

Evaluation of the Austrian Early Childhood Intervention Programme

Key Findings of the following (evaluation) reports:

 Stoppacher, Peter; Edler, Marina (2017): "Dran bleiben und sich immer wieder in Erinnerung bringen" – Netzwerke für eine erfolgreiche Zielgruppenarbeit. Endbericht der Begleiteva-luation "Frühe Hilfen". IFA Steiermark – Institut für Arbeitsmarktbetreuung und -Forschung, Graz.

("Keep going and don't stop reminding them of yourself" – Networks for successful outreach-work. Final report of "Frühe Hilfen" formative evaluation)

2) Schachner, Anna; Hesse, Nina; Rappauer, Anita; Stadler-Vida, Michael (2017): Umsetzung von regionalen Frühe-Hilfen-Netzwerken in Österreich. Endbericht der summativen Evaluation. Berichtszeitraum: November 2015 bis März 2017. queraum. kultur- und sozialforschung, Wien.

(Implementation of regional Early Childhood Intervention Networks in Austria. Final report of outcome evaluation)

3) Schachner, Anna; Hesse, Nina; Rappauer, Anita (2021): Evaluation 2018 bis 2021 der Umsetzung von Frühen Hilfen in Österreich. queraum. kultur- und sozialforschung, Wien.

(Evaluation 2018 to 2021 of the Implementation of *Frühe Hilfen* in Austria. Final report of evaluation)

4) Juraszovich, Brigitte (2017). Zur Wirkung und Wirksamkeit von Frühen Hilfen – Darstellung von Kosten und Nutzen anhand exemplarischer Fallvignetten. Gesundheit Österreich GmbH / Geschäftsbereich ÖBIG. Im Auftrag der Bundesgesundheitsagentur, Wien

(On the impact and effectiveness of early childhood interventions – a cost-benefit analysis based on representative snapshot case studies. Report on impact and cost effectiveness)

1) "Keep going and don't stop reminding them of yourself" – Networks for successful outreach-work

Final report of "Frühe Hilfen" formative evaluation

Summary

The objective of the formative evaluation was to identify learnings for the adaptation of existing and establishment of future early childhood interventions networks. The main question was, if and through which processes, *Frühe Hilfen* succeeds to effectively establish early childhood intervention networks and make a contribution to health equity. The evaluation process included interviews and focus group discussion with involved stakeholders as well as a comprehensive online survey with various groups of network partners. The chosen methods served to assess the functionality and effectiveness of the regional early childhood interventions networks.

Catchment Area

23 regional early childhood intervention networks cover a total of 53 from 118 political districts in Austria and are spread across all Austrian districts. Satisfaction with the status quo of network establishment is generally high. A majority of respondents said that networks were functioning well and that they were bit by bit being expanded and consolidated.

Network Management

Each regional network has got a "network management" resp. network manager/s. This was considered to be positive by a majority. The network managers were appraised to be doing a (very) good job, esp. in terms of communication and information.

Family Support

Relationship building and the family supporters' navigator function were seen to be equally important, since a trustful relationship needs to be established before it is possible to adequately refer families to other support offers.

Benefit

90% answered that awareness-raising in relevant institutions that work with the concerning target groups had been successful. A majority of respondents is convinced that cooperation within the networks promotes and facilitates effective support delivery and that the offered support services meet the needs of clients.

Target group outreach

80% of respondents said that target group outreach was successful. Until the end of 2016 1,360 families were referred to early childhood intervention networks, often by facilities of the health care system. In 930 cases family support was taken up. In a majority of supported families it was possible to identify hidden capabilities and resources which could be activated to strengthen self-efficacy. This was mainly owed to relationship building between support workers and families.

Health equity

Current experience shows that disadvantaged target groups could be reached. Economic security was a common issue. FRÜDOK documentation reveals that the financial situation was a burden in 45% of cases and housing circumstances were so in 24%. In 31% of cases there is a lack of social support.

