines the broad needs of all children and young people in Scotland, and sets out the intended outcomes for all policies and all services concerned with children and families, is quoted as being consistent with the Convention.

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> *… most of the countries/states in the study have a profound concern to ensure that the rights of children are reflected in, taken account of and acted on in their policy and provision.*

2.6 Conclusions

This factual policy scoping has provided evidence of governmental concerns in 34 of the 54 countries and states studied, towards ensuring co-ordinated policy, strategy and provision for children, young people and families. Of the 34 countries, at least eight appear to have programmes in place that include outcomes which bear significant similarities to those in Every Child Matters in England and/or are actively moving towards integrated provision. Others of the 34 are developing policy documents which reflect some similar outcomes to those expressed in ECM, and a developing commitment towards ensuring more collaboration and joined-up thinking in the provision of services and the development of policies and strategies.

In addition, most of the countries/states in the study have a profound concern to ensure that the rights of children are reflected in, taken account of and acted on in their policy and provision. Indeed, even where countries do not appear to be moving towards any form of integrated provision of services for children, young people and their families, nor to be considering co-ordinating policy or strategy in this area, children's rights are still, more often than not, of considerable importance to government and policy makers.

This scoping of the international policy landscape in relation to services for children provided the context for, and is complemented by the international literature review in Section 3.

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3. Findings from the literature
(Pippa Lord and Shona MacLeod)

3.1 About the review

The aim of the literature review was to identify empirically-based international research (published from 2003 onwards) on the integration of children's services. It asks:

- What evidence is there of countries' progress towards integrating their children's services?

- What research evidence is there on the effectiveness of approaches that integrate children's services?

- What research evidence is there on the impacts for children, young people and their families of the integration of services for children?

The search strategy involved:

- Systematic scanning and identification of evidence from a range of relevant academic databases.

- Scanning and collection of information and documents from appropriate websites and internet subject gateways.

- Using the NFER International Information Unit's policy scoping to help identify sources.

Empirically-based research and evaluation, which answered all or some of the three main research questions, was examined and 73 sources meeting these criteria were audited. Areas noted were: aspects of integration, which children/young people were involved (age, key group, etc.), evidence answering research question 1, evidence answering research question 2, and evidence answering research question 3. From these documents, 20 were selected for full review to highlight in more detail answers to the three main research questions, and provide examples from the international literature. Details of these 20 reviewed sources and references for the remaining 53 audited documents are provided on the CfBT website: www.cfbt.com/evidenceforeducation.

Overall, there is little research evidence on progress towards integration of children's services at the country level…

3.2 What evidence is there on countries' progress towards integration of children's services?

The following key findings come from the audited sources, with examples from those that have been fully reviewed.

Evidence of integration

Overall, there is **little research evidence** on progress towards integration of children's services at the country level (e.g. on how services are integrated).

In the research literature, it is really only that from the UK (England in particular) which refers to a national mandate to integrate children's services. This stems from the Children's Act (2004) – which provided the impetus for an outcomes-based approach and the integration of services for children. Hence, evidence of 'change' and progress towards integration in the literature is more common in England than elsewhere in the world.

Few studies provide a picture of **national change over time** (e.g. of how services have changed, or how the work of professionals has changed) with regard to children's services. However, the following evidence of the way in which children's services operate reveals some indication of change at the country level:

- **evidence from England** – e.g. Lord *et al.* (2008a), which provides an overview of the progress made by 14 local authorities in their integration of children's services since 2004, and the recent Audit Commission Report (2008) which provides a picture of the current state of play as regards governance of, and resources for, children's services in England and Wales

- **evidence from Hong Kong** (Lee, 2003), which examines an integrated team model for children and youth services. Integrated Teams (ITs) were introduced as a delivery model for children and young people's services in Hong Kong in 1994. Since then, the number of teams has expanded from 10, to 60 in 2001 and 130 in June 2003. Following eight years of its operation, the

IT model is the trend in developing children and young people's services in Hong Kong. There is support from the Government for this approach

- **evidence from Norway** (Iversen *et al.*, 2006), which examines multidisciplinary health and education teams for children starting school. At the end of the project in 2004, the participatory multidisciplinary team approach was implemented as standard in the North region and was planned for implementation in Stavanger in all primary schools. In 2005–06, seven schools in Bergen used the approach

- **evidence from the Pacific Islands** (Sadao and Robinson, 2002), which looks at the development of an interagency model of delivering services for children and people with disabilities in rural Pacific Islands, and has been developing a framework for this since the mid-1990s. The island of Palau received grant funding from the US to develop a collaborative model for providing comprehensive family-centred services for families and children, particularly those with disabilities. The model was introduced in 1993 and remained current as at 2002. Changes included the creation and training of an interagency team, implementing a data tracking system, designing a system of care across agencies, and setting up an interagency office to direct the initiative. An outcome framework produced by the evaluation in 1997 included outcome categories in relation to family, child, community and team outcomes, interagency system of care outcomes, and data system outcomes.

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> *According to Katz and Hetherington (2006), countries' prevailing cultures across three spectra affect the nature of children's services, and ultimately, outcomes for children and young people.*

There is, however, evidence of more **local integration or initiative-specific integration**. Whether or not this is tied into a national agenda is not clear in the research literature. The US and Australia in particular have many initiatives and programmes which employ aspects of integration, or integrate some parts of the picture of children's services. Examples include:

• the integration of health and early education in the Families First Initiative in Australia (e.g. Fisher *et al.*, 2006; Valentine *et al.*, 2006; Alperstein and Nossar, 2002)

• the School Retention Action Plan (SRAP) which seeks to increase the proportion of young people staying in education to year 12 in South Australia, and which has funded a diverse range of programmes including a local programme for young mothers, youth education centre short course programmes, a programme of alternative learning options, action research studies and reviews of policy development (Patterson, 2007)

• Head Start initiatives in the US, including Early Head Start which began in 1995, and is aimed at enhancing the development of infants and toddlers and strengthening low income families (e.g. Vogel *et al.*, 2006; NASBE, 2003; McWayne *et al.*, 2008).

Political, funding and legal systems affect the nature of services for children

The political, funding and legal systems in countries, and their history of integration, appear to affect what a country does in terms of integration of services for children. Box 1 below provides examples of this from research by Katz and Hetherington (2006) with regard to child protection and family support cases across Europe.

