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# The Experience of Sure Start in England

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# The Experience of Sure Start in England

Draft Report prepared for EPIC by Dr Martin Prowse

**Social Cohesion Practical Experiences and Initiatives**

http://epic.programaeurosocial.eu

The author wishes to thank Norman Glass and Professor Melhuish for their time and insights into the experience of Sure Start, and the management, parents and staff at Sure Start Tanhouse and Digmoor, Skelmersdale, for their input into this report.

Martin Prowse has prepared this report within the framework of an agreement between the Coordination Office of EUROsociAL - FIIAPP and the Overseas Development Institute (ODI). Its contents reflect the research and opinions of its author and under no circumstances are they to be interpreted as the official position of the European Union, the FIIAPP or the Coordination Office of EUROsociAL.

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# 1 INFORMACIÓN SINTÉTICA SOBRE LA EXPERIENCIA

**1.1. Name: SURE START**

**1.2. Geographical location (country, region, town)**: England

**1.3. Sector (multiple answers allowed)**:

- ☒ Education
- ☒ Health
- ☒ Employment
- ☐ Taxation
- ☐ Justice
- ☐ Others (please specify):

**1.4. Date of commencement of experience (mmmm of yy):** 1998-1999

**1.5. Current situation (mark box as appropriate):**

☒ Underway ☐ Finished

| **1.6. If the experience is underway, indicate the expected finishing date (mmmm of yy):** Ongoing | **1.6. If the experience has finished, indicate the effective finishing date (mmmm of yy):** |
|---|---|

**1.7. Level of the experience (select from the drop-down menu)**: Shared

*Note:*

- *Incipient experience: not underway for very long and with partial or tentative results, which have not been evaluated in formal and independent manner*
- *Confirmed experience: with results verifiable by way of formal and independent evaluations, applied solely in their original context*
- *Shared experience: with verifiable results, evaluations, and which have been transferred to others contexts*

**1.8. Main components of the experience (multiple answers allowed):**

- ☐ Development of legislative instruments
- ☒ Development of plans or programmes
- ☐ Statutes or framework agreements between actors
- ☐ Finance funds or mechanisms
- ☐ Development of managerial devices
- ☒ Procedure for provision of services
- ☐ Others (please specify):

**1.9. Estimate of the total cost of the experience (in €)**:

From 1998/99 to 2000/01, total central government funding for Sure Start (England) was £452 million (for the three year period). This equates to **€696.08 million (**using the exchange rate as of 4th October 2000). This only constituted 0.05% of total government expenditure during this time period. Now that the Sure Start experience has been transferred into Children's Centres, costs have increased. In 2006-07 £1.7 billion was allocated to Children's Centres. This equates to **€2.52 billion** (using the exchange rate from the 4th October 2006). For 2007-08, £1.8 billion has been allocated, which equates to **€2.39 billion** (using the exchange rate of 4th October 2007).[1]

**1.10. Most Notable effects of the experience in terms of social cohesion (multiple answers allowed):**

***Access to well-being, through …***

- ☒ Improved access to public services
- ☒ Improvements to quality of public services
- ☐ Greater equality in access to public services
- ☐ Increased territorial solidarity in access to public services

***More efficient action by the State and public policies, through…***

- ☐ Development of legislative or regulatory protection
- ☐ Improvement in the functioning of democracy and the rule of law
- ☒ A higher level of equal opportunities for excluded groups
- ☐ Higher quality public institutions
- ☐ Increased solidarity in the taxation system
- ☒ Improvement in human security conditions

***More active and caring citizen body, through…***

- ☒ Encouragement of citizen participation
- ☒ Increased confidence in the institutions
- ☒ Encouragement of feelings of identity and belonging
- ☒ Promotion of greater participation by women
- ☐ Others (please specify):

**1.11. Brief summary of the experience:**

Sure Start has been a key Labour government policy to tackle child poverty and social exclusion. Sure Start has focussed on the health and welfare of children under the age of four (and their families) in areas of high socio-economic deprivation. The aim has been to give children the best start in life through service provision to support them and their parents (Barnes et al 2005). Key Sure Start activities included:

- *Primary and community health care*
- *Outreach and home visiting*
- *Support for good-quality play, learning and childcare experiences for children*
- *Support for children and parents with special needs, including help getting access to specialised services*

Sure Start was targeted at the 20% most deprived areas in England, and was rolled-out in six waves between 1999 and 2003. By 2004 Sure Start was operating in 524 neighbourhoods which contained over 400,000 under-fours - around one half of all children living in household whose incomes are below 60% of the median poverty line (Melhuish and Hall, forthcoming).

To obtain 'ring-fenced' central government funding, Sure Start local programmes had to be:

- *Two-generational:* That programmes had **parental involvement** in the formulation, management and implementation of services, including board level representation.
- *Multi-dimensional:* Reflecting government thinking on 'joined-up governance', Sure Start aimed to **overcome rigid single-agency approaches** to child service provision. SSLPs had to provide co-ordinated and integrated services from multiple stakeholders.
- *Non stigmatising*: To **avoid labelling** individual households or families as 'deprived', 'poor' or a 'problem'.
- *Culturally sensitive:* Given that black and ethnic minority communities are over-represented in deprived areas, Sure Start aimed to **engage hard-to-reach groups**.
- *Offering sustained support:* Sure Start is providing services for at least **a seven- to ten-year period** (see Melhuish and Hall, forthcoming).

The key ethos underpinning Sure Start was that to improve outcomes for children one had to put parents centre stage. Instead of implementing a top-down blueprint model, Sure Start local programmes were based on demand-driven service provision, and have been characterised by their heterogeneity.

# 2 ANALYSIS OF THE EXPERIENCE

## 2.1 Results obtained: analysis of the efficacy, efficiency, and the impact in terms of social cohesion

### 2.1.1 Initial situation

Sure Start is one of the Labour government's most ambitious attempts at tackling extreme deprivation and the cycle of social exclusion in the UK. During the previous era of Conservative Party rule, tacking poverty was not a political priority. For example, the Conservative government never defined an official poverty line between 1979 and 1997 (Townsend and Kennedy, 2004). Moreover, as some sections of the Conservative Government believed in an absolute view of poverty, one Conservative Minister went as far as to argue that poverty no longer existed in the UK.[2]

Created after the Comprehensive Spending Review in 1998, Sure Start has focussed on the health and welfare of children under the age of four (and their families) in areas of high socio-economic deprivation. The aim has been to give children the best start in life through service provision to support them and their parents (Barnes et al 2005).

When the Labour party came to power in 1997 the provision of services for children aged 0-4 was fragmented and piecemeal. A cross-cutting review of Early Years services found that:

- That children living in poverty had a greater chance of performing poorly in school, getting a criminal record, and becoming teenage parents;
- That these children were more likely to be unemployed as adults;
- And that services for young children were highly variable and haphazard (see Glass, 1999).

The programme was founded on the belief that high-quality service provision for both children (0-4) and parents can contribute significantly to beneficial educational, health and crime outcomes (Eidenstadt 2000). Sure Start was founded on a rigorous evidence base. The Headstart scheme in the United States showed that Early Years services can lead to substantial long-term savings. Created in 1965 and with over 19,000 nationwide centres, Headstart showed that every $1 spent on children under the age of five in highly deprived areas saved $7 by the time they were thirty (due to reduced public expenditure on imprisonment, mental health institutions, and social security payments). Headstart children also had much better employment prospects (see Melhuish and Hall, forthcoming). Moreover, much of the evidence from the United States was based on randomised control trials and quasi-experimental trials of Early Years service provision – methods which often enjoy particular policy traction (see Melhuish and Hall, forthcoming). Sure Start was also based on substantial UK-based evidence that showed that basic infant and child health enables children to reach their potential and become fully active members of society (Melhuish and Hall, forthcoming).

