

## Anti-social Behaviour Intensive Family Support Projects

### **An evaluation of six pioneering projects for families at risk of losing their homes as a result of anti-social behaviour**

*“Intensive family-based interventions are essential if the deepest-rooted anti-social behaviour (ASB) problems are not simply to be recycled from area to area”*

(Home Affairs Select Committee, 2005)

### 1. Introduction

The Government’s strategy to develop sustainable solutions to anti-social behaviour (ASB) is based on a ‘twin track’ approach involving both action to address the underlying causes of problem behaviour and the use of appropriate sanctions to support and protect the wider community.

This report addresses the former of these concerns and presents the findings from a two-year evaluation of six Intensive Family Support Projects (IFSPs) pioneering a new way of working to support ASB ‘perpetrators’ to change their behaviour. The research, funded by the Office of the Deputy Prime Minister, now the Department for Communities and Local Government (DCLG), was undertaken by a team of specialist researchers at Sheffield Hallam University. The study draws on a wide range of quantitative and qualitative data to evaluate the six intensive family support projects in terms of effectiveness, costs and benefits and lessons for wider dissemination.

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## Key Findings

- IFSPs form part of local well developed, comprehensive ASB strategies providing a range of services to families at risk of eviction as a result of ASB. Most commonly projects provide outreach support to help families maintain their existing accommodation but for those requiring more intensive supervision families may be offered core residential units run by the projects.
- The three most common types of ASB associated with families at the point of referral were: Youth nuisance (70%); general neighbour conflicts and disputes (54%); and property damage (43%).
- In six out of ten families (60%) as well as being ‘perpetrators’ of ASB family members were also reported by project staff/referral agencies as being ‘victims’ of ASB.
- The families referred to the projects:
  - were large, 62% had three or more children;
  - two thirds (68%) of families were headed by single women;
  - family members were found to have multiple support needs which in many cases had not been adequately addressed by other agencies;
  - just under half (47%) of families were affected by interpersonal and/or intergenerational violence;
  - in four out of ten families project workers assessed there to be a risk of family breakdown with specific concerns about the ‘vulnerability’ of children recorded in relation to eight out of ten families (79%);
  - a sixth of families were already homeless at the point of referral with nine out of ten of the remaining families at risk of losing their current accommodation.
- For most families the ‘optimum’ referral point was prior to the commencement of legal action although for those offered core residential accommodation referrals could successfully be made at a later stage.
- The broad multi-disciplinary nature of project interventions helped family members to achieve remarkable changes. For more than eight out of ten families at the point at which they exited the

project complaints about ASB had ceased or reduced and tenancies were stabilised resulting in a reduction in the risk of homelessness.

- The cost analysis of the IFSPs indicates that this form of intervention offers excellent value for money.

## Intensive Family Support Projects

During 2003, six pioneering local authorities, working closely with housing associations and charities, established a number of dedicated ASB Intensive Family Support Projects (IFSPs). While each of the schemes has been developed in response to locally-identified needs, they share a number of common features:

- Project interventions are designed specifically to help support families who have been evicted or who are under threat of homelessness due to ASB displayed by themselves or visitors to their homes, to change their behaviour.
- Projects aim to break the cycle of poor behaviour and homelessness; bring families back into mainstream housing; help children and young people who are perceived to be out of control; and/or provide an alternative solution where other ASB interventions have failed.
- The model of provision is based on the work undertaken by the Dundee Families Project run by NCH in partnership with Dundee City Council (Dillane, 2001) with projects providing a range of services including some or all of the following types of intervention:
  - outreach support to help families address behavioural and other problems in order to maintain their existing accommodation;
  - outreach support in dispersed tenancies managed by the project;
  - intensive support in *core* residential accommodation<sup>1</sup> managed by the project.

Five of the six projects have been developed by NCH (North West) in partnership with authorities in Blackburn with Darwen, Bolton, Manchester, Oldham and Salford, to deliver an outreach, preventative service to reduce the dependency on legal remedies to tackle ASB exhibited by families. Services provided in Bolton and Manchester also include a core residential unit for families considered to be in need of more intensive support

<sup>1</sup> Of the 157 families working with projects during 2004–05, 11 families were provided with support in core residential units while the remaining 146 received outreach/dispersed support.

and it is proposed that a further core residential unit will be opened in Salford during 2006/7. The sixth project included in the evaluation was established by Sheffield City Council. The dedicated ASB high support service provides both core residential accommodation and dedicated outreach support mainly to families living in dispersed tenancies.