Box 1
Political, funding and legal systems affect the nature of services for children

According to Katz and Hetherington (2006), countries' prevailing cultures across three spectra affect the nature of children's services and, ultimately, outcomes for children and young people. We have summarised these spectra below as questions.

• Is there a 'statist' or 'subsidiarity' system for providing services for children?

– Statist systems, in which services are provided directly by the state (national and/ or local), tend to have the highest levels of integration. This especially occurs in **Nordic counties**, where local authorities directly run the services, in co-located or adjacent offices.

– In **France**, where there is a mixed system of provision from the state and from the voluntary sector, the child support social worker for the local authority becomes the **key link person between agencies**. A disadvantage of this approach is a feeling amongst the link social worker of being kept 'out of the loop' by their specialist colleagues. They can simply become the broker of interagency service provision. It would seem, therefore, that this is **not the same as the role of the lead professional** in England, who is a core member of the team working for the child.

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> *As an indication of any systemic change in countries' services for children, the research literature was examined for examples of reported changes to strategic-level structures and systems, and the experiences of front-life staff.*

Box 1 (continued)

- In subsidiarity dominated structures, such as in **Germany**, where services are decentralised and provided by the voluntary sector and local agencies, co-ordination of services is more difficult. The services are felt to be highly accessible to professionals and families, but there is little integration between them.

- Is the system centred on child protection or on prevention and family support?

  - Systems that **focus on prevention** seem better equipped to maintain a focus on the family as a whole, and to allow **agencies to work together**, than systems that focus on child protection. In countries that focus on prevention and family support, the **time that practitioners spend on communication** and exercising professional judgement is valued at a strategic level.

  - Where **child protection** is the underlying orientation of the whole system, a response from practitioners of **self-protection** is heightened. This tends to discourage communication and collaboration with other agencies.

- Is the legal/court system adversarial or inquisitorial?

  - In **adversarial systems**, such as in England, there is a need to gather evidence for cases. Whilst this may produce clarity, it can result in high referral rates and a high expenditure on investigation and assessment of child protection cases in comparison to expenditure on prevention and early intervention (this has been reported for Australia, for example, where mandatory reporting is the main mechanism for ensuring interagency communication).

  - In **inquisitorial systems**, such as in **France**, there is more emphasis on **problem solving** and early intervention and prevention.

Reference: Katz, I. and Hetherington, R. (2006). 'Co-operating and communicating: a European perspective on integrating services for children', *Child Abuse Review*, **15**, 6, 429–39.

Indications of moves towards integration in services for children

As an indication of any systemic change in countries' services for children, the research literature was examined for examples of reported changes to strategic-level structures and systems, and the experiences of front-life staff.

Changes for strategic-level structures and systems are listed below:

- Changes to service and front-line **structures**, which include:

  - some **co-location** of services in local authorities in England (Lord *et al.*, 2008a) and in Norway (Katz and Hetherington, 2006), and setting up an **interagency office** in Palau to direct interagency working in the Pacific basin (Sadao and Robinson, 2002)

  - the creation of **interagency teams** e.g. in the Pacific Islands (Sadao and Robinson, 2002).

- The introduction of **tools and frameworks**, including:

  - The Common Assessment Framework (CAF) in England

  - Working Group Terms of Reference and Conflict of Interest Guidelines devised by Communities for Children Townsville West in Australia (Johnson, 2006) and now being used by the State Department of Communities as a best practice guide.

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" The role of schools and other professionals in schools to improve outcomes for young people is a particularly changing area in England… "

- The implementation of **new IT and data systems** – e.g. ContactPoint, and the Integrated Children's System in England (Cleaver *et al.*, 2008), a data tracking system in the Pacific Islands (Sadao and Robinson, 2002), and a communications system to aid the integration of agencies involved in the Families First Initiative in New South Wales, Australia (Fisher *et al.*, 2006).

- The development of the **type of support** available, including:

  - more intensive support through the School Retention Action Plan (SRAP) programme in South Australia (Patterson *et al.*, 2007)

  - prevention and early intervention, such as in the Families First Initiative in New South Wales, Australia (Valentine *et al.*, 2006)

  - outcome-focused work, such as the Turnaround integrated service system evaluated in Australia (Wyles, 2007) and similar to Wraparound in the US (e.g. Bruns *et al.*, 2006).

The role of schools and other professionals in schools to improve outcomes for young people is a particularly changing area in England (with growing research and evaluation on this topic especially on extended schools, e.g. Wilkin *et al.*, 2008; Kendall *et al.*, 2007; Ainslie *et al.*, 2007). The Brede School (literally, broad school) in The Netherlands, and the new integrated community schools in Scotland follow a similar approach. Research in The Netherlands explores the development of a collaborative model to improve school health promotion and linking health promotion into the school curriculum (Leurs *et al.*, 2005).

Changes for front-line staff in terms of their daily work and experiences include:

- Improved and more extensive **communication and collaboration** across agencies and participants involved in interagency working, in England (Lord *et al.*, 2008a), in the Local Learning and Employment Network (LLEN) in Victoria, Australia (Fowler, 2002), in local interdisciplinary teams in Norway (Iversen *et*

al., 2006), in the SRAP programme in South Australia (Patterson, 2007), and in the Pacific Basin (Sadao and Robinson, 2002).

- Improved **joint working practices** including better joint planning, co-ordination and implementation of services (e.g. Lord *et al.*, 2008a and Patterson, 2007).

- Greater **understanding** of other services and agencies (Lord *et al.*, 2008a, and Sadao and Robinson, 2002).

- Improved relations and increased contact between participants in local disciplinary teams – 'the role of active participation made it easy for the external professionals to naturally 'blend' with the teachers' (Iversen *et al.*, 2006).

Some of the identified features outlined above mirror changes found in **England** in a comprehensive study of integrated children's services in 14 local authorities (Lord *et al.*, 2008a). However, some of the changes found in England are not highlighted in research from other countries, e.g. the implementation of training programmes for staff on aspects of integrated working, and notable changes to staff roles such as the introduction of the lead professional (Lord *et al.*, 2008a). Interestingly though, there are other changes evident elsewhere that are **not highlighted** in the research from England studied here. These are:

- **Understanding** amongst professionals **of the need to work together** (Sadao and Robinson, 2002).

- Improved and increased **partnerships with the community** (Patterson, 2007).

