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Improving children's life chances

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Child Poverty Outcomes Framework NI

September 2013

Office of the First Minister and Deputy First Minister

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Contents

Acknowledgements

The National Children's Bureau would like to acknowledge the contribution of all of the members of the Child Poverty Advisory Group comprising representatives from across the statutory, community and voluntary sectors and both universities. A full list of those who participated in the Advisory Group can be found in Appendix G. In addition, we would also like to thank those who attended and participated in the numerous 'turning-the-curve' workshops that NCB hosted since late 2012 – these were well attended by representatives from across Government departments and other statutory organisations; community and voluntary sector organisations, and; universities.

Executive summary

Introduction and purpose of this report

In February 2012, the National Children's Bureau (NCB NI) and the Centre for Excellence and Outcomes (C4EO) were commissioned by the Office of the First Minister and deputy First Minister (OFMdFM) to assist it in establishing an approach for bringing together Government departments so that each department has an opportunity to understand its role in terms of reducing child poverty. A key aim of this commissioned work is, therefore, to define a Child Poverty Outcomes Framework (hereafter referred to as the 'Outcomes Framework'). Underpinning the programme of activities is a commitment to the key principles of Outcomes Based Approach[1] (OBA) which has a track record of delivering improvements in outcomes internationally. The deliverables of this project include:

- *A mapping report* which examines in detail how the corporate and/or business plans of each government Department map to building blocks of the Northern Ireland Child Poverty Strategy. The child poverty building blocks were adapted from the Department for Work and Pensions (DWP) and included in the Child Poverty Act 2010 which was endorsed by public consultation. The child poverty building blocks are essentially the overarching issues that need to be tackled in order to reduce child poverty and/or minimise its impact. They fall into four domains including: education and life chances; housing communities; employment and adult skills, and; financial support.

- *A Child Poverty Outcomes Framework* to support implementation of the Strategy;

- *A capacity building training programme and materials* informed by OBA to be rolled out across Government departments and wider stakeholder groups (e.g. Community and Voluntary sector), and;

- *A Social Impact Tool* that would be used by Government departments to help understand the potential monetary costs and benefits of implementing new policies/programmes aimed at reducing the incidence or impact of child poverty.

The purpose of this report is to propose an Outcomes Framework that has been developed to support a cross-governmental approach in which every department understands its role and makes an effective contribution to reducing child poverty.

This project is set against a background of unprecedented reforms of the welfare system centred on the introduction of universal credit. Excluding transitional protection, and assuming that welfare reform is undertaken on the basis of parity with England, it is estimated that a small, but significant, minority of families (c.9%) will gain under the proposed changes and a similar proportion will lose[2]. This project is, therefore, very timely in the sense that it focuses attention on the importance of improving outcomes for children and young people against the relative uncertainty around the eventual impacts of welfare reform.

Leaving aside the welfare reforms, there is already a strong case for taking action given the large proportion of young people currently living in poverty. The most recent estimates suggest that 22% of children in Northern Ireland live in poverty according to DSD statistics. Other research, undertaken by the Child Poverty Action

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[1] Outcomes Based Approach is based on the Outcomes Based Accountability model developed by Mark Friedman (Friedman, 2005)

[2] Institute for Fiscal Studies (2013) Universal Credit in Northern Ireland: What will the impacts be, and what are the challenges. London: Institute for Fiscal Studies. Study Commissioned by OFMDFM.

Group, suggests that there are areas with significantly higher levels of child poverty, for example they claim that almost one-half (46%) of children in West Belfast live in poverty[3].

Activity undertaken to inform development of the Outcomes Framework

A significant amount of work has been undertaken to date to inform the development of an Outcomes Framework for Northern Ireland, including the mapping report mentioned above. In addition, the following activities have helped to inform the development of the suggested Outcomes Framework:

- *Thematic workshops:* A number of workshops were held to provide stakeholders (from across the statutory, and community and voluntary sectors) with an opportunity (a) to comment on/make suggested changes to proposed outcomes and indicators and (b) to participate in turning-the-curve exercises which enabled them to explore trends in a number of indicators and propose potential strategies/ actions for improving the direction of travel of these indicators. This helped to inform the Outcomes Framework for Northern Ireland by establishing broad agreement on the outcomes and indicators that would be included within the framework. It also helped to establish a consensus that partnership working is the most effective way to secure improvements in outcomes.

- *International literature review:* An international literature review was undertaken to understand the variety of approaches taken to address child poverty in particular case study countries/regions. The case studies included a mix of countries/regions with varying rates of child poverty and a variety of approaches to addressing issues related to child poverty. This helped to inform the Outcomes Framework for Northern Ireland by helping to understand the key policies/initiatives that help to make a difference to child poverty rates. It also shed light on the various approaches to measuring and monitoring child poverty that have proven to be effective elsewhere.[4]

Outcomes Based Approach as a tool

The proposed Outcomes Framework for Northern Ireland draws heavily on the principles underpinning OBA. OBA[5] is a tool that has been demonstrated to work elsewhere as it helps to do three key things:

- **It creates a common language:** it helps stakeholders to agree on a common language and does so by clearly defining core concepts such as 'outcome', 'indicator', and 'performance measure';

- **It helps to bring together stakeholders for a common purpose:** OBA as a tool can help to bring together key stakeholders and provides them with a structured approach to help improve outcomes; and

- **It provides a framework for managing performance:** OBA provides a framework enabling discussions to take place about how to continually measure and improve outcomes.

This report discusses OBA including definitions and concepts such as: outcomes, indicators, performance measures, baselines and 'turning-the-curve'. It also distinguishes between two different types of accountability – population accountability which refers to whole populations of a country or region and performance accountability which refers to the accountability that a programme manager has for particular groups of people participating in a programme or service. These definitions and concepts are important as they help to define critical components of the suggested Outcomes Framework for Northern Ireland.

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[3] Child Poverty Action Group (2012) *Child poverty map of the UK.* London: Child Poverty Action Group.

[4] This is available at: http://www.ncb.org.uk/media/892283/child_poverty_outcomes_models_international_review.pdf. Readers might also be interested in a related document, which is available at: http://www.ncb.org.uk/media/892335/tackling_child_poverty_1302013_final.pdf

[5] The term Outcomes Based Approach is also known as Outcomes Based Accountability (Friedman, 2005), Results Based Accountability (RBA), Results and Performance Accountability and Results Accountability.

A Child Poverty Outcomes Framework for Northern Ireland

It became increasingly clear from much of the work that had gone into informing the Outcomes Framework for Northern Ireland, particularly the thematic workshops, that outcomes for children and young people living in poverty are poorer than for those young people living in less socially deprived areas and for Northern Ireland as a whole. The data collated in this report (see below) also supports this view.

The aims of the proposed Outcomes Framework, therefore, are to:

- Strengthen alignment between the aims of the child poverty strategy with action taken across and beyond government;

- Provide a framework around which to coordinate the work of different departments, agencies and key stakeholders in relation to child poverty;

- Help focus resources on activity that has been shown to have a positive impact on reducing child poverty and/or its effects;

- Enable agencies to monitor progress and strengthen transparency and accountability; and

- Inform action taken to secure further improvement.

The proposed Outcomes Framework has the following components:

- **A set of clearly defined outcomes[6]:** The starting point for creating an Outcomes Framework for Northern Ireland is to establish clear outcomes for children and young people towards which Government departments and other stakeholders can direct their efforts. A total of four high level outcomes have been agreed including:

  — Children in poverty achieve good educational outcomes;

  — Families have adequate income and work that pays;

  — Children and families thrive and have a healthy future; and

  — Children and families live in a safe and secure environment.

- **A set of primary and secondary indicators for each outcome:** For each outcome, a set of 2-3 primary and a number of secondary indicators have been established[7]. The purpose of defining a set of relevant indicators is to understand whether policies/programmes being delivered on the ground are having a positive impact in terms of improving outcomes. The approach adopted by the project team was to start from the principle that (a) the final list of indicators needs to be focused and manageable and include indicators which most closely relate/align to the outcome and (b) that the indicators measure what is important and not just what is easily measurable. The full set of primary and secondary indicators selected for each of the outcomes can be found in Section 3. In addition to the primary and secondary indicators, a data development agenda has also been identified – these are broad areas for which satisfactory indicators could not be sourced at this point in time. As discussed below, it is important that this agenda is managed by an appropriate lead organisation and is adequately funded and resourced.

- **Balanced scorecards:** In addition to detailing the range of outcomes and indicators, this report contains a number of exemplar balanced scorecards, which help to structure conversations around how to 'turn-the-curve' and improve outcomes.

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[6] An overarching outcome and set of indicators has been suggested – these relate to absolute and relative income indicators.
[7] We have also put forward two overarching indicators relating to income deprivation – both the relative and absolute measures. These are in addition to the primary and secondary indicators.

- **A set of suggestions to help stakeholders implement the action plan in relation to:**
  — Raising capacity of key stakeholders;

  — Establishing robust accountability structures;

  — Establishing effective data management processes;

  — Using OBA to continually review and improve outcomes; and

  — Aligning programmes/initiatives to outcomes.

It is important to note that the implementation of the Outcomes Framework like all of the preparatory work that has gone into it, is a process that involves substantial investment in gaining the buy-in of stakeholders. This Outcomes Framework is not a 'quick-fix' solution to improving one or more of the outcomes, however the principles underpinning it (drawing as they do on OBA) have been shown to be effective elsewhere when combined with the commitment and hard work of relevant stakeholders. Similarly, the Outcomes Framework, as has been alluded to above is, focuses on a small but manageable number of outcomes and associated indicators – this means that it will not cover each and every aspect of poverty (including its associated impacts). These indicators are open to further refinement when further analysis is conducted in the 'turning-the-curve' exercises (see below).

Next steps

The next steps will involve developing/delivering further elements of the Outcomes Framework, namely:

- **Capacity building training sessions:** The purpose of these training sessions will be to introduce stakeholders to the key concepts of OBA, share with them the key components of the Child Poverty Outcomes Framework, and involve them in a series of turning-the-curve exercises. The ultimate aim of these training sessions is to equip trainees with the knowledge, skills and enthusiasm to incorporate OBA and the Outcomes Framework into their day-to-day practice. In the first instance, these sessions should be targeted at senior civil servants (Grade 5 or above) from across Government departments and should include those with responsibility in the areas of policy, economics and/or statistics.

- **Specifying governance arrangements:** In terms of governance of the Outcomes Framework, it has yet to be decided where precisely this will be held. However, we are aware that governance arrangements will be agreed by the Delivering Social Change (DSC) Programme Board.

1. Introduction

Background

The NI Child Poverty Strategy *Improving Children's Life Chances* was published in March 2011. The strategy set out the actions proposed by the Northern Ireland (NI) Executive to address the issue of child poverty. It was laid before the Assembly in fulfilment of its obligations under the Child Poverty Act (2010). The Act provides a statutory basis for joined up action to reduce poverty amongst children and by 2020 eradicate it. *Improving Children's Life Chances* identifies two key strands of work relevant to the causes and consequences of child poverty:

- Reducing poorly paid work and unemployment among adults with children; and

- Improving longer term prospects through child-based interventions designed to tackle the cyclical nature of child poverty.

Subsequent to this, and in March 2012, the First Minister and deputy First Minister published the Programme for Government (PfG) 2011-2015 which affirmed that the focus over the next four years is to grow the economy whilst at the same time tackling social and economic disadvantage. The latter of these will be progressed through the delivery 'of a range of measures... through the DSC delivery framework.'[8]

DSC is intended to provide the context for coordinated action across government and other stakeholder communities and is focused on two key outcomes that are closely associated with the Child Poverty strategy:

- A sustained reduction in poverty and related issues across all ages; and

- An improvement in children's health, well-being and life opportunities, thereby breaking the long-term cycle of multi-generational problems.

The long-term objective of DSC is to create a solid foundation for continued social improvement for children and young people along with a reduction in poverty across all age groups. In doing so, it will take account of other key Government policies (e.g. the *Ten Year Strategy for Children and Young People* and *Lifetime Opportunities*, the Executive's anti-poverty and social inclusion strategy) whilst also seeking to fulfil its international commitments, e.g. in terms of the United Nations Convention on the Rights of the Child (UNCRC) and United Nations Convention on the Rights of Persons with Disabilities (UNCRDP).

This project is set against a background of unprecedented reforms of the welfare system centred around the introduction of universal credit. Excluding transitional protection and assuming that the reforms are implemented in the same way as in England, it is estimated that a small, but significant, minority of families (c.9%) will gain under the proposed changes and a similar proportion will lose[9]. This project is therefore very timely in the sense that it focuses attention on the importance of improving outcomes for children and young people and is set against the relative uncertainty around the eventual impacts welfare reform, which could see a relatively large number of families financially impacted by the reforms.

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[8] OFMDFM (2012) *Delivering Social Change: Children and Young Persons Early Action Document.* Belfast: OFMDFM.
[9] Institute for Fiscal Studies (2013) *Universal Credit in Northern Ireland: What will the impacts be, and what are the challenges?* London: Institute for Fiscal Studies. Study Commissioned by OFMDFM.

Leaving aside the welfare reforms, there is already a strong case for taking action given the large proportion of young people currently living in poverty. The most recent estimates suggest that 22% of children in Northern Ireland live in poverty according to DSD statistics[10]. Other research undertaken by the Child Poverty Action Group suggests that there are areas with significantly higher levels of child poverty, for example they claim that almost one-half (46%) of children live in poverty in West Belfast[11].

Therefore, it is all the more important that the focus is on improving outcomes and the proposed Outcomes Framework contained in this report provides a very useful starting point in that journey.

Purpose of this report

In February 2012, NCB NI alongside C4EO were commissioned by OFMdFM to assist it in establishing an approach for bringing together Government departments so that each department has an opportunity to understand its role is in terms of reducing child poverty. At the same time, the approach will also help Government Departments to understand the additional actions they could take towards reducing the prevalence of child poverty alongside those they are already delivering.

The purpose of this report is to propose a Child Poverty Outcomes Framework that has been designed to:

- Strengthen alignment between the aims of the child poverty strategy with action taken across and beyond government;

- Provide a framework around which to coordinate the work of different departments, agencies and key stakeholders in relation to child poverty;

- Help focus resources on activity that has been shown to have a positive impact on reducing child poverty and/or its effects;

- Enable agencies to monitor progress and strengthen transparency and accountability; and

- Inform action taken to secure further improvement.

A significant amount of work has been undertaken to date to inform the development of an Outcomes Framework for Northern Ireland such as:

- *Thematic workshops:* A number of workshops were held to provide stakeholders (from across the statutory and community and voluntary sectors) with an opportunity (a) to comment on/make suggested changes to proposed outcomes and indicators and (b) to participate in turning-the-curve exercises which enabled them to explore trends in a number of indicators and propose potential strategies/ actions for improving the direction of travel of these indicators. This helped to inform the Outcomes Framework for Northern Ireland by establishing agreement on the outcomes and indicators that would be included within the framework. It also helped to establish a consensus that partnership working is the most effective way in which improvements in these outcomes should be addressed.

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[10] These figures are for 2011/12 and relate to relative low-income or relative income poverty which is defined as the proportion of the population group living in a household whose income is less than 60% of the UK median household income. More information can be sourced at: http://www.dsdni.gov.uk/index/stats_and_research/stats-publications/stats-family-resource/households/poverty_bulletin.ht
[11] Child Poverty Action Group (2012) *Child poverty map of the UK.* London: Child Poverty Action Group.

- *International literature review:* An international literature review was undertaken to understand the variety of approaches taken to address child poverty in particular case study countries/regions. The case studies included a mix of countries/regions with varying rates of child poverty and varying approaches to addressing issues related to child poverty. This contributed to the development of the Outcomes Framework for Northern Ireland by helping to understand the key policies/initiatives that have been shown to make a difference to child poverty rates. It also shed light on the various approaches to measuring and monitoring child poverty that have shown to be effective elsewhere[12].

