#### DEPARTMENT OF FAMILY AND COMMUNITY SERVICES

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# A meta-analysis of the impact of community-based prevention and early intervention action

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# **Preface**

This study was commissioned by the Department of Family and Community Services (FaCS) in December 1999 and was largely completed by February 2000. Given the timeframe involved, it was challenging to cover all the literature addressing the impact of community-based prevention and early intervention action. Inevitably, judgements had to be made as to what to include and what to leave out. The basis for these judgements is addressed in some detail in Chapter 1. These judgements involved decisions as to both topics to be covered and coverage within topics. Therefore this study is not comprehensive in the sense that it covers all possible topics where community-based prevention and early intervention action is evident, nor does it exhaustively review all literatures that address such action.

However, the authors believe that the topics covered and the literature surveyed are sufficiently comprehensive to provide a good guide to the empirical assessment of the effectiveness of community-based prevention and early intervention programs. The authors hope that the study will therefore provide a guide to policy formation, while recognising that further research will be required in order to intensify and extend our knowledge about the likely effectiveness of such programs.

# **Executive summary**

This study posed two principal questions of the Stronger Communities element of the Commonwealth Government's Stronger Families and Communities Strategy:

- What is the evidence that prevention and early intervention programs promote the development of stronger communities and create measurable positive social outcomes?
- What is the evidence that there is a cost-benefit to be achieved by government supporting such programs?

Substantial evidence to answer these questions is presented in the report. From this evidence, it may be concluded that:

- prevention and early intervention programs do contribute to the promotion of strong communities and to positive social outcomes—furthermore, they do so in a way that enables communities to continue to deal with issues through their own resilience and capacities; and
- prevention and early intervention programs contribute to community building and positive social outcomes in a cost-effective way—in many instances, these cost-benefits are demonstrably cumulative.

A large number of programs are reviewed and the evidence from cost-benefit analysis shows that a wide range of programs are successful both in terms of their dollar value as well as building stronger and healthy communities. Many studies highlight the economic savings that can be achieved through prevention and early intervention.

As well as the economic benefits, many programs referred to outcomes that are linked both directly and indirectly to the stronger communities' indicators—that is, knowledge and community skills, including volunteering; networks and partnerships in communities; leadership in communities; local solutions to local problems; and community capacity to use best practice.

Many of the programs surveyed were developed in response to particular social indicators (such as juvenile crime, poor educational achievement, homelessness) rather than being established with the primary objective of strengthening communities. In addition, most programs were delivered within a context narrower than the broader community—for example, schools, families. Notwithstanding, explicit links to the broader community was a critical component to the success of many programs. Therefore, programs delivered in environments such as schools and families are capable of producing outcomes that contribute to stronger and healthier communities. Further examination is warranted of prevention and early intervention as strategies for community building that focus on strengthening communities as a means of developing social capital.

Some specific conclusions may be drawn from the various areas covered in this study.

# **Community wellbeing**

The analysis of community wellbeing (the physical, mental and social wellbeing of people) showed that there is increasing recognition of the importance of community participation and the role that community groups play in developing healthy communities. In particular the analysis shows:

- the building of trust and reciprocity leads to an increased social capital, which is an important ingredient of healthy communities; and
- there is significant research to support the notion that people with diverse networks of quality relationships are healthier than people who are socially isolated.

Keys to building healthier and therefore stronger communities are:

- structures in place to identify community leaders and other highly-motivated community members: and
- the inputs of relevant professionals working in the community are mobilised and where these skills are utilised in a multi-disciplinary framework.

The building of social capital through community-based programs is also facilitated where opportunities exist:

- to enable skills development in areas such as organising groups, running meetings, lobbying, the writing of grant applications, and so on;
- to enable the identification of funding sources and the capacity to bid for these funds; and
- to build better links with other community groups and organisations, to publicise achievements and, in turn, to access information about other communities' achievements.

# Early childhood and families

The literature reviewed clearly establishes the benefits of community-based early childhood and family prevention and intervention programs. The benefits arise from both the cost effectiveness of many of the programs as well as in building stronger and healthier families and, in turn, stronger and healthier communities. The premise for early childhood prevention and early intervention programs is the recognition that a child's development in the first few years of life sets the foundation for life-long learning, behaviour and health outcomes.

It is apparent from the review of the literature that:

• a combined approach which links community-based programs with individual prevention and ameliorative programs targeted at at-risk children provides superior outcomes;

- similar conclusions can be drawn for family support programs—community-based programs build resilience and protective factors which address the structural causes of disadvantage in ways which are not addressed by individual programs alone;
- by building social networks and empowering communities, self-reliance and protective factors are strengthened (and there is some evidence that dependency on individual programs is thereby reduced); and
- because of the complexity and multi-dimensional nature of many social problems affecting children and families (for example, child abuse, maltreatment, and so on ), community-based initiatives that are integrated with government programs, and which address combinations of problems, are likely to produce more socially and cost-effective results.

The study shows the importance of prevention and intervention programs that are initiated early in the child's life. This is for three reasons:

- When programs are directed at families with children who have yet to complete primary school, they are more effective in terms of social outcomes (such as reduced substance abuse, reduced maltreatment, reduced future involvement with the justice system, increased school completion rates, future employment and so on).
- Considerably greater cost-benefits may be seen in terms of program expenditure per participant.
- The importance of education and schools is emphasised, as is the importance of the active involvement of parents and other primary care givers.

# Young people

There is overwhelming evidence that for many community-based programs directed at the early prevention of social disadvantage through unemployment or homelessness and/or antisocial behaviours in young people, economic and social benefits are delivered way in excess of the costs of the programs. Key factors which contribute to effective programs are that:

- it is important that programs address the 'whole-of-community'—society-wide social and
  economic forces which impact upon young people make it difficult for some of them to
  avoid the risk factors which lead to unemployment or homelessness or to destructive or
  anti-social behaviours; and
- whole-of-person and whole-of community approaches which coordinate appropriate service delivery are more likely to address these society-wide factors through building resilience and protective barriers.

A dominant theme in the literature was the claim schools are critical in terms of laying the foundation for healthy participation in society. 'Instructionally-effective' schools are also effective in reducing the potential for individuals to engage in delinquency. In addition, such

schools increase the chances of achieving the educational and social skills necessary to enter employment and to avoid marginalisation.

In the area of crime prevention, early intervention is crucial:

- in minimising future involvement as an offender in the criminal justice system—the more that young people become involved in the criminal justice system, the more likely it is that they will continue to offend; and
- in reducing the costs of crime—both prosecution of crime and incarceration are expensive and far in excess of the cost of effective prevention and early intervention programs.

#### In addition:

- Small size programs (with small caseloads) appear to be more effective than larger scale programs.
- Programs that include job training appear to reduce recidivism, as well as reduce substance abuse and other destructive behaviour.
- Such programs also tend to engender a preference for work over welfare.

## Seniors and intergenerational programs

Seniors are often addressed by social policy as the recipients of services. While this is important, it is not the whole picture. Seniors also embody much accumulated social capital, and they often exercise local leadership and provide a major source of voluntary effort. The conclusions which may be drawn from the evidence are that:

- programs to facilitate seniors contributing voluntary effort in the community are most effective when they receive infrastructure funding and when they are organised or coordinated;
- the levels of funding for volunteer activities are low relative to the costs of professional services:
- the work that can be performed is of a different nature—however, there are benefits arising from the voluntary work of seniors that augments professional effort;
- there are the positive gains for seniors themselves from having an active and valued role;
   and
- some programs have quantifiable cost-benefits in the short-term (first order), while all have predictable longer-term cost-benefits, although these are less easy to quantify (second order)—however, it is clear that these longer-term benefits are key elements of stronger communities and the development of social capital.

#### **Overall summary**

Although there are some quite significant differences between the four major areas of programs that have been examined in this study, there are also several key issues that may be identified as general findings that span the field.

First, there is a clear predominance of programs either based in schools or working through schools as a community resource. Not only are schools essential for the development of future generations of citizens (investing in social capital), but also schools are a focal point for most communities. Networks develop around focal points, shared interests and opportunities for people to meet.

Second, best practice in prevention and early intervention and best practice in community building have much in common. Not only are prevention and early intervention best located in community settings and most effective when they respond to local conditions, but community building too may be more effective when it is addressed at the early stage of identifying community problems.

Third, inheritance of social capital requires that it is actively 'passed on' between generations and nurtured by older members of communities. The intergenerational programs discussed should not be seen in isolation, but many of them could be viewed from the perspective of the other main areas. Communities consist of all generations and strong communities show evidence of positive intergenerational relationships.

Fourth, community involvement and participation is a factor in all community-based programs. This includes local leadership, volunteering, civic trust, networks and partnerships between people and between institutions. Where professionals are involved, they are more effective from a community-building perspective if they respond to local context, work in multi-disciplinary ways and adopt facilitative approaches as much as possible. It is also an indicator of strength in communities when the various sectors (government, business, non-government welfare, community groups and individuals) work together towards positive social outcomes.

Fifth, government support for programs is appropriate for two reasons. It is important as seed money, especially in communities where the erosion of civil society can be seen to have had an impact (through rising crime rates, high levels of child abuse, isolation of seniors, and so on). At the same time, there is strong evidence that by adopting an active role in community building, there is great potential for government to make downstream savings on the projected levels of spending on resolving social problems. Early intervention programs that encourage community building are cost-effective.

Sixth, although many of the programs reviewed in this study have a family focus, this is not in contradiction with community building. The programs that were examined all achieve the promotion of stronger communities, and many of them do so through the interventions with families on which they are based. Families are a key element to strong communities because they are a primary building block of the social fabric.

Through a meta-analysis of available evaluative literature, this study has demonstrated the value of prevention and early intervention programs. These are a key dimension to promoting stronger communities that display the characteristics of a civil society in which social capital is nurtured for the benefit of the whole community.

# 1. Introduction

# 1.1 Social capital and early intervention—strengthening communities

#### Social capital and civil society

Recent debate around the issues facing contemporary society has identified the fragmentation of communities and related challenges to families as a central concern. Cox (1995) defines the core 'problem' as that of the weakening of social capital, with the associated need for policy to address this and to strengthen communities by promoting the growth of social capital. Cox is clear that the term social capital ' ...refers to the processes between people which establish networks, norms and social trust and facilitate co-ordination and co-operation for mutual benefit' (1995, p. 15).

Social capital is the sum of relationships and networks that make for a flourishing society, that provide the basis for a general sense of wellbeing and promote integration. Although this concept draws on economic language, it concerns 'the good' in the sense of values attached to the experience of social life rather than to 'goods' in the populist sense sometimes attached to this term. Flourishing local economies may be a consequence of social capital, but they are not synonymous (Gittell & Vidal 1998, p. 19). Falk and Harrison (1998, p. 3) go further and argue that a strong economy is an effect, rather than a cause of strong civil society.

Understood thus, social capital (Cox 1995, pp. 16-19) consists of:

- trust—a reciprocal respect for each other shared by members of a society, that includes a
  positive regard for difference and a sense of mutuality;
- cooperation—a willingness to be involved in shared enterprises that does not depend on an immediate and concrete equality of exchange but is based on a give-and-take in which reciprocation is achieved in a more complex way;
- time—that the social world (including employment) is organised in such a way that people have the capacity to engage with their fellow citizens;
- voluntarism—both the capacity and the willingness to be active in society of people's own volition;
- community—the sense that the immediate society within which people live and work is something of which they are part; and
- democracy—that the social and political structures (at all levels) are based on the involvement of citizens in ways that incorporate all the above.

Cox draws her use of the notion of social capital from the work of Putnam (1993). He had previously summarised the concept, and the importance that it has for strengthening or

weakening communities, as one of the central themes of debate about the nature of modern society (Putnam 1993, pp. 163-67). The issue to be addressed is why and how societies vary in the extent to which they are 'civil' (that is, achieve strength through the elements listed by Cox (above)). Yet Putnam is clear that civil society and strong community should not be associated with 'traditionalism'; and that modernity is not necessarily the enemy of civility (p. 114). Putnam associates civil society with 'enlightened self-interest', not 'altruism', as against 'myopic self-interest'—'self interest that is alive to the interests of others' (p. 88). Mutuality or reciprocity is the basis of a strong community, expressing the value that it is good for a person to address the needs of others because by doing this, their own needs will be met. It is immediately apparent that the elements described by Cox are necessary for this to be accomplished.

Gray extends this question by noting that in the most recent times, the differences of opinion and values in our societies have become so great that the most effective way to understand the relations of a civil society is through notions of 'complex fairness' (1996, p. 47). In these circumstances, the strengthening of communities, even the possibility of 'community', will only be achievable if the virtuous circles of civic trust, norms, networks and reciprocity are facilitated and sustained (Putnam 1993, p. 177). Interestingly, Putnam points to the way in which relatively informal voluntary associations are an important part of the way that this can be achieved. Choral societies, sports clubs and community service organisations are the barometer of strong communities and at the same time central parts of the ways in which that strength is developed. The 'depletion of volunteering' as observed recently in many western societies is an example of this barometer falling, and so can be taken as a negative measure of social capital (Falk & Harrison 1998, p. 18).

Gittell and Vidal (1998) make a distinction between 'bonding capital' and 'building capital'. The former is that which 'brings closer together people who already know each other', while the latter 'brings together people who previously did not know each other' (p. 15). Although a simple conceptual distinction, it may be important when applying the idea of social capital to policy development. That which 'bonds' may not 'build', while 'building' may be seen as of equal importance as a policy objective, and so on. This is especially the case in those communities where there are 'structural holes' (Gittell & Vidal 1998, p. 20), which is a metaphor for people and groups who could benefit from connection with each other but who are limited by social structures from developing those connections.

Analysts in this field agree that to promote civil society, build social capital and strengthen communities, it is necessary for governments to develop policies that promote, facilitate or support the various elements that go to make up the necessary community infrastructure (Cox 1995; Gray 1996). In particular, this suggests that government has a key role not only in the formation of policy but also through more tangible assistance to voluntary and non-government effort by those people in communities who seek to respond to the needs around them. Such a role is likely to be congruent with the task of government in promoting economic and fiscal development—indeed as Woolcock (1998) argues, economic growth is likely to be tied to the fate of civil society and the 'returns' to be gained from 'investment' in social capital. The challenge is for government intervention to facilitate and empower community strength rather than to be a 'top down' provider of solutions. The causal chain runs from civil society to economic wellbeing by way of stronger communities (Falk & Harrison 1998, p. 18).

Paldam and Svensden (1999, p. 3) have distinguished between positive and negative indicators (or measures) of social capital. The positive indicators are those elements listed above. The negative indicators are those phenomena more usually referred to as social issues or problems, such as crime, endemic high levels of health morbidity, family breakdown and isolation of seniors. As these authors point out, it is perhaps more difficult to measure something such as 'trust' (1999, p. 10) and yet they cite some of this can be achieved by using Putnam's (1993) discussion as a basis. However, this work is preliminary and although it has generated possible economic modelling techniques, it is noted that these require further evaluative evidence before they can be regarded as robust (Paldam & Svensden 1999, p. 31).

#### Prevention and early intervention strategies

Contemporary evidence concerning the effectiveness of social intervention shows that while the targeting of intensive high-cost interventions to those most in need is efficient in managing the demand for health and human services, balancing this with prevention and early intervention strategies is also necessary (Smith 1999). These two terms refer to elements in the overall range of points at which particular issues may be addressed by policy and program development. They may be distinguished quite simply:

- prevention—programs and practices that intervene with individuals, families or communities to stop the occurrence of a problem or issue that could otherwise be expected; and
- early intervention—programs and practices that intervene with individuals, families or communities at an early stage in the occurrence of a problem or issue in such a way that there is a high probability that the intervention will resolve the problem or issue and stop it from becoming worse.

Therefore, although there is a difference between the two approaches, it can be seen that they are also closely connected (Chamberlain & Mackenzie 1998, p. 115). In some programs they are separated, while in many they are treated as two parts of the same strategy. There are also instances where the distinction may be further blurred by reference to 'primary' and 'secondary' prevention, in which the latter term is synonymous with early intervention (Cox, 1997 p. 247; Chamberlain & Mackenzie 1998, p. 116). The blurring arises because the problems and issues develop over time in a complex relationship of causes and effects, rather than being a single cause-effect event with a sharply defined start and finish.

Prevention and early intervention strategies have increasingly become regarded as necessary, although not sufficient elements of community development (Sowers et al. 1996, p. 225; Reppucci et al. 1999). This is not to deny that continuing or acute primary health and other community services have a role. The work of Keating and Mustard (1993) for example, clearly demonstrates the community benefits (including those of economic growth) of early intervention programs with very young children and their parents. However, the importance of prevention and early intervention derives from the way in which they are a means to empowering communities to exercise greater independence and self-reliance. Of particular significance in this regard is the connection between social capital (both 'building' and

'bonding') and the strategies of prevention and early intervention. The objectives of these strategies can be summarised in terms of increasing the strength of communities by working with and through the communities themselves. If programs are to be successful, the means and ends of community development need to be congruent in this way (Sowers et al. 1996; Gittell & Vidal 1998).

A distinction is often made, in practice as well as in theory, between 'community-based' and 'community (development)' programs. The former term is applied to those programs that have individuals and families as their main objective and their means of intervention. Both the ends and the means of the latter category are communities as a whole, in which interventions with individuals and families are at the level of the social relationships between them. However, as the evidence summarised in this report demonstrates, this distinction may mask the extent to which community-based programs may have tangible benefits for the development of communities and, *vice versa*, community development may also bring benefits to individuals and families.

Principles of community development that are also encapsulated in community-based prevention and early intervention strategies are:

- a 'bottom-up' approach—working from the perspectives of people within a community in the definition of social issues and appropriate program responses;
- participation—the active involvement of community members in all aspects of programs (this includes the engagement and motivation of participants, especially when it facilitates the emergence of local leadership);
- a 'strengths' perspective'—rather than focusing solely on problems and deficiencies, building on existing strengths in a community as a resource for programs; and
- empowerment—promoting community self-reliance and (including working 'with' and 'for' as the appropriate orientation of professionals involved in programs).

These principles are widely regarded as the keynotes of effective community development (Lackey & Gersham 1992; Sowers et al. 1996; Kaplan 1997; Chamberlain & Mackenzie 1998; Gittell & Vidal 1998). They are also highly congruent with the elements of social capital, including trust, cooperation, voluntarism, community and democracy (see discussion on social capital above).

Prevention and early intervention strategies are found in a wide range of community programs. These include programs for early childhood, young people, Indigenous people and seniors. The issues addressed include drug and alcohol dependence, homelessness, crime, mental health (including suicide), physical health, child protection and intergenerational issues. In each instance, the programs in question aim to integrate a response based on a particular issue with a more general sense of community building that can be seen in terms of social capital accumulation. Yet in many instances, the focus of programs and community services more generally on prevention and early intervention, do so in terms of community deficits. In the light of the connections between social capital and effective community building through early

intervention strategies, there is a need to consider the positive indicators that may be used as 'measures' of stronger communities.

From the literature that addresses the connections between social capital and prevention and early intervention, there is a range of positive indicators that can be identified (Putnam 1993; Cox 1995; Sowers et al. 1996; Gittell & Vidal 1998; Paldam & Svensden 1999). In turn, these can be divided between social indicators (SI) of building resilience and indicators of stronger communities (SC). The SI measures are those factors through which it is possible to see the social effects of strengthening communities, while the SC measures are the important elements of stronger communities. The literature supports the delineation of six SI factors and five SC indicators. These are:

#### Social indicators

- 1. strengthened local economic capacity
- 2. reduced crime (including vandalism)
- 3. reduced welfare dependency
- 4. better health outcomes
- 5. reduced long-term unemployment
- 6. increased social capital (as defined above)

#### Stronger communities indicators

- 1. knowledge and skills, including volunteering
- 2. networks and partnerships
- 3. community leadership
- 4. local solutions to local problems
- 5. community capacity to use best practice.

These indicators draw explicitly on the dimensions of civil society identified by Putnam (1993) that were further developed by other analysts already cited. It is argued that the strength of communities is revealed in the ways in which the following questions may be answered about a locality:

- Is the knowledge and skill in dealing with social issues at the local level shared informally within a community?
- Is there a high level of voluntary effort in community life?
- Are there networks and partnerships between community members in a variety of aspects of shared community life?
- Is there identifiable leadership within the community?

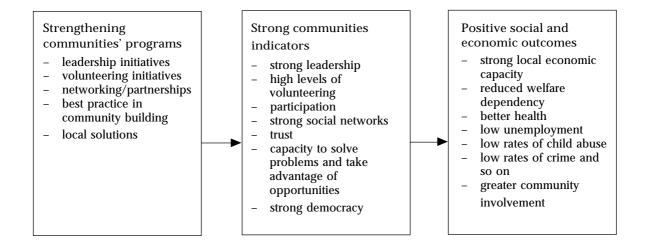
- Is the community able to generate local solutions to the problems that it faces at a local level?
- Does the community have the capacity to make use of the best models or practices for community building to resolve problems and respond to issues?

The SC indicators can be used to identify the extent to which a particular community has the potential resilience to deal with issues and resolve problems locally. These indicators incorporate the principles of social capital development discussed above, including bottom-up approaches, local solutions, partnerships, networks, active social participation including volunteering, increased self-reliance, sharing best practice, and gaining skills and knowledge (Smith & Herbert 1997). So it may be noted that community strength is associated with social capital development and a strong civil society. It is also important to note that both the theoretical work and the empirical studies of strength in communities emphasise the ways in which these elements are linked.

It is these indicators that form the basis of the Stronger Communities Strategy announced by the Federal Government in 1999 (Newman 1999, p. 4). This statement outlined the strategy as '...the vehicle for promoting self-reliant communities [and] build[ing] leadership and local skills' (p. 5). This strategy incorporates the SC indicators discussed above, focusing on local leadership, extensive skills and knowledge, and strong networks and partnerships. The strategy includes all sectors—government, business, and not-for-profit welfare organisations as well as individuals and community groups.

Figure 1 displays the analytic framework of this study in graphic format. It shows the connection between programs that have the goal of strengthening communities, the indicators of strong communities and the positive social indicators that may be used to chart and evaluate success.

Figure 1: Analytic framework of strengthening communities' indicators



The purpose of this study is to examine evaluative material to see whether this connection is plausible. In other words, what is the evidence that interventions in the form of programs that seek to develop stronger communities and measurable positive social outcomes are connected in this way? Furthermore, what is the evidence that there is a cost-benefit to be achieved by government supporting such programs?

This is not to say that these indicators can be treated deterministically—that is, a particular position in relation to one indicator will not of itself provide a way of establishing exactly where a community will be in its development in relation to any other indicator. However, in broad terms it may be expected that a similar direction of movement will be seen in relation to all indicators if a community is weakening or becoming stronger (Putnam 1993; Gittell & Vidal, 1998). Therefore, these indicators have been used in this study to report on the relevance of particular projects and approaches as a basis for building resilience and strength in communities.

It should also be noted that the extent to which prevention and early intervention programs explicitly address the development of social capital and the building of stronger communities varies greatly between specific cases.