The majority of IFSP funding was provided by Supporting People<sup>2</sup> (with some projects receiving all their funding from this source). Small amounts of additional funds were accessed from a variety of other sources including Children's Fund and Social Services.

## What types of Anti-social Behaviour are the projects are dealing with?

At the point of referral, a wide range of different types of ASB were noted in connection with family members. While some allegations involved criminal behaviour, the majority of cases concerned low-level but persistent nuisance behaviours. The cumulative impact of such

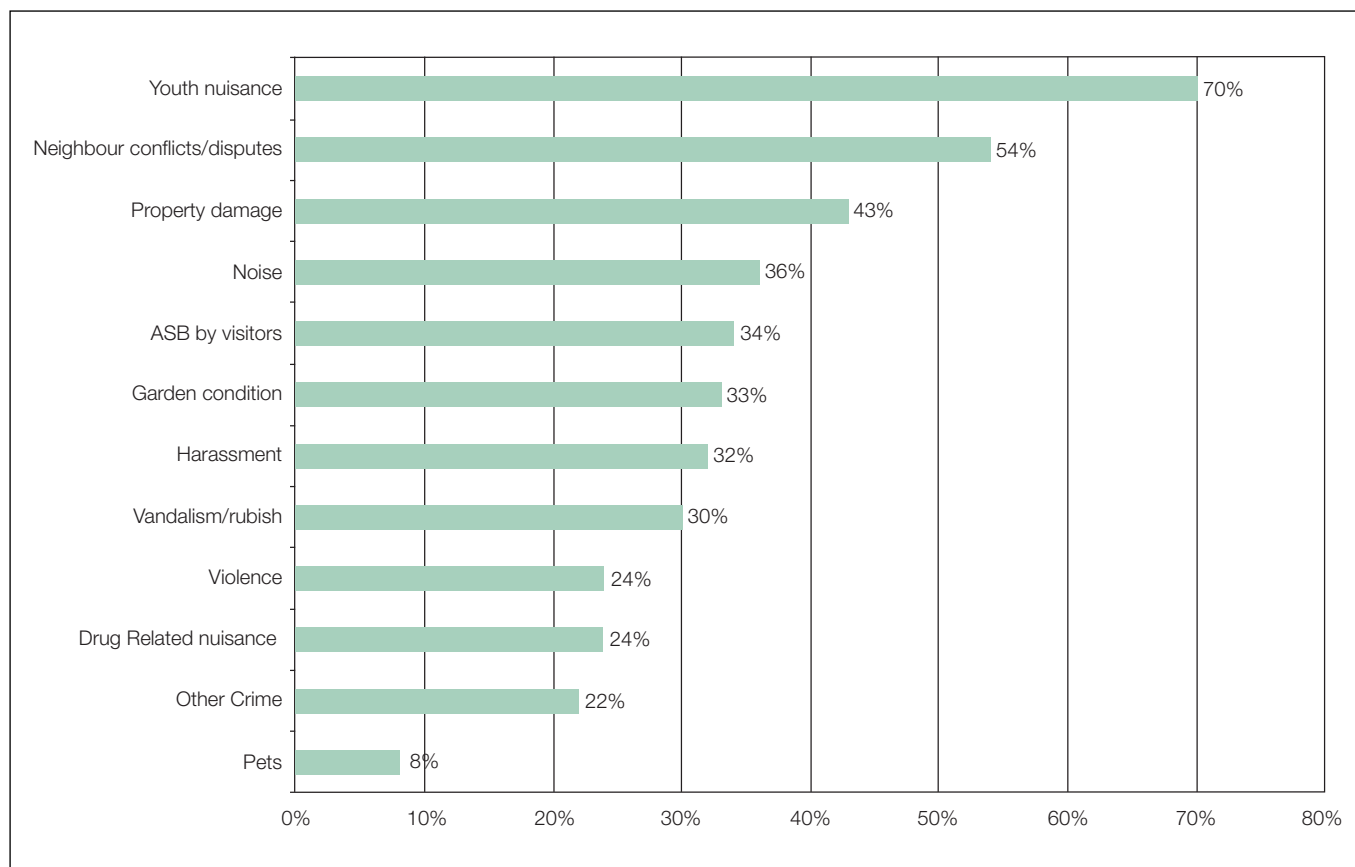
behaviour on neighbours should not, however, be underestimated. An indication of the serious nature of the problem is reflected in the fact that seven out of ten families had received a verbal or written warning of impending possession action as a result of their behaviour. The three most common types of ASB associated with families were:

- Youth nuisance: 70%
- More general neighbour conflicts and disputes: 54%
- Property damage: 43%.

Differences were recorded in the types of ASB families were reported to be involved with according to a number of different factors including size of family, the age of children, and the project locality.

Reflecting the complex and often contradictory way in which behaviour is judged families' perceptions about the impact of their behaviour on their neighbours and the wider community varied both between families and over time. With the benefit of hindsight and following a period of intense work with the projects, many service users acknowledged the damaging impact of past

**Chart 1: Types of anti-social behaviour complaints**



<sup>2</sup> Supporting People is a Government programme which enables the provision of housing related support services to help vulnerable people maintain or improve their ability to live independently.

behaviour. At the same time, however, family members commonly disputed the validity of either all or some of the claims made against them, which had left them with a sense of unfairness that they had been singled out for action by agencies. In part, service users' reluctance to apply the term ASB to their own behaviour was informed by the negative connotations associated with the term. Project staff, referral agencies, and other key stakeholders were also hesitant to describe families as being 'anti-social' and clearly articulated the need to restrict the use of the term ASB to describe specific behaviours rather than employing it as a generic description of people.

Evidence of the complex, multi-layered reality of ASB was reflected in the finding that, as well as being 'perpetrators' of ASB, six out of ten families (60%) were reported by project staff and/or referral agencies to be 'victims' of ASB. This finding strengthens the emerging evidence that it is not always possible to clearly distinguish ASB 'perpetrators' from 'victims' (Jones et al, 2006) and highlights the need for agencies investigating complaints to develop well-defined investigatory policies and processes to ensure that all those involved in ASB cases are dealt with fairly and effectively.

## The profile of families referred to projects

Families referred to the six projects shared a number of key characteristics:

- Most typically families referred to the projects were large, with 62% (97 households) comprising of three or more children. Reflecting local demographic trends, projects operating in large metropolitan areas tended to have the highest concentrations of very large (4+ children) families.
- Over the evaluation period, changes were noted in the ethnic composition of families referred to the projects. When the projects were first established referrals predominantly involved white British families. By 2005, a greater diversity in referral patterns was noted with service users broadly representing the national profile of Black and Minority Ethnic (BME) populations living in social rented housing. However, when measuring referral patterns against local demographic profiles in some areas, particularly where the local BME population was higher than the national average,

BME families were still found to be under-represented in the sample of service users.

- Families referred to the projects were characterised as having high multiple support needs, which in many cases had not been adequately addressed by other agencies. A wide range of health-related difficulties was prevalent amongst family members, with poor mental or physical health and/or substance misuse affecting 80% of adults. Depression was the most widespread problem affecting 59% of adults, with other mental health problems – such as schizophrenia, obsessive compulsive disorder, anxiety, and stress – affecting adults in a further fifth (21%) of families.
- High levels of family violence were associated with families. In almost half of families (47%) referred to the projects a family member was suffering from a history of, or currently being subjected to, intimate partner violence or intergenerational violence. This issue, although very debilitating, was rarely seen as the main problem and was often referred to by both family members and other key workers as a marginal problem, with lone parent women in particular reporting finding it hard to access support in dealing with violence in the home.
- High levels of previous experiences of homelessness combined with chaotic and, in some cases, dysfunctional lifestyles were reflected in changes in family composition. The risk of family breakdown was assessed by project workers as being exceptionally high, with four out of ten families (40%) deemed to be at risk in some way.
- Children working with projects were amongst the most disadvantaged in the country. A high incidence of behavioural problems was noted by project workers with for example, Attention Deficit Hyperactivity Disorder (ADHD) affecting children in as many as one in five families as compared to the national average which predicts that ADHD is likely to be prevalent in between 3% – 8% of school-age children (Mytars, 2001; DfES, 2004). Concern over the welfare of children was reflected in the finding that in nearly eight out of ten (79%) families project workers assessed at least one child to be 'vulnerable', while in 20% of families one or more child/ren were on the child protection register. At the point of referral project workers assessed the risk of children being taken into care as exceptionally high, with children in 38% of all families considered

to be at a high or medium risk of being taken into care.