- Development of professionals' **communication and facilitation skills in working together** with other agencies, demonstrating a real focus on the growth of the professionals for this work (Sadao and Robinson, 2002). This work has been developing since the 1990s, and the growth in new skills to work together effectively goes further than understanding each other and increased dialogue evidenced in the 14 local authorities in England (Lord *et al.* 2008a).

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These inter-professional skills have been established within situations where there is an existing culture of collaboration between professionals (i.e. in South Australia and the Pacific Island of Palau in the examples above). These skills are more advanced in those contexts than found in the research in England, which tends to show that integrated professional skills are developing but not yet fully embedded (for example, the evidence from England shows some tensions around diluting roles, losing identity, and 'turf' issues, etc.).

Notwithstanding this, these integrated professional skills seem to be particularly important. In England, could or should efforts be made to develop these cultures and skills further, to enable professionals to work across boundaries even more effectively? Could, for example, the initial training for *all* professionals who work with children include a module on integrated children's services? Could we develop a sort of 'integrated professionalism'?

3.3 What research evidence is there on the effectiveness of approaches that integrate children's services?

How is effectiveness measured?

Wide variation in approaches was found when assessing effectiveness in the international research literature on the integration of children's services. Effectiveness

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Box 2
A participatory action research model to integrating pre-school health and education

Iversen *et al.* (2006) carried out participatory action research to pilot, evaluate and roll out a multidisciplinary approach to integrating health and education pre-school.

Aim: to evaluate the development of a participatory multidisciplinary health and education team approach in improving the quality of starting school, with a focus on early health promotion and support to children at risk of developing problems.

Methods: Five main methods were:

- *Participatory week* – where the local multidisciplinary teams jointly planned and delivered a normal school week with some activities tailored to facilitate participatory observation. For example, physiotherapists delivered gymnastics, school nurses taught health promotion activities, etc.

- *Follow-up activities* were agreed by the local team after the participatory week. These included delivery of guidance from external professionals, and agreeing the need for further assessment/intervention for specific children.

- *Regional lectures* and workshops throughout the year on health and developmental issues.

- *Annual multidisciplinary conferences* in both areas to reflect on the overall evaluation findings within the region.

- *Participatory day before school start* to build relations between parents, children, teachers and external professionals (piloted in the first year, and adopted by other schools for the remainder of the project).

Reference: Iversen, S., Ellertsen, B., Joacobsen, S.R., Raheim, M. and Knivsberg, A.M. (2006). 'Developing a participatory multidisciplinary team approach to enhance the quality of school start', *Action Research*, **4**, 3, 271–93.

> *The literature review identifies three examples where outcome frameworks have been specifically developed and used to measure the achievement of organisational and inter-organisational outcomes.*

is measured in a range of different ways and often from different perspectives. In part, this reflects the breadth of research studies identified as relevant to this review, the different country contexts and the types of integration which were the subject of their investigation.

Staff perceptions of the impact of integrated services were the main mechanism by which effectiveness was measured in research in Norway, where the views of children's services professionals and administrators were systematically used to design and refine the service delivery model (Iversen *et al.*, 2006) (see Box 2). In research in Hong Kong, a baseline of staff views was conducted in the early stages of integration and compared with a later survey (Lee, 2003).

Other research characterises effectiveness in terms of the **levels of participation** achieved through, and as a result of, the integration of services. In the Families First Strategy in New South Wales, Australia, the involvement of individuals and local groups with a stake in the delivery of services was considered a critical measure of the success of a tailored, local approach (e.g Fisher *et al.*, 2006). Inclusive practice, in terms of the degree of participation secured from different levels of government (local, state, regional and national/federal) and involvement in other networks is another parameter used for evidencing effectiveness (e.g. Valentine *et al.*, 2006).

The literature review identifies three contexts in which **outcome frameworks have been specifically developed** and used to measure the achievement of organisational and inter-organisational outcomes.

- In the Pacific Island of Palau, the *'Palau interagency model – outcomes framework'* was produced to conduct a process and outcome evaluation following the introduction of integrated services for children and families with disabilities (Sadao and Robinson, 2002). This framework includes eight outcome categories in relation to family, child, systems, collaborative working and community (see Box 3).

- Elsewhere, in Hong Kong an outcomes framework was designed to assess the effectiveness and feasibility of implementing Integrated Teams (ITs) to deliver children and youth services in the Territory (Lee, 2003).

- In research in England, a four-stage outcome model has been developed to explore progress made in local authorities' integration of children's services (Lord *et al.*, 2008a). Progress at Level 1 is characterised by changes to services and structures. Level 2 describes changes to the daily experiences and attitudes of practitioners. At Level 3, progress is depicted by the qualitative accounts of the difference that has been made to children and families. Level 4 impacts indicated embedded, systemic change.

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Box 3

The Palau interagency model – outcomes framework

The Palau interagency model outcomes framework includes the following eight outcome categories. Some examples of outcome descriptions are included under each.

Family involvement outcomes

- Family as partners in team and IEP decision making

- Families have increased service options due to co-ordination

Child outcomes

- Increase in number of children served

- Children's access to follow-up care has improved

- Frequency of screening and assessment has increased

Interagency system of care outcomes

- Adequate representation from all agencies on CSN Clinic Team

- CSN Clinic helps to track children and assure annual evaluations

Interagency data systems outcomes

- Interagency consolidated reports were useful for tracking purposes

- Agency data system and reporting has improved

- Interagency co-ordinator troubleshooting and monthly reports helpful

Interagency team outcomes

- Interagency co-ordinator/office model for supporting and increasing team activities was successful

- Cultural appropriateness of model was acceptable

Agency outcomes

- Agencies benefited from an increase of available resources

- Collaborative agreement in place to share resources and services

Community outcomes

- Public officials' involvement in team efforts has increased

- Increase in community participation this year

Member outcomes

- Better understanding of the needs of individuals with disabilities

Reference: Sadao, K.C. and Robinson, N.B. (2002) *'Interagency systems development and evaluation in the Pacific Islands: a process model for rural communities'*, Infants and Young Children, **15**, 1, 69–84.

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Successful implementation of integrated children's services needs to include a recognition of any historical arrangements for interagency working.

Some researchers note that the effectiveness of, or satisfaction with, integrated working is related to process variables (e.g. relationships, meetings procedures) more often than outcome variables (e.g. clinical improvement of children) (Dagenais *et al.*, 2008). This resonates with the findings in Section 3.4, which highlight that there is little systematic collection of data on the impacts of integration on children, young people and their families.