This is reflected in the presentation and discussion of programs in the following chapters where there are underlying or tangential gains in building social capital and stronger communities alongside the benefits that are intended and explicit.

To explain how projects that incorporate these factors and demonstrate a contribution to strengthening communities have been identified, and how this evidence has been evaluated, the following parts of this introduction discuss the methodologies of the literature study and of the cost-benefit analysis.

# 1.2 Methodological approach of the literature study

This study focuses on reviewing relevant national and international literature on community-based approaches to responding to family and community problems by:

- reporting on the financial implications of prevention and early intervention approaches with reference to the five factors of the FaCS' Stronger Communities Strategy (see SC indicators listed above) and emphasising the short-term and long-term costs and benefits of investing in these approaches; and
- where appropriate, extrapolating the benefits of particular local projects to estimate what
  the costs and benefits would be if that approach, or a similar one, were to be applied
  nationwide.

The strength of this meta-analysis and extent of the cost-benefit analysis relies on the scope and potency of underlying literature in providing the information required. In the search for materials, a large number of programs were identified that appeared to relate to the theme of stronger communities, but they could not be included because of the absence of any evaluation or because the literature did not contain sufficient detail. The researchers therefore

focused on accessing materials that would be accessible within the required timeframe. Where gaps have been identified and the potential for further study is identifiable, this has been addressed at relevant points throughout the study.

The literature review was based on an extensive database (via ERIC, ATSIROM, AUSTROM, BIDS IBIS, SOCIAL SCIENCE ABSTRACTS, SOCIAL WORK ABSTRACTS and SOCIOLOGICAL ABSTRACTS) and World Wide Web search (including Internet sites known to the researchers). In an attempt to find other relevant material, contact also was made with people in several government departments and community-based organisations, and with academics working in related areas.

Relevant databases accessed via ATSIROM and AUSTROM included:

- FAMILY (Family & Society)
- AGIS (Law)
- CINCH (Criminology)
- AEI (Education)
- MAIS (Multiculturalism)
- ATSIS (Indigenous Studies)
- ATSI/HEALTH (Health)
- HERA (Heritage/Culture)
- APAIS (Public Affairs).

Key words or phrases used in the search included:

- social indicators/outcomes
- · wellbeing indicators
- · community capacity
- social/economic costs
- stronger/healthy communities
- cost-benefit analysis
- program evaluation
- · early intervention
- prevention
- · community-based programs
- · Aboriginal communities.

The period covered in the database search was over the past 10 years. In a small number of searches, no time limit was specified. The study also involved a search for materials in reference lists of some key articles provided by FaCS and articles and materials known to the researchers.

After searching the literature and determining data that was accessible within the project timeframe, the researchers decided to focus on programs in::

- Community wellbeing
- · Early childhood and families
- · Young people
- Seniors and intergenerational programs.

Original plans to review literature gathered in relation to community health programs were abandoned because the material was more clinically-based rather than linking to the stronger communities' themes identified in the project brief.

The researchers accessed data on Australian-based programs and they located some basic information about a range of programs that had been evaluated and appeared to relate to the stronger communities' theme. However, it was extremely difficult to access further details because of the lack of readily-available information and/or information available within the timeframe. Finding community-based program information was also difficult because of the lack of accessible information and the fact that the intellectual copyright of many programs belongs to government funding bodies. Some material relating to Aboriginal community programs has been included, but again much of this lacked sufficient detail, was written from a theoretical rather than empirical perspective, or is not freely available because of intellectual ownership and copyright. This is an indicator that more attention could be paid to accessible evaluations of programs that strengthen Aboriginal communities.

In addition, much available evaluative research is very heavily based in the United States. This was the experience of the researchers in this project as well as others reviewing similar programs (as noted for example in Bright 1997). As a result, few Australian program examples are provided and key areas have not been examined in this report including relevant Indigenous programs and rural and regional programs. This evidence suggests a need for greater efforts to evaluate and publish findings concerning effective Australian projects (of which there are anecdotal indications of a growing number).

Not only was literature in both Australia and overseas lacking in evaluations which provide for a cost-benefit analysis of prevention and early intervention programs and community building strategies, there also was some inconsistency in what was evaluated. For example, some evaluations related more to the administration of the program rather than the social objectives.

The lack of evaluations appears to be due to a range of factors including insufficient resources for such evaluations to take place. Also, the establishment of many programs did not include evaluative mechanisms, making evaluation of impacts beyond the program difficult. A compounding factor was that much program information was obtained from secondary sources where a program was cited by an author as part of their research on a particular topic. Full details of the program, its funding, costs and outcomes were therefore not always included. The program evaluations also varied in their emphasis and methodology with some evaluations occurring at the time the program was run, some after the program had been

completed, and others some time later in relation to another piece of research. This led to differing data within the literature being elicited and prevented direct comparisons between programs. However, some programs for which there is little or no evaluative evidence are included because of the potential that can be seen for future follow-up in further studies in this field (such as LETS, Food-Share and Community Builders discussed in Chapter 2).

Specific short-term and long-term costs and benefits are outlined for some programs. There is also significant material which reinforces the groundswell of support for prevention approaches and notes more generally the effectiveness of prevention and early intervention approaches as having the potential to save costs downstream as well as to contribute to building social capital and stronger communities.

Programs within the literature range from small locally-based unfunded projects to large-scale government-funded and coordinated programs. The extent of program description and evaluation material varied significantly, leading to varying capacity to review the literature in a consistent manner. This has also led to variations in the level of data reviewed and discussed for different community-based approaches.

#### 1.3 Methodological approach of the cost-benefit analysis

Cost-benefit analysis is a technique widely used by economists in applied welfare economics. It is particularly useful in the evaluation of social and economic programs undertaken by government, but is also widely used in the private sector as a component of investment and project planning and evaluation.

A key insight utilised in cost-benefit analysis is that often there is a divergence between social and private costs and benefits. That is, although accounting costs and the accounting projection of forthcoming benefits to an organisation from a particular project in terms of revenue and profits may capture the private costs and benefits to the organisation, they may not capture the overall costs or benefits that accrue to society.

For example, the costs of materials and the labour involved in the production of a particular good or service represents the private costs to the organisation of producing that good or service. However, further costs may be imposed on others as a by-product. Take the case of a production process that results in effluent being discharged into the environment (for example, the air or a river). The effluent may impose further costs on other producers or consumers not directly connected with the initial production process. Typically, these social costs are not reflected in the private cost calculation undertaken by the organisation responsible for the production process.

As well, sometimes the private calculation of benefits (revenues and profits) does not account for all the benefits that accrue to society from a particular activity. For example, take a health clinic which immunises people against particular diseases. Although the private benefit to the patient is that he or she is protected against particular communicable diseases, others not part of the transaction between doctor and patient benefit too, because as a result they will be less likely to be exposed to communicable disease.

The analytical issue is that social costs and benefits are usually not included as part of market prices. Social costs and benefits are 'external' to the market's valuation of costs and benefits (indeed, economists refer to these social costs and benefits as 'externalities'). The result is that from society's perspective market prices will result, in either too many or too few of the goods and services which are subject to these external costs and benefits being produced.

In terms of the current study, these externalities are important because a feature of community-based programs is that they often produce social benefits way beyond the direct benefits to the participants in the particular programs. They also often result in cost savings elsewhere in the community which are unrelated to the direct costs of the programs. A notorious problem in accounting for these social benefits (especially) and costs is that although very real, they are very difficult to measure. (How does one measure the undoubted social benefit of 'improved self-esteem'?) To account for this methodological difficulty, in many cases the cost-benefit calculations that are reported throughout this study will be supplemented by discussion of these social costs and benefits. It is important, therefore, to see reported benefit-cost ratios as minima, rather than maxima.

A related issue is that the focus of this study is the evaluation of benefits and costs from the perspective of the state. The underlying questions that are being addressed are, is the state (and, through the state, taxpayers) getting 'value for money' in the programs being reviewed? And where are opportunities for the state to get greatest value for money in its conduct of social policy? This is, of course, only one perspective. The evaluation of programs often has evaluations from other perspectives, unrelated to the perspective and interests of the state, as a component. For example, often benefits are couched in terms of benefits to individuals that have no obvious social benefit implication. (For example, improved self-esteem that results from a program may result in few immediate and tangible benefits to others, but be vitally important to the individual affected and may have longer-term positive consequences for the community. Similarly, improved connections between people involved in a program might be a real benefit to those individuals, but may affect no-one else in an obvious and measurable way.) Nevertheless, these benefits are very real and a further reason why reported benefit-cost ratios must be seen as minima.

Many of the programs for which the evaluations are reported cover either a small group of participants or a portion of a year. The question arises as to whether these programs could be run either with a greater number of participants, say, in different locations or even nationally, or over a longer time, say a year, and the benefit-cost calculations remain unchanged, save for scale effects. The answer is very complex. Evaluation exercises often refer to the problem of 'creaming' (Kenyon 1994). This occurs when the participants who enter a program are either selected or self-select, either consciously or unconsciously, on the basis that they have the greatest aptitude to succeed in the program. Creaming can occur in very subtle and unconscious ways. For example, the choice of a particularly disadvantaged area in order to conduct a trial program may mean the selection of a group of participants with the highest motivation to use the program to escape disadvantage.

Of course, should creaming occur, the success of the program is likely to be far greater than if eligible participants were randomly assigned a place in a particular program. It follows that as

a wider pool of potential applicants is drawn upon, to the extent that creaming has occurred earlier in the participant selection process, the success rate (and thus the benefit-cost ratio) of the program is likely to fall.

A related concept in program evaluation is the problem of 'dead-weight loss'. This occurs when the beneficial aspects which might come to pass for some program participants would have happened in the absence of the program anyway (Kenyon 1994). Thus, the cost of the program attributable to those participants is 'wasted' in the sense that the benefits would have happened anyway. The higher the dead-weight loss, the more the benefit-cost ratio for the program is overstated. The dead-weight loss in any interventionist program is notoriously difficult to estimate, as the counterfactual is never observed.

Finally, for the practical reasons indicated above, the reporting of programs in the literature is often unconnected with explicit cost-benefit evaluation of the programs. For the most part, as a result there is very incomplete accounting for benefits (especially) or for costs—although estimates of the latter are often easier to access. Consequently, the researchers have often resorted to estimates, using plausible assumptions of what would be the minimum number of successful outcomes that would be necessary for a program to cover its direct costs and calculated a dollar value for these outcomes. The implication is that where such numbers turn out to be a very small percentage of the numbers likely to be affected by the program, then the probability of a positive (and maybe substantial) benefit-cost ratio is likely.

# 2. Community wellbeing

The search for information generally identified programs either in relation to specific age groups (early childhood, seniors, young people) or particular areas of prevention and early intervention (child abuse/maltreatment, crime). However, program information and studies that relate in various ways to the broader aim of enhancing the overall 'wellbeing' (Falk & Harrison 1998) or 'health' (Catalano & Hawkins 1996) of communities is identifiable in the literature. These programs and studies include both community-based prevention and early intervention strategies and community work in which community building was the immediate explicit purpose of the intervention.

As noted in Chapter 1, a range of literature refers to the value of communities that:

- are based on trust, reciprocity, cooperation;
- are organised in a way that provides time for people to engage with fellow citizens;
- · have a capacity and willingness for voluntarism;
- · create a sense of belonging to one's community; and
- contain democratic structures that involve citizens.

(Cox 1995; Putnam 1993; Gray 1996; Gittell & Vidal 1998; Falk & Harrison, 1998).

The notions of community participation and the value of networks in building stronger communities are further explored by Baum et al. (1999). It is argued that there is increasing recognition of the importance of community participation and the role that community groups play in developing communities in which trust building and reciprocity lead to an increase in social capital (Baum et al. 1999). Further, there is significant research to support the notion that people with diverse networks of quality relationships are healthier than people who are socially isolated. In this context, health is described as the physical, mental and social wellbeing of people (Rosenfeld 1997, cited in Baum et al. 1999). Further, a strong and healthy community may be described as one that:

- provides a clean, safe physical environment;
- meets the basic needs of residents;
- has residents that respect and support each other;
- involves the community in local government;
- promotes and celebrates its historical and cultural heritage;
- provides easily accessible health services;
- has a diverse, innovative economy; and
- rests on a sustainable ecosystem (Ontario Healthy Communities Coalition 2000).

As discussed in Chapter 1, based on the concepts of civil society and social capital, the key elements of stronger communities are: knowledge and community skills including

volunteering; networks and partnerships in communities; leadership in communities; local solutions to local problems; and community capacity to use best practice.

The consistent elements in all of the materials cited that relate to stronger/healthy communities, is the importance of a sense of connectedness between people, and between people and their community in an environment in which all people are able to participate to their full potential.

At the same time, a number of factors are cited as contributing to the unraveling of social ties and community life. These include:

- changes in the labour market such as the decline in manufacturing jobs, changes in industrial relations, increased female labour force participation, increasing suburbanisation, globalisation of jobs and racial discrimination in hiring (Debelle & Borland 1998; Morrison et al. 1997);
- a widening in the income distribution and the associated 'disappearing middle class' (Gregory 1993; Borland & Wilkins, 1996; Harding & Richardson, 1998);
- · increased divorce and family breakdown; and
- technological change which has increased the pace of life and the stress of contemporary living (Mackay 1999).

There has been an overemphasis on individual remediation and treatment and an underemphasis on prevention and development (Morrison et al. 1997). In addition, Morrison et al. refer to services with fragmented funding that are poorly designed and do little to contribute to building an overall neighbourhood structure. The importance of prevention strategies is also highlighted by claims that billions of dollars are spent on public services to address problems that are preventable. Not only does it make economic sense to invest in prevention strategies, it is also a mechanism for building capacity rather than fostering dependence on public programs (Iowa Kids Count Initiative 1993).

The Iowa Blueprint Investment Strategy is a community prevention agenda developed in the United States (US) in the early 1990s to help children to thrive. It states that over US\$2 billion was spent in 1992–93 on problems that can be prevented. The key areas of expenditure were remedial services (health, education and human services); adult dependence (welfare and health care costs); and public protection (juvenile and adult corrections). A number of poor outcomes that are preventable are listed, including:

- health—low birth weight, neonatal intensive care, chronic and severe health problems, mental and neurological problems;
- education—grade retention and school drop outs;
- · human service—child abuse/neglect, foster care and juvenile delinquency; and
- adult dependency—welfare dependency, criminal behaviour/incarceration and unemployment and lost economic activity.

It is argued that if public expenditure to address preventable problems can be reduced by five per cent, the state will save over US\$3 for every US\$1 invested in prevention initiatives (Iowa Kids Count Initiative 1995).

Within Australia, two significant pieces of research were identified—the Health Development and Social Capital Project in the Western Suburbs of Adelaide and a Social Cost Benefit Analysis of NSW Department of Housing's Neighbourhood Improvement Program. In addition, the then Commonwealth Department of Social Security produced research that examines the factors affecting living standards and strategies that may increase living standards for low-income people. Details of this program, the Neighbourhood Improvement Program, are provided, as well as materials on Indigenous Australian communities' Rural Communities and Community Economic Development programs, in Department of Social Security (1997). Some of the programs are addressed in detail, while others are included to indicate the potential that they might have for future evaluations. Furthermore, information about three US-based programs is included: the Community Middle School Consortium, the Parent Involvement Program and Communities that Care.

#### 2.1 Health development and social capital project

The Health Development and Social Capital Project is reported on in three publications by Baum et al. (1999): Building Healthy Communities: Health Development and Social Capital Project—Western Suburbs of Adelaide; Social Capital in Action: Health Promotion and Community Groups; and Inventory of Community Groups and Organisations.

The project commenced in 1997 and was a collaborative effort between the South Australian Community Health Research Unit and the Department of Public Health at Flinders University in South Australia (SA). The aim of this project was to explore community participation, health and social capital in the western suburbs of Adelaide, SA which are characterised by:

- a higher proportion of people from a non-English speaking background;
- considerable diversity;
- a history of strong networks of community organisations and collaboration between sectors;
   and
- a strong sense of 'community' defined by geography and community of interest.

Specifically, the project examined:

- the types of activities people are involved in, including both informal and formal civic and social participation; and
- the links between community participation and the health of individuals and the wider health of the community.

The specific elements of social capital explored in the project were networks and levels of trust and reciprocity. Material was drawn from a range of sources including:

- a survey of 400 residents;
- 40 in-depth interviews;
- · a survey of 400 community groups and organisations; and
- case studies of 25 of the community groups and organisations.

The authors were unable to obtain details on any quantitative evaluation that may have been completed. However, it is noted that dividends from investment in structures which strengthen social and civic activity should be seen in terms of increasing levels of trust and providing natural systems of social support that have been shown by Rosenfeld (1997) to have a generally positive effect on individual health status (Baum et al. 1999, p. 65).

The project has been included on the basis that it is a significant overarching piece of work that gives context to the role of community-based programs in contributing to the development of healthy communities.

Details of 25 case studies are presented in *Social Capital in Action: Health Promotion and Community Groups* (1999). The organisations and groups receive little if any funding and many rely on a combination of fund raising, nominal membership fees and volunteers. Many expressed concerns about relying on the energy and commitment of a limited number of people who are prepared to give their time on a voluntary basis. The overall finding was that community groups support a vibrant and energetic part of community life and they contribute to trust building, developing relationships for mutual benefit and encouraging pride in collective achievement. Specifically, the case studies found examples of:

- increased involvement in other groups and activities by people who had never participated in groups before;
- participation in a range of informal and formal social networks and exchanges;
- the development of partnerships between a range of government and non-government organisations;
- development of improved relationships and trust and tolerance;
- improved sense of wellbeing, self-esteem and confidence; and
- contributing to making industry and government more accountable (Miller et al. 1999, p. 4).

The level of participation was linked to a range of socio-economic factors with findings that:

- those on lower incomes and with less education reported making greater use of informal social contacts:
- those with higher incomes were more likely to be involved in civic participation;
- young people rarely reported involvement in civic activities and were more likely to be involved in informal social contact;

- older people were more likely to be involved in social clubs and engage in reciprocal relationships with their neighbours;
- women were far more likely to participate in just about all activities, particularly informal social activities; and
- people of non-English speaking background are more at risk of being excluded from social and civic activities (Baum et al. 1999, p. 2).

Notwithstanding variations in levels of participation, the project concluded that community groups and organisations are an important resource for developing health at the community level (*Building Healthy Communities*, p. 3). Specifically, the report identified a number of local neighbourhood characteristics that can be suggested as providing a health-promoting community:

- · a growing sense of trust between those in a neighbourhood;
- tangible evidence for basic and practical levels of support between groups and between individual neighbours;
- well-established systems of informal networks and reciprocal exchanges between individuals:
- urban environments which create and support opportunities for a variety of interactions between residents;
- developed, constructive and creative ways of dealing with hostilities and difference between groups;
- a community in which household incomes are at a level which sustains individual and community life;
- opportunities for attaining higher educational levels and a willingness to achieve higher education: and
- tolerance of racial, cultural, social and sexual differences and opportunities for people to mix with people from different backgrounds to their own (Baum et al. 1999, p. 64).

A number of community organisations identified the following factors that would 'make their group stronger':

- increased funding;
- being better known;
- building better links with other community groups and organisations; and
- skill development for members in areas such as running meetings, lobbying and writing grant applications.

# 2.2 New South Wales Department of Housing's Neighbourhood Improvement Program

Through a hypothetical case study analysis Stubbs and Storer (1996) have undertaken a costbenefit analysis of the New South Wales (NSW) Department of Housing's Neighbourhood Improvement Program (NIP) to answer the following questions in relation to the Airds Estate:

- What do the identified problems in Campbelltown public such as crime, family and community stress, unemployment and so on, cost the community as a whole?
- How successful would the Neighbourhood Improvement Program need to be to give a positive social and economic return on the money invested? In other words, what problems would the program have to effect and to what extent for the money spent to be justified?
- How likely is it that the Neighbourhood Improvement Program will or can achieve the type of results that are needed to give a positive return on the money the community is investing in the program? (pp. 1-2).

The methodology used included:

- a survey of the nature and magnitude of social problems in Airds;
- selection of social indicators which were compared against two control areas and the NSW average; and
- calculation of the costs to the community of the social indicators.

The NIP includes five public housing estates in Campbelltown and will cost approximately \$100 million over 13 years. The report states that unemployment in Airds costs \$21.7 million per year, or \$46 000 per person per year. This includes the cost of unemployment benefits, management of a benefit payments system, training programs and services for unemployed people and the opportunity costs of lost gross domestic product (GDP). When the cost of other social problems (including crime, Department of Housing maintenance and repairs and family stress) are added, it was estimated that the total cost of social problems in Airds is \$28.5 million per year, or 17 times the annual cost of the program for the estate.

If social problems in Airds were reduced to the NSW average, the cost-benefit ratio would be 1:17 (that is, this represents a saving of \$18 million per year). Further, a reduction in social problems by a mere 3.7 per cent would ensure the program 'broke even'. It is claimed that this could be achieved by the creation of 23 permanent jobs alone; a major reduction in crime and property turnover; or a small effect across all indicators. However, the report does not provide any details on whether this has been achieved.

While the report notes that poor urban design may exacerbate social problems, it is certainly not the cause. Therefore, physical improvement alone would be unlikely to result in significant reductions in social problems. It is strongly argued that there needs to be a range of strategies in place, including: a high degree of community participation; direct job creation; decreasing community isolation through improved transport; and enhancing opportunities for tenants to purchase their homes.

The report presents an overall cost-benefit analysis through the Airds case study, rather than providing examples of community-based programs that have been evaluated. However, it does highlight the enormous economic and social benefits that can be achieved through programs that reduce social problems as opposed to relying on physical design alone that is unlikely to produce lasting effects. Further, it highlights the importance of community participation and community cohesion as significant factors in reducing social problems like crime (Hagedorn 1991, and O'Sullivan 1991 cited in Stubbs and Storer 1996).

# 2.3 Western Australia Council of Social Service Poverty Commission —Housing for a Sustainable Community

In 1998, the Western Australia Council of Social Service (WACOSS) Poverty Commission requested Shelter WA to undertake a review of the contribution of housing to 'sustainable community'. This review was based on the concepts of social capital development, with a particular focus on housing as a key element of community wellbeing (Shelter 2000, p. 1). Data from Western Australia (WA) indicate that 40 per cent of low-income households in the state are experiencing 'housing stress', defined as requiring to allocate more than 30 per cent of their budget to housing costs (pp. 5–6). This is an aspect of housing that adversely affects community wellbeing. Seniors, people with a disability, veterans and families with young children are highly represented in these groups, as are Aboriginal households. The WACOSS Poverty Commission Report highlights three programs that seek to redress the impact of housing stress in WA:

- Supported Accommodation Assistance program (SAAP)—which provides transitional accommodation and related support services to promote the maximum possible degree of self-reliance and independence on the part of homeless people;
- Tenants Advice Service (TAS)—which provides information, education and advocacy for tenants; and
- Supported Housing Assistance Program (SHAP)—which supports public sector tenants who are experiencing difficulties in maintaining their tenancy.