It is important to note that the implementation of the Outcomes Framework like all of the preparatory work that has gone into it, is a process that involves substantial investment in gaining the buy-in of stakeholders. This Outcomes Framework is not a 'quick-fix' solution to improving one or more of the outcomes, however the principles underpinning it (drawing as they do on OBA) have been shown to be effective elsewhere when combined with the commitment and hard work of relevant stakeholders. In addition, and by its very nature, the proposed Outcomes Framework also acknowledges that poverty is not simply about income (as important as this is) but is about the multitude of issues that impact on children living in poverty. It is, therefore, as much about the causes of poverty as it is about reducing the impact of poverty on the quality of children and young people's lives.

The remainder of this report is structured under the following headings:

- The key features of Outcomes Based Approach;

- A suggested Outcomes Framework for Northern Ireland; and

- Next steps.

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[12] A full copy of the literature is available online at:
http://www.ncb.org.uk/media/892283/child_poverty_outcomes_models_international_review.pdf

2. The key features of Outcomes Based Approach

Introduction

Against a backdrop of economic contraction and increasing pressure on Government budgets, the choices facing policymakers in terms of what programmes/ initiatives to fund become more challenging. On the one hand, Government can seek to cut costs by reducing some of the functions it might have previously carried out and on the other hand, can undertake existing functions more efficiently. However, governments are increasingly asking more critical questions such as "are we funding the right things?" and "are we getting results from our spending?" Both of these questions can be answered through the application of OBA.

This section of the report discusses the OBA tool and its key components and also introduces the Child Poverty building blocks which have also informed the thinking behind the proposed Outcomes Framework for Northern Ireland. The remainder of this section is structured under the following headings:

- What is Outcomes Based Approach?

- What are the advantages of an Outcomes Based Approach?

- The Child Poverty building blocks and factors associated with child poverty; and

- Conclusion.

What is Outcomes Based Approach?

OBA is a useful lens through which to begin discussions about improving outcomes. It begins with 'ends', i.e. the outcomes which stakeholders would like to achieve for children, young people and their communities. In addition, it helps to make a clear distinction between two levels of accountability – population accountability and performance accountability – as illustrated below:

- **Population accountability:** At a regional/national level, these are the outcomes or the conditions of well-being that we want for our children, families and communities, such as a safe neighbourhood or a clean environment[13]. These outcomes are population outcomes as they refer to whole populations of a city, region or country.

- **Performance accountability:** This relates to how well particular services or programmes perform. Each programme would typically have a set of performance measures which would relate to whether programme participants are any better off as a result of participating in the programme, e.g. how many programme participants on a job skills programme are in a job after 3 months, 6 months etc.

It is the first of these outcome types that the suggested Outcomes Framework (described in the next section) focuses on. By their very nature, these outcomes will be quite broad and multi-faceted in nature, and cannot be achieved by a single organisation working in isolation. Rather, it takes sustained and concerted action from many agencies/organisations and key stakeholders that can only be delivered through effective partnership working.

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[13] For an extensive discussion on Outcomes Based Approach, see Friedman, M. (2005) *Trying hard is not good enough.* Marston Gate: Amazon (referred to as Outcomes Based Accountability).

In addition to understanding the importance of population accountability (and population outcomes) and performance accountability, there are a number of other important concepts that need to be understood to enable OBA to be used as an effective tool, including:

- *Indicators:* These are the measures that are used to help quantify the achievement of a population outcome and provide an insight into how well we are doing. So, for example, if the outcome is a safe community to live in, a potential indicator could be 'recorded number of criminal offences per 10,000 population.'

- *Performance measures:* These are used to evaluate how well a project, programme or service is performing. This can be represented in a simple diagram as set out in Figure 2.1 below. Measures for *How much did we do?* could include the number of young people participating in a particular programme or number of sessions delivered. Measures for *how well did we do it?* could include the percent of staff who received training to deliver sessions or young people ratings of the extent to which the training has changed their attitudes towards alcohol, tobacco or drugs. The last part of the jigsaw is compiling measures for *is anyone better off?* This could include measures like number of young people with reduced alcohol, tobacco or drug consumption and/or percentage of young people with reduced alcohol, drug or tobacco consumption.

Figure 2.1: Performance measurement categories

	Quantity	*Quality*
Effort	How much did we do?	How well did we do it?
Effect	**Is anyone better off?** Number who are better off	% who are better off

- *Baselines:* This is a multi-year display with two parts – an historical part which shows what has happened in the past and a forecast part that shows the future likely direction if things stay as they are. Baselines enable us to define success as doing better than the baseline or 'turning-the-curve'.

- *Turning-the-curve:* This is suggested as an effective way to turn talk into action. It starts with baseline measurement information and invites stakeholders to explore the story behind the baseline; the partners needed going forward, and; the knowledge of what works to do better that in turn can inform action.

## What are the advantages of an Outcomes Based Approach?

The proposed Outcomes Framework for Northern Ireland draws heavily on the principles underpinning OBA. OBA[14] is a tool that has been demonstrated to work elsewhere as it helps to do three key things:

- **Create a common language:** it helps stakeholders to agree on a common language and does so by clearly defining core concepts such as *'outcome' which are the conditions of well-being that stakeholders want for children, families and their communities*;

- **Brings together stakeholders for a common purpose:** OBA as a tool can help to bring together key stakeholders from across a variety of different contexts and it provides a structured approach to engage them in discussions and actions about how to define and continually improve outcomes;

- **Provides a framework for managing performance:** OBA provides a framework for measuring the impact of particular interventions/initiatives on outcomes and to enable discussions to take place about how to continually improve those outcomes.

The Child Poverty Building Blocks and factors associated with child poverty

Before moving on to present a proposed Outcomes Framework for Northern Ireland, it is important to have a clear understanding of the building blocks of Child Poverty, which are essentially the overarching issues that need to be tackled in order to reduce child poverty and/or minimise its impact. In developing its strategy, the Northern Ireland Executive has agreed a framework that aims to eradicate child poverty by 2020. Its stated priorities follow the 'building blocks' recommended by the Department of Work and Pensions (DWP), included in the Child Poverty Act 2010 and endorsed by public consultation. Addressing the issues within these building blocks is crucial to tackling child poverty and mitigating its impacts and can only be achieved through concerted and collaborative action across government.

Figure 2.2: Child poverty building blocks

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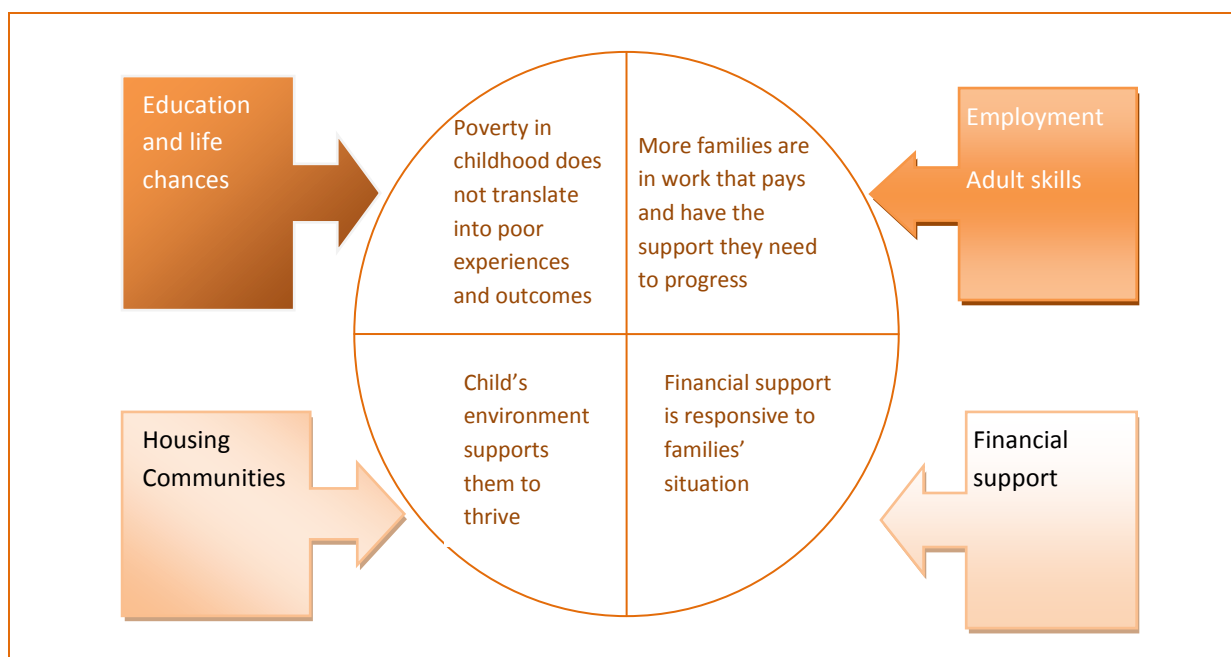
[14] The term Outcomes Based Approach is also known as Outcomes Based Accountability (Friedman, 2005), Results Based Accountability (RBA), Results and Performance Accountability and Results Accountability.

In addition to having a clear understanding of the building blocks of child poverty, it is also important to fully understand the factors that underlie child poverty. Although there are country and regional differences, there is a core set of factors that underlie child poverty in developed countries (Hoelscher, 2004; Horgan & Monteith, 2009; McLaughlin & Monteith, 2006; OECD, 2012; Social Protection Committee, 2012; TARKI, 2010). These are the various circumstances and stressors experienced by children or their family members that tend to co-occur with or exacerbate existing child poverty and contribute either positively or negatively to the building blocks above. The core set of factors is detailed in Table 2.1 below.

Table 2.1: Factors underlying child poverty

Factors	
• Unemployment or economic inactivity	• Lack of qualifications among young people
• In-work poverty	• Poor health
• Lone parenthood	• Problem behaviour
• Low parental education attainment	• Abuse and neglect
• Teenage parenthood	• Residence in deprived neighbourhoods or in substandard housing
• Lack of affordable and accessible childcare	

In addition to the factors listed above, analyses of factors specific to NI include (Horgan & Monteith, 2009; McLaughlin & Monteith, 2006):

• disincentives in the benefits system to part-time work for mothers;

• high prices for food, fuel and travel given benefit and tax credit income levels;

• limited public transport system hampering access to employment; and

• high rates of disability and limiting long-term illness.

When thinking about these factors, it is important to note that they may be *causes* (i.e. the factors come before poverty), *correlates* (i.e. the factors co-occur with poverty) or *effects* (i.e. the factors come after poverty). It is generally not helpful only to frame these factors as 'causes' of poverty, insinuating that by reducing, say, lone parenthood, child poverty rates would subsequently reduce. While lone parenthood may make individuals particularly vulnerable to poverty (i.e. due to high unemployment and low educational attainment), it also could be that poverty undermines people's marriage prospects. Further, the strong link between poverty and family structure may be due to an outside factor that drives both likelihood of marrying and the likelihood being in poverty, such as poor health.

It seems more helpful to think about these factors in so far as they help to frame the policy responses to reducing child poverty. An effective child poverty strategy (and by extension Outcomes Framework) needs to demonstrate an understanding of the various economic, social and demographic factors related to child poverty and what policies and programmes can influence these factors[15].

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[15] For a more detailed discussion of this and other aspects of child poverty and potential policy responses, see: National Children's Bureau (2012) *Child poverty outcomes models: An international review.* London: NCB. Available online at: http://www.ncb.org.uk/media/892283/child_poverty_outcomes_models_international_review.pdf

Conclusion

In conclusion, it is important to note that OBA is a tool and not a model. It seeks to establish specific outcomes ('ends') towards which action can be directed. Outcomes are the conditions of well-being that we want for our children, families and communities (e.g. a safe environment for children). In addition, it also advocates the use of agreed concepts such as indicators, performance measures, and baselines. Once an agreed set of concepts are in place stakeholders from across and beyond Government, can begin to work collectively to achieve specific outcomes.

The Child Poverty building blocks have been identified above. These are the various factors and issues which have an impact on child poverty and the areas that need to be tackled in order to reduce poverty and/or minimise its impact. In addition, the core factors widely acknowledged to have an impact on child poverty in developed countries have also been identified. These factors may illustrate causes, correlates or effects. It is generally not helpful only to frame these factors only as 'causes' of poverty, insinuating that by reducing their incidence (e.g. of lone parents) that child poverty rates would subsequently reduce. It seems more helpful to think about these factors in so far as they help to frame the policy responses to reducing child poverty.

An effective child poverty strategy (and by extension Outcomes Framework) needs to demonstrate an understanding of the various economic, social and demographic factors related to child poverty and what policies and programmes can influence these factors .

The outcomes and indicators described in Section 3 of this report have been closely aligned to these building blocks.

3. A suggested Outcomes Framework for Northern Ireland

Introduction

The DSC initiative is a new approach that aims to reduce poverty (including child poverty). DSC will do this by taking forward a number of specific projects and initiatives. Indeed, it has already started to rollout a number of signature projects[16] in broad areas such as education, health and social care e.g. DHSSPS will take forward the establishment of ten Family Support Hubs over the next two years.

There may be additional initiatives commissioned under DSC in the future and the development of this suggested Outcomes Framework provides an opportunity to help understand what areas additional investment should be targeted on. It also provides a framework for examining whether these new/additional projects or initiatives demonstrate an impact on improving the lives of children and young people.

This section discusses the key components of an Outcomes Framework for Northern Ireland. The remainder of this section of the report is structured under the following headings:

— Key components of the Outcomes Framework; and

— Conclusion.

Key components of the Outcomes Framework

The proposed Outcomes Framework has the following components:

• A set of clearly defined **outcomes and indicators**;

• **Exemplar balanced scorecards**; and

• Advice/guidance on using the **Outcomes Framework**.

Each of these components of the Outcomes Framework is discussed in turn below.

Outcomes and indicators

The starting point for creating an Outcomes Framework for Northern Ireland is to establish clear outcomes for children and young people towards which Government departments and other stakeholders can direct their efforts. A total of four high level outcomes have been agreed through extensive consultation with stakeholders and through drawing on the findings a review of existing literature in this area. These outcomes are:

— Children in poverty achieve good educational outcomes;

— Families have adequate income and work that pays;

— Children and families thrive and have a healthy future; and

— Children and families live in a safe and secure environment.

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[16] A full list of the six signature projects is contained in Appendix F.

For each outcome, a set of 2-3 primary and a number of secondary indicators have been identified both through a review of the relevant literature and through input from a wide range of stakeholders from across Government departments and other statutory agencies/bodies, universities and the community and voluntary sectors[17]. One purpose of defining a set of relevant indicators is to understand whether services/programmes being delivered on the ground might be having a positive impact in terms of improving outcomes. For each outcome, primary indicators were developed that:

— Are recognised as important by a broad and diverse audience of interested partners;

— Act as a good proxy for a range of other indicators – for example those that underperform at GCSE or indeed earlier in their school career tend also to be those with poor levels of school attendance; and

— Can be supported by good quality and timely data – stakeholders' preference has been to select indicators for which administrative data can be obtained as this relates to an entire population of interest, however a number of indicators rely on survey data where administrative data is not available.

In addition to the primary indicators, each outcome has attached to it a set of secondary indicators that also help to illustrate and reinforce what the primary indicators are saying.

The full set of primary and secondary indicators selected for each of the outcomes is illustrated in Table 3.1 below. In addition to the four outcomes and associated indicators, two overarching child poverty indicators have been put forward, namely absolute low income and relative low income. These two indicators are used by Government as the official measurements of child poverty.

Table 3.1: Outcomes and indicators for the Outcomes Framework

Indicator type	Indicator
Overarching child poverty indicators	
Overarching indicators	• Absolute low income - before housing costs: Proportion of children living in households where income is less than 60% inflation adjusted median UK household income in 2010/11.
	• Relative low income - before housing costs: Proportion of children living in a household whose income is less than 60% of the UK median household income.
Outcome 1. Families have adequate income and work that pays	
Primary indicators	• Proportion of children living in workless households.
	• Combined low-income and material deprivation - before housing costs: Proportion of children living in families that has a final material deprivation score of 25 or more and an equivalised household income below 70 per cent of contemporary median income.
Secondary indicators	• Proportion of children living in families where at least one adult is in work (but not all) and where income is less than 60% of median income before housing costs.
	• Persistent benefit recipients: Number of claimants in receipt of Income Support for more than 5 years and who have children
	• Housing benefit cases: Number of housing benefit cases with children (per 10,000 of the population).