The Sure Start model was based on the creation of multi-agency local partnerships that could access 'ring-fenced' central government funding secured for ten years. These partnerships were formed between statutory agencies (for example, Primary Care Trusts and local authorities), voluntary organisations, private sector companies, and, vitally, parents (Melhuish and Hall, forthcoming).

In this respect, Sure Start has been a concerted attempt to boost and integrate Early Years services (long neglected by the Conservative government) through the provision of substantial and sustained funds (Brown and Liddle, 2005).

### 2.1.2 Expected results

Sure Start Local Programmes (SSLPs) were locally defined, but every Sure Start had to contribute to the following set of objectives:

- To improve children's health;
- To improve children's ability to learn;
- To improve children's social and emotional development;
- To strengthen families and communities (Eidenstadt 2002).

To meet these goals, every Sure Start Local Programmes (SSLPs) had to offer a core set of services to parents that lived within their catchment area.

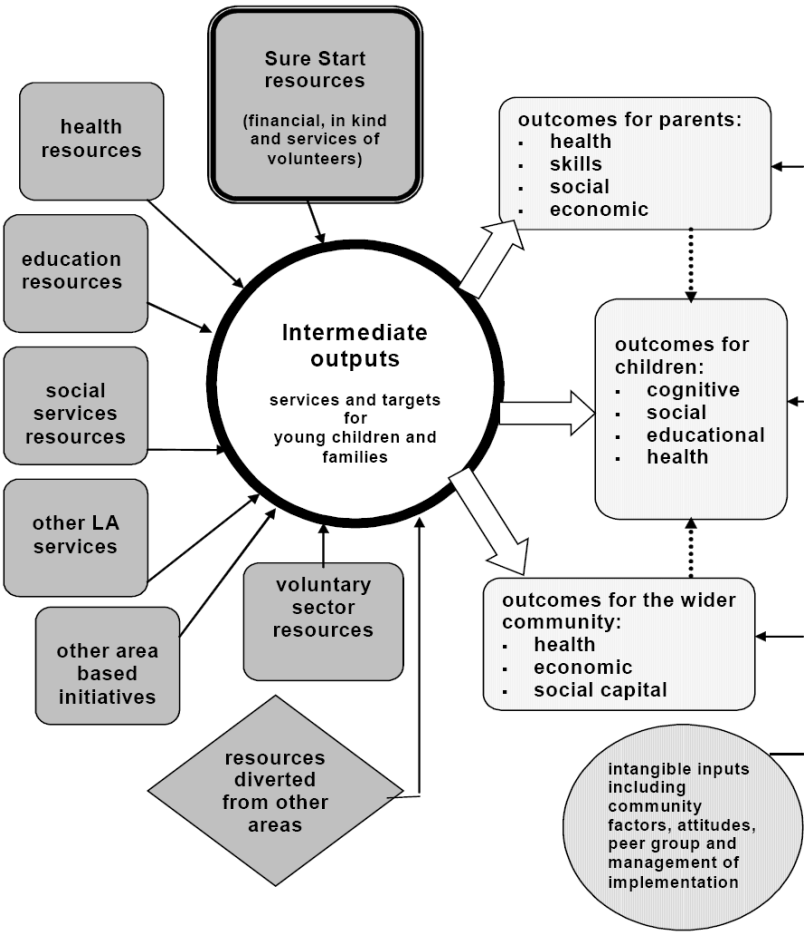
- Outreach and Home Visiting
- Support for Families and Parents
- Support for good-quality play, learning and childcare experiences for children
- Primary and community health care, including advice about family health and child development
- Support for children and parents with special needs

However, the precise activities and services provided by each SSLP was not defined centrally, but by context-specific parental demand for local services. As we will see, this heterogeneity has created numerous problems for evaluating the impact of Sure Start.

As Sure Start was a long-term investment in child health and in tackling social exclusion, the government recognised from the outset that its effectiveness would only be known in the medium- to long-term, and that evidence of 'what works' would, in time, feedback into the design and implementation of SSLPs (Eidenstadt 2002).

The conceptual framework in Figure 1 illustrates the intermediate outputs and the outcomes expected from Sure Start.

**Figure 1 – Conceptual Framework for Sure Start**




Source: Meadows et al 2006

### 2.1.3 Results attained

Sure Start has been evaluated by the National Evaluation of Sure Start (NESS). This is an independent consortium of academics and practitioners, led by Professor Melhuish at Birkbeck College. NESS published preliminary findings on the impact of Sure Start in September 2005.[1] This study compared a cross-section of nine- and thirty-six-month-old children from 16,500 families in 150 Sure Start areas, with 2,600 families in 50 control areas with similar levels of overall deprivation (see Glass, forthcoming). Importantly, the study never asked respondents if they had ever used Sure Start services.

The preliminary findings showed **no statistically significant difference** between key child development, behaviour and language indicators when comparing areas with Sure Start areas with non Sure Start areas (Melhuish et al, 2005). Certain positive differences were detected by the study (such as increased acceptance of a child's behaviour, and less negative parenting – for example, less slapping of infants). However, the study also found that three-year-olds in the types of households that Sure Start was designed to support (teenage mothers, lone parent families,

[1] http://www.ness.bbk.ac.uk/documents/activities/impact/1183.pdf

parents without work) had lower verbal abilities and social competencies, and greater behaviour problems, than similar three-year-olds in control areas.

Does this mean that the Sure Start approach failed? Has the innovative and novel perspective on integrating child service provision been a waste of money?

There are good reasons to suggest that this is not the case. The following four factors offer a good explanation of why these preliminary findings did not show evidence of impact:

- First, the study was conducted after many SSLPs had only been operating for around 18 months – far too early to discern any significant changes in child indicators.
- Second, and as stated above, the study did not sample families who attended and participated in Sure Start Local Programmes – instead it just compared families who lived in Sure Start areas with families who lived outside of Sure Start areas.
- Third, deprived areas frequently have a high turnover of households thus reducing the possible impact that Sure Start Local Programmes.
- Fourth, Sure Start Local Programmes varied so widely, it is hard to draw conclusions across the whole group.

However, these caveats were not noted in the media, who turned 'no evidence of impact' into 'evidence of no impact' and Sure Start was pitched into a crisis (Glass, forthcoming). Thankfully, recent evaluations have shown increasingly positive results from Sure Start. For example, Barnes et al (2007) have recently found that between 2000/1 and 2004/5 Sure Start areas showed significant improvements compared to other areas of England:

- Fewer children in Sure Start areas were living in workless households and households in receipt of Income Support;
- Reduced crime and disorder, especially burglary;
- Improvements in academic achievement for children aged 11 and upwards;
- Fewer incidents of under-three emergency hospitalisation due to ill-health.

Moreover, Anning et al (2007) in their study on variation within SSLPs have found that:

- Having more parent-focused services in Sure Start services was positively correlated with better parenting;
- Having improved child-focused services in Sure Start was related to higher maternal acceptance;
- Having a greater proportion of health-related in a Sure Start centre was also associated with higher maternal acceptance.