Support by NZFH.at

Stakeholders on all different levels showed high satisfaction with the work of the Austrian National Centre for Early Childhood Interventions (NZFH.at). It was perceived as highly professional, committed and service-oriented contact point that provides assistance in dealing with many problems. It was highlighted that the centre was always quick to react and that staff went directly to the regions when necessary, which was supportive in negotiations and partnership building. The offered materials, networking activities, training courses and the FRÜDOK documentation system were perceived to be very helpful.

Strengths of the Austrian model of regional early childhood intervention networks

The needs based scope of action, the outreach support with its focus on relationship building, the preventive approach with special attention to the strengthening of family resources and the integration of family support into a network of different services were seen as major strengths of the model and perceived to be unique in the Austrian context.

2) Implementation of regional Early Childhood Intervention Networks in Austria

Final report of outcome evaluation

Summary

Between November 2015 and March 2017 a summative resp. outcome evaluation was carried out by 'queraum. kultur- und sozialforschung'. The main objective was to find out, to what extent *Frühe Hilfen* is successful in creating better circumstances for the upbringing of (disadvantaged) children and making a contribution to social and health equity. A further aim of the evaluation was to establish whether families in need are being reached as well as the characteristics, problems, motivation and expectations of the families supported by *Frühe Hilfen*. The central research approach was to analyse the significance and the benefit of the programme from the view point of beneficiaries, family support workers and network managers. It was examined, to which degree the programme is improving the material and social environment of the supported families, as well as their capabilities and personal skills.

Design and Methods

Qualitative face—to—face interviews were carried out with 69 family supporters (= home visitors), network managers and other staff members of all 23 regional early childhood intervention networks. Intermediate evaluation results were discussed in two focus group discussions with 27 participants from regional networks. Furthermore 21 in–depth–interviews were carried out with beneficiaries. Further methods employed included the construction of egocentric social network maps, photo interviews, development of 8 representative snapshot case studies and analysis of existing documents (results from FRÜHDOK documentation, family feedback and the formative evaluation).

Target group outreach and health equity

Successful outreach to target groups provides a crucial prerequisite for the improvement of health equity. FRÜDOK documentation has shown that that take-up is excellent (see FRÜDOK annual report 2016). It is characteristic that many beneficiaries struggle with multiple burdens. At the beginning of the support process, families often reported that the psychosocial health state of primary carers and the financial household situation constitute challenges. Many respondents stated that the offering has had a positive effect on their material and social life circumstances as well as personal resources.

Impact on health determinants (material, social and societal environment) by increase in personal/available resources as well as reduction of strains/burdens:









- + parenting skills, parent-child-bonding
- + child development
- + familiar relations/atmosphere
- + social net
- + perspectives for parents life/future



strains/burdens

- anxiety and exhaustion
- financial burden/distress



Success factors

Concerning the fostering of parent-child bonding and parenting skills as well as the betterment of family climate, several respondents answered that the reduction of burdens and stressors was beneficial. It was also shown that home visits are an important success factor. They make it possible to supervise families in their known surroundings and perceive their habitual behavior patterns and resources. The attention given to the families' social networks has proven to have an impact. Families' informal support systems have improved. Beneficiaries reported having made new friendships or reactivated existing contacts. Some families also learned to better manage burdensome relationships or to put an end to them when necessary. With regard mental health, the offering helped to reduce fears and feelings of overstraining concerning child care and daily life management.

It was also reported that beneficiaries could develop new or reanimate existing perspectives for the future. The family supporters were perceived to be helpful and competent by families throughout the sample. This is highlighted by the fact that family supporters were positioned as an important element in all social network maps created by families. From the viewpoint of family supporters a gradual approach in relationship building, intensive efforts in establishing a trustful relationship, empowerment of families and a focus on the mobilization of strengths and resources were important success factors.

Recommendations

Since the evaluation results show high satisfaction of beneficiaries, the evaluation team recommends strengthening the success factors which are already in place. *Frühe Hilfen* should keep its focus on empowerment, cooperation in multidisciplinary teams (incl. the dual control principle) and its approach of low threshold access and needs based outreach—work. In terms of model improvement, the evaluation advises to strengthen efforts to foster a common understanding of *Frühe Hilfen* among the regional intervention networks.