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[17] For a full list of these stakeholders who attended the most recent workshop in February 2013 where these indicators were discussed and where additional suggestions put forward, please refer to Appendix D.

Indicator type	Indicator
Outcome 2. Children in poverty achieve good educational outcomes	
Primary indicators	• Proportion of school leavers achieving 5A*-C GCSE (including English and Maths).
	• Proportion of 16-24 year olds Not in Education, Employment or Training.
Secondary indicators	• Proportion of pupils achieving Level 4+ in English at Key Stage 2.
	• Proportion of pupils achieving Level 4+ in Maths at Key Stage 2.
	• Proportion of pupil enrolments in primary schools with less than 85% attendance.
	• Proportion of pupil enrolments in post-primary schools with less than 85% attendance.
Outcome 3. Children and families thrive and have a healthy future	
Primary indicators	• No. of patients under 18 who had a treatment for dental cavities per 1,000 registered patients.
	• Low Birth Weight (% of singleton births where birth weight was lower than 2500g).
	• Births to mothers aged 13-19 (Rate per 1,000).
Secondary indicators	• Crude suicide rate (deaths per 100,000 of the population).
	• Proportion of mums smoking during pregnancy.
	• Number of 0-17 year olds admitted to hospital with self-harm diagnoses (rate per 100,000).
	• Number of 0-17 year olds admitted to hospital with alcohol related diagnoses (rate per 100,000).
	• Proportion of mums who are breastfeeding on discharge from hospital.
	• Proportion of Primary One Pupils who are obese.
Outcome 4. Children and families live in a safe and secure environment	
Primary indicators	• Number of families presenting to NIHE as homeless.
	• Recorded number of criminal offences per 10,000 population.
	• Proportion of children (under the age of 18) attending hospital due to an accident in the home or on the road (rate per 100,000).
Secondary indicators	• Number of children aged 0-17 on the Child Protection Register (rate per 10,000).
	• Number of anti-social behaviour incidents recorded by the police (rate per 10,000 population).

More detailed information on the indicators can be found in the following appendices:

• Appendix A illustrates the full set of graphs for each of the indicators;

• Appendix C provides further details on each of these indicators;

• Appendix D provides some additional notes on the development of indicators and, in particular, illustrates the rationale for not taking forward some of the suggested indicators put forward by stakeholders. It also illustrates areas where stakeholders would have liked to have identified indicators but where robust indicators could not currently be sourced.

Exemplar balanced scorecards

The creation of balanced scorecards for each of the selected indicators is critical to enable stakeholders to move from talk to action within a relatively short space of time. The key benefits of a scorecard approach are that it:

- Facilitates transparency and cooperation;

- Drives decision-making with data;

- Accelerates getting from talk to action; and
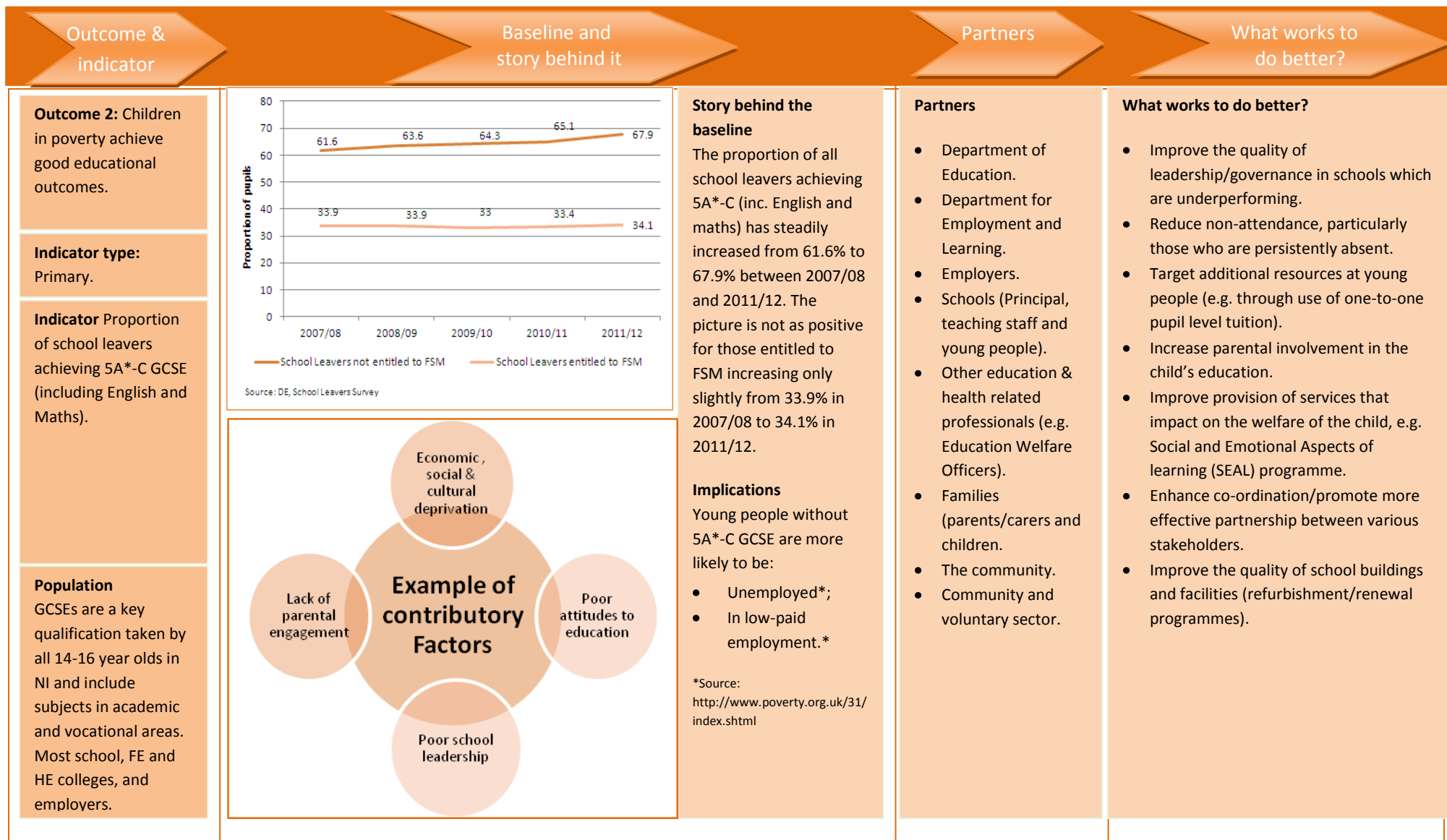
- Promotes accountability.

Figure 3.1 below provides an example of a balanced scorecard as it relates to one of the primary indicators, namely the proportion of school leavers achieving 5A*-C GCSE (including English and Maths). An exemplar balanced scorecard has been produced for each of the other three outcomes and these can be found in Appendix B. The balanced scorecard has the following components:

- *The outcome and indicator type/description:* The particular outcome to which the indicator is related and the type of indicator (whether primary or secondary);

- *Population:* These are the details of the group to which a particular outcome and indicator refer to;

- *The baseline data:* The data for a particular period of time that show the direction in which the indicator is going (whether positive or negative);

- *The story behind the baseline and implications:* The factors that contribute to or exacerbate the direction of travel of a particular indicator and the implications of not achieving a particular indicator;

- *Partners:* The individuals or organisations who have a stake in terms of contributing to actions to improve particular indicators;

- *What works to do better:* The activities or programmes that have been shown (whether in Northern Ireland, other parts of the UK or internationally) to have a positive impact in terms of 'turning-the-curve' and improving the direction of travel of the particular indicator. For example, it is suggested that improving the quality of school buildings can contribute to improvements in young people's GCSE attainment and research shows that there are particular benefits to improving school buildings that are in a bad state of repair to a decent standard[18]. In addition, international evidence has shown that one-to-one pupil level tuition can also work to improve the educational attainment of those who struggle most at school. For example, research by the Institute of Education[19] (IOE, 2010) in England has shown that one-to-one pupil level tuition can help pupils who have fallen behind others in their class make similar levels of progress to pupils who received no tuition. A number of reasons were given in relation to how one-to-one tuition helped pupils improve their attainment levels including, such as positive pupil/tutor relationship. The list of potential initiatives/actions is illustrative in Figure 3.1 and is not intended to be an exhaustive list.

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[18] Department for Children, Schools and Families (2007) *Evaluation of Building Schools for the Future.* London: DCSF.
[19] Institute of Education (2010) One-to-One Tuition Pilot Course Evaluation Final Report. London: IOE.

Figure 3.1: An example of a balanced scorecard

Outcome & indicator	Baseline and story behind it	Partners	What works to do better?

Outcome 2: Children in poverty achieve good educational outcomes.

Indicator type: Primary.

Indicator Proportion of school leavers achieving 5A*-C GCSE (including English and Maths).

Population GCSEs are a key qualification taken by all 14-16 year olds in NI and include subjects in academic and vocational areas. Most school, FE and HE colleges, and employers.

Source: DE, School Leavers Survey

School Leavers not entitled to FSM: 61.6, 63.6, 64.3, 65.1, 67.9
School Leavers entitled to FSM: 33.9, 33.9, 33, 33.4, 34.1

Example of contributory Factors — Economic, social & cultural deprivation; Poor attitudes to education; Poor school leadership; Lack of parental engagement

Story behind the baseline
The proportion of all school leavers achieving 5A*-C (inc. English and maths) has steadily increased from 61.6% to 67.9% between 2007/08 and 2011/12. The picture is not as positive for those entitled to FSM increasing only slightly from 33.9% in 2007/08 to 34.1% in 2011/12.

Implications
Young people without 5A*-C GCSE are more likely to be:

- Unemployed*;
- In low-paid employment.*

*Source: http://www.poverty.org.uk/31/index.shtml

Partners

- Department of Education.
- Department for Employment and Learning.
- Employers.
- Schools (Principal, teaching staff and young people).
- Other education & health related professionals (e.g. Education Welfare Officers).
- Families (parents/carers and children.
- The community.
- Community and voluntary sector.

What works to do better?

- Improve the quality of leadership/governance in schools which are underperforming.
- Reduce non-attendance, particularly those who are persistently absent.
- Target additional resources at young people (e.g. through use of one-to-one pupil level tuition).
- Increase parental involvement in the child's education.
- Improve provision of services that impact on the welfare of the child, e.g. Social and Emotional Aspects of learning (SEAL) programme.
- Enhance co-ordination/promote more effective partnership between various stakeholders.
- Improve the quality of school buildings and facilities (refurbishment/renewal programmes).

Suggestions to help stakeholders implement the Outcomes Framework

The Outcomes Framework as has already been discussed focuses on a small number of population level outcomes (and indicators) relating to what is known about the causes and consequences of child poverty. It provides the context within which partners with a role to play, e.g. in reducing poorly paid work and unemployment among adults with children, can come together to examine how well the actions they have taken have had an impact in terms of improving outcomes.

The next step in the process is to take the proposed framework and translate the principles within it into tangible actions that make a difference. We suggest that thought is given to the following important areas:

- **Raise capacity:** A crucial first step for those starting out on this journey and who are unfamiliar with the principles of OBA is to link in with opportunities for training and capacity building. The Centre for Applied Learning (CAL) has agreed to assist OFMDFM and the project team in rolling out the capacity building strategy. This strategy will help to ensure that those who are interested in, or who have a responsibility for, improving outcomes have the necessary support and training opportunities available to them, along with associated materials and guidance.
  It is anticipated that training will take place from September 2013 onwards.
  We anticipate that the first training sessions will be delivered as master classes to senior civil servants (Grade 5) across Government departments and will be open to those who have a policy, economics or statistics background and/or responsibilities.

- **Establish robust accountability structures**: All of the stakeholders who have an interest in, or responsibility for, improving child poverty outcomes need to have a structure within which to work and be held accountable for their actions. We suggest that groups (what we have termed Cross-Sectoral Child Poverty Outcomes Groups) are established for each outcome given the variety of issues that impact on each and the varying strategies/actions that might work to improve those outcomes. An overarching Board or other type of responsible body would also need to be established – alternatively, OFMDFM might wish to make use of existing structures to hold individual Outcomes Groups to account.

- **Establish effective data management processes**: The proposed Outcomes Framework is predicated on extensive use of data both as a tool for understanding current performance and as a way of understanding whether additional actions are needed to secure improvements in outcomes. It is important therefore that data for the proposed outcomes and associated indicators is kept up-to-date and is updated as soon as new data become available. In parallel, suggested areas where currently no data exists (i.e. the data development agenda) should be discussed with relevant government departments (e.g. NISRA) and further research/work in this area commissioned. NCB/C4EO are happy to provide ongoing assistance/ resources to enable this to be taken forward and we have already begun work to establish, for example, possible indicators that could be used in relation to school readiness. We suggest that the data development agenda is managed by the proposed Cross-Sectoral Child Poverty Outcomes Groups (as described above). Regardless of which organisation/lead body takes this work forward, it needs to be adequately resourced and funded and needs to draw heavily on the expertise of particular groups of individuals (e.g. departmental statisticians).

- **Align programmes/initiatives to outcomes:** The Outcomes Framework, if used effectively, will provide each of the services/programmes with a line of sight between what they are doing and how their actions might impact on a particular outcome/ indicator. If services/ programmes can more clearly see the link between their own activity and particular outcomes, it is anticipated that this could strengthen their contribution towards reducing child poverty and associated impacts.

- **Use OBA to continually review and improve outcomes:** Over time, and as stakeholders become more comfortable with using the OBA tool, it is important that they review progress in terms of how well particular outcomes are being achieved. The key questions in Figure 3.2 provide partners with a helpful structure with which to undertake these discussions.

Figure 3.2: Stages in reviewing progress

Conclusion

This section of the report has provided a proposed Outcomes Framework for Northern Ireland with a particular focus on defining a core set of outcomes and associated indicators. Finally, it detailed the next steps in terms of stakeholders taking the proposed framework and translating the principles within it into tangible actions that make a difference. A number of areas were outlined in this respect including raising capacity; establishing robust accountability structures; establishing effective data management processes; using OBA to continually review and improve outcomes, and; aligning programmes/initiatives to outcomes. It is important that consideration is given to all of these points if the Outcomes Framework is to have the best possible chance of succeeding. The next section outlines the next steps in terms of taking the suggested Outcomes Framework forward.

4. Next steps

The key aim of this document was to put forward a suggested Outcomes Framework for Northern Ireland to contribute towards tackling child poverty. The Outcomes Framework comprises a small number of outcomes (one overarching outcome and four other outcomes) and attached to each outcome are a number of primary and secondary indicators. Finally, a scorecard approach was detailed to provide stakeholders with a suggested way of getting from 'talk to action'. It is important to note that the principles underlying OBA can be used across Government and need not be limited to addressing issues relating to child poverty only.

The next steps will involve using this suggested framework as the basis for undertaking capacity building activities across the Northern Ireland Civil Service. The data presented in this report can be used as the basis for undertaking a series of turning-the-curve exercises workshops, which can then be used to populate balanced scorecards for all of the indicators included in this report.

In terms of governance of the Outcomes Framework, it has yet to be decided where precisely this will be held. We understand that governance arrangements will be agreed by DSC Programme Board.

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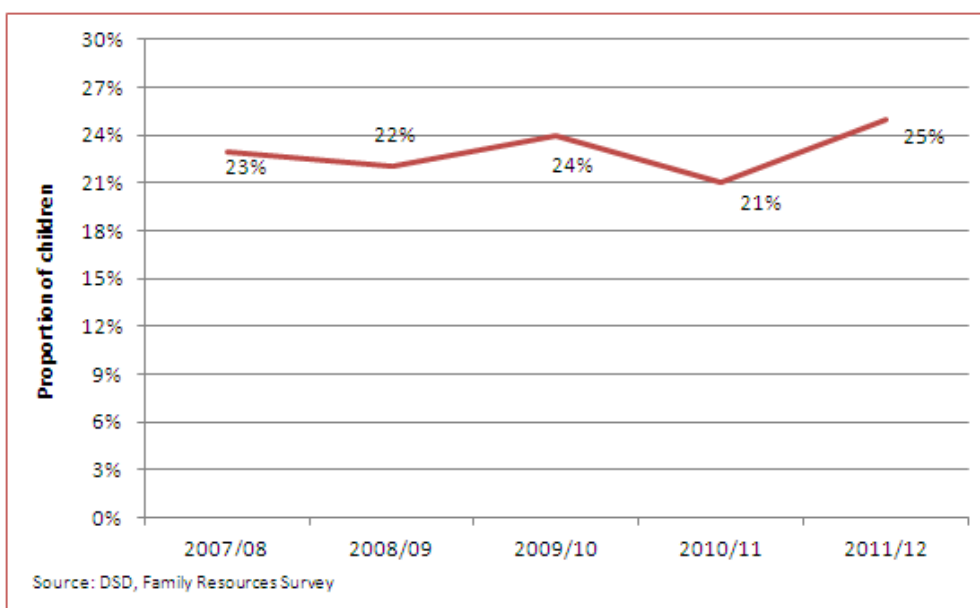
Appendix A: The outcomes and indicators

This appendix comprises a table for overarching indicators and separate tables for each of the other two types of indicators – primary and secondary.