As well as the various measures of effectiveness, the review has also revealed a **range of methodologies** to consider when exploring the effectiveness and impacts of integrating children's services.

Katz and Hetherington (2006) presented **case scenarios** to professionals/practitioners from different European countries **to encourage discussion about practitioner responses and solutions** to those scenarios in their country context.

Johnson *et al.* (2003) **asked interviewees about interagency collaborations they had been involved with in the last two years**. What factors contributed to the success of the collaboration? What factors jeopardised its success? How were problems/issues overcome? What improvements would they make in future collaborations?

Research to **link policy, practice and research sectors within child and youth services** (Metcalfe *et al.*, 2008) is valuable. The researchers report that encouraging collaboration across these three sectors has benefits in terms of: solving complex problems in child and youth services, generating and sharing new knowledge, increasing innovation, sharing risks and resources, increasing credibility for project funding, influencing policy more meaningfully, and developing long-term, sustainable and collaborative relationships. Collaboration is defined as different to networks or co-ordination of agencies, rather it is when distinct partners 'support each other to increase their joint capacity'.

These seem to be very practical and useful ways of obtaining comparative data, of linking research to practice and policy and, crucially, benefiting practitioners' reflexivity which ultimately should improve outcomes for young people.

Effective features of integration

A **wider body of evidence on the effective features** of integrated children's services is identified throughout the international literature. While not intended to present a comprehensive view of how successful integration is achieved, there are three main areas in which the evidence offers constructive insights into what constitutes effectiveness in integrated children's services:

- Ensuring a clear basis for integrated working and the supporting organisational culture.

- Designing inclusive and strength-based services.

- Managing service provision and delivery through appropriate resourcing and cultures.

In addition, this section considers the variation in how countries manage and facilitate integration at the front line, through the roles of intermediaries, brokers and lead professionals, and with varying degrees of engagement in the case. It also provides a spotlight on integration in early years services, where there is a body of international literature.

Ensuring a clear basis for integrated working and the supporting organisational culture

Successful implementation of integrated children's services needs to include a **recognition of any historical arrangements** for interagency working. Effectiveness depends on the degree to which such arrangements already exist and can be built upon (e.g. Fisher *et al.*, 2006).

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> *Involving children, their families and communities in the planning and delivery of services, and harnessing their knowledge and understanding (their strengths) to tailor interventions and improve outcomes for children is effective.*

One particularly important aspect of constructing this basis is reaching a **clear understanding of the benefits of collaboration, both for host organisations and the collaborative operation**, which thereby ensures that professionals are engaged in meaningful activity which contributes to both sets of interests (e.g. Gallagher *et al.*, 2008). This research, in Northern Ireland, to investigate the development of co-configuration of services for young people at risk identified the importance of recognising the professional identities of professionals and organisations involved in the integration. Personal relationships and trust between professionals was a critical element of success in this context.

Establishing and maintaining collaborative working processes with other agencies requires valuing time spent on communication and learning to understand each other (Katz and Hetherington, 2006). It also necessitates developing a joint commitment to the purpose of the collaboration and deeper understanding of the vision for its implementation. Providing mechanisms through which this can develop, such as joint or continuous education, training and circulation of information, is important (e.g. Wyles, 2007; Cleaver *et al.*, 2008; Lee, 2003; Fisher *et al.*, 2006; Lord *et al.*, 2008a).

Designing inclusive and strength-based services

Maintaining a focus on the family as a whole is important. Involving children, their families and communities in the planning and delivery of services, and **harnessing their knowledge and understanding** (their strengths) to tailor interventions and improve outcomes for children is effective. This is commonly referred to as a **'strength-based model'**. It is a particularly effective approach in terms of working with children with complex needs (Wyles, 2007). It does not seem, however, to universally underpin all approaches to integration. Policy makers in England may wish to consider this approach further.

Working in this more holistic way also leads to practitioners and services responding more effectively, and more constructively, to the needs of children and **especially in cases of child protection** (e.g. Katz and Hetherington, 2006). Katz and Hetherington found that in three countries (Greece, Italy and Northern Ireland), the use of a strength-based model was the overriding determinant of a successful outcome and not the level of service integration.

The capacity to establish and maintain culturally sensitive services is important. The ability of integrated children's services to offer support which is adaptive to local communities' needs, particularly those of children and families from indigenous or minority ethnic groups is a critical feature of effectiveness. This requires a recognition from all participants involved in the integration of services of the need to have the capacity and specialist knowledge to plan for, and be sufficiently responsive to, the particular support needed by different cultural groups in local communities (e.g. Fisher *et al.*, 2006) (see Box 4). In the Pacific, within an integrated team delivering services for children with disabilities, staff rated the cultural appropriateness of the model as the most effective element of their interagency approach (Sadao and Robinson, 2002).

The extent to which the **achievement of positive outcomes for the whole population of children** should be supported in a way which takes account of the needs of particular groups, but not to the exclusion of the rest of the population, is important in some of the research literature (e.g. Alperstein and Nossar, 2002; Lee, 2003). There are other arguments to this, whereby a focus on vulnerable groups is thought to raise the achievements of the whole population (see for example the Narrowing the Gap work in England).

The quality of working relationships and communication between agencies at front-line and organisation levels is identified as one of the main features of effectiveness internationally.

Box 4

The provision of culturally sensitive services: examples from Families First

In Australia, aspects of the strength-based model are observable in the approach taken within the Families First Strategy developed in New South Wales. Here, service planning is based on local knowledge and needs, not on standard models. The participation of indigenous communities is central to this approach, with their involvement fostered through engagement, time, respect for difference and collaboration. In practice, this means the participation of key individuals (e.g. local leaders, community representatives, etc.) and using their particular knowledge and skills to identify and address local needs. It also requires that managers recognise that indigenous communities are not homogenous.

Effective aspects of this service include:

- Building on strengths and particularities of existing networks.

- Supporting key stakeholders through the work of Champions for Family First, which includes community representatives.

- Overcoming differences in agency sizes through facilitating and supporting multiple forms of participation.

- Effective communications strategies for dissemination and reception of information about Families First, clarifying the distinct role and nature of Families First in comparison to existing services.

Reference: Fisher, K., Thomson, C. and Valentine, K. (2006). 'The implementation of Families First NSW: process lessons from the first four years', *Australian Journal of Early Childhood*, **31**, 1, 11–19.