All three programs have a very high usage rate of by Aboriginal households, younger single people and women escaping domestic violence. High levels of unmet need are reported. These are measured by program figures of requests for assistance that met program specifications but to which a response was not possible because of limitations of staff time and/or community resources, including affordable accommodation.

These three programs have made a difference to the outcomes for people experiencing housing emergencies, in particular in relation to the connections between housing and employment (pp. 30–2). Although changing employment patterns can have a deleterious effect on housing, conversely a housing problem can have a serious negative impact on a person's employment. Securing housing tenure thus has a positive impact on other aspects of the community, in reduced levels of social distress (such as less domestic violence and crime and better health outcomes) and increased levels of local economic participation.

## 2.4 Community Research Project

The Community Research Project is an Australian project undertaken by the then Department of Social Security between 1994 and 1997.

This project aimed to test the potential of particular community-based services to improve the living standards of people on low incomes. The living standards measured were:

- social participation
- · access to information
- family relationships
- · personal wellbeing
- · non-cash income
- · reduced costs
- involvement in the 'informal labour market';
- involvement in the 'formal labour market'

The research sites ranged from rural to inner city, urban and high-growth areas. Generally, the communities were all characterised by high unemployment and dependence on income support and were undergoing economic decline. In addition, there were particular groups of disadvantage identified (unemployed young people, Indigenous people, retired people).

In all, 80 community-based initiatives were funded for 12 months at an average cost of \$18 208. Outcomes were measured in terms of first-order outcomes and second-order opportunities and outcomes. First-order outcomes were those that focused on the immediate resolution of an individual's issue, while second-order outcomes focused more on providing an opportunity that could capitalise on or be converted into a tangible benefit at a later date.

Qualitative data indicates that 59 per cent of the 72 projects were likely to produce observable benefits in a range of living standard areas. A further 56 per cent of the projects reported achieving substantial living standard gains: 26 per cent reported that they were successful in achieving some living standard gains; and 18 per cent appeared to have only minimal effects on targeted living standard areas.

The report asserts that changes could be effected in a range of living standard areas and that a change in one living standard area was highly likely to produce changes in other living standard areas. The authors understand that an evaluation of a number of these projects in terms of stronger communities and social outcomes was under way at the University of New England in 2000 but the results were not available at the time of writing.

#### 2.5 Neighbourhoods in partnership

Morrison et al. (1997) report on programs to build stronger neighbourhoods and communities through the development of support for families and youth. They argue that connectedness between people needs to be developed and supported to overcome problems associated with social isolation and to rebuild the economic and social fabric. The Community Middle School Consortium and the Parent Involvement Program are two examples cited that aim to build stronger communities, through the development of networks for youth and families.

The Community Middle School Consortium commenced in 1996 in a US town called Aurora and involves a partnership of a high school and twelve community social service agencies providing services to students and their families. Coordination of services occurs mostly through one agency.

Services to students and families are provided through homes visits, onsite school appointments during and after school, or visits to the agencies. The educational component provides tutoring, homework clubs and parent support to parents and children from nearly 50 families within the school.

The project was in response to high rates of student suspension; a lack of eligibility of high-risk children for special education services; and low projected graduation rates. The organisations worked together to raise approximately US\$35 000 for the first year of the project's operation through a mixture of local council funds and grants.

The project was reported to have assisted 50 families with educational support; food and clothing to several students; 236 students through anger management groups; and 46 individuals referred for mental health treatment. Findings indicate that staff built trusting relationships with the students and their families. Positive outcomes were attributed to interdisciplinary efforts among teachers, social workers, agency staff, community members and others and that services 'surrounded' students and families rather than being provided at a distance (pp. 529–30).

Aimed at increasing parent participation in the school, the Parent Involvement Program includes a range of before-school, after-school and noon-time activities for students in an elementary school at Aurora. Prior to the implementation of the program, very few parents participated in the yearly 'family night'. However, since the Parent Involvement Program began, over 600 people participated in the activities offered. In addition, of 73 surveyed parents, 32 stated that they had not participated in school programs prior to the introduction of the program and 41 stated that they attended school-supported activities. Through an evaluation of the impact of parental participation in the classroom, all respondents stated that parental participation had a positive effect, with parents working as volunteers in the classroom and student attendance improving by nearly 90 per cent across all fifth-grade classes (Morrison et al. 1997).

No information was available about the cost of this program.

#### 2.6 Communities that Care

Communities that Care (CTC) is a comprehensive community-wide and risk-focused prevention strategy aimed at reducing identified risk factors and increasing their corresponding protective factors (Catalano &Hawkins 1996; Harachi et al. 1996). It has been developed and refined in a series of programs that have been run and evaluated for over 15 years in Washington and Oregon in the US northwest. This work is project-managed and researched from the University of Washington, Social Development Research Group (SDRG), in Seattle. The 'social development model' is an evidence-based theoretical tool that brings together ideas about social learning, family and community dynamics, and social interaction in the creation and maintenance of sub-cultures within the context of the wider community. It thus avoids separating individual and collective explanations for and responses to community issues.

In the initial phase of the program, identified community leaders focus on building local capacity for community-based prevention strategies. A Community Prevention Board is then formed by bringing together formal and informal community leaders and intervention personnel (Harachi et al. 1998). It is the board's responsibility to select and oversee the implementation of evidence-based interventions to fit local conditions. This is done through an assessment of the community risks and resources that uses a participatory approach to involve members of the community. In this way, the action plan that is constructed from this assessment is grounded in the community, involving members in the definition of needs and resources; building local initiative through participation; and working towards a mobilisation of the community to address its own needs. Most programs have been funded through a combination of government and non-government sources, with minimal budgets to pay for a part-time community organiser, expenses for participant members of boards and other incidental expenses (Cheadle et al. 1998).

Some work has commenced in Australia on implementing CTC programs and to date the Centre for Adolescent Health (Melbourne) has piloted a survey to measure risk and protective factors among young Australians with a view to forming preventive interventions. In 2000, the CTC program will be trialled in Victoria by a consortium including the Women's and Children's Health Care Network and the Rotary Club of Melbourne (Toumbourou 1999). The implementation of a CTC program in Victoria will integrate a randomised, controlled evaluation (Toumbourou 1999, p. 5). Its findings are due in 2002 and these will provide detailed information concerning these aspects of the program.

It is claimed that US federal expenditure on CTC has stimulated community capacity building in the form of state and county (equivalent to shire) level investment informed by community prevention planning forums (Toumbourou 1999). This is substantiated by the evidence from the evaluations conducted by the SDRG (Catalano & Hawkins 1996; Cheadle et al. 1998). Cost-benefits are not explicitly estimated by the SDRG, although these may be imputed from the relatively low levels of funding described and the evidence of community building outcomes. Such results take the form of increased community leadership, focusing on community strengths and the development of resilience (in the form of shared learning in ways of addressing community issues).

## 2.7 Indigenous Australian communities

#### Indigenous community wellbeing

Many discussions of prevention and early intervention strategies specifically for Indigenous communities emphasise very similar problems to those of mainstream Australia. Indeed, Australian projects discussed elsewhere in this report include Aboriginal people as well as people of other ethnic and cultural origins. At the same time, in order that their distinctive needs are not lost or ignored, there is a recognised need to have program and studies that are focused specifically on the wellbeing of Indigenous communities (Dodson 1998).

One factor that is of considerable importance in this area is the 'over-representation' of Aboriginal young people in the criminal justice system; in indices of at-risk behaviours (such as substance misuse, community violence, suicide attempts); and in unemployment figures (Cunneen 1997). This is paralleled by their relative absence from indices of positive outcomes such as university entrance and other post-compulsory education, employment and in wider community roles. Of course, there are many young Aboriginal people who play positive roles within the mainstream and within Indigenous communities. However, the higher proportion of young Aboriginal people compared to young people from non-Indigenous backgrounds in atrisk categories is a great concern, and in most states the proportion has risen in the last decade (Cunneen & McDonald, 1997 p. 21). (A slight fall was noticed in WA, but this was from a base almost double that of the next state, and was still the highest proportion of over-representation.) From their summary of their review of a range of programs Cunneen and McDonald conclude that early intervention strategies that are most effective in keeping young Indigenous people out of custody are those that are community-based and which are developed and implemented by the community (1997, p. 176).

Similar trends may be seen in community-based prevention strategies to respond to excessive levels of alcohol consumption (or 'problem drinking') in some Aboriginal and Torres Strait Islander communities. Saggers and Gray (1997) note that a much larger proportion of the Indigenous population than average does not consume alcohol at all, but their consumption of alcohol at harmful levels is disproportionately high. Their review and analysis of studies in this field indicate that the underlying problem is the balance between control of availability and the determination of sections within the mainstream economy to provide alcohol in Indigenous communities or where Aboriginal people form a large section of the community. This evidence suggests that although community-based health programs aimed at individual people play a part in dealing with the issue of excessive consumption, the control by communities of the supply of alcohol is likely to have a more significant impact. The crucial factors are that the community must be the source of the strategy (it cannot be imposed from outside) and it must apply to all members of the community (not only to Indigenous people). Under community-based prevention schemes, alcohol retailers suffered a loss of income, but all other indicators of community wellbeing (including other economic activity) improved.

The common factor between the youth and community health interventions briefly summarised here is that of community participation and leadership in all aspects of problem definition, program design, intervention and evaluation. Most of the literature on Indigenous communities that was surveyed and which is summarised by the material quoted above, made reference to the ways in which the current needs of Aboriginal and Torres Strait Islander peoples are a consequence of having their strengths destroyed through the processes of colonialism. Strategies to promote stronger Indigenous communities, to develop their resilience and to foster social capital within them clearly have to start from this premise.

#### **Community Development Employment Projects**

The Community Development Employment Projects (CDEP) schemes were established in 1977 to provide a work-based response to problems of unemployment among Indigenous Australian communities. They were designed to be community-based with local leadership, so that they could develop as a means to promote economic, social and cultural strength (Arthur 1991). The program was reviewed at the twenty-year mark by Spicer (1997) and has also been subject to a number of other evaluations in various respects (for example—Moizo 1990; Payne 1990; Arthur 1991; Bernard 1997). These evaluations together provide diverse insights into the strengths and weaknesses of this approach.

In what may be regarded as the most wide-ranging external review, Spicer (1997) identifies several benefits that have been gained through the CDEP. These are:

- employment—the rate of employment in Aboriginal communities has been enhanced through the CDEP by almost 20 per cent (although the rate of unemployment remains a major issue for these communities);
- business development—this has been facilitated and supported through CDEP, including in primary industries, manufacturing, crafts, tourism, service and media enterprises (with finance obtained from the Aboriginal and Torres Strait Islander Commission (ATSIC), banks, land grants and CDEP capital funds);
- networking—Aboriginal communities have been enabled to create networks of employment and business opportunity through the CDEP schemes; and
- training—in many instances employment-related training has become more widely available to Aboriginal communities through the CDEP schemes.

These gains are interlinked, and together represent community building for Indigenous communities through economic activity.

The CDEP program has also been evaluated by ATSIC (1997). Many of the findings in this evaluation match those of Spicer's study. However, one important area that the ATSIC report identifies is that of the non-employment benefits of the program. Four aspects in particular are reported—when compared to unemployed people in the same communities, CDEP participants:

- earned \$4 516 more per year (average);
- were only 0.7 times as likely to engage in problem drinking;
- were only 0.7 times as likely to have been arrested in the past five years; and
- were 1.5 times more likely to be actively identified with a clan or language group (ATSIC 1997, p. 53).

Each of these factors points to measurable cost-benefits, which in the area of earnings (and consequent local economic activity) are an immediate gain of \$2 for every \$1 funding. The savings of reduced health and crime costs would require additional figures on the costs of these issues in Aboriginal communities, but these are unavailable. (An extrapolation using the NSW Housing figures (Stubbs and Storer, 1996) could suggest gains in the order of greater than \$10 saved for every \$1 spent, but this hypothesis requires rigorous empirical testing.) The gains in the strengthening of Aboriginal community indicated in the fourth element cannot be quantified in the same way. However, to the extent that the social problems experienced by Aboriginal communities can be traced to the impact of mainstream policies and related social factors (Arthur 1991; Bernard 1997), the gains could be expected to be significant in terms of social capital (expressed in factors such as increased local leadership; the sharing of knowledge and skills; the development of local solutions to issues; and building community capacity).

In 1997, costs were \$2 600 per CDEP participant per year. Spicer (1997) recommended that this should be increased to \$10 000 per year to take account of training and infrastructure development. At the same time, he proposed that some rationalisation should occur because, of the 274 organisations that were part of the CDEP nationally, some covered the same areas as others, while some were as small as only 13 people and so were struggling. Even at this higher level, using the community economic multiplier figures given by Croft (1995), a minimum benefit of \$1.96 for each \$1 funded can be estimated (see discussion of Local Exchange and Trading Systems in this chapter, below). In addition, the cost-benefits in relation to health and crime, and the social capital gains in aspects of stronger communities could also be expected to continue to grow.

Other studies have also identified issues that are still to be addressed. In a case study, Moizo (1991) identified that although some economic autonomy had been gained, there were also instances in which the effect of CDEP had been to separate businesses from the community. Bernard (1997) goes further and argues that, in places the CDEP scheme has introduced a problematic element into Aboriginal culture and self-determination by introducing a European model of 'work'. This he says, combines with the 'workfare' basis of funding to disrupt Indigenous cultural norms. Spicer (1997) also details concerns about the 'work-for-the-dole' structure of CDEP funding. Not only does this lead to relatively low levels of income for some Aboriginal people, but it also makes connections between CDEP and the different work-for-the-dole scheme that has been introduced in the mainstream social security system. Spicer argues that it would be better for both the CDEP and the mainstream social security system (and hence wider perceptions) to create a great divide between the two by using different terminology and approaches to the two schemes. It is also necessary to address the problems faced by some Aboriginal people who may be in the worst of both worlds because they are included in a scheme but not working and so lose entitlement to either wages or a pension

(see also Daly & Smith 1996, p. 371). These issues are recognised in the ATSIC evaluation, and the study also reported a need for more effective communication between ATSIC and the local projects (ATSIC 1997, pp. 19–21).

#### 2.8 Rural communities

#### Landcare

Landcare is 'a community-based approach to fixing environmental problems' (Landcare 1999a, p. 1). Comprising over 4 250 groups around Australia, the program seeks to promote community, industry and government partnership in the management and preservation of natural resources through raising awareness and building local capacity to manage the land. These groups vary from local initiatives focused on specific issues, through to regional projects, and to national bodies that include the Landcare Australia Foundation and Landcare Australia Limited. Unlike most of the other programs discussed in this chapter, Landcare does not address negative social indicators, but it is a response to a major negative outcome for rural community wellbeing that impacts on positive indicators—for example, land degradation may have a deleterious effect on rural economic growth.

Funding for Landcare programs comes from various sources. Predominantly a combination of government and industry funding, in 1997 the total level of income to the program nationally was \$280 million. An evaluation of the first decade of Landcare suggests that the program has been successful in its environmental impact, but perhaps as importantly in the community-building outcomes that have been achieved (Landcare, 1999b). At the same time, this review recognises that further work must be done in capacity building; the even wider acceptance of sustainable agricultural practices; and greater linkage between small local projects and a wider regional vision. A cost-benefit analysis of the Landcare program was not part of this review. Given the complex network of projects and subprograms, such an analysis would be extremely difficult for Landcare overall.

Community involvement and partnership with industry and government in Landcare are the strengths of the program. One in three farmers are members of Landcare groups (Martin & Halpin 1998). Independent studies of Landcare have shown that the programs have been very successful in promoting local participation and the use of best practice (Curtis & De Lacy 1998) and in developing local leadership (Martin & Halpin 1998). Studies also sound a cautionary note about the way in which corporate sponsorship of Landcare projects is a success in itself, but it may sometimes be a substitute for a more substantial review of the impact of manufacturing practices on the environment (Lockie 1999). Curtis and De Lacy (1998) argue for further policy development to strengthen the community building and environmental achievements of the program.

#### Rural women in leadership

Increasing research evidence points to the importance of women's leadership for the strengthening of rural communities (Walls & Tanner 1994; Bourke & Luloff 1997). The view that 'there are no women out there' wishing to take on leadership roles is countered by a weight of evidence that when the right circumstances and opportunities are available, women in rural communities want to be involved (Alston & Wilkinson 1998). Indeed, women have often been the community members that have held rural societies together through networking and local community activity (Alston 1995).

Haslam McKenzie notes that rural women contributed approximately \$9 billion to Australian gross national product (GNP) in 1995–96 (1998, p. 265). However, beyond this 'their contribution to social capital is immeasurable'. Women in agriculture and rural industries, whether as single farmers, farming with a husband or partner or in other rural work, frequently provide forms of leadership that are only now becoming recognised. In her case studies, Haslam McKenzie (1998) identified as the outcomes of women's leadership: the presence of a telecentre; a plan for a locally-managed credit union to replace the bank which had closed its branch; promoting tourism as a source of local economic activity, and establishing a Business Development Group. Despite a series of national reports recognising the problems of women's leadership being blocked, excluded or ignored, Haslam McKenzie points to a continuing need to find ways of promoting opportunities for rural women to develop and/or exercise leadership (1998, p. 267). She argues that without this, rural communities will continue to decline rather than to be strengthened.

Ferrari and McKinnon (1998) summarise a series of papers from the Second International Conference on Women in Agriculture. They note McGowan's work with Women in Agriculture, which includes a program of leadership workshops for women. Initial qualitative responses are that these workshops provide considerable encouragement and capacity building for rural women. The program ran until 2000 and a full evaluation was not available at the time of writing.

Also included in this review is a summary of Scott's work in north-west NSW. This is a case study of women's economic and community leadership exemplified by Scott (who was ABC Woman of the Year 1996 and Sydney *Business Review* Business Woman of the Year 1997). While not a program, this example illustrates several of the key 'strong communities' indicators, including the development of local economic capacity, networks, voluntarism and best practice.

Studies of women in rural leadership identify continuing systemic and structural issues that exclude women from leadership to the detriment of country Australia. Although it is difficult to extrapolate cost-benefits, the centrality of women's leadership for social capital building in rural communities is indisputable. This is underlined by the figures for women's visible and invisible contribution to rural economies (and hence to the national economy) in leadership, direct employed labour, unpaid domestic labour and voluntary community effort.

#### **Community Builders**

IDEAS, a private development company based in York WA, describe Community Builders as '...a six month program that seeks to identify, encourage and empower local residents to become more involved in building their community and its economy' (2000, p. 1). The program operates by identifying a team of between two and five people. Each team consults neighbours in its local area and then meets on a monthly basis with other teams in a 'community cluster' of between six and ten community teams. Each cluster is supported by a facilitator who acts as a coach to assist in the formulation of initiatives.

The principles of the program, which are reflected in its objectives, are:

- · self-reliant attitudes are fundamental to community change;
- development of local leadership is the key to success;
- local solutions to local problems are the most effective;
- enhancing economic development leadership through engagement with (best) practice in economic development; and
- partnership and networks are more effective than competition and are possible (IDEAS, 2000, p. 2).

These principles clearly parallel the stronger communities indicators identified in Chapter 1. As a program, Community Builders is also highly participative, as it requires engagement in a continuing series of meetings, workshops and implementation in local activity. It is a voluntary movement and reflects the spirit of 'bottom-up' process that is a central feature of much community development practice.

An evaluation of Community Builders has yet to be undertaken. However, the anecdotal qualitative evidence is that it is being sought by rural communities as a practical strategy for developing stronger communities.

## 2.9 Community economic programs

#### Food-Share Australia

Food-Share Australia is a self-help community development program that aims to assist its participants to be of service and add value to their local community (Food-Share 1999). Targeted to people who live on or below the poverty line, it provides \$30 worth of food each month to a person who contributes \$15 and undertakes two hours of voluntary service. A family may be involved in purchasing multiple units on a pro-rata basis. In addition to the receipt of food, the participants may access nutritional advice.

Food-Share is a registered charity and a Public Benevolent Institution. Its start-up costs have been funded by the New South Wales Government (details not provided in available

reference), in cash and in kind, and it has begun to receive wider community support from individuals and groups (also both cash and in kind). While too new to have been evaluated, this program does evidence several of the 'stronger communities indicators', including building capacity, promoting networks, supporting voluntarism and encouraging local initiative.

#### Local Exchange and Trading Systems

Local Exchange and Trading Systems (LETS) are a coordinated means by which the interchange of goods and services in a local community can be harnessed to the 'building and strengthening [of] people's sense of belonging to communities' (Lang 1994, p. 4). It does this by creating a system based on a local alternative to the mainstream economy. The nominal value of exchange is defined in units (many of which are given colourful local names). The basic premises of these systems, however, prevent the medium of exchange from becoming a shadow currency (which is, in fact, illegal in most countries where these systems have developed). These premises are:

- · non-profit making;
- no compulsion to trade (voluntarism);
- information about balances open to all members;
- the LETS unit is equated to national currency (most but not all systems); and
- · no interest is charged or paid.

Coordination of a system is seen as work undertaken, and so is 'paid' in LETS units raised from members' subscriptions.

The important core of LETS is that the tangible exchange that is taking place is the result of people's efforts of within the same community. This is described by its advocates as an inclusive aspect of the systems, because it allows people to participate both in giving ('selling') and receiving ('buying') who might be excluded by the formal economy. Members do not leave the formal economy, and the LETS transactions are included in tax declarations in countries such as the United Kingdom, Canada and Australia. In the United Kingdom they are included in social security assessments, while in Australia they are exempt (Lang 1994, pp. 117–24; Williams 1995, p. 18). In neither country does participation in LETS excuse a person from seeking work if in receipt of unemployment benefits, but the schemes are accepted as a means by which people maintain their skills and stay in touch with the formal labour market.

LETS are described by their proponents as good for national economies, through the benefits created for local economies and communities. Williams (1995, p. 5) points to the development of community; the development of resilience in local economies; and assistance for people to maintain and improve their skills and self-esteem and so being able to participate more in community building. Croft (1995, pp. 36–8) goes further, and argues that where local trading may have a multiplier effect of \$1.41 value for every \$1 initially spent buying locally, LETS creates an equivalent (some of which will be returned to the formal economy) of \$1.96 for every \$1 spent. The benefits of stronger community arising from the social capital accrued can be estimated to make the real value even higher.

#### Local empowerment/enterprise zones

The Empowerment Zone/Enterprise Initiative is a US program, which has been implemented in 126 urban and rural areas. It is aimed at regeneration of declining communities through tax incentives, performance grants and loans to promote local economic activity (United States Department of Housing and Urban Development 1999). Although this is a federal government program, the role of government is to coordinate and support local participation by bringing together community and industry in an integrated and comprehensive way (Walker & Weinheimer 1998). It thus differs from previous enterprise development programs in its community-based focus and the emphasis on local initiative and action.