<p style="text-align:center">**Table B.1: Overarching indicators**</p>

| Overarching indicators |
| --- |
| 1. Absolute low income - before housing costs: Proportion of children living in households where income is less than 60% inflation adjusted median UK household income in 2010/11. |

Source: DSD, Family Resources Survey

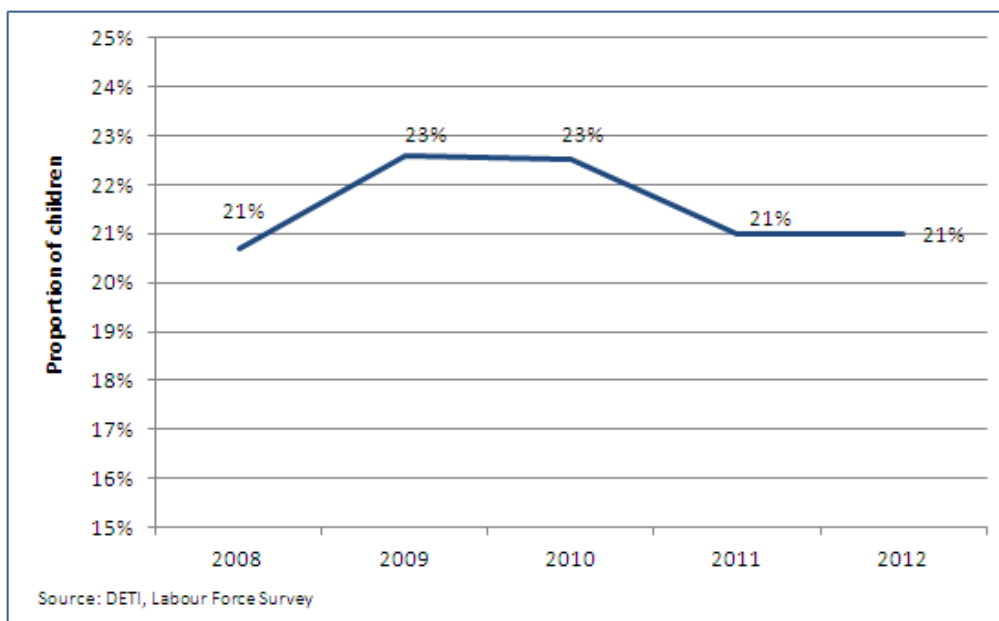| |
| --- |
| 2. Relative low income – before housing costs: Proportion of children living in a household whose income is less than 60% of the UK median household income. |

Source: DSD, Family Resources Survey
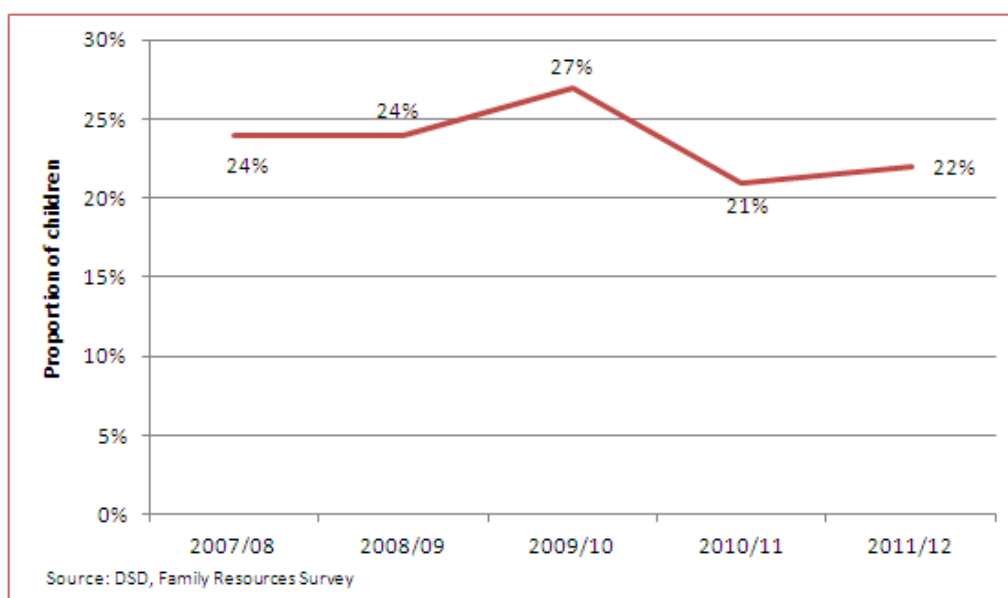
Table B.2: Primary indicators

Outcome 1: Families have adequate incomes and work that pays[20]

Proportion of children living in workless households.


Source: DETI, Labour Force Survey

Combined low-income and material deprivation - before housing costs: Proportion of children living in families that has a final material deprivation score of 25 or more and an equivalised household income below 70 per cent of contemporary median income.
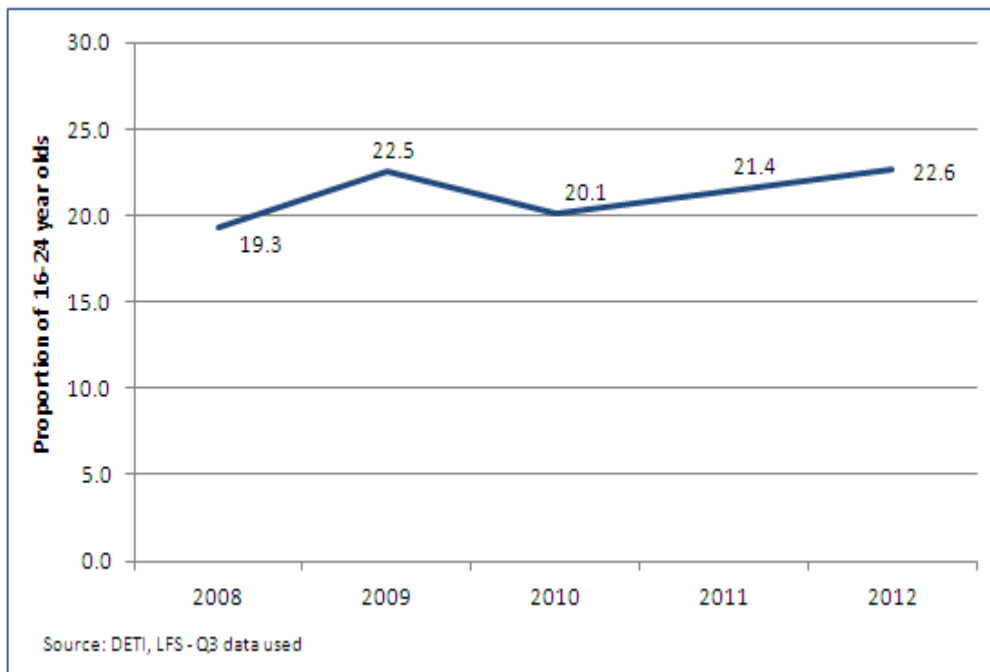

Source: DSD, Family Resources Survey
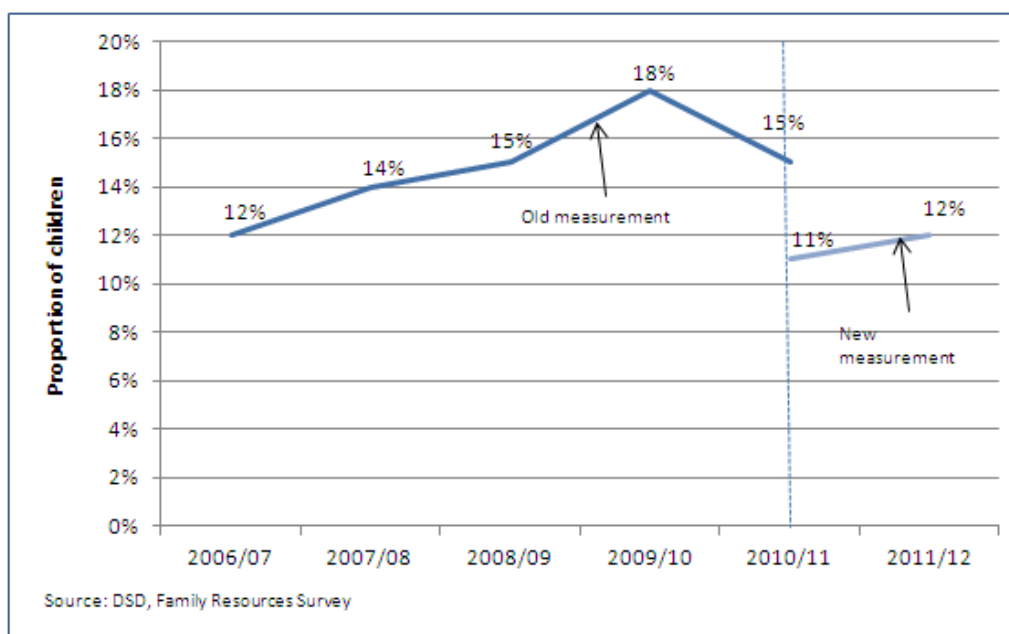
Note: New questions about four additional material deprivation items for children were introduced into the 2010/11 FRS and from 2011/12 four questions from the original suite were removed. Figures from the old and new suite of questions are not comparable.

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[20] The overarching indicators were originally grouped under Outcome 1. However consultation with stakeholders suggested that two of the three primary indicators (absolute and relative low income) should be used as overarching indicators.

Proportion of school leavers achieving 5A*-C GCSE (including English and Maths).
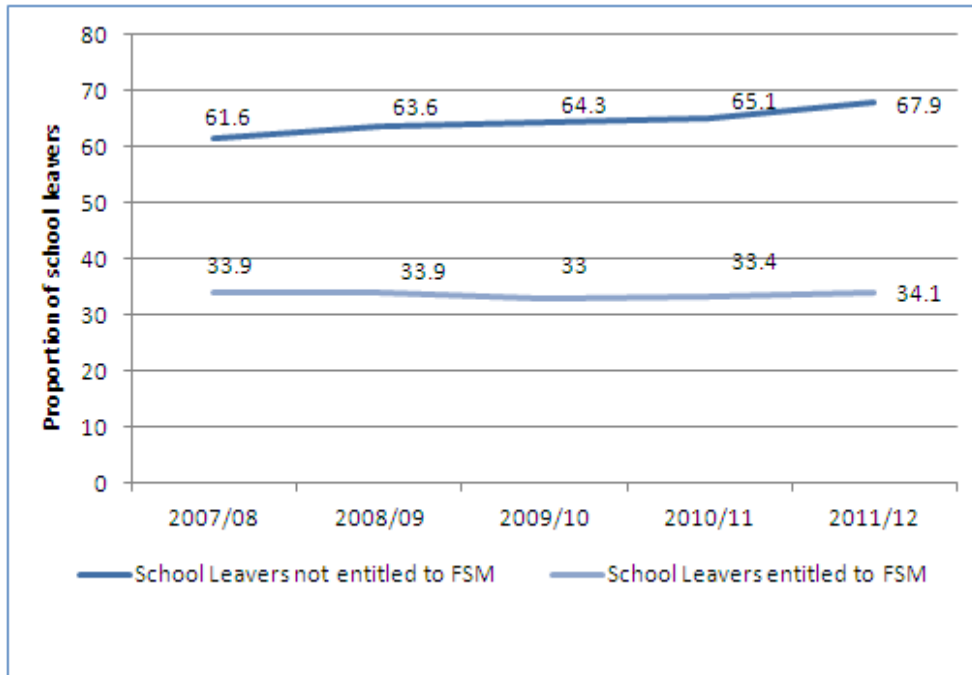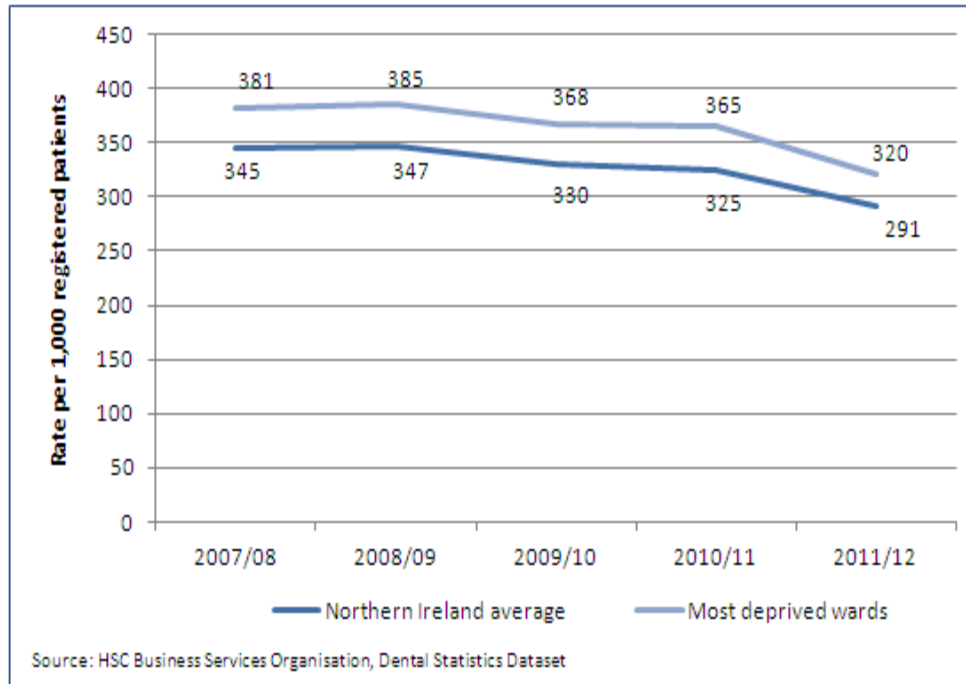

Proportion of 16-24 year olds Not in Education, Employment or Training.

Outcome 3: Children and families thrive and have a healthy future

No. of patients under 18 who had a treatment for dental cavities per 1,000 registered patients.

Source: HSC Business Services Organisation, Dental Statistics Dataset

Note: Most deprived wards refer to the 20% of wards in Northern Ireland who have scored highest across a range of domains that comprise the 2010 Northern Ireland Multiple Deprivation Measure.