## The referral process

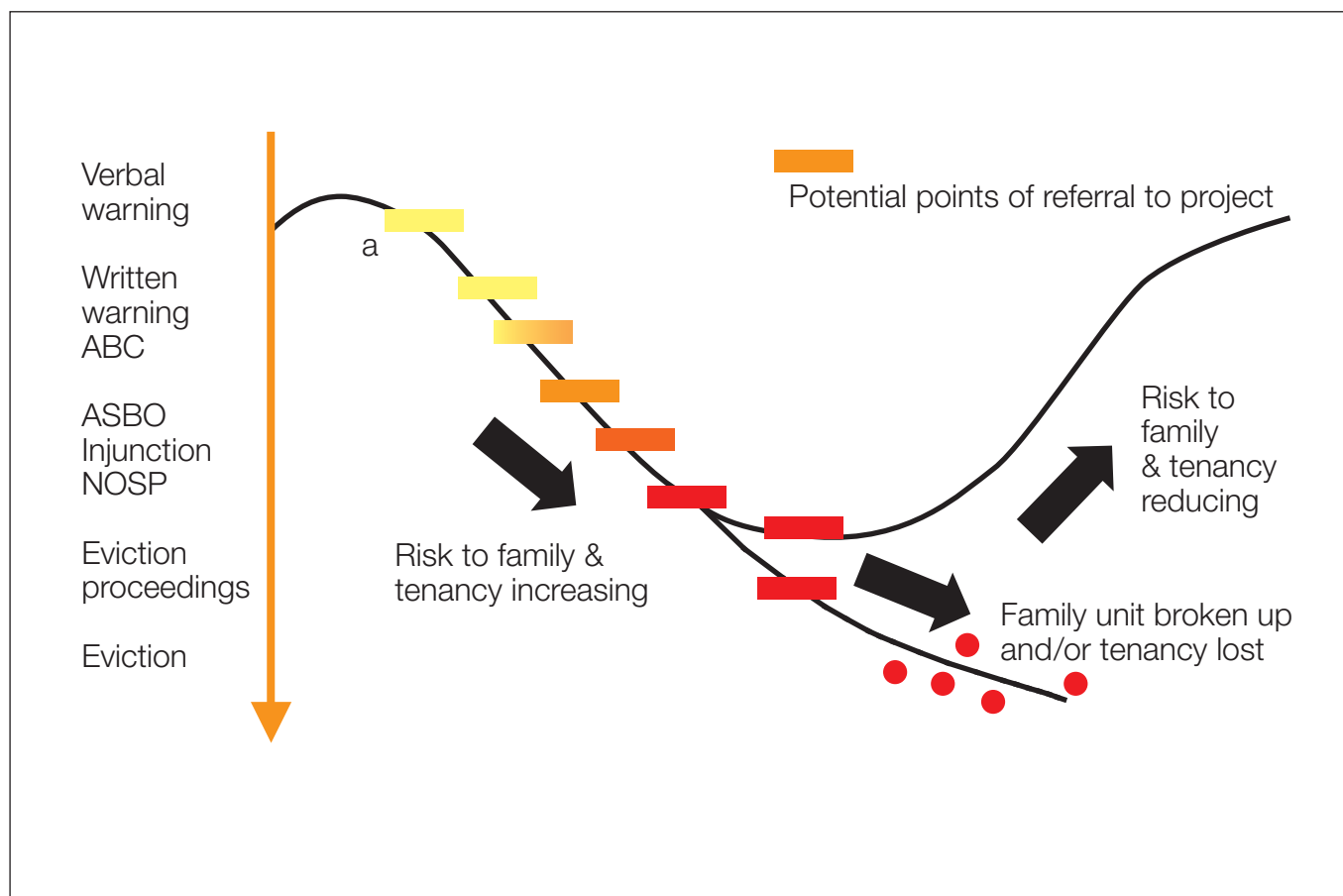
When referred to the projects, 14% of families were living in non-secure accommodation (ie they were statutorily homeless or at immediate risk of becoming so), while of the remaining referrals just under nine out of ten (89%) families had some form of threat to their tenancy. These threats included warnings (both verbal and written) from the landlord about conduct and action to tackle behaviour, such as an acceptable behaviour contract (ABC) or anti-social behaviour order (ASBO). Although these latter measures may not be a direct threat to the home, non-compliance may, sometimes, result in eviction action by social landlords.