A much fuller picture of the impact of Sure Start will emerge from a panel study (i.e. following the same individuals through time) which is tracking 8,000 children involved with Sure Start from birth (due to the published in March 2008).[2]

Despite the lack of positive results from the national-level evaluation, many local-level evaluations have found that Sure Start brought numerous benefits. For example, based on research in a highly-deprived location close to Wigan (in the North-West of England) Prowse (2006) found that Sure Start led to the following outcomes for parents:

- Improved confidence and broader horizons
- Improved integration within communities and wider social networks
- Participation on numerous short-term training courses

[2] This evaluations can be accessed via http://www.ness.bbk.ac.uk/

- Increased work experience and employment
- Heightened self belief and elevated career aims

Many of the parents in this location suffered from a lack of confidence and low levels of self esteem - key blockages that Sure Start addressed. The quotes in Box 1 illustrate the experience of some parents involved in Sure Start.

**Box 1 – Parents' Perspective on Sure Start**

Mother: *"What's the difference? (Clears throat) Trying to put it into words…well, what would I be like if I hadn't met them [the workers at Sure Start]? You can't really tell. I think I would've been isolated. I would feel really isolated. 'Cause I think although it's…it's easier in a setting like this, like Sure Start to meet other women, because we're all looking for the same thing. We're all looking to meet people…"*

Mother: *"I think that Sure Start have built up a lot of trust with the young parents here … I think Sure Start have give - especially young mums - give them an insight that there's more out there. There are things to do. There is places to go. There is a better upbringing for your kids and here's how to put one foot first and to try and make things a bit better for yourself and your children. And here's probably why you've found the people that you've spoken to have been so enthusiastic about it. And probably why Sure Start have been so successful is the way that they've done it - and as a mother who has a baby, you come in then, and give people ideas and give them something - give them something to look forward to, even if it's just a little Time Out session and so on and so forth, and they're telling their friends about it, and the people with the older children are then coming in, because their friends said it was good and – because it's a hard place to get in there with, if you know what I mean. People can be very very negative. And it's hard to show that there is something different. So I think that's where they've done good."*

These quotes illustrate how Sure Start has helped parents overcame constraints such as nervousness, anxiety, low self esteem, lack of information, lack of support and assistance, and a lack of experience. Parental outcomes that will certainly be beneficial for their children in the long run.

### 2.1.4 Unexpected effects

Sure Start has certainly had its fair share of problems (Glass 2005). Arguably, there have been three main shortcomings.

First, whilst Sure Start focuses on the most deprived areas of the country, not all children living in poverty reside in these areas. What about children living in poverty in relatively affluent areas? The tight geographical targeting caused problems and conflicts within local authorities and between different stakeholders. Moreover, in some cases these conflicts were exacerbated by the high levels of parental participation and involvement in governance of centres, opportunities that were not available to parents in non Sure Start areas.

Second, that the multiple stakeholder approach to service provision was problematic at the national level, despite working well at the local level. The initial partnership between health and education ministries was abolished, and control switched to the Department for Education and Skills. This change reflected a shift in thinking from a resolutely child-centred perspective, to a approach which emphasises training, work and childcare – what Glass (2005) refers to as the 'employability agenda'.

Third, many Sure Start programmes have suffered from a lack of male staff in programmes, and staff from ethnic minorities (Meadows et al 2006). Overall, this was reflected by a lack of involvement of parents from black and minority ethnic groups in some Sure Start Local Porgrammes, and a lack of engagement by fathers (Lloyd et al, 2003).

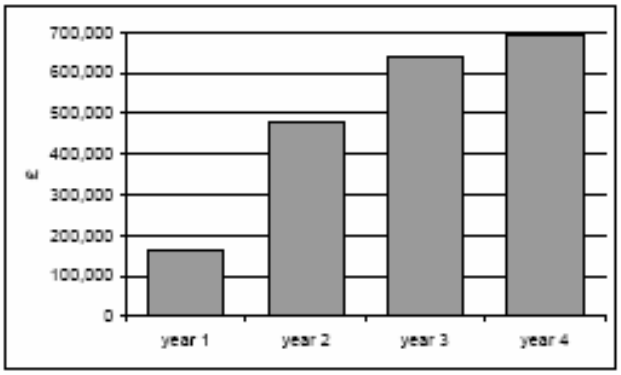
### 2.1.5 Resources invested and efficiency

Central funding for Sure Start exceeded £542 million to be spent over three years from 1998-99 to 2000-01. Of this £452 million was allocated for England (as the devolved regions of Wales, Scotland and Northern Ireland would generate their own expenditure patterns). In England over 250 programmes were operational by 2001-02, and these covered roughly 187,000 children (or 18% of all poor children under four). The ring-fenced funding per child was estimated at roughly £1,250 per annum per child in the third year of operation – the point at which funding peaked. Government funding would taper after six/seven years, and stop after ten. In the Spending Review of 2000, Sure Start was enlarged with a new target of 500 local programmes by 2005 (Eidenstadt 2000).

Whilst appearing a large investment by central government, the initial amount of half a billion pounds actually represents a very small contribution from the perspective of Treasury – only 0.05% of public expenditure (Melhuish and Hall, forthcoming; Glass, forthcoming).

On average, it took Sure Start Local Programmes a number of years to get going: they spent little in their first year, but increased expenditure in the second, third and fourth years of operation (see Figure 2).

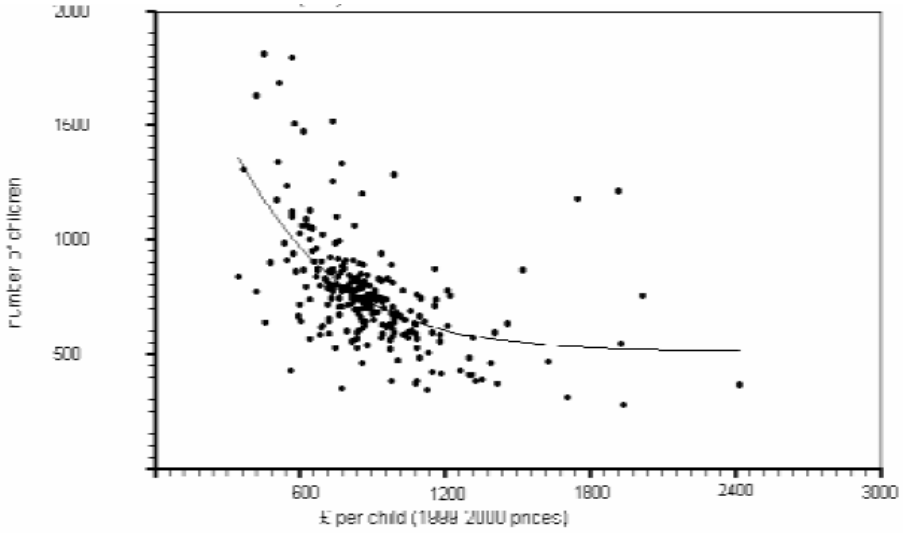
**Figure 2 – Sure Start Local Programme Expenditure by Operating Year**




Source: Meadows et al 2006

An evaluation of cost effectiveness has shown that the third year spend per child varied widely – from 350 pounds to 2,500 pounds, with the mean figure being around 900 pounds (Meadows et al, 2006). The high variation relates not to a low or high level of services, but to the particular types of services the SSLP chose to offer (based on parental demand). Unsurprisingly, SSLPs showed clear economies of scale, with smaller programmes spending more per head and *vice versa* (see Figure 3).