Low Birth Weight (% of all singleton live births where birth weight was lower than 2500g).
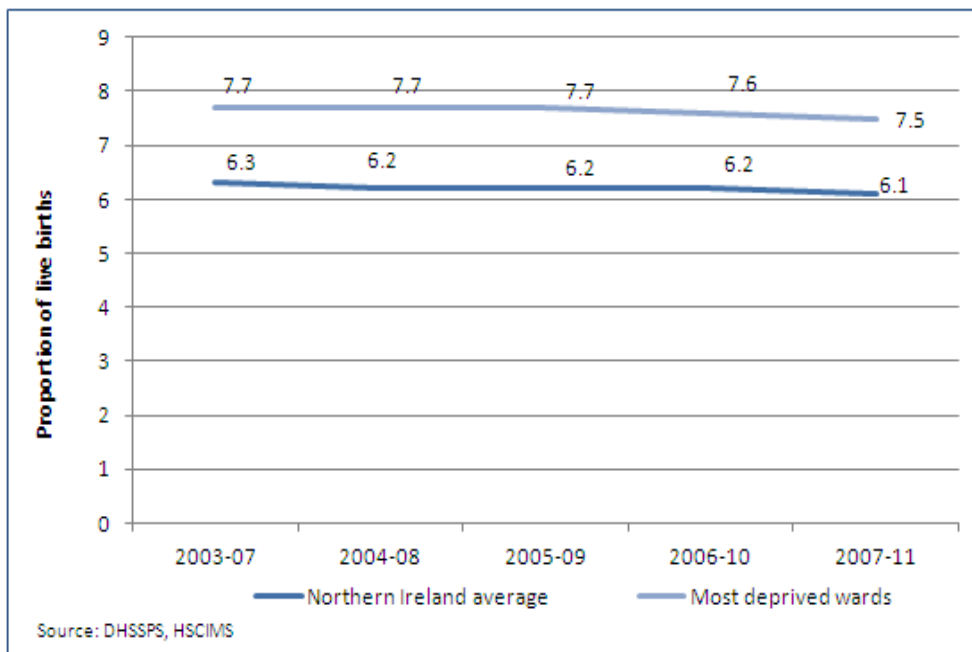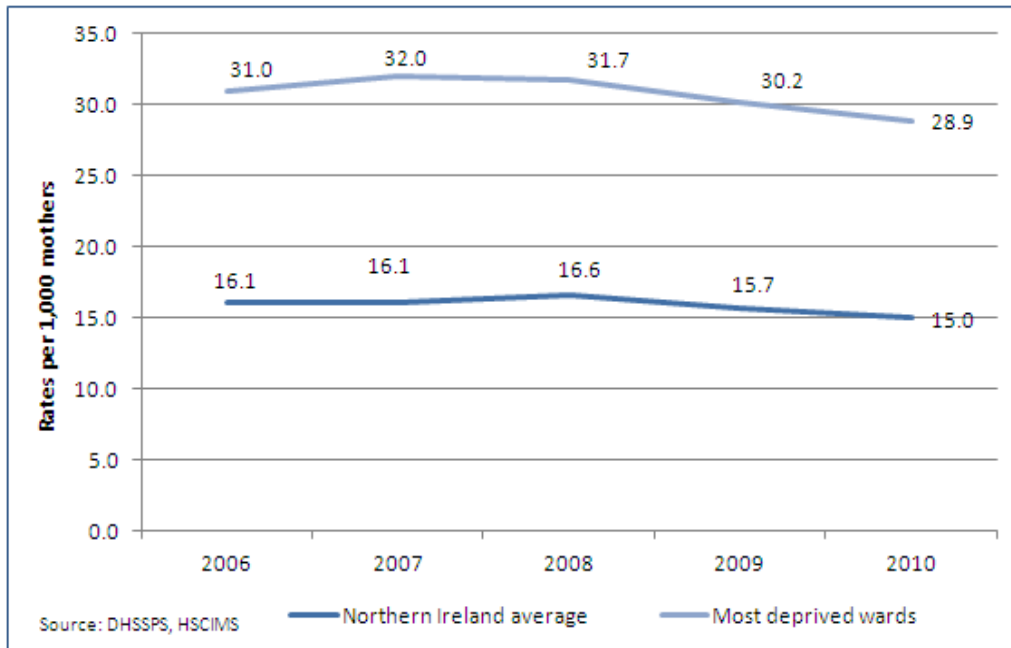

Source: DHSSPS, HSCIMS

Note: Most deprived wards refer to the 20% of wards in Northern Ireland who have scored highest across a range of domains that comprise the 2010 Northern Ireland Multiple Deprivation Measure.

Births to mothers aged between 13 and 19 (Rate per 1,000).

Source: DHSSPS, HSCIMS

Note: Most deprived wards refer to the 20% of wards in Northern Ireland who have scored highest across a range of domains that comprise the 2010 Northern Ireland Multiple Deprivation Measure.

Outcome 4: Children and families live in a safe and secure environment

Number of families with children presenting to NIHE as homeless.

Source: NIHE

Recorded number of criminal offences per 10,000 population.

Source: PSNI, Crime Recording System

Note: Most deprived wards refer to the 20% of wards in Northern Ireland who have scored highest across a range of domains that comprise the 2010 Northern Ireland Multiple Deprivation Measure.
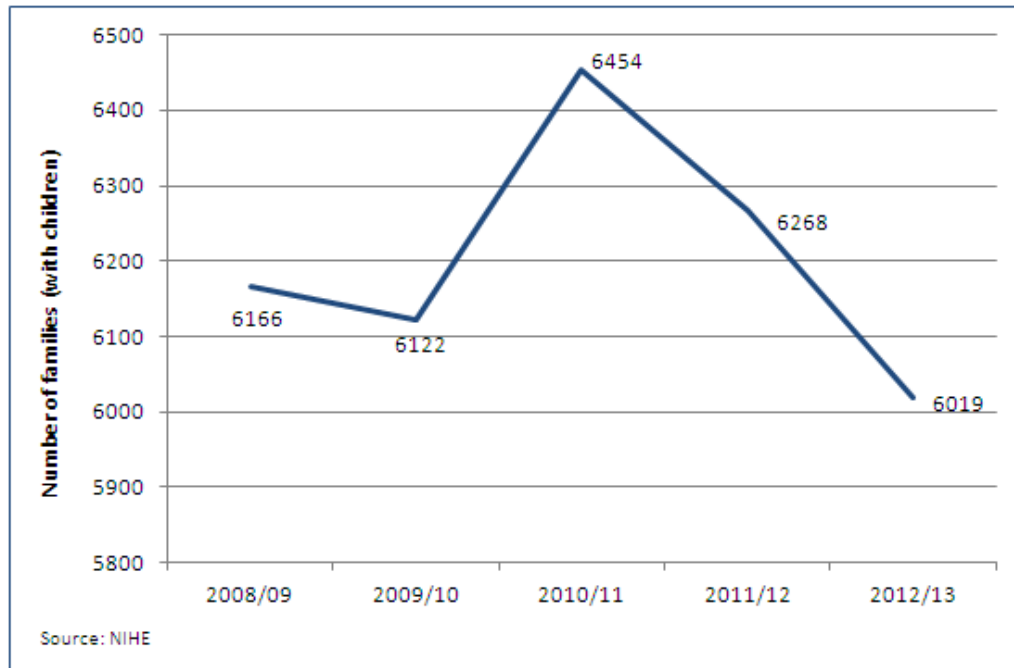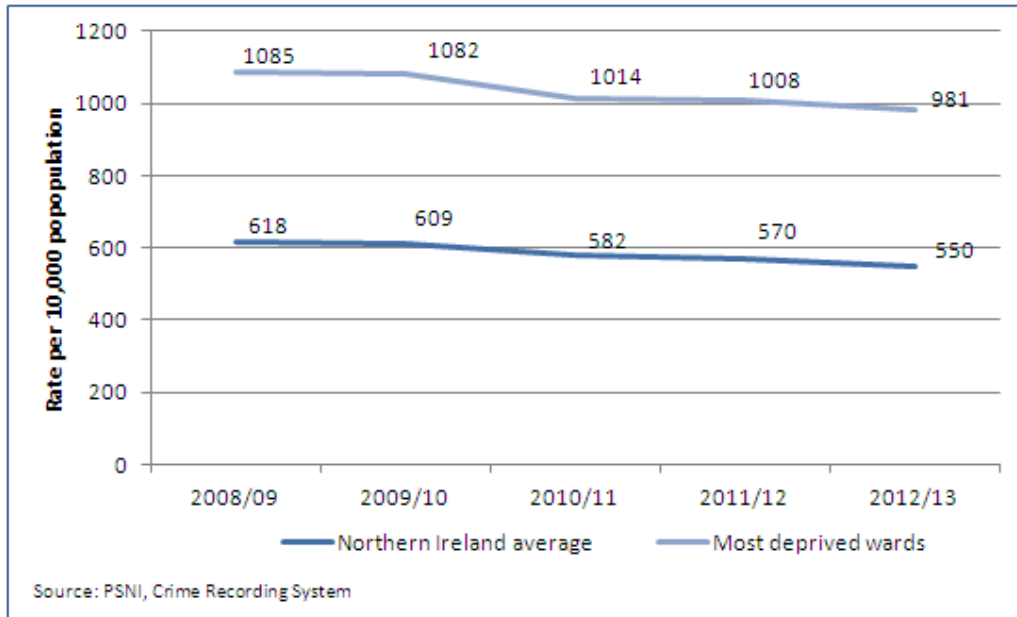
Number of child admissions to hospital due to an accident in the home or on the road (per 100,000).
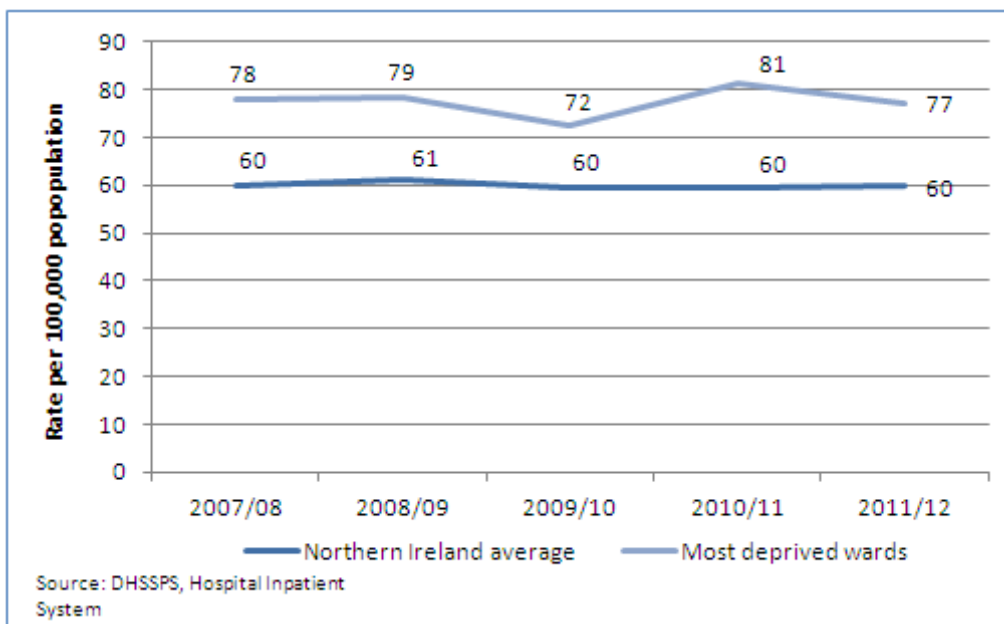
Source: DHSSPS, Hospital Inpatient System
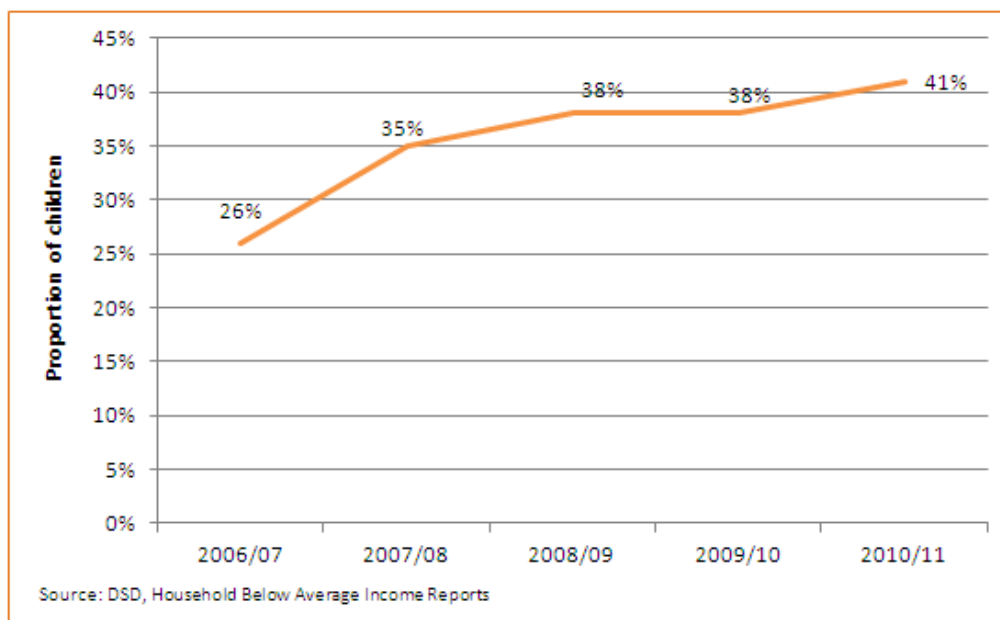
Note: Most deprived wards refer to the 20% of wards in Northern Ireland who have scored highest across a range of domains that comprise the 2010 Northern Ireland Multiple Deprivation Measure.

Table B.3: Secondary indicators

Outcome 1: Families have adequate incomes and work that pays[21]

Proportion of children living in families where at least one adult is in work (but not all) and where income is less than 60% of median income before housing costs.

Source: DSD, Household Below Average Income Reports

Persistent benefit recipients: Number of claimants in receipt of Income Support for more than 5 years and who have children

Source: DSD, Analytical Services Unit

Note: Data is presented for caseload in May of each year.

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[21] The overarching indicators were originally grouped under Outcome 1. However consultation with stakeholders suggested that two of the three primary indicators (absolute and relative low income) should be used as overarching indicators.

Number of housing benefit cases with children (per 10,000 of the population).
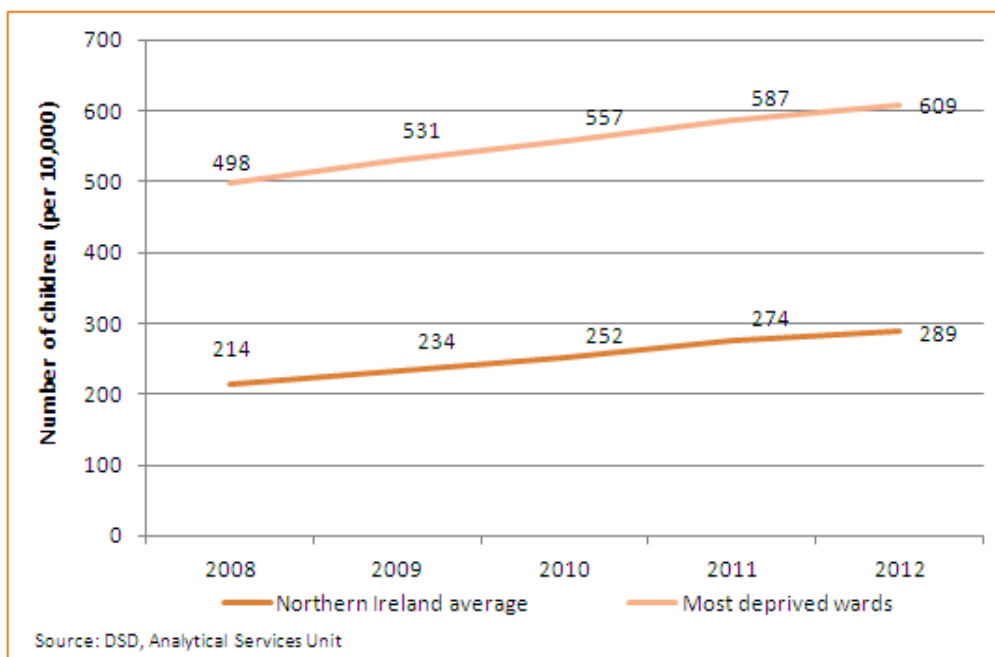
Source: DSD, Analytical Services Unit

Note: Most deprived wards refers to the 20% of wards in Northern Ireland who have scored highest across a range of domains that comprise the 2010 Northern Ireland Multiple Deprivation Measure.
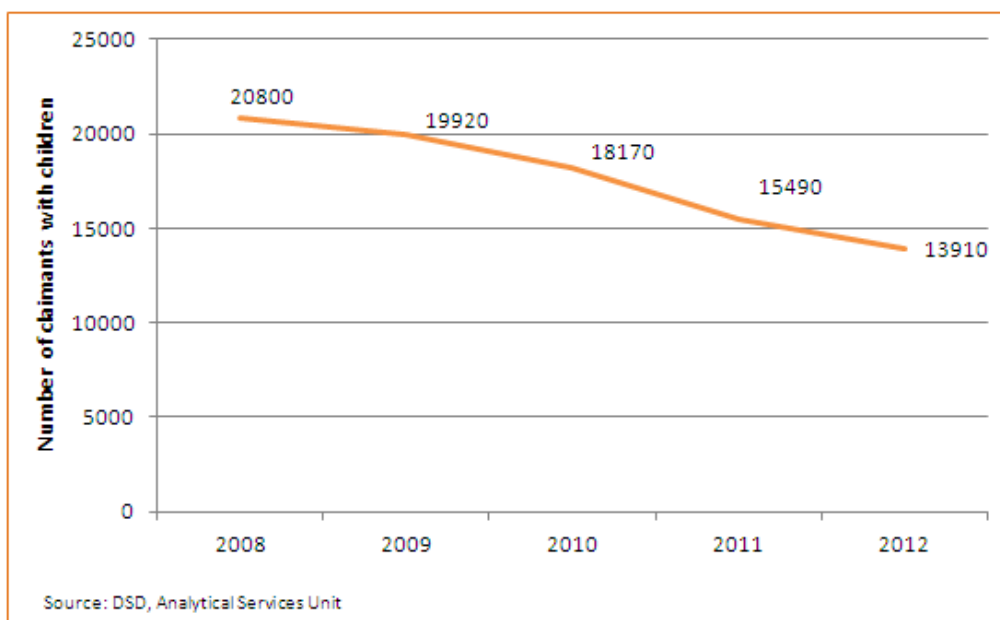This data relates to scans undertaken of HB claimants in June of each year (with the exception of 2011, when the scan was undertaken in July).