There is already evidence that the empowerment zones are meeting the goals of creating economic opportunities through encouraging local economic capacity and community initiative. The inclusion of community members in key elements of the program is a crucial factor (Detroit Empowerment Zone Transition Office (DETZO) 1999). Difficulties in the evaluation of the program include a tendency to concentrate on outputs (the amount of work produced) rather than outcomes (the achievement of results measured against objectives) (United States General Accounting Office 1996). Little evaluation has actually been done, and some problems have emerged such as an overstatement of non-government funding and inaccuracies in the reporting of achievements (Ryan 1998). Nonetheless, the Detroit zone has reported outcomes of increased economic opportunity, improvements in the sustainability of communities and some restoration of neighborhoods (DETZO 1999).

## **Community Business Partnership**

The Community Business Partnership program is an Australian initiative, launched by the Prime Minister in 1999 (Department of Family and Community Services 1999a). The program seeks to foster partnerships of mutual benefit and for the benefit of the community. Such partnerships are based around the involvement of business with a variety of community projects, in partnership with the non-government not-for-profit sector and community groups. In particular, the program aims to identify incentives to a philanthropic approach on the part of business, and where necessary to devise relevant ways of addressing disincentives.

Best practice examples are provided in the listing of the most outstanding partnerships in 1999, as reflected in the Prime Minister's Awards for Community Business partnerships (FaCS, 1999b). The 20 projects to win awards in 1999 encompassed a wide range of community issues, including:

- · family support services
- employment for disabled people
- community sports for youth
- · community economic and enterprise development
- · community law centre
- youth employment and training
- environmental and landcare projects

In each case the partnership engages the interest and support of businesses while supporting the management of projects by community groups and non-government bodies. As a new program there is no formal evaluation yet, but the early evidence is that the partners all regard the arrangements as successful.

#### Volunteering

Many of the different programs and projects included in this report incorporate an aspect of voluntarism in their approach. Some are entirely focused on volunteers. This is important, in that the notion of civil society includes voluntarism as a key element and some recent evidence suggests a 'depletion' of voluntary contributions in western societies (see Chapter 1). Beyond the incorporation of volunteering within programs, volunteering is also a focus for specific attention in its own right as a contributor to the building of social capital. The national peak body in this sector is Volunteering Australia, which also has constituent state and territory affiliate associations. These organisations exist to promote volunteering and to support a wide variety of community effort in which volunteers are used. Volunteering Australia promotes clear definitions and principles of volunteering, which are grounded in the idea of civil society (Volunteering Australia, no date). These are:

- · volunteering benefits the community and the volunteer;
- volunteer work is unpaid;
- · volunteering is always a matter of choice;
- volunteering is a legitimate way in which citizens can participate in their community;
- volunteering is an activity that is performed in the not-for-profit sector only;
- volunteering is not a substitute for paid work;
- volunteers do not replace paid workers or threaten job security;
- volunteering respects the rights, dignity and culture of others; and
- volunteering promotes human rights and equality.

Volunteering Australia argues that these principles are important because, without them, the contribution of volunteering to civil society is undermined. The notion of volunteering is incompatible with coercion, unpaid labour for the profit of someone else or as a means of intervention in industrial disputes (see also Lyons 1997; Hudson 1998).

Some critical research has suggested that volunteers are more likely to be members of groups within communities who are otherwise absent from the labour market (whether by choice or not). In particular, large numbers of volunteers are seniors (of both sexes) and younger women (Warburton 1997; Baldock 1998). However, such research also shows that there is a significant difference between volunteering and 'unwaged work' that makes volunteering a strong contributor to various aspects of communities (Kerr & Savelsberg 1996). This derives from the sense of 'volition' or willingness inherent in voluntary effort compared to the compulsion of necessity implied in the idea of 'unwaged work' (see the discussion about

social capital in Chapter 1). Volunteering has declined slightly in Australia in the last decade (Lyons & Fabiansson 1998), although it remains an essential part of the life of many communities and a source of community service (Jamrozik 1996). There is broad agreement that volunteering can be nurtured with appropriate responses from government and business. These include the valuing of volunteer effort; recognising that volunteering is complementary to (and not a replacement for) paid employment in the delivery of community services; and that volunteering is clearly distinguished from any compulsory activity (such as 'work for the dole' or 'community service orders').

The cost of coordination, training and managing volunteering is difficult to determine, although the benefits of specific programs to develop and maintain volunteering are clearly evident in studies such as that by Jamrozik (1996) and Lyons and Fabiansson (1998). A more detailed cost-benefit analysis cannot be undertaken at this time. The cost-benefits of some specific volunteer programs are noted under other headings (see chapters 3, 4 and 5). The wider benefits for communities from volunteering identified in these studies not only include the exchange of skills and ideas and the networking that is inherent in organised voluntary service, but also gains in local leadership and in the development of local solutions to local problems.

## 2.10 Community wellbeing—conclusion

This chapter has shown that there is increasing recognition of the importance of community participation and the role that community groups play in developing strong and healthy communities. The building of trust and reciprocity leads to an increase in social capital, which is an important ingredient of positive community functioning. There is significant research to support the notion that people with diverse networks of quality relationships are healthier than people who are socially isolated. In this context, health refers to the physical, mental and social wellbeing of people.

A key to building stronger communities is to have structures in place to identify community leaders and other highly-motivated community members. Community-building projects are improved where the inputs of relevant professionals working in the community are mobilised and where these skills are utilised in a multi-disciplinary framework. The building of social capital through community-based programs is also facilitated where opportunities exist:

- to enable skill development in areas such as organising groups, running meetings, lobbying, writing grant applications, and so on;
- to enable the identification of funding sources and the capacity to bid for these funds; and
- to build better links with other community groups and organisations; to publicise achievements; and, in turn to access information about other communities' achievements.

 Table 1:
 Summary of community wellbeing programs reviewed

Program/ Project Title	Program/ Project Description <sup>1</sup>	Target Community/ Group²	Funding sources Project Costs <sup>3</sup>	Outcomes <sup>4</sup>	Evaluation <sup>5</sup>	Contact Details
Health Development and Social Capital Project	Review programs in western suburbs of Adelaide, SA, looking at individuals and community groups.	Residents of western suburbs in Adelaide.	Research project funding from National Health and Medical Research Council.	(from programs studied) Social indicators: increased social capital. Strong communities' indicators: knowledge/skills and volunteering; networks and partnerships in communities; leadership in communities; local solutions to local problems; community capacity to use best practice.	Qualitative data only, no cost-benefit analysis.	SA Community Health Research Unit, Flinders University.
NSW Dept. of Housing — Neighbourhood Improvement Program	Cost-benefit analysis of objectives of planned intervention for community development program in Airds, NSW.	Residents of Airds, NSW.	NSW State Government. \$100 million over 13 years.	(projected outcomes) Social indicators: strengthened local economic capacity; reduced crime; reduced welfare dependency; better health outcomes; reduced long- term unemployment; increased social capital. Strong communities' indicators: networks and partnerships in communities, leadership in communities, local solutions to local problems, community capacity to use best practice.	Quantitative and qualitative data reported. Cost-benefit ratio of between \$6 for each \$1 spent (short-term) and \$17 for each \$1 (long-term) — projected.	NSW Department of Housing.
WACOSS Housing Report	Analysis of three programs to support WA tenants in difficulties.	Residents in WA.	State and federal government, figures not stated.	Social indicators: strengthened local economic capacity; reduced crime; better health outcomes. Stronger communities' indicators: local solutions to local problems.	Qualitative and quantitative. Costbenefit figures not available.	WACOSS, 2 Delphi Street, West Perth. WA 6005.

Description of project aima and location. Pilot, one-off, or on-going. Project length.
By geographic location/region and/or community of interest.
Name of funding program/s or funding sources, total project costs (direct and indirect).
General effectiveness/outcomes as well as social indicators and stronger communities indicators.
Quantitative and/or qualitative evaluation. Availability of cost-benefit data.

Program/ Project Title	Program/ Project Description <sup>1</sup>	Target Community/ Group²	Funding sources Project Costs <sup>3</sup>	Outcomes <sup>4</sup>	Evaluation <sup>5</sup>	Contact Details
Community Research Project	Eighty (80) community projects to improve social circumstances of lowincome families. Australia (national).	Households on low incomes.	Department of Social Security \$18 000 average per project	Social indicators: strengthened local economic capacity;, reduced welfare dependency;, better health outcomes;, reduced long-term unemployment;, increased social capital. Strong communities' indicators: networks and partnerships in communities, local solutions to local problems; volunteering, leadership in communities.	Quantitative and qualitative data reported. No precise cost-benefit analysis.	Department of Social Security.
Community Consortium Middle School	A program involving a partnership between the high school and twelve community social service agencies that commenced in Aurora, USA in 1996.	High-school students.	Fund were raised through local council funds and grants to the value of US\$35 000 for the first year of the project.	Stronger communities' indicators: networks and partnerships in communities.	Not known from the material cited.	N/A
Parent Involvement Program	A program aimed at increasing parent participation in schools, based in Aurora, USA.	Elementary school students.	Not known from the information cited.	Social indicators: reduced absenteeism. Stronger communities' indicators: networks and partnerships in communities.	Not known from the material cited.	N/A

Description of project aima and location. Pilot, one-off, or on-going. Project length. By geographic location/region and/or community of interest. Name of funding program/s or funding sources, total project costs (direct and indirect). General effectiveness/outcomes as well as social indicators and stronger communities indicators. Quantitative and/or qualitative evaluation. Availability of cost-benefit data.

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Program/ Project Title	Program/ Project Description <sup>1</sup>	Target Community/ Group <sup>2</sup>	Funding sources Project Costs <sup>3</sup>	Outcomes <sup>4</sup>	Evaluation <sup>5</sup>	Contact Details
Communities that Care	Increasing community resilience and developing community mobilisation, Seattle and Oregon, US. Increasing community resilience, Melbourne VIC.	Residents in target communities.	Data not reported.	Social indicators: strengthened local economic capacity; reduced long-term unemployment; increased social capital.  Strong communities indicators: knowledge/skills and volunteering; networks and partnerships in communities; leadership in communities; local solutions to local problems, community capacity to use best practice.	A great deal of qualitative and descriptive evaluation. Some quantitative material is available, but cost- benefit analyses have not been published in any of the literature cited.	Prof. Richard Catalano, School of Social Work, University of Washington, Seattle, US.
Community Development Employment Projects (CDEP)	Community-based projects to assist Indigenous Australian communities to develop autonomous economic activity (national).	Members of Indigenous communities who would be eligible for unemployment benefits.	Pooling of unemployment benefits plus capital and recurrent running costs of projects. \$2 600 per person per year (1997 figure). Government-funded, plus commercial loans.	Social indicators: strengthened local economic capacity; reduced welfare dependency; reduced long-term unemployment; increased social capital. Stronger communities' indicators: knowledge and skill; networks and partnerships; leadership in communities; local solutions to local problems; community capacity to use best practice.	Quantitative and qualitative analysis. Cost-benefit analysis by extrapolation of a minimum annual gain of \$2 for each \$1 spent (may be as high as \$10 for every \$1 in some aspects).	ATSIC.

Description of project aima and location. Pilot, one-off, or on-going. Project length. By geographic location/region and/or community of interest. Name of funding program/s or funding sources, total project costs (direct and indirect). General effectiveness/outcomes as well as social indicators and stronger communities indicators. Quantitative and/or qualitative evaluation. Availability of cost-benefit data.

Program/ Project Title	Program/ Project Description <sup>1</sup>	Target Community/ Group²	Funding sources Project Costs <sup>3</sup>	Outcomes <sup>4</sup>	Evaluation <sup>5</sup>	Contact Details
Landcare	Community-based approach to fixing environmental problems. Australia (national).	Open membership, heavily represented among rural primary industry and other rural communities.	Federal government and business grant funding.	Social indicators: increased local economic capacity; increased social capital. Stronger communities' indicators: volunteering; networks and partnerships; leadership in communities; local solutions to local problems; community capacity to use best practice.	Primarily qualitative in terms of social evaluation (impact on communities).	Landcare.
Women in Agriculture	Program to develop and support leadership skills among women working in the farming sector. Australia (national).	Women working in the farming sector.	Not available from the literature cited.	Social indicators: increased local economic capacity; increased social capital. Stronger communities' indicators: knowledge and skill including volunteering; networks and partnerships; leadership in communities; community capacity to use best practice.	Qualitative, in progress.	C. McGowan, Women in Agriculture— e-mail: cmcgowan@ albury.net.au
Community Builders	Program to develop leadership and partnership in rural economic development.	Members of rural communities.	Not available from the source cited.	Social indicators: increased local economic capacity; increased social capital. Stronger communities' indicators: knowledge and skill including volunteering; networks and partnerships in communities; leadership in communities; local solutions to local problems; community capacity to use best practice.	Qualitative.	Ideas Inc., York. WA.

Description of project aima and location. Pilot, one-off, or on-going. Project length. By geographic location/region and/or community of interest.

Name of funding program/s or funding sources, total project costs (direct and indirect).

General effectiveness/outcomes as well as social indicators and stronger communities indicators. Quantitative and/or qualitative evaluation. Availability of cost-benefit data.

Program/ Project Title	Program/ Project Description <sup>1</sup>	Target Community/ Group <sup>2</sup>	Funding sources Project Costs <sup>3</sup>	Outcomes <sup>4</sup>	Evaluation <sup>5</sup>	Contact Details
Food-Share Australia	Program to support low- income individuals and families through food subsidies integrated with support for voluntary community effort, Sydney, NSW.	Individuals and families on low incomes.	State government seed grant, with community and business partnership funds, plus part contribution by participants. Project costs not available.	Social indicators: reduced welfare dependency; increased social capital. Stronger communities' indicators: knowledge and skill including volunteering; networks and partnerships; leadership in communities; local solutions to local problems.	Qualitative, in progress.	Food-Share Australia,
Local Exchange and Trading Systems (LETS)	Community voluntary networks of neighbours who exchange goods and services through a local non-monetary system.	Anyone in a community who wishes to participate.	Unfunded. On-going 'costs' of running a scheme are included as voluntary effort and 'reimbursed' accordingly. Trades and exchanges may be given nominal cash equivalent value based on local market rates.	Social indicators: strengthened local economic capacity; increased social capital. Stronger communities' indicators: knowledge and skills including volunteering; networks and partnerships; leadership in communities; local solutions to local problems; community use of best practice.	Qualitative and quantitative. Costbenefit of \$1.96 for each \$1 spent (as calculated by Croft 1995, on the basis of a multiplier effect on local economic activity, priced at market equivalent values).	Not available.
Local Empowerment/ Enterprise Zones	Structured government intervention through tax incentives, grants and loans to promote local business and community development, US.	Urban and rural areas with high indicators of community need.	Government, industry and private philanthropy in partnership. Exact figures not provided (vary by program). Emphasis on corporate foundations and private philanthropists.	Social indicators: strengthened local economic capacity; reduced crime; reduced welfare dependency; increased social capital. Strong communities indicators: networks and partnerships in communities; leadership in communities; local solutions to local problems.	Quantitative and qualitative. Averaged over \$25 million per year through 1990s. Cost-benefit analysis not available.	Not available.

Description of project aima and location. Pilot, one-off, or on-going. Project length.
By geographic location/region and/or community of interest.
Name of funding program/s or funding sources, total project costs (direct and indirect).
General effectiveness/outcomes as well as social indicators and stronger communities indicators.
Quantitative and/or qualitative evaluation. Availability of cost-benefit data.

Program/ Project Title	Program/ Project Description <sup>1</sup>	Target Community/ Group <sup>2</sup>	Funding sources Project Costs <sup>3</sup>	Outcomes <sup>4</sup>	Evaluation <sup>5</sup>	Contact Details
Community Business Partnership	To promote partnership between industry and the non-government welfare sector, Australia (national).	Businesses and non-government welfare agencies.	Minimal government funding (BUT THERE WAS OVER 13 MILLION DOLLARS FOR THE PROGRAM OVER FOUR YEARS) for co-ordination and publicity, with funds going direct from business to community service agencies.	Social indicators: increased social capital. Stronger communities' indicators: volunteering; partnerships in communities; local solutions to local problems.	Yet to be undertaken. Cost-benefit not available.	Department of Family and Community Services. Philanthropy Australia.
Volunteering Australia	National co-coordinating body for state organisations to promote volunteering across all sectors of the community, Australia.	Anyone who is interested in volunteering or in using volunteers in a community project.	Federal Government(*CHECK EDIT)	Social indicators: increased social capital. Stronger communities' indicators: knowledge and skills including volunteering; networks and partnerships in communities; leadership in communities; local solutions to local problems.	Qualitative. Cost-benefit analysis not available.	Volunteering Australia, Floor 4 Ross House, 247-251 Flinders Lane, Melbourne. VIC 3184

Description of project aima and location. Pilot, one-off, or on-going. Project length. By geographic location/region and/or community of interest. Name of funding program/s or funding sources, total project costs (direct and indirect). General effectiveness/outcomes as well as social indicators and stronger communities indicators. Quantitative and/or qualitative evaluation. Availability of cost-benefit data.

# 3. Early childhood and families

The available literature clearly establishes the benefits of community-based early childhood and family prevention and intervention programs. This includes in terms of both the dollar value of many of the programs, as well as in building stronger and healthier families, and in turn, communities (Greenwood 1999; Bright 1997; Morrison et al. 1997; Tomison &Wise 1999; McCain & Mustard, 1999).

There has been increasing recognition that a child's development in the first few years of life sets the foundation for lifelong learning, behaviour and health (McCain &Mustard 1999; Greenwood 1999). Investment in early childhood development has been found to 'increase the efficiency of primary-school investments and human capital formation, foster valued social behaviour, reduce social welfare costs, stimulate community development, and help mothers become income earners' (Young, 1997, cited in McCain & Mustard 1999, p. 330).

The significance of education in helping to reduce the effects of socio-economic disadvantage and difference has also been emphasised (Tomison &Wise 1999), as has the positive effects of holistic and community-based approaches (Bright 1997; Morrison et al. 1997; 1999; Tomison &Wise 1999; McCain & Mustard 1999).

A note of caution has been consistently made, warning that disadvantages experienced by children, families and the community will not be solved by ameliorative programs alone and that structural causes must also be addressed (Tomison &Wise 1999; Zigler & Styfco 1996; Greenwood 1999; Bright 1997). Further notes of caution have been that the effectiveness of community-based programs should not lead to the replacement of individually-targeted programs (Tomison & Wise 1999; Bright 1997; McCain & Mustard 1999; Zigler & Styfco 1996). Also, while providing prevention services can reduce the need for spending on compensatory and remedial services, not all social expenditures are preventable or can be eliminated. Not all prevention efforts will reach those who need them, or will always be successful with those that they reach (Iowa Kids Count Initiative 1993). The importance of combined, comprehensive approaches consistently underpinned these comments. A range of literature emphasised the need for targeted programs to at-risk groups. At the same time, programs were being expanded to be community-based with aims to change the developmental system and build healthy communities rather than be purely individual-based interventions (Bright 1997; Cox 1997; Morrison et al. 1997, p. 532; Tomison & Wise, 1999).

Over the years, a number of approaches have been developed with increased emphasis on the merits of community-based approaches which foster social networks and strengthen partnerships (Bright 1997; Tomison &Wise 1999). The need to reduce risk factors and strengthen protective (resiliency) factors for children at risk has also been a consistent theme. There has been a groundswell of support for emphasis on holistic prevention strategies and integrated whole-of-community approaches (Watchel 1994; Hay & Jones 1994; United States' (US) Advisory Board on Child Abuse and Neglect 1993; Tomison 1997; New South Wales (NSW) Child Protection Council 1997; National Crime Prevention 1999, cited in Tomison & Wise, 1999, p. 2). There was also broad recognition that coordinated services can better meet

the needs of children and their families and stretch available funds through, for example, the pooling of resources (Morrison et al. 1997, p. 531; McCain & Mustard 1999; Tomison & Wise 1999).

Key settings for programs have included—kindergarten, schools, child care centres and other community settings. Of note is that schools were a key community setting for many early childhood and family programs. Programs have focused on a range of areas including early childhood development; child abuse/maltreatment preventions and interventions; education including children at-risk interventions; and family support interventions. Depending on the target group/s, program aims and approaches adopted, there is inevitable overlap among programs in their setting and focus.

Specific program examples are discussed, as well as broad and recurring themes that link with building stronger communities.

## 3.1 Early childhood development

The Iowa's Kids Count Initiative (1993, 1995) was part of an effort to develop an *Iowa Blueprint Investment Strategy* for Iowa's young people. (See chapter 2). The initiative produced a working paper that identified what Iowa social expenditures were preventable and what increased economic activity was possible if very young children started their lives more likely to achieve their full potential. As part of this process, costs that could be associated with a lack of developmental supports and nurturing in the early years were summarised as including:

- untreated health conditions;
- · neurological disorders and associated costs;
- emergency room costs;
- special education expenditures;
- · grade retention and associated costs;
- · school dropout costs, lack of employability, and costs in lost economic activity;
- child abuse and maltreatment intervention costs (including foster treatment costs);
- juvenile delinquency and associated costs;
- welfare dependency and associated costs;
- homelessness and associated costs;
- · mental illness and associated costs: and
- adult criminal behaviour and incarceration costs, as well as crime-associated costs (1993, pp.19, 23).

The Iowa Kids Count Initiative calculated that if prevention initiatives reduced the social costs associated with preventable poor outcomes by just five per cent, then public savings on

compensatory, remediation and rehabilitation services, maintenance and basic needs programs and social control and public protection would be more than US\$108 million. The estimated savings outweighed the amount invested at that time in prevention and early intervention services by more than five times. The savings would have been even greater if an increased proportion of preventable outcomes were achieved, and/or if other potential gains to society were factored in, such as increased tax revenues from a more skilled and productive workforce (Iowa Kids Count Initiative 1993, 1995).

While few actual cost estimates were available for the specific preventable social expenditures such as those outlined in the Iowa Kids Count Initiative, costs of child abuse and neglect in Australia were obtained. A cost estimate was for annual (1995–96) fiscal and economic expenditure on child abuse and neglect in South Australia (SA) (South Australia Office for Families and Children and the Australian Institute of Family Studies 1999). A lack of specific data relating to inadequate reporting systems meant that economic cost estimates relied heavily on estimates of both the incidence of abuse and actual expenditure.

Only expenditure incurred directly (or likely to be incurred) and immediately attributable to child maltreatment was included, meaning that final calculations did not include expenditures such as for services to adults as a result of their experience of abuse as children. Estimates were made where exact data could not be extracted. The instance of child abuse formally reported was estimated at to be between 0.8 and 1.6 per cent, although it was noted that the incidence of child abuse and neglect is generally recognised to be much greater than those reported. Based on this, an estimate of a five per cent incidence of child abuse and neglect was made, but this was seen as a conservative estimate.

Total expenditure in SA was estimated as \$354.92 million. This comprised \$51.59 million expenditure for responding to known incidences of child abuse and neglect (\$41.41 million) and for expenditure in responding to child abuse and neglect not reported to child protection services (\$10.18 million). The costs for responding to abuse-related child deaths, disability, injury and impairment were calculated to be \$303.33 million. A comparison is drawn between these total costs and other budget areas, as a measure of the relative magnitude of potential savings through an effective prevention program. It was also noted that child maltreatment absorbs more than the state earned from major exports in wine (\$318.46 million) and wool and sheepskin (\$239.86) in the same fiscal year.