By 2005, when all the projects had been running in some form for about two years, good relationships had been developed with local community safety

and housing agencies and referrals were received from an ever-increasing range of agencies. The families referred predominantly lived in social housing, although again, over the life of the projects, greater diversity had emerged, with increasing numbers from private rented housing and a small number (three) of owner-occupiers. Those projects with a diverse range of referral agencies also tended to display a more diverse range of tenure amongst their clients.

The optimum point of referral for outreach work was identified as being prior to the commencement of legal enforcement action. For those with core or dispersed units, the optimum referral point may be later because, when families are either being asked to give up their existing accommodation to move into non-secure accommodation and/or are being asked to undertake the type of intensive supervision which takes place in core units, a more severe risk to the home may be required to effect their engagement with the project.

**Chart 2: Optimum points of referral**



## Multi-agency working and the multi-disciplinary nature of the projects

The multi-disciplinary nature of the project teams was viewed as a key strength and facilitated a broad range of responses to the multiple needs of the families. Direct work with families involved the construction of tailor-made support plans appropriate to the specific circumstances of individual family members. Methods of engagement with family members were informed by a number of shared guiding principles which included treating the family with respect, listening, being non-judgemental and accessible while also ensuring that the approach adopted was challenging consistent, and honest. Empowering families through building confidence and skills appeared to be a significant factor in promoting positive change. The projects also had a critical role in inter-agency working and negotiation to maximise the effectiveness of existing services for the benefit of the families.

## The experience of living in project core residential accommodation

In addition to working with families in their own homes, three of the six projects provided a more intensive form of intervention based around residential core units, flats housed within a project's premises and managed directly by the project. Families living in core accommodation were required to adhere to a set of rules and regulations. These varied between projects, but usually required children and adults to be in the accommodation at a set time in the evening; restricted access in and out of the project building where the flats were located; visitors by permission only; plus specific rules deemed appropriate for particular families.

Families referred to the core units tended to have multiple and more complex needs than those provided with outreach support. For example, families living in project residential units were three times more likely to have been served with an eviction notice or Suspended Possession Order at the point of referral than those provided with outreach support. Further, just under two thirds of those living in core accommodation reported that they had previously experienced homelessness in the recent past, compared with just over one-third of families supported on an outreach basis.

Providing the most 'challenging' families with highly structured, residential support was seen as one of the toughest elements of project interventions. The potential benefits of this type of intervention were recognised by project managers, other key stakeholders, and indeed families themselves. However, it was also acknowledged that residential support was both very resource-intensive and a high risk activity, with residential accommodation only being suitable for a limited number of families. The decision as to whether or not to develop this resource-intensive form of provision could only be determined by reference to local service priorities and it should not be seen as a generic requirement for all family support projects.

### Case Study 1 – Core residential accommodation

Sarah, a single mother with four children aged from 18 to 12 suffers from severe depression and Obsessive Compulsive Disorder. Two of her children had been diagnosed with Attention Deficit Hyperactivity Disorder; one had been excluded from school, while the other, who also suffered from a bone tumour, was withdrawn and had suicidal tendencies. Her eldest son was violent and abusive towards Sarah and, at the point that the family were referred to the IFSP, had left home. The trouble started when the eldest children became closely involved with a criminal gang and the family were the subject of numerous complaints about gang fights, noisy, threatening abusive behaviour, and criminal damage. Gang warfare resulted in the family becoming the target of retaliatory action involving criminal damage, intimidation, and burglaries, culminating in Sarah being raped by a gang member. Sarah had no choice but to leave her home and take her children to an emergency Refuge accommodation in a nearby town. This move however, resulted in her getting into arrears with rent payments as a result of which her landlord took eviction proceedings. Sarah was then referred to an IFSP who provided her with intensive support. After living in core residential accommodation for over two years Sarah obtained work and she and her family are now living peacefully in the community with no further complaints about anti-social behaviour.