Outcome 2: Children in poverty achieve good educational outcomes

Proportion of pupils achieving Level 4+ in English at Key Stage 2.
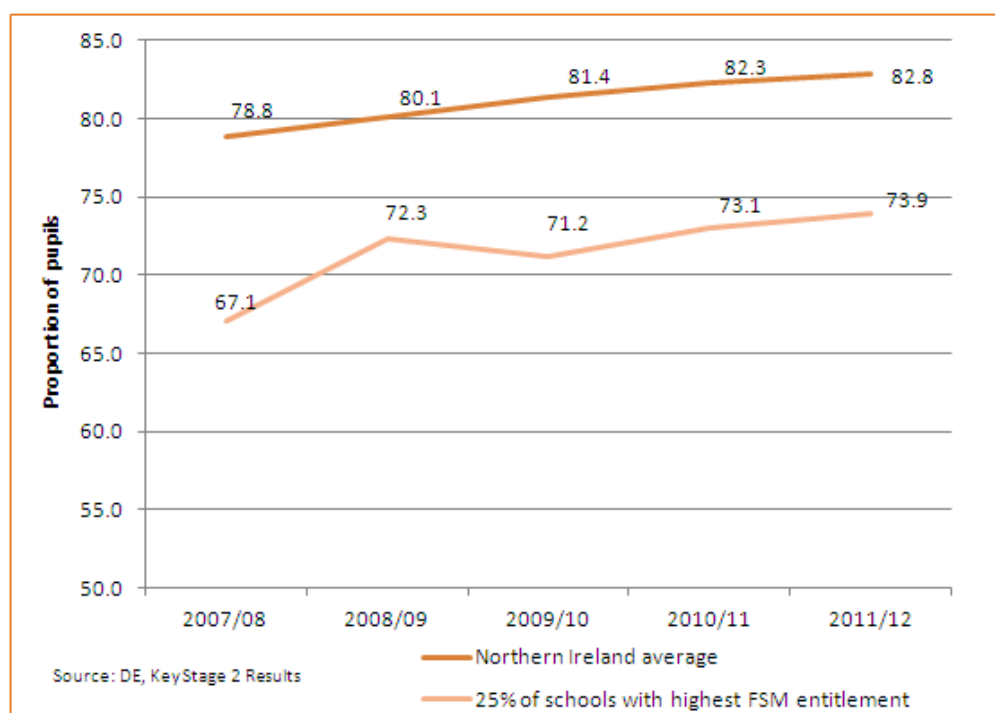
Source: DE, KeyStage 2 Results

Proportion of pupils achieving Level 4+ in maths at Key Stage 2.

Source: DE, KeyStage 2 Results

— Northern Ireland average

— 25% of schools with highest FSM entitlement - NI

Proportion of pupil enrolments in primary schools with less than 85% attendance   .

Source: DE, School Census

— Northern Ireland average   — Most deprived wards
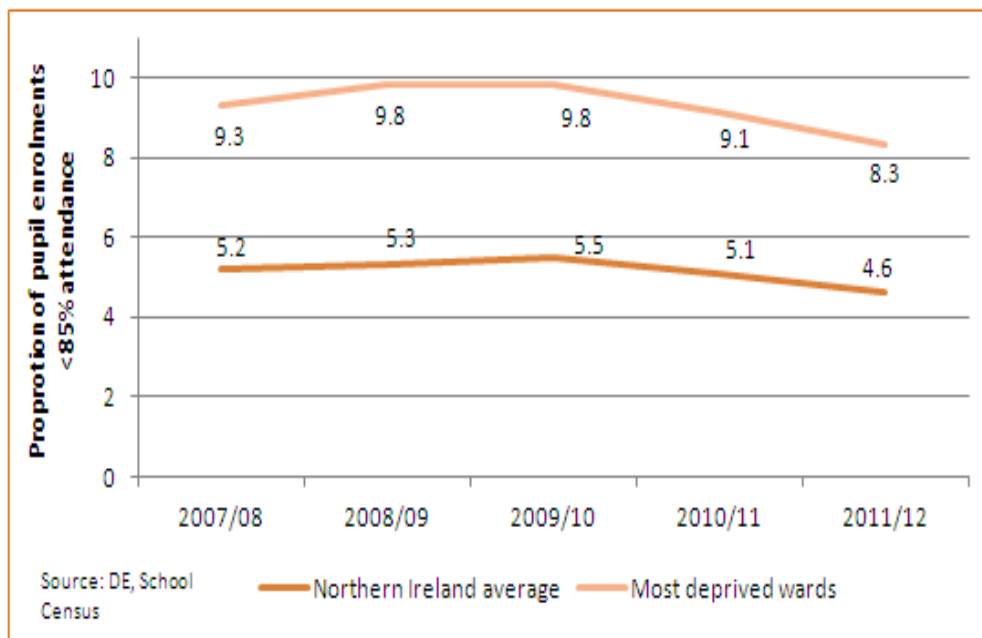
Note: Most deprived wards refers to the 20% of wards in Northern Ireland who have scored highest across a range of domains that comprise the 2010 Northern Ireland Multiple Deprivation Measure.

Proportion of pupil enrolments in post-primary schools with less than 85% attendance.
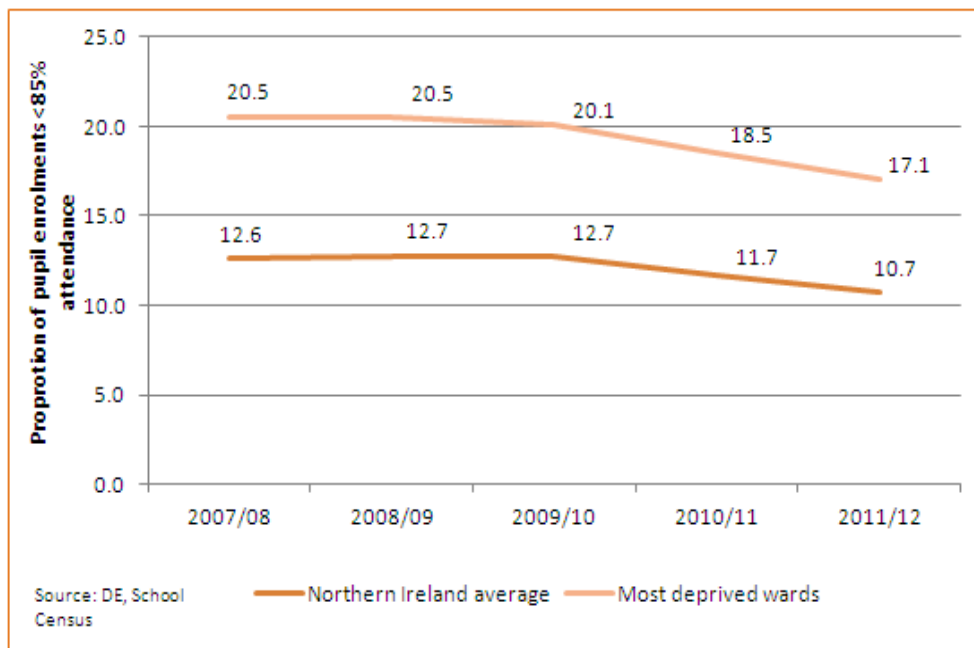
Note: Most deprived wards refers to the 20% of wards in Northern Ireland who have scored highest across a range of domains that comprise the 2010 Northern Ireland Multiple Deprivation Measure.

Outcome 3: Children and families thrive and have a healthy future

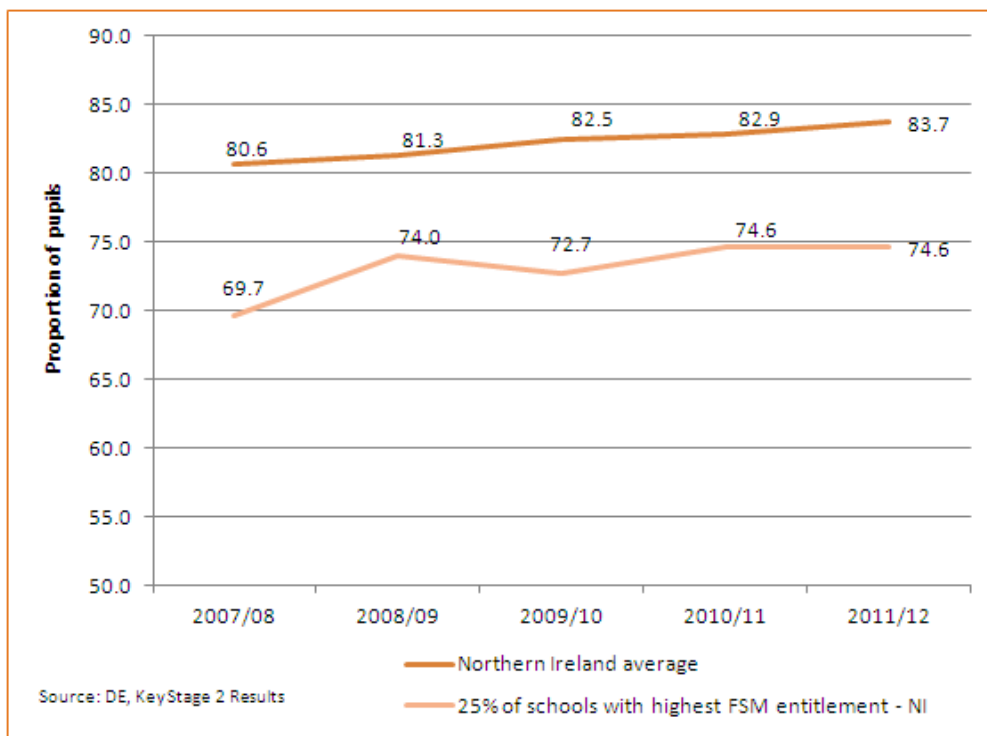Crude Suicide Rate (deaths per 100,000 population).

Note: Most deprived wards refers to the 20% of wards in Northern Ireland who have scored highest across a range of domains that comprise the 2010 Northern Ireland Multiple Deprivation Measure.

Proportion of mums smoking during pregnancy.

Source: DHSSPS, HSCIMS

Note: Most deprived wards refers to the 20% of wards in Northern Ireland who have scored highest across a range of domains that comprise the 2010 Northern Ireland Multiple Deprivation Measure.

Number of admissions to hospital of those aged 0-17 with self-harm diagnoses (rate per 100,000).

Source: DHSSPS, Hospital Inpatient System

Number of admissions to hospital of those aged 0-17 with alcohol related diagnoses (rate per 100,000).

Source: DHSSPS, Hospital Inpatient System

Note: Most deprived wards refers to the 20% of wards in Northern Ireland who have scored highest across a range of domains that comprise the 2010 Northern Ireland Multiple Deprivation Measure.

Proportion of mums who are breastfeeding at discharge from hospital.

Source: DHSSPS, HSCIMS

Note: Most deprived wards refers to the 20% of wards in Northern Ireland who have scored highest across a range of domains that comprise the 2010 Northern Ireland Multiple Deprivation Measure.

Proportion of Primary One Pupils who are obese.

Source: DHSSPS, CHS

Note: Most deprived wards refers to the 20% of wards in Northern Ireland who have scored highest across a range of domains that comprise the 2010 Northern Ireland Multiple Deprivation Measure.
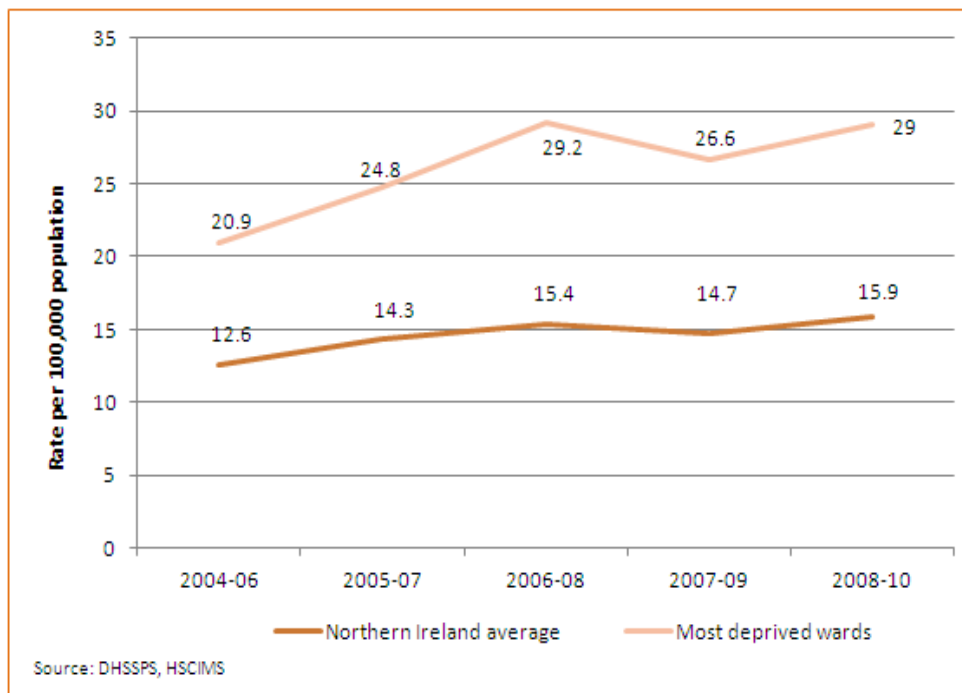
Outcome 4: Children and families live in a safe and secure environment

Number of children aged 0-17 on the Child Protection Register (rate per 10,000).
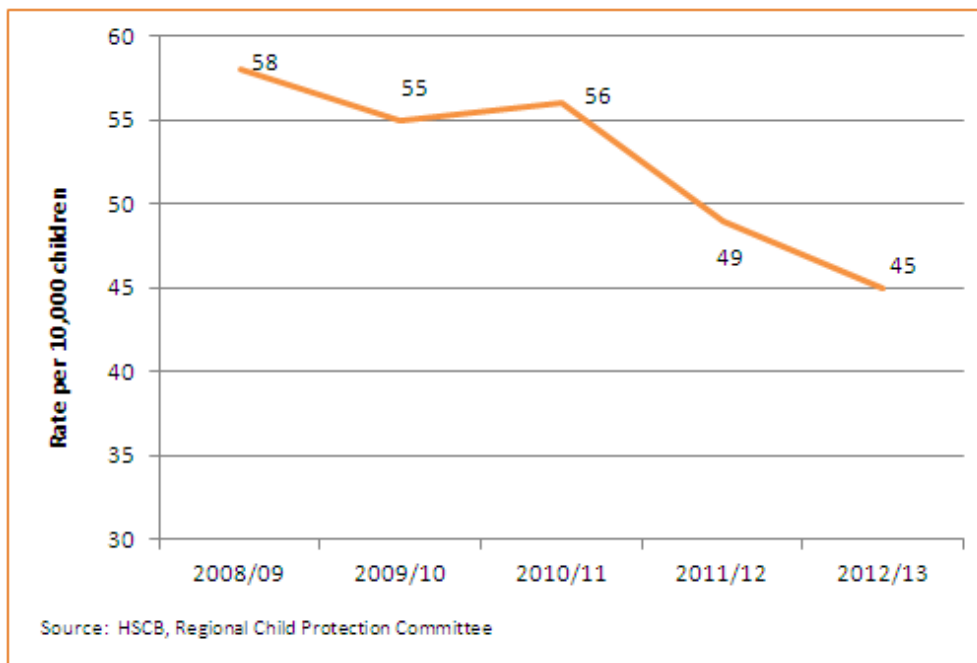
Source: HSCB, Regional Child Protection Committee

Number of anti-social behaviour incidents recorded by the police (rate per 10,000).