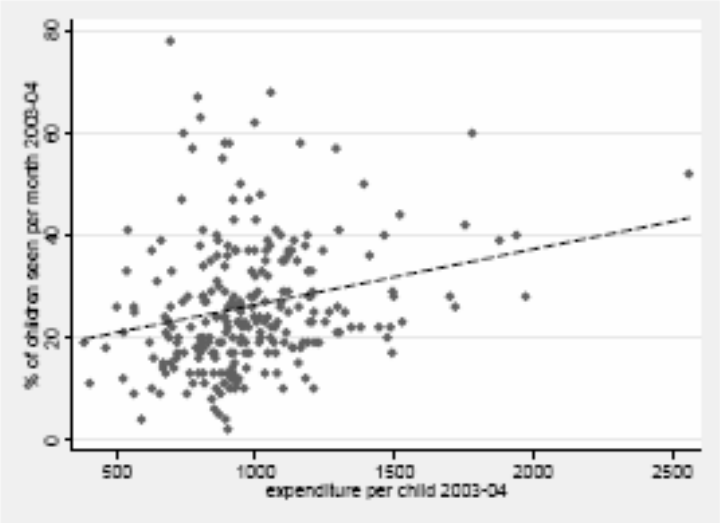
**Figure 3 – Programme Size and Expenditure per Child in Third Operational Year**




Source: Meadows et al 2006

Consistent with the findings on economies of scale, higher expenditure per child was only weakly associated with increased numbers of children using the services. For example, Meadows et al (2006) found that for each extra £100 expenditure per child, only 1 percent more children were seen per month (see Figure 4).

**Figure 4 – Proportion of Children Seen Each Month and Expenditure per Child, 2003-04**




Source: Meadows et al 2006

Importantly, though, expenditure was greatest in the areas that needed it most. Meadows et al (2006) find that SSLPs in the most deprived areas (i.e. those in the 5% most deprived) have spent more per child (averaging around £1000) than less deprived Sure Start areas (i.e. those that are in the 15-20% most deprived range).

Across all of the local programmes, the breakdown of costs by service shows that around 17% of expenditure was for play, learning and childcare, and 14% was for healthcare, outreach and home visiting (although it was hard for Meadows et al to categorise the wide array of activities offered).

In addition to recurrent direct central government funding, between 1998-99 and 2003-04 over sixty percent of SSLPs received additional financial resources. For example, funds were secured from partner organisation, European Union programmes, the National Lottery and charitable trusts. On average, these funds contributed around 6 percent of SSLP's third year expenditure (roughly £50,000). SSLPs also received financial support through the free use of premises and utilising partner organisation's resources. Each SSLP was also allocated £1million for capital expenditure (although many programmes have been slow to utilise all of these resources on capital projects).

The relatively generous funding of SSLPs undoubtedly led to under-use of some services, and the large gap between well-funded Sure Start areas, and a real lack of provision in adjacent non Sure Start areas, became a worry to local authorities (Meadows et al 2006).

### 2.1.6 Repercussions of the experience in terms of social cohesion

EUROsociAL defines social cohesion as a characteristic of democratic societies which contributes to the social fabric of communities. Following the framework outlined in 1.10 above, there are three elements to social cohesion: access to well-being; more efficient action by the state and public policies; and a more active and caring citizen body. These components are now discussed relying on the evidence presented in section 2.1.3 above.

*Access to well-being*

Sure Start has contributed to improving the well-being of populations in selected areas through **improving access to public services** (such as maternity services, health services, and 'signposting' training and employment opportunities), and **improving the quality of public services** in highly-deprived communities. However, Sure Start did not contribute to greater equality in access to public services, nor increased territorial solidarity in access to public services, as Sure Start was targeted tightly to specific geographical areas. Whilst this form of selection rebalanced pre-existing inequalities in public service provision to some extent, it also increased inequality between Sure Start areas and adjacent non Sure Start areas, leading to some tensions within local authorities.

*More efficient action by the state and public policies*

Sure Start has undoubtedly contributing **to better opportunities for excluded groups**. Through tackling isolation and a lack of trust in state-related institutions, Sure Start has **increased the confidence and belief of many parents**. Evidence from local evaluations of Sure Start suggest that the greater self belief of parents, and increasing their range of possible life choices, led to improved training and employment opportunities. These benefits are reflected in national-level evaluations: that within Sure Start areas there has been a reduction in children living in workless households. Moreover, these intermediate outcomes for parents have led to benefits for children (having parent- and child-focussed services improved parenting and increased maternal acceptance). In addition, the outcomes were also beneficial for the community as a whole (with Sure Start areas showing a reduction in crime and disorder). In this respect Sure Start has played a role in **improving human security conditions**.

*A more active and caring citizen body*

Sure Start has played an important role in increasing a sense of belonging and the **active participation of the citizenry**. Through the demand-led nature of SSLPs, parents' participation in the management of local programmes, and parents' position on the board, Sure Start has empowered parents in deprived communities to take much greater control of their lives and communities. As services for under-fours naturally pull in mothers, many of these parents have

been women. This bottom-up approach has increased communities sense of **trust and belief in state-related institutions**, and fostered feelings of **identity and belonging**.

## 2.2 Activities performed, processes and parties involved in the design, approval, and execution of the experience

### 2.2.1 Discussion, approval, and execution processes of the experience

The manifesto on which the Labour Party was voted to power in 1997 did not refer to Early Years service provision: at this time the health of infants was just taken as a given. As noted above, Sure Start was created in the Comprehensive Spending Review of 1997-1998, which was informed by conventional ministry-by-ministry reviews and a number of cross-cutting reviews. These were commissioned by the Treasury, and included the review of Early Years service provision highlighted earlier.

Interestingly, the ability of Treasury officials to work on the cross-cutting review stemmed from the decision of the Chancellor – Gordon Brown – to devolve monetary policy decision making to the Bank of England (through the creation of the Monetary Policy Committee). This created a surplus of well-trained economists. In addition to his economic credentials, Gordon Brown also held a strong belief in the ability of policy to tackle social exclusion and the inter-generational transmission of poverty (Melhuish and Hall, forthcoming).

The Early Years review involved both the Minister of Health and the Secretary of State for Education and Employment, thus demonstrating a collaborative cross-departmental endeavour. It also wanted to send a strong signal that Early Years provision mattered, and was informed by visits to projects offering Early Years services, such as Early Excellence Centres (Glass, forthcoming).

The management of Sure Start was initially conducted by the Sure Start Unit. Whilst this was housed in the Department for Education and Employment, it was managed by ministers from both health and education, and the Unit initially benefited from co-operation from the both departments (not least as Early Years services had been neglected for so long). Later, conflicts began to emerge. For example, the Ministry of Health placed little emphasis on preventative measures at the time, and there was some tension with this position and the proactive, preventative agenda of Sure Start.

Sure Start was targeted at areas that were the most 20% disadvantaged districts in England using the Index of Multiple Deprivation (IMD). Whilst fresh analysis was carried out in 1999 and 2000, the most recent data at this time was from 1992. Within each area selected to receive a Sure Start Local Programme, the partnership of agencies and organisations agreed upon specific boundaries, and Sure Start services were available only to families living within these geographical catchments. At this time, it was often the case that local councillors with the loudest voice would have a large say in the specific location for the centre (interview, Melhuish).

Partnerships were asked to submit funding proposals. The main statutory agencies needed to have a degree of ownership over the proposal, and it had to adhere to the ethos of Sure Start. The rollout of SSLPs occurred slowly at first. Only one quarter of the 60 ‘trailblazer’ partnerships invited to submit proposals were granted Sure Start status and received funds in 1999. The remaining three quarters had to wait until June 2000 for approval and funding (Glass, forthcoming).