## The impact of projects interventions

Intensive family support projects are targeting interventions at families who are amongst the most disadvantaged and needy families in the country. ASB was only one symptom of the dysfunction in many of these families, with ill health, school exclusions and family breakdown all contributing to the marginalisation of the family members. Given the levels of need associated with families referred to the projects, it might be anticipated that project interventions would only be partially successful. This was not the case. Indeed, the study findings relating to outcomes at the point at which families left the service indicate that, for the vast majority of families, the projects had helped them achieve remarkable changes:

- in more than eight out of ten families (85%), complaints about ASB had either ceased or had reduced to a level where the tenancy was no longer deemed to be at risk at the point where the family exited the project;
- moreover, project workers assessed that in 80% of cases families' tenancies had been successfully stabilised with an associated reduction in the risk of homelessness;
- while it was beyond the scope of the evaluation to carry out an independent assessment of the impact of these changes on the wider communities in which families lived, in 92% of cases project workers assessed the risk to local communities had either reduced or ceased completely by the time families left the project.

Further evidence of the beneficial impact of intensive family support projects was reported in relation to children's needs. Project interventions to support children were framed within the Every Child Matters Outcomes Framework and over the evaluation period significant improvements in children's health, well-being and educational attainment were recorded.

While no single project model or 'blue print' could be identified with each of the six projects crafting specific interventions to reflect local priorities and practices, the very positive outcomes associated with this type of intensive provision were similar across the sample of projects. Further analysis of the specific interventions employed across the six projects identified a number of shared guiding principles that underpinned the work:

- employment of a multi-disciplinary and multi-agency focus embedded within local ASB partnerships;
- provision of intensive interventions sustained over a considerable length of time with outreach support often required for 6+ months and residential support for 1-2 years;
- the ability of project workers to challenge individual family members based on the professional values of listening, being non-judgemental, promoting well being, and establishing relationships of trust.

### Case Study 2: Project outcomes – “I don't know what you've done, but it's marvellous”

At the point of referral to the project, Jane a single mother, with three children was described by the local neighbourhood community beat officer as having '*gone off the rails*'. No single agency had '*had taken ownership of the problem*' and as a result the family had '*fallen through the net*'.

The problem behaviour started when Jane moved into private rented accommodation located in a neighbourhood with a good reputation. Her eldest daughter, who was pregnant, was in a violent relationship with a drug dealer; her younger daughter was exhibiting poor behaviour at school and was bullying others. Jane's son, who was suspected of taking part in a number of thefts and burglaries, had spent some time in care. When he returned to live with the family he did not get on with Jane's new partner and as a result Jane's partner moved out. This event was described by the community beat officer as '*sending Mum into turmoil. She ended up not going to work. Started drinking, having parties, trying to get another fella really, having people around.*'

Shortly afterwards, Jane's eldest daughter lost her baby due to a cot death. Over eighteen months numerous complaints were made about noisy parties, allegations of drug dealing from the premises, reports of people threatening neighbours with baseball bats, and cars coming and going at all times of day and night. At the point of referral to the project, the neighbours, who were described as '*highly motivated educated people*', had made numerous reports to the police, the local MP, and the local paper and wanted the family moved. The project worker worked closely with each member of the family to address the underlying problems. Jane was

## Case Study 2: Project outcomes – “I don’t know what you’ve done, but it’s marvellous”

(continued)

provided with support in developing parenting routines and structures; her son was assisted in getting a job as a YTS mechanic and was helped with budgeting skills; a system of rewards was established to address the younger daughter's aggressive and bullying behaviour. Following six months of intensive work with the project the changes that were achieved were remarkable and resulted in neighbours writing to the local beat officer saying: “I don’t know what you’ve done, but it’s marvellous”.

Source: Community Beat Officer

## The costs and cost consequences of project interventions

The cost analysis of IFSPs shows that the projects, which in most cases did not reach maturity during this period of analysis, offer excellent value for money as they have the potential to reduce considerably the short-term and longer-term costs of many agencies, including those providing services relating to housing, criminal justice, policing, education, and health. In addition, they deliver many intangible benefits to the families – such as keeping families together and improving their quality of life and their prospects – and to society – for example, by making neighbourhoods and communities safer and more pleasant places.