Managing service provision and delivery through appropriate resourcing and cultures

The provision and availability of adequate resources (their level and quality) to support the implementation of interagency working is the main determinant of effectiveness, rather than the degree of integration, as found in Katz and Hetherington (2006) and Lee (2003). In England, research reveals fewer concerns regarding models of funding amongst children's services which are more advanced in their progress with integration (e.g. Lord *et al.*, 2008a).

The quality of working relationships and communication between agencies, at front-line and organisation levels, is identified as one of the main features of effectiveness internationally (e.g. Lord *et al.*, 2008a; Valentine *et al.*, 2006). However, this aspect of integrated working is reported only to work

if '*purposive processes and mechanisms to build and maintain relationships are set up to maintain relationships at each of these levels*'. In the Pacific island of Palau, the research showed that one of the most effective features of the interagency working was the greater communication across agencies and participants within the Interagency Team, leading to the development of their communication skills and learning about other agencies' roles and responsibilities (Sadao and Robinson, 2002).

Developing management systems and a culture which supports integrated working is vital. Building organisational infrastructures and systems at different levels, with support for local multidisciplinary teams, is a key factor in supporting the participatory approach to integrated working introduced to improve outcomes for children starting school in Norway (Iversen *et al.*, 2006). In the implementation of the Families First Strategy

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> *In the US, local intermediary organisations (LIOs) bring multiple stakeholders together to promote and provide services, mobilise political support and attract private and public sector support…*

in Australia, senior management support is also noted to perform a vital role (Fisher *et al.*, 2006).

The **presentation of the integrated services as a 'whole' to their clients** (i.e. the children, schools and families with whom they interact) seemed especially important in research in The Netherlands, for example, in the integrated delivery of school health services, albeit a localised project (Leurs *et al.*, 2005).

Managing and facilitating front-line interagency co-operation

Managing and facilitating front-line interagency co-operation varies internationally. As highlighted in Box 1, the role of a key link person in facilitating interagency co-operation seems important. In France, a key link social worker acts as a broker of specialist services (although this is reported by practitioners to leave the link worker feeling isolated or less important than their specialist colleagues) (Katz and Hetherington, 2006). In England, a lead professional is the key member of the team who takes the lead to co-ordinate provision and act as a single point of contact for a child and their family (see CWDC **www.integratedworking.com**).

In the US, local intermediary organisations (LIOs) bring multiple stakeholders together to promote and provide services, mobilise political support and attract private and public sector support (Blank *et al.*, 2003). For children, LIOs address early care and education, after school care, youth development, community and school partnerships, and school-to-work transitions. They establish quality standards and accountability – i.e. What are we trying to accomplish together? Who is responsible for which aspects of the process? How will we measure success? – simple but not simplistic questions to ensure clarity of purpose about the collaborative approach. **In England, should agencies working together have a simple set of three of four questions to establish a common purpose and clarity of roles? Do lead professionals ask these questions?** Interestingly, in the US, the LIOs

also have a role in brokering and leveraging community resources for interagency work – not evident in a specific role in England.

In developing New Community Schools (NCS) in Scotland, the role of an integration manager was felt to be crucial (Sammons *et al.*, 2003). NCSs are responsible for expanding and integrating the range of services offered to young people in disadvantaged areas in Scotland, with the aim of raising attainment and promoting social inclusion.

In managing and co-ordinating the partnership around the child, research also suggests who that co-ordinator should be and, in particular, that they should be part of the service provided. In a US study on early intervention service co-ordination models, it was found that a co-ordinator who is independent of the services being provided for children and families offers fewer services and less frequent co-ordinator contact than other non-independent models (Dunst and Bruder, 2006). This model was also associated with less use of practices valued by parents. Interestingly, in an effort to make this model unbiased and free from conflict of interest, the results are actually a more disconnected service delivery system rather than integrated.

Spotlight on early years service integration

There is a comparatively comprehensive body of research on service integration for early childhood. Research is available from the Head Start initiative in the US, Sure Start in England, Families First in New South Wales, Australia (Fisher *et al.*, 2006, Valentine *et al.*, 2006), and Starting Early Starting Smart in the US (e.g. Hanson *et al.*, 2001). The effective characteristics from the research on early years' integration are outlined in Box 5.

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Box 5
The effective characteristics of integration of early childhood services

These include:

- **Inclusive participation** of all relevant agencies and stakeholders (including NGOs/voluntary sector) (C4EO, 2009; NASBE, 2003; Fisher *et al.*, 2006; Valentine *et al.*, 2006) – in Families First, multiple forms of participation are important to overcome differences in agency sizes.

- **Participatory planning processes** (e.g. NASBE, 2003; C4EO, 2009) including planning based on local knowledge and needs (such as in Families First, Fisher *et al.*, 2006).

- **Building relationships** and collaborative practices, including shared aims and agreed working practices (Lord *et al.*, 2008b), understanding the need for integration at local, regional and government level (e.g. Valentine *et al.*, 2006), and effective communication strategies such as for the dissemination and reception of information to local indigenous populations in Families First (Fisher *et al.*, 2006).

- The adoption of combined approaches to intervention (focusing on both children and family members) (C4EO, 2009).

- The **quality of the integration**, which seems to matter more than the type of integration (C4EO, 2009). However, defining what 'quality' is requires more work. In Head Start, for example, the team approach was essential in introducing a range of perspectives, aligning and maximising resources (NASBE, 2003).

- **Providing training**, ongoing support and professional development for staff (Lord *et al.*, 2008b), including **leadership training** and a need for greater specific training of service co-ordinators, was identified in C4EO, 2009.

- **Time and resources** (e.g. Valentine *et al.*, 2006).

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Barriers and challenges for integrating children's services

The international literature also provides several examples of the lessons learned, in different country or service contexts, regarding the barriers and challenges for integrating children's services. Table 3 below provides more detail on the most common barriers and challenges identified in the review.