Despite this slow start, and clearly without any rigorous evidence about the success or failure of Sure Start, it was announced in the 2000 Comprehensive Spending Review that the number of SSLPs would double - to over 500 by 2004 (Glass, forthcoming). At the time, some of those working for the Sure Start Unit argued against such rapid expansion. However, the Treasury had

a surplus of revenues, and therefore the following two rounds of expansion were doubled – from 60 local programmes to 120 in each round.

### 2.2.2 Technical activities and processes that give shape to the experience

Once a funding proposal was accepted by the Sure Start Unit, the ring-fenced funds (as outlined in 2.1.5) were made available to the partnership (including capital expenditure). As we have seen, the activities offered by Sure Start centres varied widely. However, the five core sets of services offered SSLP were as follows:

**Primary and community health care** – In partnership with health workers and NHS Primary Care Trusts, Sure Starts provided antenatal classes, breastfeeding groups, counselling to tackle post-natal depression, and good parenting classes. On a wider note, Sure Starts also provided information about the benefits of a balanced diet, and how to access specialist health services.

SSLP have undoubtedly improved access to maternity services through providing them in innovative and often non-health-related locations (see Kurthz et al, 2005). Maternity services have also enabled Sure Star staff to spend more time with parents with the greatest need, and has allowed health practitioners to build good relationships with some (but not all) hard-to-reach mothers. Sure Start's maternity services have improved the visibility of wider health services and co-ordination between different agencies. Volunteers and paraprofessionals have had an important role to play here, especially as a shortage of skilled professionals led to some conflicts between health service providers (ibid.).

**Outreach and Home Visiting –** Outreach included three main activities. First, communicating what was available to help parents (through the local press, leaflets, attending community events). Second, making services much easier to reach and use (locating the Sure Start centre within pram-pushing distance, and ensuring they were open and accessible). Third, providing a 'signposting' service that highlighted local training and employment opportunities. Home visits were a vital strategy to deliver key services and to foster trust (see Ball and Niven, 2006).

**Support for Families and Parents** – Sure Start centres act as an easily accessible one-stop-shop for information regarding health, education, training and employment. For example, community development workers at the centres are often confidential and non-judgemental, and understanding of clients' situations and needs.

**Support for good-quality play, learning and childcare experiences for children** – Sure Starts provide 'Mums and Tots' drop-in sessions, and nursery facilities for under-fours. Gender specific groups – such as Dads and Kids groups – were often included. Services also include language development sessions and work on physical and literacy development.

SSLPs have increased the amount and styles of play, learning and childcare opportunities for infants and younger children (see Anning et al 2005). One benefit of group-play activities has been that children and parents learn from each other. Childcare services give parents a break, sometimes enabling them to take part in a training course. On the downside, many SSLPs did not emphasise cognitive development to a sufficient extent (Annig et al 2005).

**Support for children and parents with special needs, including help getting access to specialised services** – Over five percent of under-fours attending Sure Start centres suffered from a disability or had special learning needs (for example, speech delay, behavioural problems, autism, deafness and blindness (see Pinney, 2007)). Due to the number and range of services offered by SSLPs, many children and parents with special needs and disabilities were able to participate. Whilst targeted services often engaged those with the greatest learning and medical needs (often providing much needed support and advice), those with less severe difficulties frequently attended 'mainstream' services. Home visits and flexible working patterns have been particularly beneficial to this group.

Overall, and due to a lack of confidence and lack of trust with state-associated institutions, parents were often hesitant or reticent about taking up SSLP services (Tunstill et al 2005). Programme staff frequently needed to be proactive and creative in their approach to overcoming apprehension and nervousness about Sure Start. In this respect, outreach work that fostered trust with parents, and the confidentiality and professionalism of staff, were particularly important for SSLPs (ibid.).

### 2.2.3 Activities for the evaluation of the experience

To date, much of the evaluation has focussed on the first 250 or so programmes started between 1999-2000 and 2002-03. NESS has five evaluation elements (see NESS, 2001):

1) **Impact on children, families and communities:** This examines "the effects of Sure Start on children, families, and communities and to identify the conditions under which Sure Start proves most effective in enhancing child, family, and community functioning." (NESS, p.6).
2) **Local context analysis:** Cross-sectional and longitudinal data on 250-plus SS communities and fifty control communities
3) **Implementation evaluation:** This provides data on policy, design and the expansion of Sure Start Local Programmes. It also offers qualitative data for the impact study and quantitative data for the cost effectiveness evaluation
4) **Cost effectiveness evaluation:** Cost of SSLPs, and their efficiency in achieving their objectives (see above 2.1.1)
5) **Sure Start Local Programme Evaluations:** Local, small-scale and in-depth evaluations of an individual SSLP or a cluster.

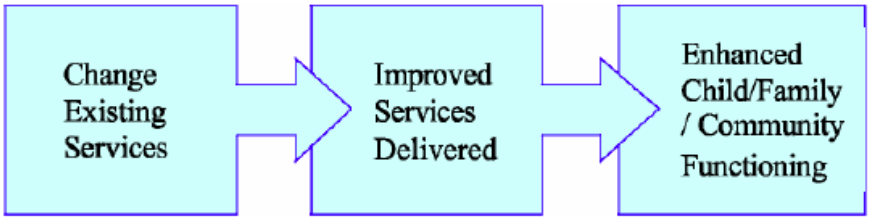
Three core questions guided these evaluation activities (illustrated in Figure 5): [3]

1. Do existing services change? (How and, if so, for which populations and under what conditions?)

2. Are delivered services improved? (How, and if so, for which populations and under what conditions?)

3. Do children, families and communities benefit? (How, and if so, for which populations and under what conditions?) (see NESS, 2001).

**Figure 5 – Core questions guiding NESS**




Source: NESS, 2001

[3] All of these evaluations can be accessed at http://www.ness.bbk.ac.uk/

As highlighted above, the NESS Impact Study reported preliminary findings that cast doubt about the impact of Sure Start. However, the publication of the preliminary findings at this early stage was because of the political pressure (interview, Melhuish; see also The Guardian, 2005).

One particular challenge to the multi-faceted evaluation was the great diversity of Sure Start programmes – in other words, the ethos of letting a thousand flowers bloom circumscribed the ability to conduct rigorous comparisons. Professor Melhuish acknowledges that an ideal comparison would have been a randomised control trial. However, the haphazard way in which Sure Start was rolled out meant that the methodology had to be flexible (interview, Melhuish). Professor Melhuish asserts that the NESS research team, guided by an excellent academic advisory group, has done the best possible job in the circumstances, and states the forthcoming research tracking a panel of children provide a much more positive evaluation of the efficacy of the scheme.

Moreover. recent research has found that the most positive outcomes from Sure Start were linked to the governance and management of the centres, in particular that:

- Effective governance and management/leadership (including involving a range of stakeholders and showing sensitivity to local communities);
- Ethos (an inclusive atmosphere, with approachable and sympathetic staff);
- Capacity to empower service users (see Anning et al, 2007).

The difficulties that NESS encountered in isolating the influence of one policy intervention from others is certainly not unique to Sure Start (see Tunstill et al, 2005). There are substantial methodological challenges to evaluating such large-scale interventions – and whilst randomised control trials may be of some assistance, they are not always appropriate or desirable (see Prowse, 2007).