3) Evaluation 2018 to 2021 of the Implementation of *Frühe Hilfen* in Austria

Final report of evaluation

Executive Summary

Aims and questions of the evaluation

The accompanying evaluation of the quality standard of Early Childhood Intervention in Austria was conducted from March 2018 to March 2021. The primary objective of the evaluation was to evaluate the process of defining and agreeing on the quality standard as well as the implementation of the quality standard in the regional networks. The evaluation focused on the following overarching questions:

- o Does the quality standard contribute to a successful regional implementation of Frühe Hilfen?
- What factors support the implementation of the quality standard at regional level? What are the obstacles and barriers to the regional establishment of the quality standard?
- Which quality criteria and implementation strategies have proven successful? In which areas is there still a need for further development/improvement?
- o Can the Austrian National Centre for Early Childhood Interventions (NZFH.at) support the regional level satisfactorily/sufficiently in the current implementation phase?

Methodology

A mixed methods approach was used to evaluate the first draft of the quality standard: Early Childhood Intervention coordinators had their say in qualitative telephone interviews and two focus groups to reflect on the process of defining the standard, to describe the benefits of the standard from their perspective and to obtain direct feedback on the formulated structural quality in the quality standard. All regional networks quantifiably assessed the degree of implementation, challenge and relevance at two points in time and their experiences with the quality standard as well as feedback on its contents were discussed in workshops. In addition, the coordinators and the networks were asked for feedback on their satisfaction and requests for improvement regarding the cooperation with the NZFH.at. The families' perspective on quality in the process of family support was also obtained by means of seven qualitative interviews and supplemented by the analysis of 22 interviews with families from the outcome evaluation 2015–2017.

Results

All respondents from the regional networks and the early childhood intervention coordinators were very positive about the cooperation with National Centre for Early Childhood Interventions (NZFH.at). It works in a very participatory way and is perceived as supportive. According to the interviewees, *Frühe Hilfen* is also characterised by the fact that there is a central office with a view to the whole country. Research, uniform documentation throughout Austria and a common quality standard are considered useful.

The early childhood intervention coordinators and the interviewees from the teams of the regional networks agreed that a common quality standard is an important basis for the further development of early childhood interventions in Austria and enables a necessary differentiation from similar services.

All respondents found the procedure for setting the standard to be successful and would also like to see such a procedure for the further revision on the basis of the evaluation. The early childhood intervention coordinators are in favour of involving all stakeholders from the beginning to the

definition. They do not see development and implementation as a top-down directive, but as a participatory process, which in their view has been successful so far. In order for implementation to continue to be successful, it is important that all people in the teams of the early childhood intervention networks can identify with the standard so that they can also support it. The majority of the early childhood intervention coordinators interviewed already use the quality standard as an orientation framework or as a guideline and requirement for the work with and in the regional networks.

Almost all respondents pointed out the problem that not all criteria can be implemented in every federal state due to regional circumstances, different settings and financial possibilities. For this reason, it is important that alternatives to the requirements remain formulated in the quality standard. The NZFH.at could support the implementation in the provinces by ensuring clarity and bindingness and by providing information on an ongoing basis.

The feedback on the individual requirements for the respective criteria in the quality standard is comprehensive and partly makes divergent perspectives of the networks clear. Overall, it became apparent that the structural quality criteria are considered sensible and comprehensible. Thus, in no network and federal state was the wish for a change or deletion of the criteria mentioned. It was also shown that the networks generally attribute high relevance to the structural quality criteria.

Based on the findings of the evaluation, the criteria for process quality also include all important aspects and, from the evaluation's point of view, can remain in place, although some suggestions for additions to certain requirements could be worked out from the data. Overall, however, it was clear that there was much more agreement in the networks on process quality than on structural quality and that the formulated quality requirements are already being implemented for the most part.