Source: PSNI, Anti-Social Behaviour Incidents Recorded by the Police

Note: Most deprived wards refers to the 20% of wards in Northern Ireland who have scored highest across a range of domains that comprise the 2010 Northern Ireland Multiple Deprivation Measure.
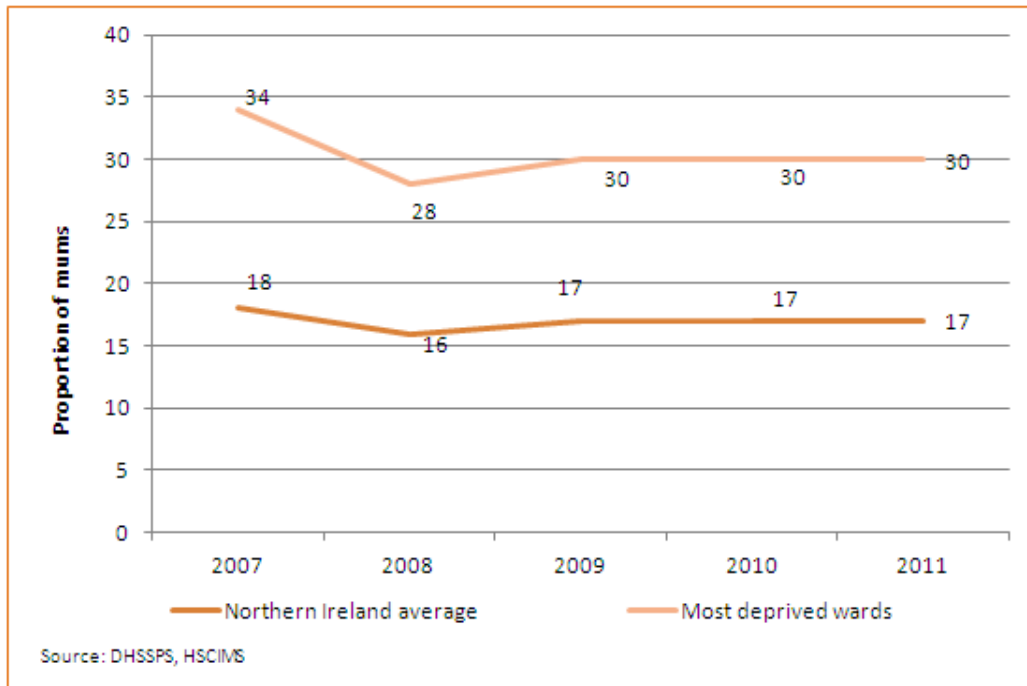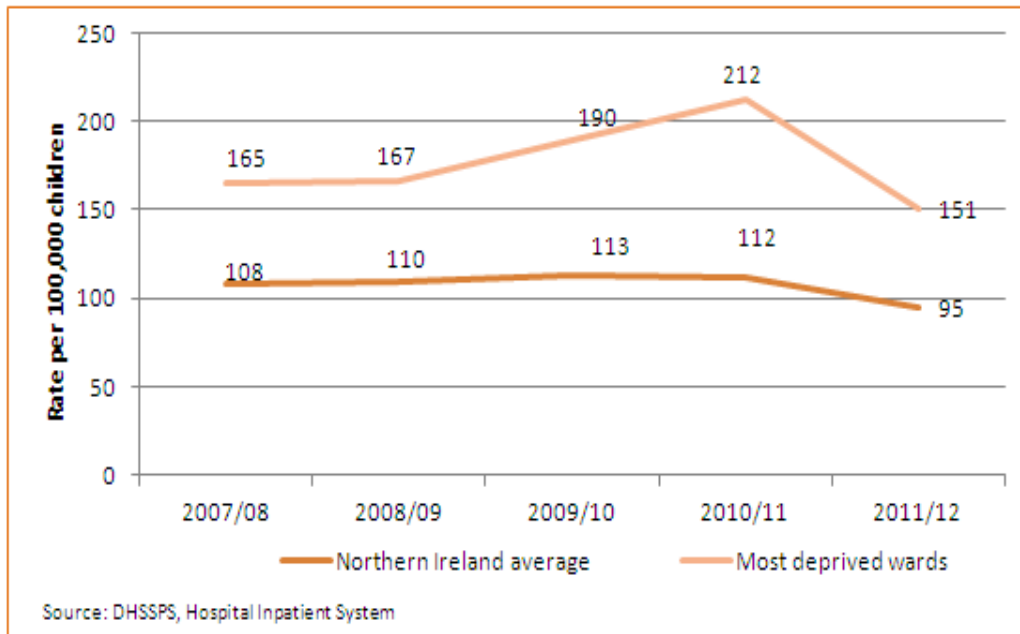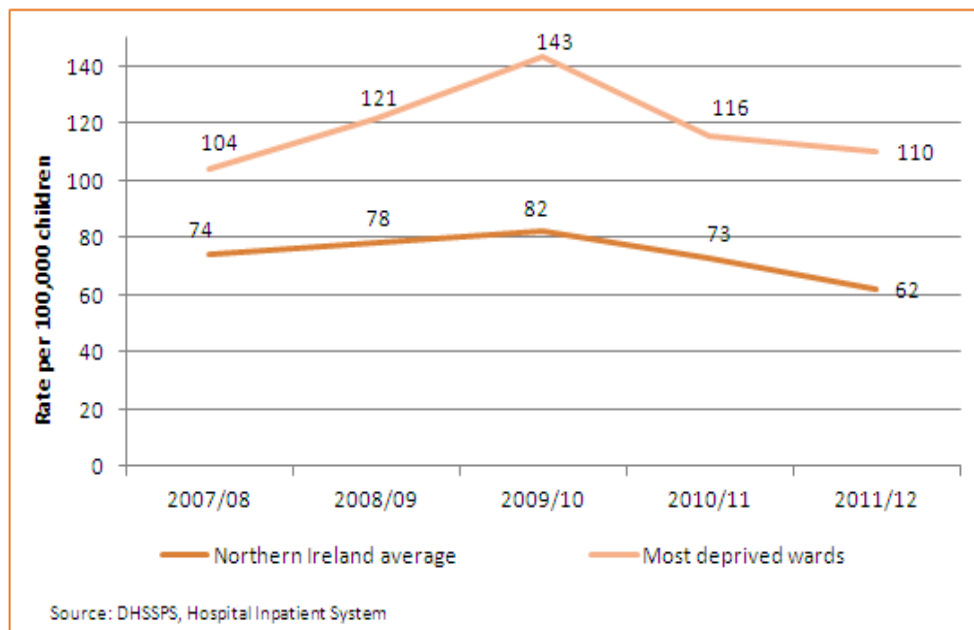
Appendix B: Examples of balanced scorecards for each of the outcomes

Figure C.1: Balanced scorecard for Outcome 1

Outcome & indicator	Baseline and story behind it	Partners	What works to do better?

Outcome 2:
Families have adequate incomes and work that pays.

Indicator type:
Primary.

Indicator
Proportion of children that live in workless households.

Population
Children aged 0-17 who live in workless households (where neither parent works).

Source: DETI, Labour Force Survey

Examples of contributory Factors
- Structural factors (Skills imbalance/mismatch)
- Benefit system (e.g. benefit trap, lack of affordable childcare)
- Personal factors (e.g. lack of confidence/ self-esteem)
- Economic factors (e.g. recession, low-wage economies)

Story behind the baseline
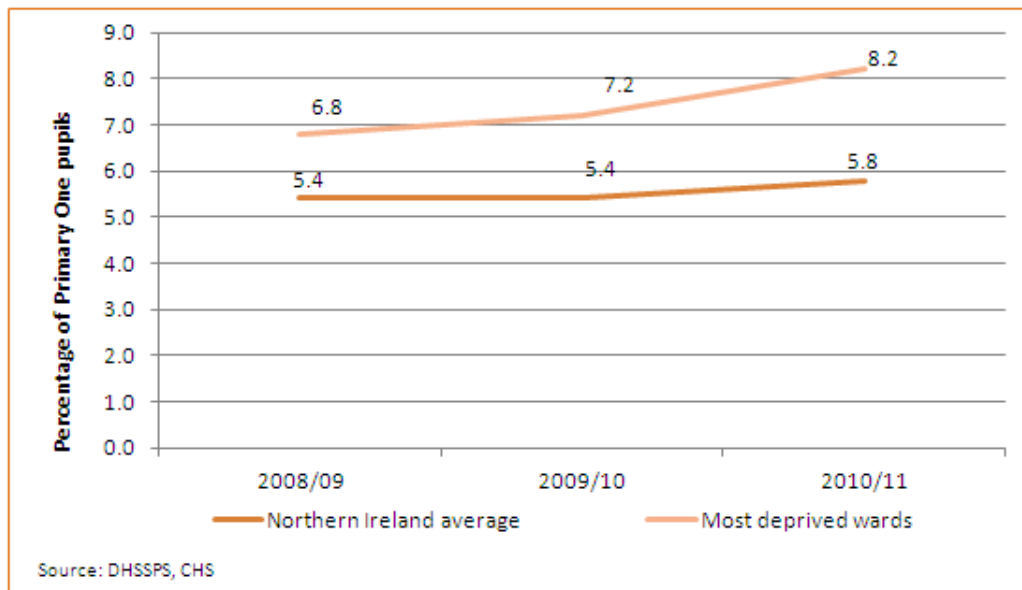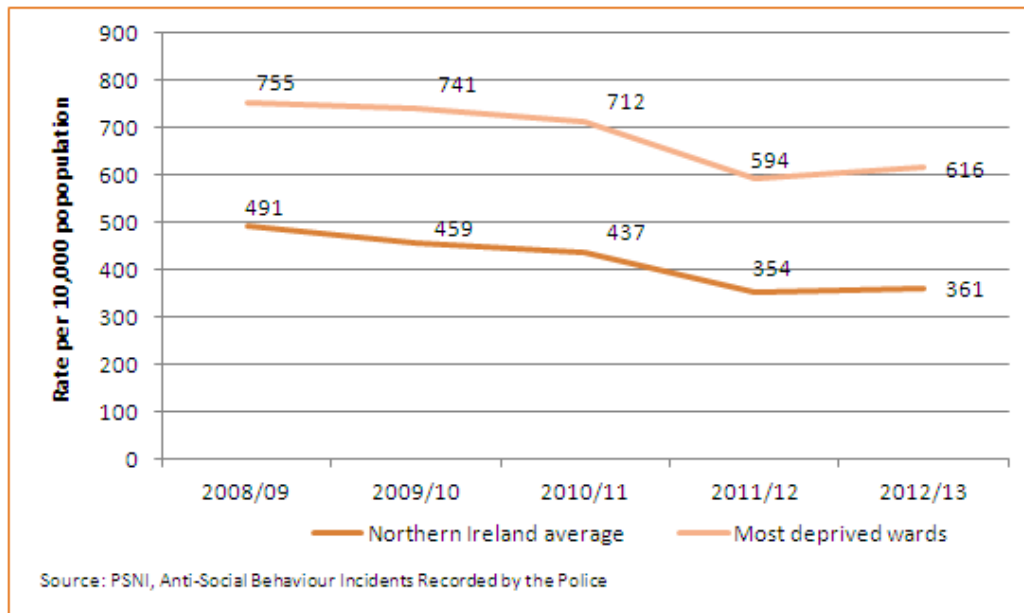The proportion of children living in workless households has fluctuated over the last five years, however there has been no overall reduction over that time.

Implications
Young people from workless households are:

- twice as likely than their peers to say they will end up on benefits.
- more likely to say they will leave school early.

Partners

- Range of Government Departments e.g. DEL, DETI, DSD, DE, DRD.
- Private sector representative organisations, e.g. Northern Ireland Chamber of Commerce.
- Private sector employers.
- Schools and FE colleges.
- Community and voluntary sector.

What works to do better?
The economy

- Jobs creation initiatives linked to, for example, infrastructure development such as Tourism Development Scheme.
- Target resources specifically at areas of high social deprivation (e.g. through Social Investment Fund).

Skills/ personal development

- Essential skills training (i.e. Level 2 or above).
- Youth Employment Scheme.
- Apprenticeships.
- Training to overcome barriers to employment (e.g. Workable/ Work Connect).

Enhancing financial resources

- Allowance to promote staying on in school (e.g. Educational Maintenance Allowance).
- Subsidised childcare .

Figure C.2: Balanced scorecard for Outcome 3

| Outcome & indicator | Baseline and story behind it | Partners | What works to do better? |

Outcome 3:
Children and families thrive and have a healthy future.

Indicator type:
Primary.

Indicator
No. of patients under 18 who had a treatment for dental cavities per 1,000 registered patients.

Population
Children aged 0-17 who are registered with a dentist and who are receiving dental treatment.

Source: HSC Business Services Organisation, Dental Statistics Dataset

Examples of contributory Factors
- Poor diet (and over-consumption of high carbohydrate foods)
- Poor oral hygiene
- Smoking (and passive smoking)
- Low levels of saliva production

Story behind the baseline
The gap has fluctuated only very slightly over the last five years and has narrowed slightly between 2010/11 and 2011/12.

Implications
Young people suffering from tooth decay are more likely to have:

- higher levels of school absence.
- difficulty concentrating.
- poorer levels appearance.
- other illnesses in the longer term, e.g. diabetes, heart disease, and low-birth weights .

Partners

- Range of Government Departments/ statutory agencies e.g. DH, DE, PHA.
- Schools.
- Higher Education Institutions.
- Parents/carers.
- The community.
- Community and voluntary sector organisations.

What works to do better?^
Diet/ healthy eating

- Programmes to encourage healthy eating, i.e. restricted intake of sugary foods.
- Incorporation of dental health into education syllabus.

Preventative treatments/ programmes

- Fluoride Toothpaste Schemes (operated in NI between 2004-2008 with a number of variants ranging from provision only of toothbrush and toothpaste to supervised brushing).
- Provision of other topical fluorides
  o Varnish;
  o Gel; and
  o Mouth-rinse.
- School fluoride rinse scheme.
- School fluoridated milk programmes.

^ School-based oral health education alone has no impact on cavities levels.

Figure C.3: Balanced scorecard for Outcome 4

| Outcome & indicator | Baseline and story behind it | Partners | What works to do better? |

Outcome 4:
Children and families live in a safe and secure environment

Indicator type:
Primary

Population
Children aged 0-17 who live in families deemed to be homeless

Indicator
Number of families presenting to NIHE as homeless.

Source: NIHE

Example of contributory Factors
- Relationship breakdown (inc. domestic violence
- Intimidation/harassment
- No accommodation in Northern Ireland
- Lack of affordable housing

Story behind the baseline
The number of families with children presenting as homeless has fluctuated quite significantly increasing from 6,122 in 2009/10 to 6,454 in 2010/11, ad has fallen back since.

Implications
Children living in bad housing are more likely than others to:

- suffer from poor health as other children.
- have lower levels of academic achievement.
- have low self-esteem.

Partners

- Government departments/ statutory organisation (e.g. DSD, NIHE, HSCTs).
- Local/district councils (e.g. Belfast City Council).
- Housing Associations.
- Voluntary and Community organisations (e.g. DePaul, NIACRO, NICVA, Shelter Northern Ireland).