The NESS evaluations have been supplemented by local evaluations of SSLPs. As Myers and Barnes (2005) indicate, the "evaluation of SSLP services really does not exist until the results have been disseminated in a number of ways" (p.3). Local evaluations have been able to feedback into programme design through the following dissemination strategy:

- Presentation of draft report to programme manager
- Presentation of full report to partnership board
- Full report sent to all board members
- Summary of report sent to all informants who participated in the research

### 2.2.4 Transfer of the experience

Sure Start was originally envisaged as a 10-year project. However, in recent years the Sure Start model has been transferred to a much larger number of Children's Centres (Glass 2005). Existing Sure Start centres have been transformed into new Children's Centres, and new Children's Centres are expanding at an eye-watering rate: 2,500 by 2008, and 3,500 by 2010 (with the aim of covering every area of England).

Glass (forthcoming) argues that this shift may not be positive and, in many ways, Sure Start has been a victim of its own success. Not only was the scheme expanded too early in his eyes (from around 260 local programmes to above 530 by 2004), but in 2004 the Government announced that Sure Start would be 'mainstreamed'. This was full year before the publication of even the preliminary findings from NESS (the reasons for which are discussed shortly).

So, as there was not much evidence on the impact of Sure Start, what other factors led to Government to expand it so rapidly?

The shift to Children's Centres can be traced back to three currents. First, the lack of co-ordination of services for infants and young children led to Margaret Hodge becoming the first

Minister for Children, Young People and Families within the Department for Education and Skills. Remember, the Sure Start Unit was transferred into this department, and Margaret Hodge thus took an executive role in leading Sure Start. Second, that the lack of immediate impact of SSLPs in the preliminary findings of NESS (which the government had been briefed about) led to concerns over the political sustainability of the existing Sure Start model. And third, an alternative policy intervention – the Effective Provision of Pre-School Education (EPPE) project – appeared to be particularly effective for promoting children's life skills and development (Turnstill et al 2005). EPPE centres provided a 'service domain' hub (Brown and Liddle 2005) which included broader provision for childcare and family support (not just for the under-fours) as well as typical Sure Start services. (Children's Centres were also informed by the experiences gained from Early Excellence Centres and Neighbourhood Nurseries.)

However, more important than all of the above were three political factors. First, as Sure Start was an extremely popular programme amongst voters, the forthcoming parliamentary elections in 2005 meant that the government had an important vote winner (Glass forthcoming). Second, that the Minister responsible for the decision – Margaret Hodge – wanted to ensure her own political legacy by expanding Sure Start. And third, and most importantly, embedding Children's Centres within local authorities' mandate has ensured that they are the most recent addition to the welfare state: only an Act of Parliament can remove them.

Children's Centres can be seen to be extending the scope and remit of Sure Start in that they are providing an integrated and holistic approach to child service provision. However, there are **significant changes from the original Sure Start model**.

**Reduced autonomy of the centres:** As local authorities are now responsible for CCs, there is a much greater control and regulation of services, and a lack of flexibility in responding to children's and parents' needs. Moreover, and reflecting the shift to Public Service Agreements in central government, Children's Centres are much more closely monitored through the achievement of targets.

**Funding not ring-fenced:** Direct access to 'ring-fenced' central government funds provided Sure Start Local Programmes with consistent and stable funding streams from which they could plan effectively. Children's Centres do not have this stability. Glass (forthcoming) argues that history shows that Early Years services are frequently at the bottom of the pecking order, and will not receive the required sustained funding from local authorities that is required.

**Reduced levels of funding per child:** It is estimated that funding per child in Children's Centres will only be 30% of the levels enjoyed by Sure Start. However, there will be a two-tier approach: Sure Start centres that are converting to Children's Centres, and the Children's Centres created in areas that are 20-30% most deprived, will receive funding at 50% of previous Sure Start levels. Overall, in 2006-07 £1.7 billion was transferred to local authorities for Children's Centres, and for 2007-08, £1.8 billion has been allocated.

**Withdrawal of mandatory parental participation in governance structures:** One of the major successes of Sure Start was the high levels of parental participation and empowerment. Glass (forthcoming) argues that reduced parental engagement on CC boards will reduce the popularity of the programme.

**Increased emphasis on childcare and employability:** In contrast to the original aims of Sure Start (improving health and child development) Children's Centres have a primary focus on childcare (see Meadows and Garber, 2005). As Glass (forthcoming) notes, childcare and child development are not the same thing. Childcare provision aims to facilitate parents entry into training and employment. Whilst this is an important goal in itself, there is a danger that the childcare agenda crowds-out attention to health and social development of under fours.

**Reduced emphasis on child health:** The shift of Ministerial responsibility for Sure Start to the Department for Education and Skills has been reflected in reduced attention being paid to child health in Children's Centres. It is hoped that Primary Care Trusts will provide finance and personnel to provide health services, but Glass (forthcoming) argues that this is highly unlikely to occur considering that PCTs have their own spending priorities, are frequently in deficit

themselves, and are often short-staffed (see Halliday and Asthana, 2007). Moreover, there may well be some conflicts and a lack of collaboration between PCTs and Children's Centres. For example, there is currently little indication that PCTs hand over information on births to Children's Centres.

However, the emergence of Children's Centres has also been seen in a much more positive light: that universal provision of childcare across the country indicates a **shift towards a Scandinavian model of childcare** (see The Guardian, 2006). The problem is that whilst Children's Centres are to be universal (increasing the number of SS centres by more than a factor of five), funding levels have only been increased twofold.

Some tentative insights from the shift from Sure Start to Children's Centres can be gleaned from my own research in the North-West of England. Interestingly, many of these concerns reflect the issues raised in the national-level discourse. Firstly, that attempts to reduce parental participation on the board met with stiff parental opposition. Second, that there was concern amongst parents and staff that health services will be cut as the local Primary Care Trust would not provide mid-wives for services provided in the Children's Centres. Third, that Children's Centres is much more about 'ticking boxes' than responding to the needs of children and parents. Fourth, that uncertainty about staffing levels is also of some concern – whilst it takes a long time to foster trust with hard-to-reach parents, it only takes a minute to destroy this trust. Fifth, that Children's Centres have a much greater emphasis on education instead of healthcare.

One further area of concern articulated by parents and staff is that **the use of Children's Centres by middle-class parents has displaced hard-to-reach parents**. Now that parents from any neighbourhood can use Children's Centres, mothers from extremely deprived areas (where the original Sure Start Local Programme was located) found it extremely difficult to attend groups filled with middle-class mothers who would arrive in 4x4 jeeps and discuss their next foreign holiday (see also The Times, 2006). In this respect, the decision to move from geographical targeting to universal provision may have decreased the attractiveness of Early Years services for the precise social group (the socially excluded) that Sure Start was originally aimed at. This has been reported, albeit anecdotally, in several areas of the country – London, Portsmouth and Wigan. However, if this displacement is widespread, it should only be a temporary phenomenon, for as Children's Centres are rolled-out across the country, middle-class parents will access Children's Centres closer to home and where their social networks are based.

### 2.2.5 Main actors and parties involved in the execution of the experience

When the Labour Government came to power in 1997, partnerships across health and social sectors were seen as a vital way of overcoming fragmentation and a lack of co-ordination (Brown and Liddle, 2005). Sure Start was very much an attempt at operationalising 'joined-up' government, assisted by the long-term funding stream.

Numerous actors were involved in the Sure Start Unit in central government.[3] However, joined-up government had a downside: despite initial success, departments soon reverted to form and inertia took hold (Glass, forthcoming).