The average total cost per closed case ranges from £3,954 – £5,991 in 2003/04 for the four projects that did not have a core unit during this time and from £4,913 – £12,940 in 2004/05 (the value for the project that opened a core unit during this year is within this range). The average total costs per closed case for the projects with a core unit throughout the period were £22,663 in 2003/04 (one of the projects did not close any cases during this year) and ranged from £27,214 – £36,580 in 2004/05.

To determine if the projects offer value for money, it is necessary to consider what costs may have been incurred in both the short-term and the longer-term had these projects not intervened to stabilise tenancies and prevent ASB. Potential costs prevented in the short-term include those associated with tenancy termination, the costs of foster care or residential care for children, and costs relating to criminal justice (such as those of being in a young offenders’ institute). Costs due to ASB and

domestic violence will also be reduced. A family evicted for ASB with three or four children requiring custodial care, residential care and foster care can easily cost the Exchequer £250,000 – £330,000 in a year (Ward et al; 2004). Longer-term costs include those of social exclusion and of not having appropriate skills or qualifications for regular employment with reasonable earnings, leading to a lifetime of benefit dependency. Such effects can be inter-generational, so the potential longer-term benefits of sustaining tenancies, reducing ASB and keeping families together will be considerable. It is also important to recognise that the projects are likely to have an impact on expenditure by other Exchequer-funded services (eg the NHS, education) as previously unrecognised or unmet needs are identified and addressed, but these costs are also expected to be considerably less than the subsequent costs of not addressing these problems.

## Service Focus: lessons from the evaluation

The Intensive Family Support Projects involved in this study afford access to, or themselves deliver directly, multiple services to address the multiple problems of their service users. The research emphasises how projects, ostensibly with the same remit and several within the same organisational regime, have been shaped by their local context. The full evaluation report outlines the similarities and differences between projects that have shaped the difficulties experienced and the solutions put in place to address these issues. Advice for those who are seeking to establish such projects in the future is given in the form of potential difficulties and examples of good practice that have helped in securing viable and effective rehabilitation projects over the last two to three years.

## Conclusion

The study findings make a significant contribution towards improving knowledge and understanding about the underlying causes of ASB. They also provide a robust evidence base to further the development of the Respect Action Plan 2006, in which multi-agency interventions to address the underlying causes of ASB have been given prominence. In particular, it is hoped that the study findings in relation to the most effective and beneficial approaches will inform the Government’s proposed national roll-out of a network of intensive family support projects.



## The Research

The evaluation of ASB Intensive Family Support Projects is being undertaken by a team of researchers led by Judy Nixon from the Centre for Social Inclusion at Sheffield Hallam University. A wide range of data collection methods have been employed, including documentary analysis; detailed monitoring of projects closed case files from 2003/04 and 2004/05; interviews with service users (children and families), project managers, project workers, and key stakeholders in each of the six case study locations; analysis of annual accounts and tracking a small number of families to explore the costs and wider benefits associated with the projects.

The findings in this summary report are based on analysis of statistical data collected from project case files in relation to 256 families, consisting of 370 adults and 743 children, who had worked with the six projects during the period 2003-2005. This quantitative data have been supplemented by qualitative data drawn from interviews with a sample of service users (both adults and children), project staff, referral agencies, and other key stakeholders.

## Acknowledgments

Our thanks are due to all the people who have agreed to take part in the evaluation and who have given their time and energy so generously. In particular, we would like to express our thanks to the project managers and project workers who have facilitated access to case file records and have introduced us to service users. Finally we would like to thank all the members of families who agreed to take part in the study and to share their experiences with us, without their help it would not have been possible to undertake the work.

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## Further Information

A copy of the full report, *Anti-social Behaviour Intensive Family Support Projects: An evaluation of six pioneering projects*, on which this summary is based, is available on the DCLG website:

[www.communities.gov.uk](http://www.communities.gov.uk).

A further report outlining the longer-term impact of project interventions will be published in 2007.

Further copies of this summary are available via the DCLG website or from:

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