To help with forecasting future cost estimates, the South Australian report recommends that measures be implemented to improve recording on service demand and expenditure on child abuse and neglect. It also recommends that a minimum additional expenditure of one per cent of the total amount of child maltreatment costs to the state (\$3.5 million) be made in an extended prevention program. In terms of potential gains by commercial standards, this was seen to represent a modest investment.

The New South Wales (NSW) Department of Housing produced some social cost estimates for its case study on the Airds neighbourhood (Stubbs & Storer 1996). Some of these costs are cited elsewhere in this report. A cost more relevant to this chapter includes family stress. This was estimated as the direct costs of entry into care and costs per notification incident for the

NSW Department of Community Services' Campbelltown Community Service Centre. The annual budget for the centre was taken and divided by the number of children in care to produce a cost of \$3 660 per entry into care per child. Similarly, the centre's annual budget less substitute care and cash grants was divided by the number of notifications to provide a cost of \$2 215 per notification incident. This then allowed a cost to be calculated for a particular locality based on the unit cost being multiplied by the incidence of notifications for the area.

A summary of a report *Investing in Our Children: What we Know and Don't Know about the Costs and Benefits of Early Childhood Interventions* is reported on in Greenwood (1999). Unfortunately, the original report could not be obtained for this project and the summary lacked program details. Nevertheless, the summary provides some data worth noting. Through a critical review of relevant literature, the report examined a range of early intervention programs to assess whether targeted children and their families benefited, and whether government funds invested early in the lives of children would yield compensating decreases in government expenditure. This led to the conclusion that early interventions do provide significant benefits to children and their families. The report also made findings that early interventions might save some children and their parents from incurring state expenditures from criminal justice, welfare and other costs (the report did not extend its claims to all types of early interventions). Also noted were limitations of evidence collected to date and how improved evaluations would be of value. Nine programs were reviewed in the report (unfortunately, no program details were provided in the summary paper) and found to lead to the following advantages for participants compared to control group members:

- increased child development (emotional or cognitive), typically in the short term or improved parent-child relationships;
- improved educational process and outcomes for the child;
- increased economic self-sufficiency, initially for the parent and later for the child (through increased incomes stemming from increased labor force participation and decreased welfare dependency);
- · decreased criminal activity; and
- improved health-related indicators such as child abuse, maternal reproductive health, and substance abuse (Greenwood 1999, p. 1).

These factors are consistent with outcomes reported, for example the Iowa Kids Count Initiative and other programs reviewed in this chapter.

#### The Early Years Study

The *Early Years Study* is a comprehensive, 200-plus page report, commissioned by the Ontario government in 1998 (McCain & Mustard 1999) focusing on children in the early years (aged 0 to 6). The Study sought to learn more about how government, communities and parents could positively affect young people's lives and how young people could be better prepared for life success (in school, their careers and society). Whilst not providing a cost benefit analysis, important background information is provided in this report.

The study sought to learn about how the lives of young children, including those with special needs or at-risk could be enhanced for educational, career and social success. It confirmed that the better the nurturing and learning experience in early childhood involving parents or other primary caregivers, the better the outcomes. These findings covered all socio-economic groups in society. It also found that the early childhood years and childhood development was equal to, or in some cases of greater importance in long-term impacts on people's lives than the time spent in education or post-secondary education. However, it noted that expenditures for early childhood are far outweighed by expenditures for older children and adults.

For example, with the overall provincial expenditure on programs for children up to 18 years in Canada at C\$17 billion, the annual average expenditure per child for children up to six was approximately \$2 800, compared to approximately \$7 250 per year for children aged six to 18. Less than a third of expenditure on the below-six age group was for 'universal' programs, with the remainder for treatment-based programs for children with problems. The study found that the programs lacked a cohesive system to meet the diversity of needs, and that whilst excellent initiatives existed, they did not meet the needs of all families with preschool children. One of the key conclusions was that investment in the earlier years is more cost-effective than remedial programs later in life seeking to address problems stemming from poor early development.

The study outlined key research on brain development and early childhood development, and the effects of the early years on learning, behaviour and health throughout life. It examined the socio-economic context and how Ontario children were faring. The mismatch between opportunity and investment in the early years was highlighted and the importance of building on what is working in communities was discussed.

The study outlined recent early childhood program initiatives and incentives for early childhood development in Ontario (pp. 105–26). Financial details were provided for some programs and incentives, although the examination did not extend to a cost-benefit analysis and insufficient detail was provided to merit their inclusion here. Follow up of these initiatives may be warranted at a later stage.

The study also found that increased community-based initiatives and investment (both public and private) would enhance communities through a range of effective strategies. A number of effective strategies for providing community-based early childhood programs were suggested (pp. 131–45):

- building on existing community strengths;
- a coherent and comprehensive approach;
- · collaboration:
- integration of government services and programs with community-based initiatives (public and private sector);
- respecting diversity and local initiative;
- empowering community leadership;

- · providing universal systems and targeting at-risk groups from within these systems; and
- not increasing resources for early year's programs at the expense of disadvantaged older children.

The study recommended a comprehensive early childhood development framework involving early childhood development and parenting programs across all socio-economic groups (pp. 147–72).

#### 3.2 Child abuse/maltreatment

Figures collated by the Australian Institute of Health and Welfare (AIHW) (1999) indicate the incidence of child abuse/maltreatment. For 1997–98, the AIHW estimated child abuse and neglect in Australia to total 98 613 notifications (involving 77 399 children) and 26 025 substantiations (involving 21 772 children). Substantiations varied in severity, ranging from classifications of severe to having causing significant harm, causing moderate harm and posing no further risk. Only cases substantiated by community service departments were included and unreported incidents or incidents reported to other agencies were not included in the data. This indicates that the figures are greater.

The highest proportion of children who were the subject of substantiation was in the age groups 5 to 9 years and 10 to 14 years. A relatively high proportion was also noted for children under one year. Notably, Indigenous children experienced a markedly higher rate of child abuse and neglect for all states and territories except Tasmania. The average rate of 46.4 per 1 000 children aged 0 to 16 years for Indigenous children compared to a rate of 5.6 per 1 000 for other children. Data also indicated that the incidence of child abuse and neglect is greater in sole-parent families. The AIHW saw this as a reflection of the fact that sole parents were more likely to be on low incomes, to be financially stressed and to have less support available in their immediate family. The institute noted other data which suggested that families with low socio-economic status are most likely to be involved in a substantiation of child abuse and neglect.

Child protection orders in Australia were also quantified by the institute and calculated to be 16 449 as at 30 June 1998 (an increase of 731 on the previous year). This equates to a rate of 3.5 children per 1 000 children aged 0 to 17 years. The living arrangements for these children were 85 per cent living in home-based care (34 per cent living in family care (not reimbursed) and 51 per cent living in reimbursed home based care such as foster care); and 15 per cent living in out-of-home care (10 per cent in facility-based care and four per cent living in other arrangements, including independent living). Again, the rate for Indigenous children who were on care and protection orders was 15.5 per 1 000 children and five times the average rate for other children (3.0 per 1 000). Indigenous children were also more likely to be placed in out-of-home care with a rate of 14.2 children per 1 000 in Australia as at 30 June 1998 and more than five times the rate for other children (2.6 per 1 000).

The above figures support the literature on child abuse/maltreatment. Mulroy (1997, cited in Tomison & Wise 1999) noted that child maltreatment is complex and associated with other problems including poverty, mental illness, substance abuse, domestic violence, unemployment and lack of social support. The social problems stemming from child abuse/ maltreatment have also been noted in other research. For example, in the Iowa Kids Count Initiative the consensus among child psychology and development workers was that signs of abuse in the early years are forewarnings of involvement in foster care and juvenile justice systems later on. The initiative also noted that significant numbers (25 to 55 per cent) of institutionalised juvenile offenders had histories of child abuse occurring early in life and that the majority of adult prisoners were from dysfunctional families where consistent support and nurturing was lacking (Iowa Kids Count Initiative 1993). Werner & Smith (1992, cited in McDonald et al. 1997 and Tomison & Wise 1999) identified distinctions between children who overcome risk factors and those who did not in a thirty-year longitudinal study. A relationship with a significant adult family member and a caring relationship with an adult in the community were identified as two critical protective factors that promote resilience among vulnerable children throughout their lives.

To address primary and underpinning issues, a holistic, community-based approach is advocated by Tomison and Wise. It is also advocated as a cost-effective means of service delivery through mechanisms such as pooling of resources. Tomison and Wise (1999) discuss community-based approaches in preventing child maltreatment at length. They outline three theoretical constructs that underpin the development of a holistic approach in recent years in Australia and overseas. These include:

- ecological theories of child maltreatment causation, recognising that causes of child abuse and maltreatment are complex and multi-dimensional and underpinned by a number of individual, social and community factors (Garbarino 1977; Belsky 1980; National Research Council 1993, cited in Tomison &Wise 1999);
- the identification of key risk and resiliency (protective) factors that influence children, family and community vulnerability to child maltreatment and other social ills; and
- the importance of the local community and the development of the concept of social capital (Tomison & Wise 1999, p. 2).

Tomison and Wise (1999, p. 3) refer to some specific Australian initiatives, which develop the concept of resilience as valuable in promoting healthy communities. These include The University of Newcastle Family Action Centre project in collaboration with Professor John DeFrain to develop a measure of resiliency in Australia, as well as the Hawkin and Catalano *Communities that Care* model implementation in Victoria (see chapter 2).

#### Sydney neighbourhood study

Whilst not examining any programs in detail that warrant a cost-benefit analysis, Tomison and Wise (1999) do refer to a study with some positive indications of the effects of strong communities. A study by Vinson et al. (1996) of two adjoining neighbourhoods in Sydney is

cited. The neighbourhoods were determined as both economically depressed and displaying differing rates of child maltreatment. The study looked at reasons for the differences in child maltreatment rates and found a major difference to be the structure of social networks within the neighbourhood. Parents in the neighbourhood with the higher rate of abuse were found to have less social networks and community links. This, and other research, has emphasised the value of enhancing a sense of community and building networks and informal support systems in the prevention of child abuse and maltreatment (Vinson et al. 1996; United States (US) National Commission on Children 1991, cited in Tomison & Wise 1999).

Similar to the *Early Years Study*, Tomison and Wise (1999) expand on these themes to note that effective programs to meet the needs of children and families comprise a combined approach involving partnerships. This includes universal services to reduce the effects of maltreatment in early development stages (the earlier the better) through improving parenting skills and reducing risks, and targeting services to those most at risk or who are being maltreated.

The approaches advocated in the above research appear to varying extents in the programs outlined below.

## 3.3 Education—school-based programs

School-based programs featured heavily in the literature. Given that every child links with the school system and schools are the primary place for families with school-age children to meet and interact, this is not surprising. Tomison and Wise (1999) noted that schools offer a key setting for the prevention of social ills and general health promotion. McDonald et al. (1997) noted that low-income families could be provided opportunities through schools to become contributing members of the community.

## The High/Scope Perry Preschool Study and Project Head Start

It would be remiss not to mention two of the earliest intervention programs—the High/Scope Perry Preschool Study and Project Head Start. Despite originating more than thirty years ago, these continue to be cited in literature as best practice models or significantly influencing the development of early intervention programs (McCain & Mustard 1999; Bright 1997; Iowa Kids Count Initiative 1993; Tomison & Wise 1999) and Project Head Start (McCain & Mustard 1999; Tomison & Wise 1999). Both projects have been extensively reviewed and evaluated including a cost-benefit analysis of the Perry Project with very positive results. Brief details for each project are provided below.

### High/Scope Perry Preschool Study

This study is widely referenced by others in the field, noting that it is a program that has significantly shaped early intervention strategies (Tomison & Wise 1999, p. 7). It is one of the few studies to have examined the link between preschool education and reduced delinquency

(Bright 1997 p. 50) and developed estimates of the cost-effectiveness of high quality early childhood development programs (Iowa Kids Count Initiative 1993, p.21).

The Perry Study was a preschool education program that commenced in the early 1960s with a curriculum focus that enabled children to participate in an active approach to learning, facilitated by well-trained teachers. To reinforce the school curriculum at home, home visiting was another component of the program.

Longitudinal studies of program participants were undertaken at age 19 and at age 27. The reported outcomes included an increased proportion of young people who were literate, employed and enrolled in post-secondary education and a reduced proportion of young people who needed special education services, had left school, were arrested, had become a teenage mother or were on welfare. Program participants were also found to have a greater earning capacity and be more likely to be homeowners (Iowa Kids Count Initiative 1993, p. 22; Bright 1997, p. 50; Tomison & Wise 1999, p. 8).

Schweinhart (1987, cited in Potas et al. 1990) estimated that the total benefits in 1981 dollars were approximately US\$28 000 per participant, or approximately six times the cost of a one-year program and three times the cost of a two-year program. This was supported by other work by Schweinhart et al. (1993, cited in Bright 1997, and Tomison & Wise 1999). A cost-benefit analysis quantifying the impact of social costs estimated that, by the time children involved in the study had reached 19 years, there had been a return of \$4 for every \$1 spent on early childhood services. This return on investment became even greater when calculated at 27 years. At this age, the estimated savings of those less likely to require special education services were more than \$7 for every \$1 of taxpayers' money spent on the preschool program (Barnett 1993, cited in Tomison &Wise 1999; Schweinhart & Weikart 1993, cited in the Iowa Kids Count Initiative 1993). Barnett and Escobar (1987, cited Zigler & Styfco 1993) estimated the per-child cost of the Perry School Project to be US\$6 300 in 1986 dollars.

The Iowa Kids Count Initiative offered a cautionery note on the benefits of high-quality preschool programs. It stated that such programs (including Project Head Start, below) are only part of the solution to achieving school readiness and are not a solution for all children or families involved in such programs. It also found that the most gains were to be found in programs that also included an active parent involvement program.

#### Project Head Start

Project Head Start commenced in 1965 with to give disadvantaged preschool children aged three to five years a 'head start' to help them commence elementary school with competence levels similar to their middle-class peers. The program had an initial enrolment of more than 500 000 children. Early studies of Head Start focused on improvements to children's intelligence test scores. The findings were that while children who attend preschool increase their IQ score for some years, this boost eventually fades. However, lasting effects were found in other areas. These included that children were less likely to be referred to special education classes or to repeat a grade in school (Zigler & Styfco 1993). Another Head Start study found that children had better health, better immunization rates and nutrition and improved socio-

economic circumstances (McKey et al. 1985, cited in Zigler & Styfco 1993). Other studies showed better school adjustment for Head Start participants, as well as fewer school absences and improved academic performance (Copple et al. 1987, and Hebbeler 1985, cited in Zigler & Styfco, 1993).

Zigler and Styfco (1993) and (1996, cited in Tomison & Wise 1999) noted a number of the outcomes and cost-benefits identified in the Perry School Project. These included savings to society from reduced special education; reduced grade repeats; reduced usage of welfare and criminal justice systems; and contributions to the tax base from higher unemployment). These outcomes and cost-benefits have also been inferred to Head Start and other early intervention programs. Zigler (1993, p. 12) noted that 'although it is somewhat difficult to extrapolate the likely effects of individual Head Start programs ...the salient effects of high-quality programs are sufficiently consistent to permit an inference of at least broad developmental benefit'. However, Zigler and Styfco (1993) did note that the attributing the Perry School Projects' reports of \$7 savings for every \$1 invested to Head Start appears to be in part because of media elaboration. It was also noted that findings for the Head Start program were too modest or that data were lacking on program outcomes to make such direct correlations (Haskins 1989; Woodhead 1988). Zigler (1996) noted that based on positive evidence, Head Start-like programs have seen a resurgence in the US as half-day programs during a school year with some children attending for over two years. No cost-benefit analyses of Head Start Projects (original or current) were cited. Barnett and Escobar (1987, cited in Zigler and Styfco 1993) estimated the per-child cost of Head Start in 1990 to be US\$2 767. The lesser expenditure per child for Head Start compared to the Perry Project was considered a key reason why Head Start had not achieved the extent of outcomes that the Perry Project had (Zigler & Styfco 1993).

#### Families and Schools Together—Australia and the United States

Families and Schools Together (FAST) is a collaborative, school-based early intervention program for children and families. The program is a multi-family, community-based approach originating in the US in 1988 through Dr Lynn McDonald (McDonald et al. 1997; McDonald & Sayger 1998; Coote 1999). It has been implemented in over four hundred school sites throughout the world, including twenty-seven US states, Australia (nine Victorian primary schools), Canada, Germany and Austria. Pilot projects are planned for Queensland, the Australian Capital Territory and Western Australia in 2000 (Coote, 1999).

FAST aims to build resiliency and protective factors for children. Primary-school children aged four to nine years identified within the school system as being at-risk are targeted (if showing underlying risk factors of school failure, child abuse, substance abuse and delinquency). FAST also targets the children's families. FAST involves the collaboration of schools, parents, family support and alcohol and drug agencies over an intensive eight-week program involving volunteer families in strategies and activities involving individuals, families, parents and school-community networks. The first stage of the program commences with teachers identifying at-risk children and home visits to identified families are undertaken to encourage program participation. The eight-week program is followed up with a two-year FASTWORKS program—a series of monthly family-support meetings designed to maintain an active social

network. Staff in the program are also available in between weekly sessions and families sometimes offer contact details to each other for contact in-between and beyond the program. McDonald notes that parent graduates are used to help with future programs. This facilitates ongoing skills' formation as well as job creation. Noted outcomes of participants' involvement in FASTWORKS have included increased community involvement and the emergence of community leaders. The formation and maintenance of strong and ongoing social networks and the building of a sense of community have also been observed (McDonald et al. 1997). Parent testimonies also recognised FAST as having contributed to the pursuit of further education and to obtaining employment (McDonald et al. 1997).

Typically 10 to 15 families participate in a FAST program, involving thirty to fifty adults and children per weekly session. Tangible participation incentives are incorporated in the program including transport, a meal and child care.

FAST seeks to develop a support network for the family and to empower parents to be the primary prevention agent for their child. It has also been designed to promote educational achievement, strengthen family bonds and relationships and build communities. Other goals were identified as fostering feelings of affiliation, and mutual respect and reciprocity among the children's family, school and community environments (McDonald et al. 1997).

Evaluation results are highly positive, showing significant decreases in children's identified behaviour problems (including anxiety/withdrawal and attention-span problems). According to both parents and teachers (an improvement of 20 to 25 per cent in behaviour was calculated) (McDonald & Frey 1999). Another behaviour-related finding was that parents reported that the improvement in their child's behaviour was maintained or improved two to four years after the FAST program had been completed (McDonald et al. 1997). Other program findings by McDonald et al. (1997) included:

- increased child and parental self-esteem (95 per cent of participants);
- increased parental involvement in the child's school (75 per cent of parents);
- reduced social isolation of parents (86 per cent of them having made friends with other FAST participants); and
- increased parental involvement within the community (83 per cent of parents).

The nature of community involvement by program participants since FAST included 30 per cent in full-time employment; 24 per cent in part-time employment; 44 per cent in further education; 14 per cent in volunteer organisations; 35 per cent in a community center; 32 per cent in church; 17 per cent in a parent-teacher organisation; 26 per cent in counseling; and eight per cent in alcohol or substance abuse treatment. Based on responses by the families involved, improved family cohesion (reduced family conflict and increased expressive play time) was another reported outcome.

Australian data shows high participation and retention rates, with data showing that the program will be completed by 94 per cent of those attending the first session (McDonald & Sayger 1998). This compared to an 88 per cent retention rate for the US (McDonald et al. 1997).

Follow up was made with Coote to elicit more costs details. Funding sources in Australia have been through charitable trust grants. Coote provided cost estimates showing that the cost to operate FAST in one primary school range from \$32 000 to \$49 000 including costs for the two-year follow up program. Other variables affecting cost include the number of FAST team members (maximum is ten, minimum is four) and whether FAST team members are paid to work on the FAST team or require additional payment for the out-of-hours work involved. Depending on how the program was staffed, Coote advised that estimated Australian costs are an average of \$38 000 or less. This was the cost for the program (over two years) for servicing between 20 families (up to 30 children attending with parents) and 30 families (up to 60 children attending with parents). The cost per family unit was estimated to range from \$1 266 to \$1 900 per family over two years.

McDonald and Frey also provided a cost analysis, reporting that the cost per family is approximately US\$1 200 for eighty-six hours of services (30 sessions, including FASTWORKS) over two years. The cost for each school offering two FAST cycles per year to serve 30 families was calculated as US\$30 000 (not including evaluation of FASTWORKS) (1999).

#### **Better Beginnings, Better Futures**

This project was discussed in the *Early Years Study* (1999, pp. 110–11) and further information was obtained via a web search (http://www.opc.on.ca/bbbf/index.html). The project is a 25-year longitudinal prevention policy research demonstration project being implemented in 12 communities across Ontario, Canada. Its aim is to prevent young children in low-income, high-risk neighbourhoods from experiencing poor developmental outcomes that then require expensive health, education and social services.

Better Beginnings, Better Futures is a holistic and integrated program provided initially in eight, and later 12 communities, targeted at economically-disadvantaged and high-risk children aged 0 to 8 years. Program components include child and parent-focused components and community-focused initiatives with the aim of:

- preventing emotional, behavioural, social, physical and cognitive problems in young children;
- · promoting healthy child development; and
- enhancing capacities in socially and economically-disadvantaged communities.

Project funds stem from a range of government sources totalling \$6.64 million per year in 1999.

The program recently completed a five-year demonstration project. Comprehensive data were to be available in 1999 although was not attainable for this project. Children involved are to be monitored as a part of a twenty five-year longitudinal research study to see if they fare better than equally disadvantaged children not participating in the prevention programs. Anticipated long-term program outcomes are that children involved will require fewer expensive services, be less likely to be in trouble with the law, less likely to become pregnant as teens, more likely to stay in school and be healthy, and more likely to be employed as adults. Shorter-term

outcomes are predicted to be that fewer children will require expensive protection and treatment services, be less likely to require special school services and less likely to have chronic illness and injury.

#### **Success for All Program**

Success for All was a school-based achievement-oriented program for disadvantaged students from kindergarten to grade five which originated from a partnership between Baltimore Public Schools and the Centre for Research on Elementary to Middle Schools (Balkcom & Himmelfarb 1993). The program was based on the views that every child can learn and that early success is crucial for later success and that intervention can alleviate learning problems and effective school interventions are comprehensive and intensive. The program sought to:

- address learning difficulties with the aim that every high-poverty school student would finish grade three with grade level reading skills;
- reduce the number of students referred to special education classes;
- reduce the number of students held back to repeat a grade;
- · increase school attendance; and
- address family needs for food, housing and medical care to enable the family to support its child in education (Balkcom & Himmelfarb 1993, p. 1).

The program involved a family support team working to promote parent involvement and build child resiliency. Other services (community and mental health) were provided as necessary. As at 1993, the program had been implemented in 50 schools in 15 states in the US. Program results included improved performance by some children, reduced special education placements and improved retention rates. For example, 3.9 per cent of third-grade students in the program performed two years below grade level, compared with 11.7 per cent of the matched control-group students. Savings in students not repeating a grade and special education placements were found to offset the annual per student cost—an additional US\$800 to the school's usual allowance per student.