Table 3: Common barriers and challenges for integrating children's services

Barrier	Acts as a barrier ...
Absence of external support for integration	... either in terms of the absence of any imperative to integrate services stemming from specific policies developed to support integrated children's services, or the gap in additional funding required to facilitate the implementation of such a change (e.g. Wyles, 2007). To some extent this barrier is related to the cultural nature or emphasis placed on protection versus prevention in service delivery (Katz and Hetherington, 2006).
Inclusion/exclusion of external agencies and/or organisations in the integration of services	... as the less these external agencies are involved in partnership working the more likely they are to constrain, or even impose constraints on, the integration of services. ... where there is a lack of statutory requirement for certain key groups or organisations to participate in integration and services, for example where education or health are not part of the collaborative working arrangements. ... where there are conflicting priorities amongst participating organisations. (e.g. Gallagher *et al.*, 2008; Audit Commission, 2008; Lord *et al.*, 2008a).
Workforce turnover	... for example, in the event that there are changes in leadership of partner agencies (e.g. Audit Commission, 2008).
Development of system planning processes and service networks	... in the event that they become complex and make communication between organisations, services and professionals more difficult (e.g. Fisher *et al.*, 2006).
Models of governance	... where there is a lack of clarity regarding the way in which integrated services will be governed and the purpose of any new body/bodies overseeing integrated arrangements, there can be uncertainty or confusion about the roles and relationships between organisations and professionals (Audit Commission, 2008).
Vision and leadership	... where this is not shared and communicated (e.g. Lord *et al.*, 2008a).
Expectations of service delivery	... if expectations are not managed in conjunction with the promotion of the service provision available, there may not be the capacity to meet these (e.g. Fisher *et al.*, 2006).
Joint commissioning of services	... due to the complexity of commissioning when more than one organisation is involved, the lack of experience, knowledge or common definitions of joint commissioning can be an issue (e.g. Audit Commission, 2008).

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3.4 What research evidence is there on the impacts for children, young people and their families of the integration of services for children?

Evidence of impacts

At present, there is **little systematic collection** of data on the impacts of integration on children, young people and their families. Most research evidence is on the **processes** of integrated working rather than on the outcomes (as highlighted for example in Cozens, 2006; Brown and White, 2006; Audit Commission, 2008).

There is some research evidence on **service providers views'** on outcomes and impact. For example, qualitative accounts were gathered in research in England in 14 local authorities (Lord *et al.*, 2008a). These highlight improved wellbeing for young people, better access to services, and improvements in children's experiences of those services.

However, there is **limited evidence from the clients'** (i.e. children and families) **perspective** as highlighted in a review of the evidence base for integrated children's services to inform Scotland's policy on integrated community schools (Brown and White, 2006)). Lord *et al.* (2008a) provide qualitative and triangulated accounts of impact from children and parents who have received some aspect of integrated service. Outcomes include children getting on well with school work, feeling safer, happier and more confident.

Where integrated services have been provided in the early years, there is a body of evidence of benefits for children. This is outlined in Box 6 below.

Box 6
Evidence of the impact of early years' integration on children and young people

- The C4EO review (2009) found strong research evidence that high-quality pre-school provision, that integrates childcare and education, benefits children in terms of **cognitive and behavioural outcomes up to the age of 11**.

- A 25-year follow-up study of the Brookline Early Education Project (BEEP), which integrated health and education services to parents of young children, found that young adults who participated have: **higher incomes,** more years of **education**, are more likely to be **employed**, have **better health** and more positive health behaviours, and have better **relationships** with their parents, than those who did not participate (Voices for America's Children, 2006).

- In Norway, research on a participatory multidisciplinary health and education pre-school project found that the vulnerable children had: improved transition into school, better **relationships** with external professionals, and more opportunities and support for their **active participation in learning** (Iversen et al., 2006). Inclusion of parents also improved when specific action was taken to build positive relations between children, parents and professionals.

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Indications of impacts for children, young people and families

As an indication of the impacts for children and young people of receiving integrated services, the reviewed literature was examined for accounts of impacts (rather than empirical evidence, which was lacking in the research). A list is provided below of the identified impacts:

- Improved school attendance / retention in school (Lord *et al.*, 2008a; Patterson, 2007; Wyles, 2007; Bruns *et al.*, 2006; Sammons *et al.*, 2003)

- Improved engagement or re-engagement with learning and attitudes to school (Lord *et al.*, 2008a; Patterson, 2007; Sammons *et al.*, 2003)

- Decrease in negative behaviours, including aggression and social problems (Wyles, 2007; Lord *et al.*, 2008a; Bruns *et al.*, 2006)

- Improved wellbeing (Lord *et al.*, 2008a; Dagenais *et al.*, 2008)

- Improvements in literacy and numeracy skills – in the School Retention Action Plan (SRAP) programme (Patterson, 2007)

- Successful transitions from primary to secondary school (Patterson, 2007)

- Improvements in access to care (e.g. follow-up care for children with disabilities in Sadao and Robinson, 2002; greater continuity of care for children with autistic spectrum disorders in Lord *et al.*, 2008a; and better access to services in Dagenais *et al.*, 2008)

- Families feel involved and that they have a say (Lord *et al.*, 2008) and families as partners in the scheme (Sadao and Robinson, 2002)

- Relief for parents and care givers, including feeling supported and less isolated, and having time for their other children (Lord *et al.*, 2008a; Dagenais *et al.*, 2008).

3.5 Conclusions

Key cross-cutting themes

From the international research literature a number of specific themes should be taken into account when considering the integration of children's services. These include:

- Ensuring a clear basis for integrated working and the support of organisational culture, including the importance of **reference to country context in terms of its legal systems**, and its orientation towards either prevention and family support, or child protection.

- Designing inclusive and strength-based services, including **cultural sensitivity**, and the **importance of local needs** (noting that there may be a tension with national demands).

- **Managing service provision and delivery** through appropriate resourcing and cultures, including managing 'horizontal' integration (where children's services' professionals work together to deliver more holistic services) and 'vertical' integration (which represents all levels of government and local administrative staff working together with children's services' professionals in various models).

Exploring how integrated children's services in England sit with these themes provides new and refreshing perspectives on the state of play in this country. Implications for policy, practice and research are highlighted below.

Implications for policy

Through considering the international research, it becomes clear that, to be effective, integration of services needs to be culturally and contextually sensitive. This includes being sensitive to existing working practices between services, and to the children and communities they serve. Crucially, this means **local variation** in integration practices. In England, whilst it is known there is variation on the ground, **strengthening this message in policy and strategy** around the integration of

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> *Research and evaluation could have a role to play in developing further ways of measuring the effectiveness of integration, and in particular evaluating the outcomes and impacts for children and young people.*

children's services might provide reassurance for local authorities whose focus is often on meeting national demands and targets. In so doing, considering also the application of a strength-based model further in England might prove useful.