Designing Sure Start involved institutions outside of central Government: experts from local government, the voluntary sector and the research community. An informal support group called the Friends of Sure Start was formed and was involved in policy debates. Further stakeholders attended regular workshops and conferences. And as we have seen, at the local level key stakeholders in SSLPs included statutory organisations (such as PCTs, and Job Centre Plus) and voluntary agencies.

### 2.2.6 Alliances established between the actors

Whilst the aim of 'joined-up' government is laudable, in practice such partnerships are often contested and subject to conflict (Bagley and Ackerley, 2006). One frequent trade-off is between meeting externally driven targets and ensuring sufficient trust and reciprocity within local communities (ibid.). A further source of tension can be between central government policy and local government implementation. Fortunately, the ring-fenced direct government funds, and high levels of parental participation, ensured that most SSLPs did not suffer from such problems, and key actors were able to co-operate effectively.

Of particular significance in making SS partnerships work were clearly-defined criteria explaining the relationship between the Sure Start Partnership, and the lead agency (which was accountable to the Sure Start Unit) (see Tunstill et al, 2005). A further element appears to be the articulation of a clear 'shared vision' by the lead agency (Smith and Bryan, 2005). Despite the mix of agencies and professions involved, in general Sure Start partnerships worked extremely well and in the best interests of their clients.

## 2.3 Context of application of the experience

### 2.3.1 Back-up policies

Sure Start has benefited from further area-based initiatives implemented by the Labour Government since 1997. For example, Education Action Zones, Health Action Zones and the New Deal for Communities operated in similar locations to Sure Start, and in many cases entered into partnerships with SSLPs. However, the crossover between these different Government initiatives has meant an inability to isolate the effects of one from another.

### 2.3.2 Institutional capacity

Of particular concern here is the role and capacity of the lead agency (who were accountable to the Sure Start Unit and responsible for the SSLP). Programmes led by a social service department, local authority department, or a voluntary/community organisation had higher expenditures per child (just under 1,000 pounds) compared to those programmes led by health trusts and other organisations (just over 800 pounds) (Meadows et al, 2006).

### 2.3.3 Technological aspects

An important technological aspect to Sure Start was geographical targeting using the 1992 Index of Multiple Deprivation. This index uses a wide number of indicators to provide a composite index.

**Figure 6 – Index of Multiple Deprivation 2004: Average Deprivation across Districts [4]**

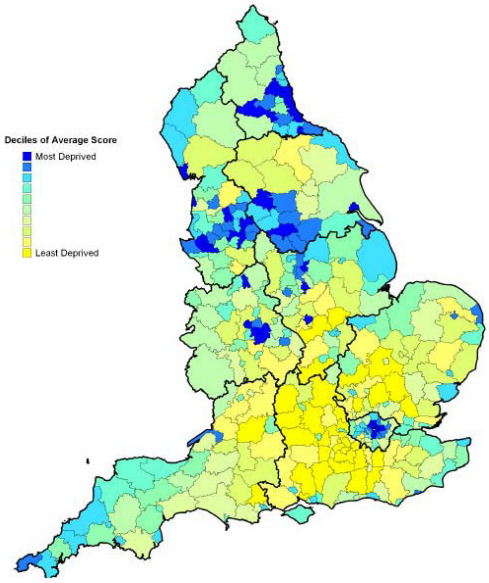



Figure 6 shows an example of the Index of Multiple Deprivation using 2000 figures. Such an index helped to create the two-tier Children's Centre model. It clearly shows the spatial distribution of the 30% most-deprived districts in the UK. As we've seen, the upside of using geographical targeting for Sure Start was this it avoided stigmatising households (although it does, to a certain extent, stigmatise a whole area). The major downside to this approach was that not all disadvantaged children live in these targeted areas, and that adjacent areas (which might not be much better off) had no Sure Start services at all.

Source: ODPM 2003

### 2.3.4 Economic-financial factors

See section 2.1.5 above.

### 2.3.5 Other contextual elements

The reconfiguration of the world economy, often termed 'globalisation', has changed the landscape of employment in the UK. In recent decades, manufacturing and industrial areas of the UK have seen the widespread closure of factories and plants due to the lower labour costs and lower labour standards of East Asia, Eastern Europe, India and China. There has been a shift in employment from manufacturing and processing towards service sector jobs. Figure 6 illustrates this well, for the most deprived areas in 2004 – for example, the North-West, Birmingham, West Yorkshire, the North-East – were key industrial and manufacturing areas. Such changes meant that communities whose culture was forged around industrial employment have been forced to adjust to the new employment landscape. In many industrial areas of the UK, traditional working class roles for men have disappeared and have been replaced by increasingly feminised service-orientated employment opportunities (for which older men often do not have the skills, experience or inclination to work in).

The shift in employment opportunities is a continual process. For example, Barnes et al (2005) found that the share of local employment in manufacturing in SSLP areas fell by two percent between 2000 and 2002, a higher rate than that of non-SSLP areas. Together with these changes in the supply of jobs, have been numerous measures to increase the flexibility of labour markets. Whilst employment used to mean a job for life, the increased flexibility of labour markets, and the reduced power of trade unions, means that job opportunities are often temporary and/or part-time, with fewer employment rights and less security and certainty.

## 2.4 For more information

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### 2.4.1 Documentary and bibliographical references

Anning,A., J.Stuart, M.Nicholls, J.Goldthorpe and A.Morley (2007) *'Understanding Variations in Effectiveness amongst Sure Start Local Programmes'* Research Report NESS/2007/FR/024, Her Majesty's Printer and Controller of HMSO 2007

Anning,A., E.Chesworth and L. Spurling (2005) '*The Quality of Early Learning, Play and Childcare Services in Sure Start Local Programmes*' Research Report NESS/2005/FR/009, Queen's Printer and Controller of HMSO 2005.

Bagley, C. and Ackerley, C.L. (2006) "I am much more than just a mum: Social capital, empowerment and Sure Start', *Journal of Education Policy*, 21:6, 717 - 734

Ball,M and Niven,L. (2006) *'Outreach and Home Visiting Services in Sure Start Local Programmes'* NESS/2005/FR/017, November 2006.

Barnes,J., H. Cheng , M. Frost, G. Harper, B. Howden, R. Lattin-Rawstrone, C. Sack (2007) 'Changes in the Characteristics of SSLP Areas between 2000/01 and 2004/05' Research Report NESS/2007/FR/021, Her Majesty's Printer and Controller of HMSO 2007

Barnes,J., Desousa1,C., Frost,M., Harper,H., Laban,D. and others (2005) "*Changes in the characteristics of Sure Start Local Programme areas - 2000/2001 to 2002/2003*" National Evaluation of Sure Start http://www.ness.bbk.ac.uk/

Brown and Liddle (2005) "Service Domains – The New Communities: A Case Study of Peterlee Sure Start, UK" *Local Government Studies*, Vol. 31, No. 4, 449 – 473, August 2005

Eisenstadt,N. (2000) "Sure Start: Research into Practice; Practice into Research" Public Money and Management, October-December 2000

Eidenstadt ,N. (2002) "Sure Start: key principles and ethos" *Child:Care, Health & Development,* 28,1,3–4

Glass,N. (2005) "Surely some mistake?: Norman Glass, a creator of the government's much vaunted early years childcare programme, on why successful, community-led Sure Start projects in deprived areas of Britain are now being dismantled in everything but name" *The Guardian* Society Section Jan 5, 2005 p.2

Glass,N. (1999) "Sure Start: The Development of an Early Intervention Programme for Young Children in the United Kingdom" *Children & Society*, Vol. 13 p. 257-264

Glass, N. (forthcoming) 'Sure Start: Where Did It Come From; Where is it Going?' in From Belsky, J, Barnes, J, & Melhuish E. (Eds.) (forthcoming) *'The National Evaluation of Sure Start: Does area-based early intervention work?'* Bristol: Policy Press.