## 3.4 Family support interventions

Family support interventions were discussed by Bright (1997) and noted to be effective strategies for averting social and community problems. Family supports include crisis interventions, less intensive supports for families in difficulty, parenting programs and/or a mixture of programs. Targets are families, particularly those at greatest risk, including, those who are poor and socially isolated. Bright noted research findings linking isolated families with factors such as abuse and neglect, school failure, truancy and delinquency (Schorr 1988, cited in Bright, 1997). The benefits of family support interventions can include reduced foster care and out-of-home placements as well as improved parenting, reduced child abuse, improved school achievement and reduced delinquency. For example, Bright referred to programs in the US that claimed substantial reductions in foster care and other out-of-home placements with

cost effectiveness estimates of a return of between \$5 and \$6 on every \$1 invested through reduced long-term foster care, group case or psychiatric hospitalisation (p. 48). Bright noted that improved parenting and reduced out-of-home placements could be expected to reduce later offending patterns. He noted that while this has yet to be proven by longitudinal studies, knowledge of family discord and breakdown and its association with delinquency were reasonable indicators for this conclusion. Bright also noted that action to address outside stresses such as poverty and unemployment which make it difficult to be a 'good' parent, would help family support interventions achieve their full potential.

#### **Homestart**

A United Kingdom (UK) program called Homestart was referred to which aimed to reduce family breakdown through using trained volunteers to support families with preschool children. A positive evaluation was reported with 86 per cent of children registered as at-risk staying out of care (Van der Eyken 1982, cited in Bright 1997). Bright noted that fully attributing these results to Homestart was not possible. Financial details were not provided, which precludes a cost-benefit analysis at this stage.

### Provence group approach

The Provence group approach is a US-based program discussed by Seitz et al. as part of a longitudinal analysis of the program (1985). The program involved coordinated social and medical services (including social work, paediatric care, day care and psychological services) to disadvantaged mothers and included day care for their children. The program began during the mother's pregnancy and continued for 30 months after the birth. The program costs were US\$7 500 per family in 1970–72 dollars over the 30-month intervention period. These were calculated to translate to approximately US\$20 000 in 1982 dollars.

A 10-year longitudinal study produced findings that supported findings from a five-year follow up. These were that the program contributed to significant changes to parents and the interventions had lasting consequences for the families' socio-economic status. The 10-year study compared program participants (mothers and children) to a control group. Its findings included that mothers involved in the program were more likely to be self-supporting (almost all of the program families were compared to about half of the control group families). Program families were smaller—this was believed to be significant in the higher education levels achieved by program mothers (through delays in subsequent childbearing allowing a return to education) compared to the control group. The study also found that mother-child relationships were better in program families than control families. Also it found that program mothers were more active in the school and their child's education. The children involved in the program were found to have better school attendance (an average of 7.3 days absence for program participants compared to 13.3 days absence for the control group). It was also found that boys in the program were less likely to need costly special school services (average service costs for program participants were US\$450 per child compared to US\$1 570 per child for the control group).

Over the ten years, an estimated US\$40, 000 additional welfare costs in 1982 dollars and documented school service costs were calculated as needed each year by the 15 families in the control group. This led to the conclusion that the program was paying itself off at the rate of at least two families per year. The study also concluded that providing services over a long time does not necessarily lead to dependence (as evidenced by the increased self-reliance of program families). Other conclusions of the study were that programs designed to address combinations of problems were likely to be more effective and that comprehensiveness and coordination should therefore be an element of all family support intervention.

## K-Six Early Intervention Partnership

This was a school-based program serving high-risk families through an early intervention, family-centred approach developed in 1984 by a community task force studying high school drop outs. The program was piloted in two schools and later adopted by Fresno Tomorrow, Inc. (a youth services collaborative) and expanded.

The program sought to increase academic and social literacy; promote regular school attendance; reduce chronic transiency; strengthen family functioning; empower parents to serve as effective partners in education; increase community accountability for children; identify fiscal and regulatory barriers to the provision of services; and demonstrate effective means to overcome those barriers. The program involved the cooperation of several agencies using pooled funds (public and private) to provide services and case management to families. Families were identified as high-risk by teacher and parent input and computer analysis. Agency workers (Department of Social Services, social workers, mental health specialists and juvenile probation officers) formed a team with school-based workers. The program involved support and incentives provided at home and in the school in a range of areas including attendance incentives; community and family advocacy; cross-age tutoring; cultural enrichment; family literacy training; mentoring; parent involvement workshops; parenting and household management education and training; and parent and child support groups and recreation.

Positive outcomes were reported for the program. This included referrals for misbehaviour among the children involved reduced by 70 per cent per child; increased parent-initiated contact with the school (from two contacts a year to two contacts a month); a 40 per cent reduction in unexcused absences; and reduced high school drop outs and reduced teenage pregnancy (nil drop outs or pregnancies among the 60 children involved in the program and now in high school).

Fresno Tomorrow, Inc. coordinated the K-Six Program and was funded by the Annie E. Casey Foundation. The Program had an overall budget of US\$1.2 million and the cost per family for services was estimated to be US\$375.

## 3.5 Early childhood and Families—conclusions

The literature reviewed in this chapter clearly establishes the benefits of community-based early childhood and family intervention and prevention programs. The benefits arise from both the cost effectivenes of many of the programs as well as in building stronger and healthier families and, in turn, stronger and healthier communities. As in medicine, prevention is far more effective than remedial action. The premise for early childhood prevention and early intervention programs is the recognition that a child's development in the first few years of life sets the foundation for lifelong learning, behaviour and health outcomes.

From this literature review, it is apparent that a combined approach which links community-based programs with individual prevention and ameliorative programs targeted at 'at-risk' children provide superior outcomes. Similar conclusions can be drawn for family support programs. This is because community-based programs build resilience and protective factors which address the structural causes of disadvantage in ways which are not addressed by individual programs alone. By building social networks and empowering communities, self-reliance and protective factors are strengthened (and there is some evidence that dependency on individual programs is thereby reduced). Because of the complexity and multi-dimensional nature of many social problems affecting children and families (for example,. child abuse, maltreatment, and so on), community-based initiatives that are integrated with government programs, and which address combinations of problems, are likely to produce more socially and cost-effective results.

The studies show the importance of prevention and intervention programs that are initiated early in the child's life. When programs are directed at families with children who have yet to complete primary school, they are more effective in terms of social outcomes (such as reduced substance abuse, reduced maltreatment, reduced future involvement with the justice system, increased school completion rates, future employment and so on). They are also considerably more cost effective in terms of program expenditure per participant. The importance of education and schools is emphasised, as is the importance of the active involvement of parents and other primary care givers.

Early childhood and families

Table 2:         Summary of early childhood/family prog	ams received
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Program/ Project Title	Program/ Project Description <sup>1</sup>	Target Community/ Group²	Funding sources Project Costs <sup>3</sup>	Outcomes <sup>4</sup>	Evaluation <sup>5</sup>	Contact Details
High/Scope Perry Preschool Study: Ypsilanti Perry Preschool Project	A two-year preschool program to enable children from disadvantaged backgrounds to participate in an active approach to learning. Undertaken in Ypsilanti, Michigan from September 1962 to June 1967.	Preschool aged children from disadvantaged backgrounds.	State funds (Michigan).	Social indicators: Over the long term—reduced crime; reduced welfare dependency; increased literacy; improved school retention rates; reduced long-term unemployment; reduced teenage pregnancy; increased social capital.	Short-term and longitudinal studies, including cost benefit analysis and comparison of program participants with control groups. Cost-benefits over the long term; a saving of \$7 for every \$1 invested in the preschool program at the time participants were 27 years old. The estimated program cost per child was US\$6 300 in 1986 dollars.	No longer current.
Project Head Start	A preschool program run throughout the US to help disadvantaged preschool children get a 'head start' by starting elementary school with competence levels similar to their peers. Originally commenced in 1965, it has continued since in various forms throughout the US.	Preschool children aged three to five years from disadvantaged backgrounds.	Various US funding sources.	The outcomes and cost- benefits for the Perry Preschool Project (above) have been generalised to Head Start, including positive long term effects on the child's ability to meet academic and social expectancies. Social indicators specific to Head Start: improved school retention; reduced referrals to special education classes; better health outcomes; better immunisation rates; better nutrition and improved socio-economic circumstances.	Various short-term and longitudinal studies. Similar cost-benefits to the Perry Preschool Project (above) have been extrapolated to Head Start although with some caution. The estimated program cost per child was US\$2 767 in 1990 dollars.	No longer current.

Description of project aims and location. Pilot, one-off, or on-going. Project length. By geographic location/region and/or community of interest. Name of funding program/s or funding sources, total project costs (direct and indirect). General effectiveness/outcomes as well as social indicators and stronger communities indicators. Quantitative and/or qualitative evaluation. Availability of cost-benefit data.

Program/ Project Title	Program/ Project Description <sup>1</sup>	Target Community/ Group <sup>2</sup>	Funding sources Project Costs <sup>3</sup>	Outcomes <sup>4</sup>	Evaluation <sup>5</sup>	Contact Details
Families and Schools Together— Australia and US.	A two-year, school-based early intervention program for children and families to build resiliency and protective factors for children through an eight-week intensive course, followed up by a two-year program involving monthly self-help meetings and ongoing family support. The program has been operated in various locations including the US, Canada, Australia, Germany and Austria.	At risk children aged four to nine years.	Australia—charitable trust grants. Cost to operate FAST in one primary school is estimated to cost from \$32 000 to \$49 000 (including two-year follow up program costs). USævarious funding sources. Estimated cost per school for two FAST cycles per year was US\$30 000 (not including FASTWOKS evaluation).	Social indicators: decreases in identified behaviour problems of children (sustained over two to four years); increased child and parental self esteem; improved educational success; improved family cohesion; increased parental involvement in their child's schooling; increased higher education participation of parents; increased employment for some parents (including as program workers after graduation from the program). Stronger communities' indictors: networks and partnerships in communities; knowledge and skills including volunteering; leadership in communities.	Qualitative and quantitative evaluation built into each program. Various evaluations have been reported upon including in the US and Australia—short-term and longitudinal. Some cost data is available. For example, average cost per family over two-year program for Australia was estimated to be from \$1 266 to \$1 900 and for the US approximately US\$1 200).	Australia: Sherrie Coote, FAST International— Australia, (Ph: 03 9481 4915), (e-mail: scoote@tig.com.au). US: Dr Lynn McDonald, Program Founder, The FAST Research Project, Michigan (Ph: 608 263 9476), (e-mail: mrmcdona@facstaff.wisc.edu).
Better Beginnings, Better Futures	A twenty-five year longitudinal prevention policy research demonstration project across twelve communities in Ontario, Canada with the aim of preventing young children in low-income, high-risk neighbourhoods experiencing poor developmental outcomes which then require expensive health, education and social services.	At risk children aged 0 to 8 years.	Ministry of Community and Social Services; Ministry of Health; Ministry of Education and Training; Federal Department of Indian and Northern Affairs; and Heritage Canada. Total program funds in 1999 were C\$6.64 million.	Social indicators: reduced crime; reduced welfare dependency; better health outcomes; reduced long-term unemployment.	A five-year evaluation was completed in 1999 (not available for this report). Future evaluations are planned to assess effectiveness and cost-benefits of the prevention model.	Carol Crill Russell, Senior Research and Policy Advisor, Children's Services Branch, Ontario Ministry of Community and Social Services, 4 <sup>th</sup> Floor Hepburn Block, 80 Grosvenor St, Toronto, ON M&A 1E9. Ph: 416-325-5329.

Description of project aims and location. Pilot, one-off, or on-going. Project length.
By geographic location/region and/or community of interest.
Name of funding program/s or funding sources, total project costs (direct and indirect).
General effectiveness/outcomes as well as social indicators and stronger communities indicators.
Quantitative and/or qualitative evaluation. Availability of cost-benefit data.

Program/ Project Title	Program/ Project Description <sup>1</sup>	Target Community/ Group <sup>2</sup>	Funding sources Project Costs <sup>3</sup>	Outcomes <sup>4</sup>	Evaluation <sup>5</sup>	Contact Details
Success for All	A school-based achievement-oriented program involving a family support team. The program aimed to promote parental involvement and build child resiliency through improved reading skills; reduced special education referrals and repeated grades; increased school attendance; and addressing family needs (food, housing, medical care). Originated in Baltimore, US and later extended to various US locations.	For disadvantaged students from kindergarten to grade five.	Not available in literature cited.	Social indicators: reduced welfare dependency; increased social capital.	Program evaluation undertaken including an estimated US\$800 cost per student additional to a school's usual allowance. Savings in grades not being repeated and reduced special education placements were calculated to offset program costs.	Robert Slavin, Centre for Research on Effective Schooling for Disadvantaged Students, The John Hopkins University, 3505 North Charles Street, Baltimore, MD 21218. Ph: 410-516-0274.
Homestart	A UK volunteer support program to families with preschool children aiming to reduce family breakdown.	Families to preschool children.	Not available in literature cited.	Social indicators: reduced welfare dependency; increased social capital. Stronger communities' indicators: knowledge and skills; including volunteering.	Evaluation undertaken. No cost-benefit details available in the literature cited.	Not known.

Description of project aims and location. Pilot, one-off, or on-going. Project length.
By geographic location/region and/or community of interest.
Name of funding program/s or funding sources, total project costs (direct and indirect).
General effectiveness/outcomes as well as social indicators and stronger communities indicators.
Quantitative and/or qualitative evaluation. Availability of cost-benefit data.

Program/ Project Title	Program/ Project Description <sup>1</sup>	Target Community/ Group <sup>2</sup>	Funding sources Project Costs <sup>3</sup>	Outcomes <sup>4</sup>	Evaluation <sup>5</sup>	Contact Details
Provence group approach	A one-off US-based program (New Haven, Hamden and West Haven, Connecticut) involving coordinated social and medical services to disadvantaged mothers and their children.	Disadvantaged mothers from pregnancy to 30 months after birth.	Not available in literature cited.	Social indicators: reduced welfare dependency; increased social capital. Stronger communities' indicators: local solutions to local problems.	Evaluations including a five-year follow up and a ten-year longitudinal study. Cost estimates of the program include: US\$7 500 (in 1970-72 dollars) or US\$20 000 (in 1982 dollars) per family. Welfare and services savings of US\$40 000 (in 1982 dollars) estimated for families in the program compared to a control group.	Not known.
K-Six Early Intervention Partnership	A school-based early intervention program which sought to increase academic and social literacy; improve school attendance; reduce chronic transiency; strengthen family functioning; empower parents; and identify and develop means to overcome barriers to service provision. Piloted in Fresno, California and expanded to other locations in the US.	High-risk families.	Annie E. Casey Foundation.	Social indicators: reduced crime; better health outcomes; increased social capital. Strong communities' indicators: networks and partnerships in communities; local solutions to local problems.	Qualitative and quantitative evaluation. Cost estimates; overall program budget US\$1.2 million. Estimated program cost per family—US\$375.	Jeff Stover, Executive Director, Fresno Tomorrow Inc., Fresno Executive Plaza, 1900 Mariposa Mall, A-301, Fresno, CA 93721. Ph: 209-442-3342.

Description of project aims and location. Pilot, one-off, or on-going. Project length. By geographic location/region and/or community of interest.

Name of funding program/s or funding sources, total project costs (direct and indirect).

General effectiveness/outcomes as well as social indicators and stronger communities indicators.

Quantitative and/or qualitative evaluation. Availability of cost-benefit data.

# 4. Young people

The impact of changes in the social and economic structure of society is highlighted by the fact that many young people face a mismatch between their natural abilities and the task and roles that are available to them. The resultant weakening of the bonds between young people, their families and their communities undermines social cohesion and inhibits the development of social capital (Graycar & Nelson 1999).

As noted in the previous chapter, the early years are critical in laying the foundation for healthy participation in society. In addition, it is widely accepted that if early prevention experience is to have a permanent effect, it must be subsequently reinforced and built on (Bright 1997).

A recurrent theme in the literature is the notion of identified 'risk factors' which are said to increase the likelihood of a range of behaviours, for example, young people offending, substance abuse, and 'protective factors' (which are often the opposites of the risk factors). Risk factors and their corresponding protective factors fall into four categories: community; school; family; and peer/individual. Many prevention strategies have been based around increasing protective factors and decreasing risk factors (Bright 1997; Harachi et al. 1996).

Of particular interest, is the claim that community disorganisation and low neighbourhood attachment are key risk factors with the corresponding protective factor being strengthened communities. In support of this, the success of prevention strategies, including community based-programs and those aimed at strengthening communities rather than remedying individual pathologies, is cited in a range of literature (Bright 1997; Krisberg & Austin 1993; Graycar & Nelson 1999; Pinkney & Ewing 1997, cited in Chamberlain & MacKenzie 1998).

While the value of prevention and early intervention programs is cited throughout the literature, there are two broad caveats to this. The first is that various authors refer to the need for coordinated service delivery and treating the 'whole person' (Krisberg & Austin 1993; Chamberlain & MacKenzie 1998). In some instances, coordination of services is also specifically discussed in terms of it being more cost effective (Krisberg & Austin 1993). Secondly, the profound impact of broad structural changes in society is highlighted. Of particular concern are changes in levels of employment, the economy, technology and family structures which have made it increasingly difficult for some young people to avoid drugs, crime and under-employment (Bright 1997; Blumstein 1998, as cited in Krisberg & Austin 1993; Graycar & Nelson 1999; Morrison et al. 1997a). This idea is further developed by Pinkney and Ewing (1997,cited in Chamberlain & McKenzie 1998) who argue that the real economic cost to the community does not arise primarily from government expenditure needed to support young people in the absence of family and employment. Rather, it is a consequence of a more fundamental undermining of economic wellbeing, resulting from the reduced productive capacity of the nation as a whole. To this end, the key economic costs of youth homelessness have been identified through focusing on labour market efficiency, health related costs and involvement in the criminal justice system (p.129).

In terms of the cost of a range of poor social outcomes for young people, there are various estimates, both within an Australian and the United States (US) context.

For example, institutionalisation of young people through imprisonment or residential treatment for emotional disorders is enormously expensive. A 1990 US study found that residential placement for treatment of children with emotional disturbances is the most expensive form of treatment, averaging at US\$30 000 per year per child. In contrast, the study provided an estimated cost of US\$3 474 for a community-based continuum of care intervention (Texas State Department of Mental Health and Mental Retardation 1990).

Estimations of costs of juvenile crime in Australia were obtained from a number of different sources. Potas et al. (1989) claim that the direct cost of some major categories of juvenile crime in Australia in 1986–87 was \$601.7 million. This includes \$150 million for car theft; \$90 million for household burglaries; \$4 million for vandalism to local government property; \$56.5 million for arson and vandalism to non-local government property; \$300 million for shop theft; and \$1.2 million for violent crime (based on in-patient bed day costs). In addition, it is estimated that \$500 million is spent on administering juvenile justice; \$350 million on policing; \$15 million for legal aid, prosecution and private legal costs; \$70 million on detaining offenders in institutions; \$12 million on non-custodial sanctions; and \$250 million on the private security industry. Therefore the total cost of juvenile crime in Australia is stated to be \$1.5 billion per year.

In terms of juvenile incarceration, the annual cost is stated to be between \$50 000 and \$83 000 per person, not to mention the emotional and financial costs to the community in the course of getting them into prison, nor the likely social security payments after their release (Potas et al. 1989; Graycar & Nelson 1999). In turn, this means that it costs 12 or 13 times more per day to keep a juvenile in an institution than putting them on probation or under community service orders (both equally effective in terms of recidivism rates). It is also costs five to 10 times more to deal with juveniles through the courts than administering cautions (Potas et al. 1989, p. 2).

In relation to homelessness in Australia, the number of homeless young people and associated costs are cited in a range of literature.

The Australian Institute of Health and Welfare (AIHW) (AIHW 1999) provides a range of data, particularly in relation to the Supported Accommodation Assistance Program (SAAP). SAAP provides a range of services to people who are homeless or at imminent risk of becoming homeless. The enormous impact of youth homelessness is highlighted by the fact that, for both men and women, the greatest proportion of recipients of SAAP services is for 15–19 year olds (this includes only those who themselves are SAAP clients). In 1997-98, 15–19 year olds represented 20.7 per cent (or 19 376) of the total number of clients and 20.9 per cent (or 34 130) of the total number of support periods. In 1997-98, the total funding for SAAP services was \$224 million (AIHW 1999).

Indigenous Australians are also identified as being particularly vulnerable to homelessness. This is stated to be a result of: displacement associated with European settlement and subsequent policies of segregation and assimilation; and with difficulties in accessing housing due to low incomes, discrimination and in some instances, lack of housing stock (AIHW 1999,

p. 296). The over-representation of Indigenous people in SAAP services is highlighted by the fact that in 1997-98, Indigenous Australians received 13 per cent of support periods and yet only two per cent of the general population identified as Aboriginal or Torres Strait Islander in the 1996 census (AIHW 1999, p. 316).

Dixon (1993) has estimated the cost of homelessness in Australia to be \$7 400 per year per person. This includes the cost of unemployment benefits and the associated loss of tax revenue, based on the assumption that homeless people are unemployed. While it is acknowledged that some people are homeless as a result of unemployment, addressing homelessness remains a viable strategy for increasing the employability of young homeless people. In addition, it is argued that homelessness has significant non-economic costs because of the loss of people's potential to contribute to communities and the broader community (Dixon 1993).

Again, within an Australian context, Pinkney and Ewing (1997) argue that the total cost attributable to homelessness in 1994 was \$574 million. This includes \$132 million in costs associated with ill health and involvement in the criminal justice system, and \$442 million in foregone education and long-term unemployment. They argue that a national early intervention strategy would cost \$100 million per year which would result in a net benefit of \$474 million and would break even at a success rate of 21 per cent. Therefore, even if only one quarter of homeless students could be helped, the economic benefit would outweigh the cost (Pinkney & Ewing 1997, quoted in Chamberlain & MacKenzie 1998, p. 129).

Despite the availability of some information regarding costs, there is clearly a need for better costing and reporting on juvenile crime (Potas et al. 1989).

The prevention and early intervention programs cited in the literature relate to a range of issues including crime prevention, mental health, unemployment, homelessness and education. For the purposes of this report, the programs have been divided into four categories: crime prevention, school-based programs, unemployment and youth leadership. The following provides a summary both of programs that contain detailed cost-benefit analysis and of those that report information of a more general qualitative nature only (including those, such as the scouts, that do not address negative social indicators explicitly).

### 4.1 Crime prevention

Research indicates that community-based programs are both effective in reducing recidivism rates and are considerably less expensive than total confinement in traditional correctional services (Krisberg 1992, cited in Krisberg & Austin 1993). In addition, it is generally accepted that early entry in the criminal justice system is a significant factor in the creation of criminal careers and that attention should therefore be focused on prevention and early intervention approaches (Blagg 1992; Graycar & Nelson 1999).