The findings concerning **prevention** rather than protection (whereby systems oriented towards prevention seem better equipped to allow agencies to work together) could make a useful **contribution to the work of Safeguarding Boards** and the **wider safeguarding agenda** in England.

Implications for practice

Establishing a real understanding of why practitioners and services are working together is important. Through considering the international research, it is clear that some initiatives from elsewhere in the world establish firmly a common sense of purpose and clarity of roles within an existing culture of collaboration. In some cases (for example in research from South Australia, and the Pacific Island of Palau) this is further embedded through a growth in professionals' communication, facilitation and collaborative **skills for integrated working**, which seems to be deeper and more established than shown by the evaluation evidence from England on professionals 'working together'. In England, should efforts be made to develop an **integrated professionalism** further?

In England, agencies working together might wish to build on the short set of questions asked by local intermediaries in the US when working together, which include: What are we trying to accomplish together? Who is responsible for which aspects of the process? How will we measure success?

Implications for research and evaluation

This literature review of the international research and evaluation on integrated children's services reveals that there is little research at a country level on integrating services for children. This is **a gap in the evidence**.

There is wide variation in the nature of the research and little consistency in the ways in which effectiveness of integration is characterised. Research and evaluation could have a role to play in developing further ways of measuring the effectiveness of integration, and in particular evaluating the outcomes and impacts for children and young people. Achieving this **in collaboration with policy and practice** would increase joint capacity, enhance practitioner reflexivity, and, ultimately, should improve outcomes for young people.

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4. Conclusion
(David Brown)

> *It offers one of the most comprehensive pictures to date of the pattern of how services internationally integrate their 'offers' to children, young people and families.*

While few countries have adopted an approach closely related to the English approach, many countries have been wrestling with the question of how education, health and social care can work together to help children and their families. This report indicates several areas where there are important lessons that can be learned from international experience.

4.1 The role of government

The debate about integration raises some interesting questions about the role of government and wider social changes. Policy makers in many countries have inherited structures and approaches to service provision designed in the immediate post-war period, based on a particular view of the role of the state. This view is increasingly redundant. In many countries there are both changing views of the role of the state and also changed priorities and perspectives. These altered perspectives include:

- a reduction in trust in professionals and policy makers within a more open, transparent and, at times, critical public sphere
- greater awareness of child protection issues
- the gradual breakdown of traditional community networks
- high levels of international migration creating increasingly complex and pluralistic societies
- the development of new forms of knowledge society, based on the internet and social networking: potentially liberating but also providing new opportunities for the exploitation of children
- a growing aspirational middle class, with expectations about issues of public provision of services and access, alongside a significant disengaged underclass

- the development in some countries of contested market-orientated solutions to social provision, while in other states more traditional bureaucratic approaches are adopted to questions of welfare provision.

If we are to understand one part of this picture, namely how a society constructs its 'children's services', then this needs to be seen in the context of the changing role of the state. In this context the CfBT/ NFER research is very timely. It offers one of the most comprehensive pictures to date of the pattern of how services internationally integrate their 'offers' to children, young people and families. The lessons from the CfBT/ NFER review raise a number of important issues for policy makers and those involved in the design of service integration and in the continuing approach to achieving improvement.

4.2 The rationale for change

Although a majority of countries and sub-national jurisdictions (34 of the 54 in the sample) have shown some level of commitment in policy terms to a joined-up or collaborative approach, very few have emphasised the centrality of integration along UK lines. Beyond the UK, The Netherlands, Norway, Malta, Hong Kong and the states of New South Wales in Australia and Maryland in the USA have approaches that, at least for some of their regions or services, are similar in construction to that of England. Twenty-six jurisdictions have adopted more modest approaches to integration.

The vast majority of countries in the sample have moved to enshrine the UN Declaration on the Rights of the Child into a national commitment to follow through on its implications for children and young people. There is no simple link between integrated services for children and the UN Declaration. However, the overall philosophy of the Declaration appears to have strengthened the

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> *There is no blueprint globally for either leadership or common professional approaches and no one accepted way forward.*

case, in many countries, for a joined-up view of the rights and needs of children.

It is difficult to identify a single cause in those jurisdictions that have moved towards a more integrated offer. In many cases, as in England, there was a sense of social crisis leading to policy changes. The exact nature of this crisis varies from country to country. Japan's National Youth Development Policy is an instructive example. This was developed at a time of economic recession and in a climate of concern about alienated teenagers and young adults, linked to concerns about rising levels of crime and family breakdown. Japanese policy makers concluded that there was a need for a more holistic view of how the state needs to co-ordinate its approach to the needs of young people from birth to age 30. In the UK and The Netherlands concerns over child abuse of relatively young children were key drivers – but although the causes were similar the concerns led to very different structural solutions.

4.3 The challenge of delivery: principles and policy into reality

Making integrated services work effectively is not necessarily easy or straightforward. It is clear from the literature review that, of the barriers to effective integrated working, several relate to the ability to establish common aims and values and the real commitment of partners from different backgrounds to work effectively together.

There is no blueprint globally for either leadership or common professional approaches and no one accepted way forward. Different organisational approaches have been adopted. Several jurisdictions, like England, have altered the structure of government departments to enable better integrated service delivery. In Alberta, a different approach has been explored. The *Alberta Children and Youth Initiative* (ACYI) has similar outcomes to the English Every Child Matters agenda. However, in Alberta there remain separate departments covering education and children's services, with high importance given to taking a collaborative

approach across departments in the province recognising that issues cross many government ministries. In England, a large department of state, the Labour government established a single Department for Children, Schools and Families (DCSF) (now the Department for Education – DfE), to lead on both resource allocation and policy through its own staff with some co-operation from other departments.

In some countries the departments remain distinct but one department has a lead function in the integration of children's services. In Australia, at federal level, the lead department is Education. In Ireland, by contrast, the lead department is Health.

The approach The Netherlands has taken, from a not dissimilar starting point to England, is very different. The Dutch government introduced a policy framework in 2007 with clear parallels to the ECM approach. However, rather than create a single super-ministry, a co-ordinating ministry was established. This Ministry of Youth and Families is entirely staffed by civil servants seconded from other departments, and its role is to establish a cross-department approach across four other ministries:

• Health, Welfare and Sport

• Justice

• Education, Culture and Science

• Social Affairs and Employment.