Based on the results, it can be concluded that the first draft of the quality standard is a very good document, which is evaluated very positively by all persons involved. From the evaluation's point of view, there is only a need for adaptation and supplementation of individual requirements. In the view of the interviewees, the structure is successful and the 17 criteria named include the most important areas and fields of action for quality work of the networks.

4) On the impact and effectiveness of early childhood interventions – a cost-benefit analysis based on representative snapshot case studies

Report on impact and cost effectiveness

Abstract

Since the start of 2015 regional early childhood intervention networks, based on a uniform underlying model, have been rolled out across all the Austrian provinces. They provide needs based support for families in stressful situations during the early childhood phase (pregnancy and the first years of a child's life). These efforts centre on regional networks that act as multidisciplinary support systems, providing well co-ordinated, varied service offerings for parents and children. Network managements see to the establishment and ongoing maintenance of the inter-agency coordination concerned. Family supporters provide continuous and comprehensive support (mostly as home visits) over an extended period, which lays the foundations for relationships and trust, and arranges the delivery of needs based services by the network.

The preventive nature of these services and the very early start of the intervention permits the **timely recognition and reduction of burdens and stresses**. Due to the proactive and tailor-made support offered, families' **resources can be pinpointed and mobilised**, and **parent-child bonding** strengthened. Proactive and systematic efforts to reach disadvantaged families promote **equity of health and social opportunities**. Intensive networking contributes to the **efficiency of the deployment** of the support services required.

Early childhood intervention has the following objectives, among others:

- Promotion of strong parent-child bonding, and strengthening of parent-child interaction, resilience and development of protective factors;
- Improvements in parenting skills;
- Strengthening of family relationships and social networks;
- o Greater health literacy.

International evidence demonstrates that early childhood intervention in the form of early-life health promotion and prevention is particularly efficient and has a positive long-term effect on children's development, their health, and equal health and social opportunities for them.

In particular, studies attest to the following positive impacts:

- o Improved prospects for both children and parents;
- Reduced behavioural problems;
- Better physical and mental health, especially with regard to obesity, cardiovascular disease, depression, alcohol abuse, drug abuse and addiction;
- o Improved educational attainment, and resultant better qualifications and higher labour force participation;
- o Improved quality of life.

An analysis based on four summarised case studies was carried out to illustrate the **above effects and their potential financial impact on Austria**. The snapshot case studies were designed to show the benefits of early childhood intervention and early initiation of support services (e.g. those provided by a multidisciplinary network) in terms of the avoided cost of typical subsequent support services.

Each case study compares the new programme with an alternative scenario without early childhood intervention, and assumes that the initiation of some kind of support is called on at a later juncture.

The cases were discussed with experts to ensure that the **scenarios were as realistic as possible**. A conservative approach was taken to the assumptions, and extreme consequences such as imprisonment or disablement due to violence were excluded, so the actual benefits could be still greater.

Table: Summary of the results of the snapshot case studies

Case study	Cost-benefit ratio up to school leaving age (18-20 years)	Life-long cost-benefit ratio (up to the age of 65)	Life-long cost-benefit ratio (up to the age of 65) excluding benefits from higher productivity
Family F	1:1.5	1:16	1:7
Family H	1:1.7	1:23	1:8
Family S	1:10.6	1:25	1:13
Family Y	1:5	1:19	1:4

Source: GÖG - Austrian Public Health Institute

In these case studies, the medium-term **cost-benefit ratio** (up to school leaving age) of early childhood intervention ranges from 1:1.5 to 1:10.6.

The long-term cost-benefit ratio taking account of the benefits yielded by higher productivity is between 1:16 and 1:25 due to both longer/greater labour force participation and improved vocational skills.

Excluding the indirect benefits of higher productivity, the long-term cost-benefit ratio still ranges from 1:4 to 1:13.

All the case studies show that the **overall benefits of early childhood intervention and support services provided by a multidisciplinary network exceed the related costs**. At the same time it is apparent that the benefits exceed the costs incurred in every single area (health, social welfare, education, etc.).

A truly representative picture of the benefits cannot be given because of inadequate data and the impossibility of long-term observation due to the short lifetime of the regional networks.