While the authors were unable to obtain program information relating to prevention strategies specifically targeted at Indigenous people, there is significant evidence of over-representation

of Indigenous young people in the criminal justice system and the need for programs that involve and/or are controlled by Indigenous communities (Blagg 1992; Crime Research Centre 1995; Aboriginal Justice Council 1998). It is recommended that further information be obtained in relation to Indigenous-specific programs.

#### Massachusetts Department of Youth Services

Krisberg and Austin (1993) report on the success of the Department of Youth Services' crime prevention strategy in Massachusetts, US. The strategy incorporates a range of community-based programs including group homes; forestry programs; day treatment programs; outreach and tracking programs; and foster care.

Under the program, the young offender is assigned to a case manager who develops a treatment plan based on clinical and educational evaluations as well as family history and the severity of the current offence. As a condition of release from a residential program, the case manager arranges participation by the offender in community services, such as drug and alcohol treatment or counseling

The small size of the program has been identified as a critical success factor—no residential program houses more than 30 young people and supervision case loads are kept very small.

Two significant evaluations have occurred—the first by a Harvard Research Team, reported on in 1982, and the second by the National Council on Crime and Delinquency (NCCD), reported on in 1988. While the Harvard evaluation offers some insights, it is the NCCD evaluation that provides a more detailed analysis of the program outcomes.

The NCCD study tracked the criminal involvement of 819 young people for 36 months. The first indicator of recidivism used was the number of young people who continued to violate the law during the 12 months after returning to community living. It is noted that this is a very conservative measure of success or failure as it is based on the notion of 'absolute cure'/ abstention. Having said that, of all the young people, 51 per cent were re-arraigned within 12 months of their return to community living compared with a figure of 66 per cent of young people released from the old training schools. It is argued that this decrease in recidivism cannot be attributed to the department handling less serious offenders or that the police were less likely to arrest juvenile offenders.

Through comparisons with other states, albeit with methodological constraints, the recidivism rates were equivalent to, and in some cases lower than, youth recidivism rates in other states. In another comparison the recidivism rate, after being statistically re-weighted, was 62 per cent compared to 70 per cent for the Californian Youth Authority data. From a 12-month follow-up study, it was found that for both those admitted for a violent crime and chronic offenders, the number of arraignments dropped by half after involvement in the community-based program. In addition, the young people showed a tendency to commit less serious crimes. This is highlighted by the fact that while 60 per cent of pre community-based program charges were for violent crimes, in successive follow-up periods only one third of their offences were crimes against people. Based on statistical analysis, it was argued that the decline in offending could

be attributed in part, but not wholly to a 'regression to the mean' (based on the notion that a predictable slowdown occurs immediately after the frequent and serious offence episode) and through maturation (offenders engage in less crime as they grow older).

Of the 810 youth committed annually to the Department of Youth Services, approximately 15 per cent are initially placed in a locked treatment program. Generally, offenders are transferred to less secure residential or non-residential programs after a very short time (that is, four weeks), compared to traditional juvenile corrections programs that result in longer placements in secure confinement and often re-incarceration following parole violations.

A variety of states in the US report spending US\$100–125 per day to hold a young people in a traditional training school (Allen-Hagen 1991, cited in Krisberg & Austin 1993). Massachusetts offers a range of community-based programs for young offenders, including secure treatment programs at US\$170 per day; staff-secure placements at US\$127 per day; community-based group care averaging \$95 per day; day treatment programs at US\$50 per day and non-residential outreach and tracking services costing US\$23 per day. The increase in cost of secure units is because of the small size of the programs and extensive investment in educational and clinical services. The average annual cost per young person for the community-based programs is US\$23 000 compared to US\$35 000–45 000 per young person per year spent by many states. As well, it is estimated that to incarcerate young people in a training school in Massachusetts would cost an additional \$16.8 million in operating funds. This estimate assumes that all committed young people were placed in a secure program for 360 days (which was typical of many states in 1988) and that the state would have to triple its number of secure beds.

#### **Job Corps**

The evidence that job training is successful in reducing recidivism and in generating other social benefits comes primarily from the US-based Job Corps program (Potas et al. 1990). Job Corps provides a comprehensive set of skills and services to disadvantaged unemployed young people, and includes vocational, education and health care with a 6–12 month residential placement (Long, Mallar & Thornton 1981, cited in Potas et al. 1990).

A cost-benefit analysis has been completed which details budgetary (governmental) impacts and other social impacts. Based on this analysis, the cost per entrant in 1997 dollars is said to be US\$5 070, with the net value per entrant at US\$2 271. This equates to a benefit-cost ratio of 1:45—that is, for every \$1 invested in the Job Corps program there is a return of \$1.45.As the analysis did not include a number of benefits that were hard to quantify, it is further argued that this is likely to be an underestimate (Long, Mallar & Thornton 1981, cited in Potas et al. 1990).

#### Benefits reported include:

- increased utility due to preferences for work over welfare;
- reduced dependence on transfer programs;
- reduced criminal activity (reduced criminal justice system costs, personal injury and property damage; reduced value of stolen property; and reduced psychological costs);

- reduced drug/alcohol use (reduced treatment costs, and increased utility from reduced drug/alcohol dependence);
- utilisation of alternative services (reduced costs of training, education and PSE programs, and reduced training allowances);
- · increased utility from redistribution; and
- increased utility from improved wellbeing of corps' members (Long, Mallar & Thornton 1981, cited in Potas et al 1990, p. 65).

There are a number of similar programs in Australia æ for example Special Youth Employment Training Program, Education Program for Unemployed Youth, the Wage Pause Program, the Good Neighbour Program (Victoria) and the Community Employment Program. However, there is no systematic evaluation of these programs.

#### **Croydon Good Neighbourhood Program**

Vernon and McKillop (1989) report on this Victorian State Government initiative where money was made available for projects that aimed to both assist the identified offenders, but also had a broader prevention focus.

A total of 15 councils across the Victoria were each given a \$10 000 seeding grant to initiate a Good Neighbourhood Committee. In addition, up to \$40 000 could be accessed via submission and a further \$20 000 obtained on the basis of the government matching money raised by the community, dollar-for-dollar. Croydon was one of the first to take up the invitation and received \$10 000 seeding money and an additional \$40 000 grant.

The Croydon Neighbourhood Committee of 20 people included academics, professionals, retired people, youth workers, police and students. The following initiatives were developed:

- student information officers—students paid to disseminate information to other students about activities occurring within the community;
- a shuttle bus for the area—youth workers used the council bus and the local church provided a bus and a driver to transport young people home after events;
- practice facility for garage bands with funding from various sources;
- discounted tickets for local cinemas through a subsidy offered by the local cinema;
- · an outward bound type adventure course with all equipment donated;
- a 'no-wine bar'—with some funding from the local Technical and Further Education (TAFE) colleges; and
- a 'safe train'—trains with police patrols and entertainment to provide a safe transport at night.

The cost for the various programs varies enormously and no quantitative evaluation has been completed. However, all programs have led to the development of extensive involvement with

other parts of the community and an awareness of all participants of each other's activities. Examples of cooperation cited include:

- collaboration between the church, council and sign-writers to develop the bus;
- churches, local musicians and government organisations joining forces to set up facilities for the garage bands;
- a local cinema owner expressing commitment to the community;
- government departments, individuals dealing with offenders and councils teaming up to implement the adventure program;
- TAFE colleges, soft drink companies and the Australian Bar Tenders Guild collaborating to develop the no-wine bar; and
- police, unions, ministers and the broader community all supporting the safe train (Urjadko 1989).

While the literature cites the increased networks and partnerships that were formed as a result of involvement in the program, no quantitative evaluation was reported.

#### **Family Ties Program**

Bilchik (1995) reports on the Family Ties Program which originally began in New York in 1989 as an alternative to incarceration for young people aged 7 to 16. The program is underwritten by the City of New York with the state providing match funding on a three to one basis.

The program consists of intensive home-based services and an assessment of family, community and educational needs of the young person. The program aims to modify individual behaviour, but it also works to strengthen families as a key aspect of crime prevention.

Approximately nine out of 10 juveniles who participated in the program during 1991 and 1992 remained uninvolved with the juvenile justice system six months later with no significant difference in the results of a follow up after 12 months. Findings indicate that for every \$1 spent on the program there was a \$7 saving to the public by averting juvenile placements in detention centers. This has been equated to a total saving of over \$335 388 during a six-week period, based on an average of 32 participants per group (Bilchik, 1995). The literature did not provide information about whether the program had been repeated and if so, with what effect. Therefore, it is not possible to extrapolate the savings over a 12-month period.

# Pathways to Prevention—developmental and early intervention approaches to crime in Australia

The *Pathways to Prevention* report is the result of research undertaken by the Developmental Crime Prevention Consortium in 1997 that included:

• a review of the international literature on human development and early intervention;

- an audit of several hundred early intervention services and programs in Australia; and
- the formulation of a policy framework for planning and developing prevention initiatives.

Appendix 1 contains the descriptions of a large range of Australian programs, presented by categories æ either as special needs' programs (Aboriginal and Torres Strait Islander peoples, people of non-English speaking backgrounds, children/families of offenders, children with disabilities); or children and family services' programs (pre-school, school age behavioural, family counseling, household management skills, and community center-based development and support).

A number of the programs have been evaluated and refer to a range of outcomes related to building stronger communities. Time did not permit the authors to obtain detailed information on the programs but several may be worth following up, specifically:

- 1.10—the Early Intervention Program for Aboriginal Families which aims to reduce truancy and crime through the development and implementation of culturally-appropriate parenting programs for Aboriginal people;
- 2.7—the Supplementary Services Program for people in special needs' categories (as above), which aims to ensure that families with children with additional needs can participate in the workforce and the general community by providing suitable child care opportunities;
- 5.1—the Home Instruction Program for Preschool Youngsters, which aims to assist children to be successful at school and one of the outcomes reported is the development of community leadership;
- 6.3—the Volunteer Tutor-Friend Program aims to both enable youth and their families to make changes in a supportive environment and to empower the wider community; and
- 8.2—the Positive Parenting Program aims to both enhance individual parenting skills and also reduce the risk of child abuse, mental illness and delinquency (Attorney General's Department 1999).

# 4.2 School-based programs

The link between education and a range of social outcomes has been explored in a range of literature, both from the point of view of the impact of school on the wellbeing of young people and the impact of the wellbeing of young people on their school performance (Bright 1997; Graham & Bowling 1995; Texas State Department of Mental Health and Mental Retardation 1990).

Referring to the 'school effect' where students of the same ability achieve different academic grades in different school settings, Bright (1997) argues that the school itself has a considerable impact on young people. This is reinforced by Potas et al. (1989) who state that 'instructionally

effective' schools are also effective in reducing the potential for individuals to engage in delinquency. In addition, the impact of truancy, bullying, school exclusion and underachievement have been linked to social indicators such as levels of offending. For example, a study found that truants are three times more likely to offend than those who had not truanted. It also found that excluded children are much more likely to admit to offending and other anti-social behaviour (Graham & Bowling 1995, cited in Bright 1997). Equally, a student's school performance will be adversely affected by substance abuse or mental health problems (the Texas State Department of Mental Health and Mental Retardation 1990).

It is no surprise, therefore, that schools have increasingly become the focus of prevention and early intervention programs in areas like mental health, school exclusion, truancy, bullying, under-achievement and parent involvement.

#### **Student Assistance Program**

The 1990 Texas State Department of Mental Health and Mental Retardation report highlighted the Student Assistance Program which includes a comprehensive range of services provided in a school setting to students at high risk of emotional disturbance. Service delivery options are either coordinated and/or provided by staff within the school, by professional external agencies, or a combination of both. In the combination model, services have a broader base which incorporates campus-wide programs such as healthy living, parenting skills and student leadership. It is noted that communication and networking are facilitated in such an approach.

While the literature did not provide details of program costs or quantitative evaluative details, a number of findings are worth noting. For example, in New Jersey a sample of approximately 10 per cent of the 2 000 student participants indicated that absenteeism has decreased significantly. In Phoenix, 61 per cent of surveyed participants reported either a decrease or cessation of chemical abuse and the majority reported gains in areas such as coping with problems, expressing feelings of self-worth, peer relations and family relations. In Oregon, there was a decrease in alcohol and other drug-related violations æ from 27 in 1986–87 to 12 in 1987–88 (Texas State Department of Mental Health and Mental Retardation, 1990).

#### The Youth Support Coordinator Initiative

The Youth Support Coordinator Initiative was recently implemented by the Queensland Department of Families, Youth and Community Care as an early intervention response to student homelessness and early school leaving. The initiative aims to:

- develop networks and coordination processes to link young people and their families to support agencies;
- facilitate the development of protocols and procedures between schools and community groups;
- coordinate information dissemination strategies regarding available support services; and
- engage the support of the community to find ways to develop service responses to address the needs of these young people and their families (p. 225).

A budget of \$1.9 million was allocated over three years, which enabled thirteen community organisations to employ Youth Support Coordinators. All projects were targeted at areas with a high incidence of youth homelessness and school suspensions and exclusions, across metropolitan and regional areas with one program set up to specifically target Aboriginal young people.

Kippax (1999) reports that there were an estimated 350 homeless students in any one week in the 35 target schools, with between 3 250 and 4 600 students at risk of homelessness at any one time (1 300 to 1 950 of which were considered seriously at risk). In addition, there were likely to be between 200 and 800 under-age school leavers and an estimated 2 000 aged between 12 and 14 who are at risk of leaving school early.

An evaluation has been completed which included:

- · ongoing data collection;
- semi-structured interviews with Youth Support Coordinators, Department of Families, Youth and Community Care Regional Youth Affairs Officers, and target school representatives;
- a focus group with Youth Support Coordinators; and
- a survey of principals at the target schools.

Results indicate that the program has been highly effective with interview and principal survey results indicating a 78 per cent and 65 per cent success rate respectively in terms of assisting young people who are at risk of early school leaving. In addition, interview responses and principal surveys indicated an 82 per cent and 55 per cent success rate respectively in relation to assisting young people who are homeless or at risk of homelessness. Unfortunately, the full evaluation report was not available, so few if any conclusions can be drawn from this information. However, taken at face value these results are impressive and it would be worthwhile obtaining further details in further research.

As well as providing direct assistance to individuals and their families, it also works at a whole-of-schools' and community development level. This is evidenced through the community networks and links formed including local businesses becoming involved in employment and vocational options and through the provision of materials; and school staff, students and families building up their own relationships with community agencies.

Critical success factors identified include:

- developing partnerships between schools and their local communities;
- the fact that the projects are outside of school management systems;
- being able to work outside of the physical school boundaries and outside of school hours;
   and
- the capacity to work with families.

It is also worth noting that there has been considerable work undertaken in relation to youth homelessness within Australia, but unfortunately program details and evaluations were not able to be obtained.

A significant initiative that is worth highlighting is the Prime Ministerial Youth Homelessness Task Force that was established in 1996. In all 26 pilot programs which targeted homeless young people and people at risk of homelessness and their families were conducted across all states and territories and in both metropolitan and rural areas.

A comprehensive evaluation was completed including:

- internal program data collection;
- · data collection by independent consultants;
- individual project evaluation reports;
- · consultancy reports;
- · file reviews of Centrelink applicants for Youth Allowance; and
- file reviews of a sample of written advice reports (Department of Family and Community Services 1998).

The specific cost-benefits of these programs were not available at the time of writing.

#### Peer group activities

Very little information was available in relation to this initiative and the source reference was unable to be obtained. However, it has been included on the basis that it is cost neutral and appears to have impacted significantly on the rate of vandalism.

A comprehensive school in Tyneside, UK, allocated existing Local Management of Schools' school improvement funds (£200 000) to a committee of students who were responsible for managing planning improvements in the school. During the three years following the introduction of the scheme, school vandalism reduced by 75 per cent. (*The Observer* 9 February 1992, cited in Bright 1997).

#### Dalston youth project

Reported on in Bright (1997), this is an education and mentoring project in Hackney, London for 15 to 18 year olds who are offenders, have been excluded from school or are persistent truants. The program includes:

- a week-long residential course to help young people decide their objectives;
- an education and training program; and
- an attachment to an adult volunteer mentor for one year.

Arrest rates for the 25 young people involved in the project reduced from between 50 and 70 per cent and 16 young people re-enrolled in college or training course. While details could not be obtained in relation to the cost-benefit analysis, Webb (1996, cited in Bright 1997) states that the estimated number of crimes prevented amounted to a greater value than the cost of the project.

### 4.3 Unemployment

While unemployment programs are obviously an area of great significance, only two community-based programs with any kind of evaluation were identified.

#### Work Force Youth Unemployment Prevention program

This program, which is based in Massachusetts and operated by the Cambridge Housing Authority and a non-for-profit corporation called Pathways Institute, has been reported on in Lassen (1995).

The program includes:

- classes and seminars;
- homework centres:
- tours and field trips;
- 'try-out' employment placements where participants are paid the base wage plus any employer supplement;
- counseling and case management; and
- · home visits to parents by counselors and teachers.

Parent involvement is cited as an important element of the program, taking on the roles of parttime coordinators of the homework centres and chaperones on college tours and field trips.

The program relies on the collaboration of a number of government and non-government agencies to deliver the services offered, including the local school; the Department of Human Services; outdoor adventure clubs; private foundations; juvenile probation; youth workers; and public and private ventures.

The total funding for 1994 was \$383 252 which serves 100–125 young people per year. Evaluations indicate that:

- 79 per cent of employers were willing to take participants back for additional programs;
- since the program started, employment rates increased for the young people involved than for comparable youth and since its inception;
- the program maintained a constant 80 per cent job retention rate; and
- in 1992–93, eight out of 10 graduating seniors matriculated to college (Lassen 1995).

Constraints and challenges to the program included:

- adequately serving all students when some have very high needs;
- finding and maintaining employers;
- developing relationships with schools and issues of confidentiality with regard to schools releasing information about at-risk students; and

• extending the program to reach both younger (that is, as young as eight years old) and older youth (that is, post high school).

#### Durham North Carolina (NC)—guidance and employment

This was a community-based preventative program in 1993, which targeted 260 African-American young men (Ringwalt et al. 1996). It combined the provision of mentoring with a six-week summer employment experience and a three-month entrepreneurial experience and was evaluated by the participants. A subsidiary element to the program was that community violence was a factor in unemployment facing these young men. The program was intended to assess risk and to promote protective factors in the actions of the participants. Findings showed that the young men were both the perpetrators of and the victims of violence. Conflict resolution and anger management were indicated as aspects for developing protective factors in work with young men in this situation.

As a whole, the project findings identified three key factors in the success of guidance and employment training. These factors are:

- conjoint leadership (program staff, community, business, young people);
- · clear roles between different stakeholders; and
- flexible budget (managed at program level).

### 4.4 Youth leadership

Young people are frequently characterised in professional and research literature as the recipients of programs or services that are led by adults. However, this may be a consequence of a needs or risks' focus as opposed to one that emphasises the development of leadership and resilience of young people themselves (Morrison et al. 1997b). For example, one survey found that young people themselves are often engaged in defining their own solutions to improve their own communities even when these efforts may not have a formal outlet (Starr 1998). The following examples represent two different approaches to the development of youth leadership in community building and show that when given appropriate support and facilitation young people have enormous potential to play a central role in strengthening communities.

#### The scout movement: service and leadership

In recent years, the scout movement has received a number of criticisms in youth studies, from a variety of directions. Because of its origins in Edwardian England and subsequent history, the movement has been seen as promoting a particular view of people and society that is exclusionary because it is derived from white, male, middle-class and able-bodied norms (for example & Salzman 1992; Stevens 1995; Pryke 1998).

The modern scout movement has responded to such perceptions through the development of a series of initiatives that seek to promote relevant leadership skills among young participants and, at the same time, to support parents and other adults in the community that are associated with the young people. A series of 'parent's guides' published by the Scout Association address issues such as drug misuse, youth suicide, child abuse, youth sexuality, employment concerns and so on (Scout Association of Australia 1993–1999). The movement is also attempting to deal with issues of cultural and ethnic bias in its operations and publicity (Victoria Scout Association 1989).

However, the emphasis of the movement is less on youth problems and very much more focused on active work in the development of leadership and potential among young people as contributors to their communities (Scout Association of Australia, 1999). The movement promotes volunteering on the part of young people and also among the adults who provide the direction for local groups and who help to run associations at regional, national and international levels (Raskoff 1994). Raskoff also notes that although the scout movement is segregated on a gender basis, this may work to the advantage of young women and girls who are able to develop strong positive models of women's leadership that go beyond dominant stereotypes. Pryke (1998) also notes that the historical ethos of the scout movement includes a positive regard for the environment alongside individual autonomy within a strong sense of community.

No cost benefit information about the scout movement is available.

### Young people as community builders

Finn and Checkoway (1998) report a pilot project studying six community-based youth programs in different parts of the US. These programs brought together young people as active participants in problem solving, program planning and providing services in their communities. The underlying principle in the sampling for this review was that the programs should involve young people as 'thoughtful, active citizens in a living democracy' and so as 'active participants in the process of personal, organizational, and community change' (p. 335).

The six programs described in Finn and Checkoway's review were evaluated in terms of four factors (1998, p. 337):

- the level of participation by the young people—the extent to which they act on the concerns affecting their lives;
- capacity building—the extent to which they demonstrate concrete contributions to personal, organisational and community development;
- collaboration—the extent to which young people and adults build teaching-learning partnerships that promote communication and respect across lines of sex, race and culture, social class and age; and
- cultural awareness—that participants draw from diverse cultural knowledge and practices and at the same time develop a greater awareness of their own cultures and histories.

Two hundred initiatives that matched these criteria were identified across the US. From these they selected six case studies & The City, Minneapolis; Youth as Resources, Indianapolis; Youth Action Program, East Harlem [New York]; Latin American Youth Center, Washington DC; 21st Century Youth Leadership Network, Selma [Alabama]; Southwest Organizing Project, Albuquerque. The authors show that these projects exemplify ways in which the talents and commitment of young people themselves can be facilitated and supported to make a significant contribution to community building. Demonstrable outcomes included both positive and negative measures. The former are illustrated by young people exercising leadership in housing regeneration and community clean-up campaigns; outreach to seniors; skills development and employment projects; peace and cultural awareness projects; environmental action; community arts; and active campaigns on a variety of community issues. Each program has its own blend of specific action projects, in which the young people are actively involved to define their own community's goals. Negative outcome measures include declining truancy and school drop outs; reduced crime and vandalism; less community violence; and reductions of expressed discrimination and of negative perceptions of their communities.

Finally, in the longer running programs, former participants have provided mentoring and support for the succeeding generation, benefiting the community through the development of capacity, leadership, knowledge and skills, as well as providing gains for both the young person and the mentor in personal development. Using older teenagers as mentors for younger adolescents has been shown in other programs to benefit both for the younger person and also the older teenager (or young adult) in recognising and valuing their own leadership potential (Hamann 1999).

No costing information is provided in this review, but the demonstrable benefits of these programs are clearly shown.

# 4.5 Young people—conclusions

There is overwhelming evidence that for many community-based programs directed at the early prevention of social disadvantage through unemployment or homelessness and/or anti-social behaviours in young people, economic and social benefits are delivered way in excess of the costs of the programs. There are several key factors that contribute to effective programs.