4.4 Prevention or protection?

In The Netherlands and England, action was deemed necessary in response to child protection concerns. Does the drive for change originating in protection and reactive policy formation inhibit wider partnership at governmental level? Integration of children's services generally aims to ensure that young people thrive in health, education and personal development outcomes. The CfBT/NFER study highlights an important distinction between policy aimed at the prevention of problems for children and their families, as opposed to policies that assume the existence of such problems and place a priority on

the protection of children from adults who are likely to harm them either accidentally or deliberately. The English experiment has placed a considerable emphasis on protection. In other jurisdictions prevention has been the greater emphasis. The authors of the report rightly suggest that we have much to learn in England from the countries where the 'prevention' approach has been adopted. Examples of the preventative approach include those in Maryland in the USA, New South Wales in Australia and the French system. One significant study that the report cites, Katz and Hetherington (2006), categorised European approaches as either 'child and family welfare focused' or 'child protection focused'.

The study makes some interesting comments on the impact of a protection approach on professional culture. Where child protection is the underlying orientation of the whole system there can be a tendency to defensiveness on the part of professionals who do not wish to be seen as the guilty party in a child protection case. Ironically, it seems that this can discourage communication and collaboration with other agencies.

The review of the evidence suggests that systems that focus on prevention are often better focused on the family as a whole, and better at enabling agencies to work together. Critically, in countries that focus on prevention, practitioners feel more professionally empowered and encouraged to spend time on key communication activities.

4.5 Measuring impact

Policy needs to be justified with evidence of likely impact. It is therefore disappointing that the evidence base of impact for integration is relatively weak. Comparison is particularly difficult because measures vary so much from place to place. The study indicates wide variation in approaches taken to assessing effectiveness in the international research literature on the integration of children's services. Frustratingly, most research evidence concerns the processes of integrated working rather than the measurement of outcomes. Providers' views are sometimes used as a proxy measure for improvement, however this

is surely a weak mechanism for the objective assessment of benefits. There is only limited evidence from the clients' (i.e. children and families) perspective.

The most substantial body of impact appears to be in the Early Years area. The report identifies British, American and Norwegian evidence of the beneficial consequences of an integrated approach to Early Years provision. While there is some promising evidence of impact for older children the evidence base is not secure.

4.6 Commissioning and the risk of fragmentation

It is interesting to reflect on the relationship between the move in England towards both more integration and a greater level of commissioning, and greater involvement of the voluntary and private sectors in welfare delivery. Arguably these two trends are pulling in opposite directions. Integration is structurally more straightforward in systems where the state is more active as a direct provider. Where the state commissions or regulates the work of others there is the possibility of a greater degree of fragmentation that is less conducive to integration.

In this context the research helpfully distinguishes between different international traditions of welfare provision: a 'statist' tradition and a 'subsidiarity' tradition. In statist systems, services are provided directly by the state, represented by both central and local government. In subsidiarity systems services are decentralised and provided by the voluntary sector and local agencies. Scandinavian countries are typically statist. Major European countries such as France and Germany have a subsidiarity tradition. In Nordic counties local authorities directly run the full range of children's services, in co-located or adjacent offices. In France, by contrast, there is a mixed system of provision from the state and from the voluntary sector. Co-ordination of services is unsurprisingly more difficult in the subsidiarity context and statist systems tend to have the highest levels of integration.

> *The task of ensuring a joined-up approach to children's services remains work in progress. This study indicates some key areas for future development.*

4.7 The relationship between national policy and front-line professionalism

Integration can be mandated from the centre through national policy but the success of the policy will depend upon effective local arrangements, and above all specific professional practices at local level. What can we learn from other countries about the practicalities of local integration? The report describes promising research findings from countries as diverse as the USA and the tiny Pacific state of Palau. These findings are important if unsurprising. Establishing a shared understanding of why practitioners are working together is key to success, linked to a clear division of labour. Other countries appear to have been more successful in putting in place at local level a common sense of purpose, supported by clarity of roles and a developing culture of collaboration. Communication, facilitation and collaborative skills for integrated working seem to be relatively undeveloped in England and the report calls for a more coherent integrated professionalism. Early Years practice provides promising evidence of how integrated professionalism can work. Key areas for collaboration include joint planning, standard operating procedures for intervention and common training.

4.8 Strength-based approaches

One interesting facet of the literature review is the international focus on so-called 'strength-based' approaches to children's services. Such an approach is based on a view that welfare practitioners can typically take a problem-based or deficit model method when a more successful model will start with a view of the strengths and resources that children and their families have. Interventions are based less on a view that certain families have 'pathological' traits and more on the need for a positive, developmental view that seeks to build on existing strengths. While there are promising examples of strength-based approaches in other countries this philosophy has not yet taken root in England.

4.9 Conclusions

One apparent gap in the literature is an exploration of cost effectiveness rather than effectiveness. The reality of increasingly limited resources alongside the continued moral imperatives involved in children's services will be a challenge for some time both in the UK and no doubt elsewhere. Although the study does not directly consider issues around efficiency and effectiveness, these considerations will be central to the future of the discourse. Another key theme given little coverage in the literature is the tension between the high level needs of some specific social groups and the 'universal' needs of all children.

A discussion about targeted provision versus the universality of all services may be necessitated by the current economic climate.

The task of ensuring a joined-up approach to children's services remains work in progress. This study indicates some key areas for future development. In England, the ECM framework has been used to champion the interests of children and young people in a largely top-down manner. The question the study raises is whether now, as children's services move to a more 'mature' phase, a more locally-driven, but equally focused approach would be more likely to yield increased results for children and families. The study suggests that this is where – in the preventative approach of many other countries and in the success story of Early Years worldwide – most impact is made.

As we look to the future there are some grounds perhaps for cautious optimism. Policy makers often turn to Finland as a country with remarkable educational outcomes. It is heartening to know that in Finland one of the underlying principles of social policy is a desire not only to do well in international academic tests, but also to be *'a nation of people who are self-assured, trust each other and are willing to share responsibility'*. This seems to be a good aspiration for all jurisdictions, including England.

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Useful websites

ARACY: the Australian Research Alliance for Children and Youth http://www.aracy.org.au

The Whole Child Petition: the Association for Supervision and Curriculum Development (ASCD) (USA) http://www.wholechildeducation.org/