*Guardian, The* (2005) "Leader - Welfare state: Shaky times for Sure Start." Sept 13, 2005 p30

*Guardian, The* (2006) 'Unsure future: New Labour's flagship initiative to help the most deprived families has been thrown into doubt by Tony Blair's lukewarm appraisal. But is the prime minister expecting too much too soon of Sure Start?' Guardian Society, May 24, p.3.

Halliday,J. and Asthana,S. (2007) 'From evidence to practice: addressing health inequalities through Sure Start' Evidence & Policy Vol. 3, No 1, p.31-45.

Kurthz,Z., J.McLeish, A.Arora and M.Ball (2005) 'Maternity Services in Sure Start Local Programmes' NESS/2005/SF/012, November 2005.

Lloyd,N., O'Brien,M., Lewis,C. (2004) "*Fathers in Sure Start Local Programmes*" National Evaluation of Sure Start http://www.ness.bbk.ac.uk/

Meadows,P. and Garbers,C. (2004) "*Sure Start Local Programmes And Improving The Employability Of Parents"* Report No. 6, National Evaluation of Sure Start, http://www.ness.bbk.ac.uk/

Meadows,P. (2006) 'Cost Effectiveness of Implementing SSLPs: An Interim Report' Research Report NESS/2006/FR/015, Queen's Printer and Controller of HMSO 2005.

Melhuish,E. et al (2005) "*Variation in Sure Start Local Programmes' Effectiveness: Early Preliminary Findings Report of the NESS Programme Variability Study"* Report No 14, National Evaluation of Sure Start http://www.ness.bbk.ac.uk/

Melhuish,E. and Hall,D. (forthcoming) 'The Policy Background to Sure Start' in Belsky, J, Barnes, J, & Melhuish E. (Eds.) (forthcoming) *'The National Evaluation of Sure Start: Does area-based early intervention work?'* Bristol: Policy Press.

Myers,P. and Barnes,J.(2005) *"Qualitative Research Methods in Sure Start Local Programme Evaluations: An Introduction"* March 2005, National Evaluation of Sure Start.

Office of the Deputy Prime Minister (2004) *'Indices of Deprivation 2004'* Report to the Office of the Deputy Prime Minister. London: Neighbourhood Renewal Unit, 2004.

Pinney,A. (2007) 'A Better Start: Children and Families with Special Needs and Disabilities in Sure Start Local Programmes' NESS/2006/SF/019.

Prowse,M. (2006) *'The Local Evaluation of Sure Start Tanhouse and Digmoor : Evaluation of Learning & Employment 'Signposting''* Pathways Consultancy, Manchester.

Prowse,M. (2007) *'Aid effectiveness: the role of qualitative research in impact evaluation'* Background Note, November 2007, Overseas Development Institute, London.

Smith,P. and Bryan,K. (2005) 'Participatory Evaluation: Navigating the Emotions of Partnerships' *Journal of Social Work Practice* Vol. 19, No. 2, July 2005, pp. 195–209.

Times, The (2006) 'Poor turned off Sure Start by middle-class mothers' Oct 6, 2006, p11.

Townsend,I. and Kennedy,S. (2004) *'Poverty: Measures and Targets'* House of Commons Library, Research Paper 04/23, 4th March 2004.

Turnstill,J., Allnock,D., Akhurst,S., and Garbers,C. (2005) "Sure Start Local Programmes: Implications of Case Study Data from the National Evaluation of Sure Start" *Children and Society* Vol. 19 p. 158–171

## 2.5 Institutional and personal references

Interviews: Norman Glass, Professor Melhuish, workers and parents at Sure Start Tanhouse and Digmoor, Skelmersdale, Lancashire.

Review: Jayne Osgood, Senior Research Fellow, Institute for Policy Studies in Education, London Metropolitan University

# 3 LESSONS LEARNED FROM THE EXPERIENCE

## 3.1 Essential successful factors of the experience (elements to be repeated)

Reviewing the Sure Start experience highlights a number of factors that have been successful:

- Origins in the Treasury (Ministry of Finance) with strong cross-departmental collaboration
- Founded on a rigorous international evidence base
- Key executive champions working at the highest level of government
- Ring-fenced central government funding gave security to stability to parents and staff
- Heterogeneity of local programmes through the participation and empowerment of parents (although this created problems for the evaluation)
- Creation of multi-agency local partnerships
- Designing Sure Start involved numerous actors in central government, and pulled-in numerous institutions outside of central Government (experts from local government, the voluntary sector and the research community)

## 3.2 Errors committed and unresolved difficulties (elements to be avoided)

Reviewing the Sure Start experience highlights several areas of difficulty:

- The expansion of Sure Start into Children's Centres was not based on sufficient evidence, but on political, personal and strategic motivations
- The haphazard way in which Sure Start was rolled out meant that the evaluation methodology had to be flexible, and it took a long time to generate findings. Because of this, 'no evidence of impact' was portrayed as 'evidence of no impact' by the media and Sure Start was pitched into a crisis.
- Whilst Sure Start focused on the most deprived areas of the country, not all children living in poverty resided in these areas. The tight geographical targeting caused problems and conflicts within local authorities and between different stakeholders.
- The multiple stakeholder approach to service provision was problematic at the national level
- Many Sure Start programmes have suffered from a lack of male staff in programmes, and staff from ethnic minorities

## 3.3 Main contextual elements necessary in order for the experience to be transferable

Sure Start has clearly benefited from the stable economic growth the Labour government has fostered whilst in office. Moreover, one could say that the set of factors that led to the creation of Sure Start – including a surplus of well-trained economists, and a national desire for change after eighteen years of Conservative rule – could be hard to come by in other contexts. However, Sure Start certainly holds a lesson about the role of elections in instituting policies the benefit social cohesion. Sure Start was created shortly after Labour swept into power in 1997, and was expanded (rather contentiously) prior to the 2005 national elections (due to concerns about its political sustainability). The heightened political climate around elections appear to be conducive to the creation and expansion of such vital policies.

## 3.4 Other general lessons

N/A

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[1] The exchange rates used in these calculations were at the mid-point of the period in question. For example, the exchange rate used for 1998/9 to 2000/01 was from the 4th October 2000 when £1 = €1.54. The exchange rate for 2006/07 was from the 4th October 2006 when £1 = €1.48, and the rate for 2007/08 was taken from the 4th October 2007 when £1 = €1.33.

[2] See Moore (1989). Absolute poverty lines are often created using a cost-of-basic-needs approach, similar to that used by Rowntree. Some include just the minimum goods required for subsistence, others include broader non-food items; and whilst some are adjusted by inflation, others are calculated annually. In arguing that poverty ceased to exist in the UK, Moore was referring to the lack of an ability to meet subsistence needs.

[3] Treasury; Education and Employment; Health; Social Security; Environment, Transport and the Regions; Culture, Media and Sport; Trade and Industry; Home Office; Lord Chancellor's Department.

[4] There are many ways to measure deprivation, and the map here shows average deprivation across the 354 districts in the UK. It is calculated by averaging the deprivation scores in each district after they have been population weighted. The larger the resultant district level score, the more deprived the district.