What works to do better?
Prevention/early intervention

- Advice/assistance pre-crisis.
- Tenancy support arrangements to help maintain vulnerable people in current accommodation (e.g. Tenancy Support Assessments).
- Joined up service provision (e.g. health, justice, social welfare).
- Provision of services (e.g. counselling).

Financial resources
- Investment in temporary accommodation.
- Initiatives to make housing more affordable (e.g. co-ownership).

Appendix C: Further information on indicators used

Indicator	Source	Deprivation split	Notes
Overarching outcome			
• Absolute low income - before housing costs: Proportion of children living in households where income is less than 60% inflation adjusted median UK household income in 2010/11.	• DSD – Family Resources Survey.	• N/A	• The 'Before Housing Costs' measurement has been used.
• Relative low income - before housing costs: Proportion of children living in a household whose income is less than 60% of the UK median household income.			
Outcome 1: Families have adequate income and work that pays			
• Proportion of children living in workless households.	• DETI, Labour Force Survey.	• N/A	• N/A
• Combined low-income and material deprivation - before housing costs: Proportion of children living in families that has a final material deprivation score of 25 or more and an equivalised household income below 70% of contemporary median income.	• DSD – Family Resources Survey & Household Below Average Income reports.		• The 'Before Housing Costs' measurement has been used.
• Proportion of children living in families where at least one adult is in work (but not all) and where income is less than 60% of median income before housing costs.			
• Persistent benefit recipients: Number of claimants in receipt of Income Support for more than 5 years and who have children.	• DSD, Analytical Services Unit.		• Data has been used for May of each year.
• No. of housing benefit cases with children (per 10,000 of the population).			• N/A

Indicator	Source	Deprivation split	Notes
Outcome 2: Children in poverty achieve good educational outcomes			
• Proportion of school leavers achieving 5A*-C GCSE (including English and Maths).	• DE, School Leavers Survey.	• FSM vs. NI average	• 5 A*-C GCSE (inc. English and maths) is the accepted standard that young people at Key Stage 4 are expected to achieve.
• Proportion of 16-24 year olds Not in Education, Employment or Training (NEET).	• DETI, Labour Force Survey.	• N/A.	• Quarter 3 data has been used. • NEET Figures are grossed on 2011 mid-year population estimates. • Because the LFS is a sample survey, results are subject to sampling error, i.e. the actual proportion of the population in private households with a particular characteristic may differ from the proportion of the LFS sample with that characteristic. • No deprivation split is possible.
• Proportion of pupils achieving Level 4+ in English at Key Stage 2.	• DE, Key Stage 2 results.	• Schools in top 25% of FSM vs. all schools.	• N/A.
• Proportion of pupils achieving Level 4+ in maths at Key Stage 2.		• Schools in top 25% of FSM vs. all schools.	• N/A.
• Proportion of pupil enrolments in primary schools with less than 85% attendance. • Number of pupil enrolments in post-primary schools with less than 85% attendance.	• DE, School Census.	• Most deprived = 20% of wards with highest deprivation score.	• These indicators refer to Pupil enrolments – a pupil can be enrolled in more than one school.
Outcome 3: Children and families thrive and have a healthy future			
• No. of patients under 18 who had a treatment for dental cavities (rate per 1,000 registered patients).	• HSC Business Services Organisation, Dental Statistics Dataset.	• Most deprived = 20% of wards with highest deprivation score.	• Dental cavity relates to a full financial year. • A patient is classified as having a treatment for dental cavities if they have had a treatment under any of the following P7-Item codes: 0701, 1401, 1402, 1403, 1404, 1421, 1426, 1441, 1451, 1461, 4401, 5811, 5812, 5813, 5814, 5001, 5821, 5826, 5836. • Registration data is taken at a point in time (1st October in the given year).

Indicator	Source	Deprivation split	Notes
Outcome 3: Children and families thrive and have a healthy future (Continued)			
• Low Birth Weight (% of live births where birth weight was lower than 2500g).	• DHSSPS, HSCIMS.	• This data has been sourced from the health and social care inequalities report. • Most deprived = 20% of wards with highest deprivation score.	• A birth weight of less than 2.5 kg is accepted nationally and internationally as a low birth weight. • Refers to singleton births only. • Data is aggregated for three year periods.
• Births to mothers aged between 13 and 19 (Rate per 1,000).			• N/A.
• Crude suicide rate (deaths per 100,000 of the population).	• DHSSPS, HSCIMS.		• These data are for all age groups. • Codes in administrative data use 'Suicide and self-inflicted injury' are X60-X84 and Y87.0 (ICD9 E950-E959), and the codes in administrative data used for 'Undetermined injury' are Y10-Y34 and Y87.2 (ICD9 E980-E989).
• Proportion of mums smoking during pregnancy.			• N/A.
• Number of admissions to hospital of those aged 0-17 with self-harm diagnoses (rate per 100,000).	• DHSSPS, Hospital Inpatient System.	• Most deprived = 20% of wards with highest deprivation score.	• These indicators relate to number of admissions and not to number of individuals. • A standardised rate per 100,000 has be calculated using Census 2011 population data. • Codes in administrative data used to identify self-harm diagnoses are: X60; X61; X62; X63; X64; X65; X66; X67; X68; X69; X70; X71, and; X78. • Codes in administrative data used to identify alcohol related diagnoses are: E244; E512; F10; G312; G621; G721; I426; K292; K70; K860; O354; P043; Q860; T510; T511; T519; X45; X65; Y15; Y573; Y90; Y91; Z502; Z714, and; Z721.
• Number of admissions to hospital of those aged 0-17 with alcohol related diagnoses (rate per 100,000).			
• Proportion of mums who are breastfeeding at discharge from hospital.	• DHSSPS, HSCIMS.	• This data has been sourced from the health and social care inequalities report. • Most deprived = 20% of wards with highest deprivation score.	•

Indicator	Source	Deprivation split	Notes
Outcome 3: Children and families thrive and have a healthy future (Continued)			
• Proportion of Primary One Pupils who are obese.	• DHSSPS, CHS.	• Most deprived = 20% of wards with highest deprivation score.	• Data could only be sourced for the periods 2008/09 – 2010/11.
Outcome 4: Children and families live in a safe and secure environment			
• Number of families presenting to NIHE as homeless.	• NIHE.	• N/A.	• N/A.
• Recorded number of criminal offences (rate per 10,000 population).	• PSNI, Crime Recording System.	• Most deprived = 20% of wards with highest deprivation score.	• This is used as an overall measure for various types of criminal offences • The rate per 10,000 has not been calculated by NCB.
• Number of children attending hospital due to an accident in the home or on the road (rate per 100,000).	• DHSSPS, Hospital Inpatient System.		• A standardised rate per 100,000 has be calculated using Census 2011 population data. • Codes in administrative data used to identify accidents in the home are: W00-W19; W20-W49; W50-W64; W65-W74; W75-W84; W85-W99; X00-X09; X10-X19; X20-X29; X30-X39; X40-X49, and; X50-X59. • Codes in administrative data used to identify accidents on the road: V01-V09; V10-V19; V20-V29; V30-V39; V40-V49; V50-V59; V60-V69; V70-V79; V81; V82, and; V87.
• Number of children aged 0-17 on the Child Protection Register (rate per 10,000). .	• HSCB, Regional Child Protection Committee.	• No deprivation analysis is possible.	• N/A.
• Number of anti-social behaviour incidents recorded by the police (rate per 10,000).	• PSNI, Anti-social behaviour incidents recorded by the police.	• Most deprived = 20% of wards with highest deprivation score.	• N/A.

Appendix D: Notes on the development of indicators

Rationale for indicators suggested by stakeholders not taken forward

It is important to note that stakeholders who participated in the numerous workshops facilitated by NCB suggested other indicators, which after careful consideration were not taken forward. Examples of these included:

- *Infant mortality rates*: Analysis of the data suggested little overall difference between the 10% most deprived and 10% least deprived wards in Northern Ireland;

- *Immunisation rates*: The data show that the vast majority of children (c. 95%) have received immunisations. Therefore, significant differences between the most and least deprived wards would not be expected.

- *Proportion of children who feel safe in the area they live and proportion of children who have a safe and accessible place to play*: A number of stakeholders requested that indicators be included in relation to this area, however findings from the Young People's Attitudes Survey suggest that these are not an issue for the vast majority (c. 95%) of young people.

Data development agenda

Through extensive discussions and consultations, it became increasingly apparent that there were particular indicators that could be useful to include in the Outcomes Framework, however data for these indicators are either not available or not sufficiently robust to report. Examples of areas where stakeholders felt particular indicators would be useful include:

- *Persistent child poverty:* This is grouped under Outcome 1. We have been unable to source reliable data to illustrate whether particular groups of children are in poverty for five years or longer. This would be helpful data to have as it would illustrate the extent to which poverty is a particular concern for young people over a long period of time.

- *School readiness:* This is grouped under Outcome 2. In response to this gap, NCB NI us currently undertaking research to understand the various definitions of school readiness that are used both nationally and internationally. In addition, the research will examine the range of indicators that are currently used for measuring school readiness and will then put forward suggested possible indicators.

- *Literacy and numeracy levels:* This falls under Outcome 2. We are aware that there are several large-scale surveys that examine literacy and numeracy that provide useful data including PIRLs and TIMMs[22]. However, these surveys are only carried out every five years, which reduces their usefulness in terms of defining indicators. In addition, we are also aware that DEL undertakes an omnibus survey; however a satisfactory indicator which disaggregates data by deprivation quintile or decile could not be obtained.

- *Breastfeeding at six months:* This is grouped under Outcome 3: There was general agreement that this would be a preferable indicator to use in comparison to the breastfeeding at discharge from hospital. However, those who were consulted indicated that the data are incomplete and, in certain instances, not sufficiently robust to be used in the Outcomes Framework. As the recording of these data improves, this indicator may eventually be added to the Outcomes Framework.

In addition to the above, a number of stakeholders believed it would be helpful to have a number of other indicators further disaggregated to help focus on particular issues relating to the most deprived areas in Northern Ireland:

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[22] For more information see: http://timss.bc.edu/

- *Looked After Children (LAC) rates:* Whilst it would be expected that the number of LAC would be higher in socially deprived areas, this indicator has not been taken forward as we have been unable to source data to make comparisons between those areas that are most deprived and those which are least deprived. It would be helpful if this data could be disaggregated in a more meaningful way. We believe that this could be done using administrative data in a way that provides the information required (e.g. looking at the 20% most deprived wards vs. Northern Ireland average) without compromising anonymity.

- *Proportion of 16-24 year olds not in full-time education, training or employment (NEETs):* Currently, the data underlying this indicator is based on Labour Force Survey data which cannot reliably be disaggregated to look at the most socially deprived wards/SOAs. DETI may wish to consider actions that could be taken to enable more robust analysis to be undertaken in this respect, e.g. by boosting the survey sample.

Appendix E: Stakeholders consulted in the development of performance indicators

First Name	Surname	Department
Susanna	Allen	OFMDFM
Sharon	Beattie	Safeguarding Board NI
Lorraine	Boyd	NICVA
Tommy	Boyle	CSM, Early Years/Early Intervention, BHSCT
Jelena	Buick	Belfast City Council
Angela	Clarke	DSD
Jim	Clarke	CCEA
John Patrick	Clayton	CLC
Jennifer	Doak	DSD
Pauline	Donnan	OFMDFM
Jacqui	Frazer	Belfast Health Development Unit
Ian	Gallagher	Dept of Justice
Paul	Galway	OFMDFM
Paul	Gamble	OFMDFM
Tina	Gregory	Clan Mor Sure Start
Gorretti	Horgan	University of Ulster
Stephen	Jackson	Dept for Employment and Learning
Maurice	Leeson	CYPSP
Katrina	Lloyd	QUB - School of Education
Alasdair	MacInnes	DHSSPS Family Policy Unit
Valerie	Maxwell	CYPSP
Patricia	McIntyre	OFMDFM
Naomi	McLaughlin	DRD Central Statistics and Research Branch
Chris	McLaughlin	Dept of the Environment
Maurice	Meehan	Public Health Agency
Erin	Montgomery	DHSSPS
Oonagh	Neenan	Department of Education
Eilish	O'Neill	DSD
Ronnie	Orr	Public Health Agency
Joe	Reynolds	OFMDFM
Dave	Rogers	Dept for Employment and Learning
Janice	Scallon	OFMDFM
Dirk	Schubotz	QUB Young Life and Times Director - ARK
Paul	Scullion	Department for Social Development
Sybil	Skelton	Assistant Senior Education Officer, SEELB
Anne	Tohill	Department of Education
Mary-Anne	Webb	Barnardo's
Deirdre	Webb	Nursing (AHP)

Appendix F: Delivering Social Change signature projects

- **Additional literacy and numeracy measures (Department of Education):** An additional 230 recent graduate teachers, who are not currently in permanent work, will be employed on a two-year fixed term contract to deliver one-to-one tuition, where appropriate, for children in primary and post-primary schools who are currently struggling to achieve even basic educational standards. Each teacher will work with a number of schools to deliver a minimum of 25 one-to-one tuition sessions, where appropriate, every week. A total of 80 teachers will be employed to support basic reading and maths skills at Key Stage 2 in primary schools and 150 teachers will be engaged with post-primary schools to support pupils in Year 4 and 5 in attaining a minimum of a C in GCSE English and Maths, where the school feels this is not likely without intervention. The impact of this initiative will be measured over the course of the next 2 years. Recruitment will start as soon as possible and teachers should be in place very early in the New Year.

- **Family Support Hubs (Department of Health Social Services and Public Safety, DHSSPS):** DHSSPS will take forward the establishment of ten Family Support Hubs over the next two years. These are coalitions of community and voluntary organisations and agencies which provide early intervention services for children and young people locally in order to enhance awareness, accessibility, co-ordination and provision of Family Support resources in local areas.

- **Parenting programmes/services (DHSSPS):** DHSSPS will take forward additional high quality support to new and existing parents living in areas of deprivation through positive parenting programmes. This would include potentially engaging 50 additional health workers on a two-year basis to support this work and will provide guidance, training and information for up to 1200 families.

- **Social Enterprise Incubation Hubs (The Department for Social Development (DSD) /Department of Enterprise Trade and Investment (DETI))**: DSD and DETI will take forward the development of approximately 10 Social Enterprise Incubation Hubs servicing areas of multiple deprivation over a two- year period. This is designed to tackle dereliction and community eyesores but also the lack of local employment by encouraging social enterprise business start up within local communities.

- **Community Family Support Programme (Department for Employment and Learning (DEL)):** DEL is to scale up and roll out the pilot intervention to support young people Not in Education, Employment or Training (NEET) in developing skills and linking them to the employment market through structured programmes and projects. DEL's pilot currently targets 20 families (10 rural and 10 urban). The intention would be replicate this model and increase the target number of families to 500.

- **Nurture units/groups (Department for Social Development (DSD)):** DSD along with Department of Education are to take forward and fund an additional 20 Nurture Units to be rolled out across Northern Ireland in addition to the 7 nurture units already being rolled out by DSD. These units are based within schools with specialists that work with targeted children to provide support, encouragement and help. The pilot run by DSD so far has shown significant improvements with young people engaging in the Nurture Units.

Appendix G: Members of Advisory Group

Representative	Organisation
Anne Moore	Save the Children
Arlene Connolly	Department of Finance and Personnel (DFP)
Celine McStravick	National Children's Bureau (NCB)
Dave Wall	Department for Social Development (DSD)
David Burnby	Independent consultant
Gorretti Horgan	University of Ulster (UU)
Helen Campbell	Centre for Applied Learning (CAL)
Lorraine Boyd	Northern Ireland Council for Voluntary Action (NICVA)
Paddy Hillyard	Queen's University of Belfast (QUB)
Paul Galway	Office of the First Minister and deputy First Minister (OFMDFM)
Paul Gamble	Department for Culture, Arts and Leisure (DCAL)
Pauline Donnan	OFMDFM
Richard Nugent	NCB
Roger Bushel	Centre for Excellence and Outcomes (C4EO)
Stephen Jackson	Department for Employment and Learning (DEL)
Tony Kavanagh	Department of Justice (DOJ)

Improving children's life chances

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