First, it is important that programs address the whole-of-community.' Society-wide social and economic forces which impact upon young people make it difficult for some of them to avoid the risk factors which lead to unemployment or homelessness or to destructive or anti-social behaviours. Whole-of-person and whole-of-community approaches that coordinate appropriate service delivery are more likely to address these society-wide factors through building resilience and protective barriers.

Second, the school environment appears to be important. Instructionally-effective schools appear to be effective in also reducing young people's destructive and anti-social behaviours, as well as increasing their chances of achieving the educational and social skills necessary to enter employment and to avoid marginalisation. In terms of the school environment,

communication and effectiveness is facilitated through a coordinated approach that involves both school staff and professional external agencies. However, effectiveness is also facilitated when the level of community involvement is high, such that there are effective partnerships between the school and members of the local community — business people, churches, sporting and social organisations, and so on, together with a capacity for working with families. A management structure outside the school's management system assists in achieving these factors. As in programs directed at children, active parent involvement is a key factor for success in programs directed at youth. For Indigenous young people, the active involvement in and control of programs by Indigenous communities is also a key factor in effectiveness.

In the area of crime prevention, early intervention is crucial in minimising future involvement as an offender in the criminal justice system. The more that young people become involved in the criminal justice system, the more likely it is that they will continue to offend. The cost of both the prosecution of crime and incarceration are enormous, and far in excess of the cost of effective prevention and early intervention programs. Small-size programs (with small case loads) appear to be more effective than larger-scale programs, and programs which include job training appear to reduce recidivism, as well as reducing substance abuse and other destructive behaviour. Such programs also tend to engender a preference for work over welfare.

Finally, the practice of mentoring appears to play a crucial role in many of the programs that have been identified. Through mentoring, young people, either individually or in groups, often develop their potential for community participation and leadership because of the encouragement, guidance and support they experience. Mentors may be only just a little older than the young person receiving the mentoring or they may be seniors. (Chapter 5 addresses intergenerational issues and develops this theme.) What is important is that partnerships and networks operate in this way to share ideas, skills and to stimulate and strengthen community capacity in all age groups.

 Table 3:
 Summary of youth programs reviewed

Program/ Project Title	Program/ Project Description <sup>1</sup>	Target Community/ Group <sup>2</sup>	Funding sources Project Costs <sup>3</sup>	Outcomes <sup>4</sup>	Evaluation <sup>5</sup>	Contact Details
Massachusetts Department of Youth Services	An ongoing program resulting out of juvenile corrections reforms in Massachusetts, USA in the 1970s that resulted in the traditional training schools being shut down and replaced by a range of community-based programs. The program has been extended to other areas in the USA.	7–17 year olds	Average of US\$23 000 per young person, per year.	Social indicators: reduced crime.	Two quantitative evaluations reported.	N/A
Job Corps	A USA job training program that aims to reduce recidivism.	Unemployed youth selected from an at risk population with regards to juvenile delinquency.	Not known from the literature cited.	Social indicators: reduced welfare dependency, reduced crime, reduced alcohol/ drug use.	Quantitative, cost benefit ratio of 1.45 that is, for every \$1 invested, there is a return of \$1.45.	N/A
Croydon Good neighbour- hood Program	An initiative of the Victorian State Government, Australia. The program aims to assist individual offenders and to help prevent young people from getting into a position where they might offend.	Youth.	A mix of state government and community funding. The state government provides \$10 000 seeding funds, up to \$40 000 program funds and an additional \$20 000 that can be accessed on a dollar for dollar basis with money raised by the community.	Stronger communities' indicators: knowledge and skills, networks and partnerships in communities, local solutions to local problems.	Specific evaluations not referred to in the literature.	N/A

Description of project aims and location. Pilot, one-off, or on-going. Project length.
 By geographic location/region and/or community of interest.
 Name of funding program/s or funding sources, total project costs (direct and indirect).
 General effectiveness/outcomes as well as social indicators and stronger communities indicators.
 Quantitative and/or qualitative evaluation. Availability of cost-benefit data.

Program/ Project Title	Program/ Project Description <sup>1</sup>	Target Community/ Group <sup>2</sup>	Funding sources Project Costs <sup>3</sup>	Outcomes <sup>4</sup>	Evaluation <sup>5</sup>	Contact Details
Family Ties program	A crime prevention program based in New York, USA that began as a pilot in Brooklyn in 1989 and was expanded to the Bronx and Manhattan in 1991. The program provides an alternative to incarceration for youth.	7–16 year olds.	Not known from the literature cited.	Social indicators: reduced crime.	Quantitative evaluation indicates that for every \$1 spent on the program, \$7 savings to the public by averting juvenile placements in detention centres.	Blanca Martinez, Director, Nuestro Centro, 1735 Ewing Street, Dallas, TX 75226 (214) 948-8336.
Student Assistance program	A US-based program run in various states that aims to improve mental health services for children, remove obstacles to children's learning and improve the quality of students' lives.	Elementary and secondary school students.	Not known from the literature cited.	Social indicators: decreased absenteeism; decreased substance use; gains in peer relations and family relations.	Quantitative.	N/A
The Youth Support Coordinator Initiative	An early intervention response to student homelessness and early school leaving implemented in schools in Queensland, Australia.	Students in Queensland schools located in urban and regional areas with high incidence of youth homelessness and school suspensions and exclusions.	\$1.9 million over three years which enabled 13 community organisations to employ a Youth Support Coordinator.	Stronger communities' indicators: networks and partnerships in communities.	Quantitative and qualitative.	Rod Kippax, Office of Youth Affairs, Qld. Department of Families, Youth and Community Care.
Peer group activities	Based in Tyneside, UK. It is difficult to know what all the stated aims of the program are due to lack of information. However, reduced vandalism and crime are mentioned.	Comprehensive school.	Allocation of existing funds which are managed by students (£200 000).	Social indicators: reduced vandalism.	Quantitative.	N/A

Description of project aims and location. Pilot, one-off, or on-going. Project length. By geographic location/region and/or community of interest.

Name of funding program/s or funding sources, total project costs (direct and indirect).

General effectiveness/outcomes as well as social indicators and stronger communities indicators.

Quantitative and/or qualitative evaluation. Availability of cost-benefit data.

Program/ Project Title	Program/ Project Description <sup>1</sup>	Target Community/ Group²	Funding sources Project Costs <sup>3</sup>	Outcomes <sup>4</sup>	Evaluation <sup>5</sup>	Contact Details
Dalston youth project	An education and mentoring project in Hackney, London.	15 to 18 year olds.	Not known from the literature cited.	Social indicators: reduced crime; increased enrollments in college or training courses.	Quantitative.	N/A
Work Force Youth Unemployment Prevention program	Commenced in 1984 in Massachusetts, US.	Youth—primarily 13 to 16 year olds comprising African Americans (40%), Hispanic (18%), other ethnic groups (16%) and white (16%).	Approximately 63 per cent of funding is received from federal, state and local government and a third from corporate foundation grants. The total funding for 1994 was US\$383 252 which serves 100 to 125 young people per year.	Social indicators: reduced unemployment. Stronger communities indicators: networks and partnerships.	A quantitative evaluation was completed in 1988.	N/A
Durham NC—youth guidance and employment	Community-based prevention program, combining mentoring, employment and entrepreneurial training. Durham NC, US.	African-American young men, aged 16to 21.	Not known from the literature cited.	Social indicators: reduced crime; reduced welfare dependency; reduced unemployment. Stronger communities' indicators: knowledge and skills; local solutions to local problems; community capacity to use best practice.	Qualitative in literature cited.	N/A
Scout movement	An international network of youth organisations, intended to promote personal development.	Youthæprimarily aged 10 to 20.	Not known from literature cited.	Social indicators: increased social capital. Stronger communities' indicators: knowledge and skills including volunteering; networks and partnerships in communities; leadership in communities.	Qualitative in literature cited.	Scout Association of Australia, Canberra ACT.

Description of project aims and location. Pilot, one-off, or on-going. Project length.
By geographic location/region and/or community of interest.
Name of funding program/s or funding sources, total project costs (direct and indirect).
General effectiveness/outcomes as well as social indicators and stronger communities indicators.
Quantitative and/or qualitative evaluation. Availability of cost-benefit data.

Program/ Project Title	Program/ Project Description <sup>1</sup>	Target Community/ Group²	Funding sources Project Costs <sup>3</sup>	Outcomes <sup>4</sup>	Evaluation <sup>5</sup>	Contact Details
Young people as community builders	Review of 200 programs in the US, with six described in detail. Most programs involve partnership between community, business, government and young people.	Youth, aged 10 to 21 (some local variation according to program)	Not known from literature cited.	All social indicators and stronger communities' indicators were evidenced in this review (exact distribution varies according to specific program).	Qualitative in literature cited.	Prof. Barry Checkoway, School of Social Work, University of Michigan, Ann Arbor.

Description of project aims and location. Pilot, one-off, or on-going. Project length. By geographic location/region and/or community of interest. Name of funding program/s or funding sources, total project costs (direct and indirect). General effectiveness/outcomes as well as social indicators and stronger communities indicators. Quantitative and/or qualitative evaluation. Availability of cost-benefit data.

# 5. Seniors and intergenerational programs

In an ageing society, the presence of older people may provide a source of enhanced social capital (Gallagher 1994; Millward 1998). In this sense, social capital may take two forms: (i) the wealth of experience of seniors made available to the community if given appropriate outlets; and (ii) the time seniors have available for active participation in the community. However, there are very few evaluated programs that draw on the contributions made by this growing section of society. (Indeed, the emphasis in policy and research has tended to be on the needs of older people as recipients of care.) Some exceptions are to be found in United States' (US) evidence that both types of programs that make use of the experience and time of seniors within an explicitly intergenerational framework may constitute a useful part of a community building strategy (Morrow-Kondos et al. 1997).

The economic benefit of unpaid grandparental contributions in families and associated community participation has been estimated as at least US\$17 billion (Bass & Caro 1996). There is also empirical evidence that a similar pattern exists in Australia, with seniors identified as a major source of non-parental child care and of voluntary community effort (Encel 1997, p. 148). Using known figures of the numbers of older people in national populations, and allowing for demographic differences such as mobility over time, it may be extrapolated that grandparents contribute the equivalent of \$1.75 billion to Australian society. Beyond the strictly economic factors, there is also evidence that positive grandparental involvement strengthens families and so contributes to the strengthening of communities (Freedman, 1997).

### 5.1 Seniors in the family

#### Supporting Grandmothers—Atlanta, and Warm-Line—Oakland

Programs that support the role of older people as carers in families have two components. First, they may be targeted towards grandparents acting as surrogate carers in place of 'foster parents'. A search of international databases from 1986 to 1999 inclusive identified 22 references to published findings and reports concerning grandparents providing primary care for grandchildren. Of these 22 references, only two evaluate specific projects—Minkler et al. (1993), and Grant et al. (1997). Both these studies are from the US.

Minkler et al. (1993) provide a summative evaluation of 124 programs in 25 large urban areas across the US (p. 808). The 124 programs were identified from an extensive trawl of all available data and represent as complete a picture of the US as possible at the time of their survey.

The programs are sub-divided into five types:

- a. groups providing emotional and informational support only;
- b. support plus another service (one-to-one counselling the most common);
- c. information and referral services;
- d. coalitions (citizen advocacy organisations); and
- e. comprehensive programs of professional services (including 'special groups').

Minkler et al. discuss two examples in detail. Both are chosen from the 24 examples that constituted their category 'e' (p. 810). The first is a program in Atlanta providing educational, emotional and social counselling services for grandmothers, at a cost of US\$110 000 over two years (number of families not stated). This program particularly served low-income families. The second is a 'warm-line' in Oakland (California), which provided information and brief counselling by telephone to 750 different callers (on over 1 000 calls) over six months, at a cost of US\$18 000. This service helped 750 grandparent carers to cope with the task of caring for grandchildren, especially in the early stages of assuming care-giving responsibilities. In addition to the phone line, it also started localised support groups, a peer training program and a directory of local services. The service cost an equivalent of \$37 per family (per year pro rata).

Using the Australian estimate of minimum costs per year of formal intervention per family of \$2 215 (Stubbs & Storer 1996), it would have broken even if only 13 (1.7 per cent) of these families would have otherwise required formal intervention. Estimates from Australian and British research suggests that 25 per cent out-of-home placements with foster parent(s) break down in the first year of placement. This rises to between 40 per cent and 50 per cent after three years of placement, so that the figure could be expected to be much higher (Triseliotis 1993, p. 16; Fernandez 1996, p. 155; Sellick 1996, p. 168) Future cost-benefits would then accumulate proportionate to other factors associated with family breakdown (truancy, crime, loss of employment opportunities and so on) which can be ten times the minimum.

Minkler et al. (1993) also note that 80 per cent, or 99 of projects were unfunded. Although some were highly successful, the lack of funding was widely seen as a problem because it meant programs were short-term or limited in their benefits (often not continuing because of the strain on volunteers). Of the 25 funded projects, ten did not provide figures, and the remainder had an estimated median average cost of US\$40 000.

#### Manhattan — school-based health and social support

Grant et al. (1997) evaluate a school-based program to support grandparent care givers in New York. The program consisted of a full-time social worker plus targeted access to health and 'fostering stipends' that matched non-relative care giving. Key features of the program are:

- psycho-social support;
- medical and health care (for children and older carers);
- · social security (including the fostering stipend); and
- legal support (*pro bono* legal service).

The costs to public services of these elements of grandparents acting as surrogate carers are usually no different to the costs of supporting non-relative foster carers. In some instances grandparents may provide additional input, or not collect some material benefits (because they consider this to be part of their family life). However, in most instances the older people involved need to access material supports because they are on relatively low incomes.

One of the barriers to grandparents fostering in the US has been identified as the jeopardy to social security income from fostering payments (Flint & Perez-Porter 1997, p. 70). Likewise, housing entitlements may be affected, although in most areas discrimination against households with children is not legal—an exception to this is in housing that is contractually designated for occupancy by seniors (usually defined as aged over 55). Thus there is no obvious financial gain from using grandparents as foster carers. The benefits are that care is provided within the family network and this may strengthen links with the absent parent. Half of the surrogate grandparent carers surveyed by Flint and Perez-Porter took on the role with a view to handing primary care giving back to their grandchild's parent(s) or of sharing the care. New York State has a statutory requirement that a child must be placed with a relative in preference to strangers, and there are additional payments to support such arrangements (over and above those provided in other fostering placements). However, there are limitations on the authority of the grandparent as a foster carer that do not apply in other circumstances, and not all grandparents caring for grandchildren may apply for the scheme—the child or children must be placed by a statutory agency (Flint & Perez-Porter 1997, p. 66).

#### Grandparenting Success (skills education)—Arizona

Second, in addition to direct care giving, seniors may support parenting by younger adult relatives (d'Abbs 1991; Gallagher 1994). Although the literature increasingly makes reference to the importance of this phenomenon, the specific programs that are described are restricted to those that are intended to enhance grandparent-grandchild relationships. These are sometimes referred to as enhancing 'grandparenting success' (Strom et al. 1990; Strom & Strom 1993). With their colleagues, Strom and Strom have evaluated short-term focused programs to provide grandparenting skills' development classes. These programs consist of 12-weekly classes in understanding the lives of grandchildren and improving intergenerational communication on the part of the older person. Family members, preferably grandchildren, were used as evaluators, and the outcomes of the quasi-experimental tests were that significant improvement was gained, where improvement was defined in terms of a measure of satisfaction in the relationship expressed by both grandparents and grandchildren. Anecdotally, the value of such an approach for families is supported by the observations of eminent British gerontologist Jefferys (1997, pp. 82-6). The costs of the educational programs are not stated, but these can be estimated from the unit costs of interpersonal skills' development courses in higher education as \$5 000 for start-up and \$4 500 for delivery per group of 12 participants (current Australian values).

#### Grandparent volunteers in schools—Arizona

Another dimension of active grandparenting is evidenced by a program to encourage grandparents to act as volunteers in schools in Tempe (Arizona). The need for this type of program was identified because of the falling numbers of parents (usually mothers) who had played such a role over a long period of time. Strom and Strom (1994) describe the program and concluded that it met the requirements of educational benefit for children and also for the volunteer grandparents, while also enhancing intergenerational family relationships. Costs are not described, although the educational input for the grandparents (that was intended to

support their volunteer activity) is very similar to the program discussed above. Such a program provides a bridge to the wider community participation of older people.

### 5.2 Seniors' participation in the community

As noted above, outside the immediate family seniors also constitute a major source of community effort. This can be seen in a diverse range of types of activity — for example in service-providing organisations, cultural and religious groups, sporting organisations and political groups (Gallagher 1994; Freedman 1997). However, as Freedman notes (p. 253) almost all program models are small, scattered and lack infrastructure.

#### **Across Ages/Linking Lifetimes**

An extension of the grandparenting role that has gradually developed is that of older volunteers acting as mentors to young people who are at risk. Rogers and Taylor (1997) provide an overview based on evaluations of American projects aimed to achieve these outcomes, with specific mention of Across Age' and Linking Lifetimes (also see Taylor & Dryfoos 1999). This overview aggregates evaluated outcomes and provides indicative data on a range of programs. Three aspects are notable. These are the roles of seniors as mentors, implementation issues and outcomes.

The roles of senior in mentoring schemes are summarised as 'companion...social supporter...teacher...role model...challenger...[and] resource supporter' (Rogers & Taylor 1997, p. 128). It was emphasised that 'telling the young person what to do' was a negative approach in the mentoring role, while positive evaluations by young people included the idea of 'fun' even if interactions had a very serious life-skills' development component. To create and sustain these roles, the organisation and implementation of schemes required the training and support of volunteer mentors. This was achieved by employing case managers (at least 50 per cent position for 10 to 20 pairs of mentors and young people). This case manager's role was both administrative and person focused. The outcomes of the schemes were that at-risk young people who were provided with mentoring improved in confidence, had good school or college attendance, reduced drug use and coped better with stress and anxiety (Rogers & Taylor 1997, p. 138). Comparable programs in Australia, such as the Seniors Helping at Risk Kids project in Western Australia, are yet to be evaluated.

#### Foster grandparents—National Senior Service Corps

The National Senior Service Corps (NSSC) in the US supports a foster grandparent program that brings together seniors with families in need of practical assistance and support (Senior Corps 2000a). The seniors are not related to the children or their parent(s), nor do the children live with the seniors. However, the support provided supplements parenting through child care, mentoring, and emotional support. Seniors are recruited and they are supported by paid and voluntary staff. The explicit goals of the program include '[to] strengthen communities by providing youth services…and by building bridges across generations' (Senior Corps, 2000a, p. 1).

The program had 25 300 active volunteers nationally in 1997, serving 175 500 children through 23.8 million hours of service (a mean average of approximately 18 hours per week per volunteer). Most (90 per cent) of the volunteers were women, with an approximate division between white Americans at 48 per cent and all other ethnic groups (including Black, Hispanic, Asian and Native Americans) together comprising 52 per cent. Fifty-one per cent of the senior volunteers were aged between 70 and 79 years, with a further 31 per cent aged between 60 and 69 years and the remaining 18 per cent aged 80 years and over. Of the children, 44 per cent were aged under five years, a further 40 per cent aged between six and 12 years and the remaining 16 per cent aged 13 years and over. The funding for the program was nearly US\$109 million of which nearly US\$77 million (71 per cent) came from Federal Project Grants Allocation. The mean average per volunteer was US\$4 305 or US\$621 per child assisted. The main gains for seniors are that they can share their life skills and experience through mentoring younger people (Wofford 1999). In Australian dollars, the per client cost is \$955, which compares with Stubbs and Storer's (1996) estimate of direct costs of family stress of \$2 215 per family.

This type of program therefore might be expected to show a minimum cost-benefit ratio of 1 to 2.32 and so could usefully be investigated. Further costs might be saved in terms of future benefits in improved life opportunities and reduced social problems as the children grow older. A comparison can be made between Stubbs and Storer's (1996) estimate of \$27 375 as the annual cost of an individual child in detention and Gittell and Vidal's (1998, p. 20) estimate of benefits in very significantly increased individual income arising from developing extended community networks.

#### Neighbourhoods 2000/Downtown 2000

A different approach to the use of older volunteers working with younger people is seen in the Neighbourhoods 2000 project in New York and Downtown 2000 project in Honolulu, reported by Kaplan (1997). As a community building exercise, the project developed and implemented shared educational programs for high-school students and seniors. Using a focus-group technique, seniors and young people were brought together to design activities such as photographic community surveys, reminiscence workshops and autobiographical walking tours. The content of the plans focused on 'problems, resources and local improvement strategies' for each neighbourhood.

The project was evaluated by the participants on a qualitative basis, with gains reported in improved intergenerational links; understanding and solidarity (p. 216, p. 218); the development of a greater sense of 'community responsibility' on the part of the younger people (p. 220); and an increase in a 'sense of cultural continuity' (p. 224). The costs of the project were limited to incidental expenses, as most of the work was done by college students as *practicum* and their lecturers. In this case the cost-benefits are *at least* 1 to 2.2 (assuming program costs of \$1 000 and only one child welfare notification prevented, costed on the figures in Stubbs & Storer 1996).

#### Senior Companions—National Senior Service Corps

Of course, seniors do more than volunteer to help young people. They also form a large part of the total number of volunteers—a finding sustained in all English-speaking countries (Chappell & Prince 1997; David & Patterson, 1997; Greely 1997; Warburton et al. 1998). This research demonstrates that community input by seniors is more likely than input by younger people to arise from a sense of social value and belonging and to take the form of service to others. Some US research shows a positive correlation with religious practice (Greely 1997), and in all countries volunteering among older people is positively correlated with higher than average levels of formal education. However, there is also a potential for greater levels of volunteering among retired people that remains untapped. Caro and Bass (1997) identify the two years immediately following retirement as the time of life when receptivity to volunteering is high. This suggests that policy and practice should focus on those about to, or who have just retired from the workforce and be focused on those groups that do not already show high levels of volunteering. Yet there are relatively few programs specifically to recruit seniors as volunteers, and even fewer evaluations of programs, despite the widespread rhetoric about the value of seniors as an element of strength in communities.

One major seniors' volunteer program that has been evaluated is the NSSC Senior Companions Program. This program facilitates senior volunteers to assist adults who require support. The areas of need are usually relate to health or other social and personal needs. The tasks include simple chores, shopping, providing transport and social contact. The formal objectives are for seniors to '...provide the essential services that enable frail older Americans to continue to live in their own homes' (Senior Corps, 2000b, p. 1). The volunteers may also provide in-home support as live-in carers for short periods.

In 1997, the program had 13 900 active volunteers nationally who served 48 900 clients through 11.8 million hours of service (a mean average of approximately 16 hours per week per volunteer). As with the Foster Grandparent program, the majority of the volunteers in the Senior Companions Program were women, although the exact proportion was slightly reduced at 85 per cent. Again, similar to the previous program, approximately 50 per cent were white Americans and 50 per cent all other ethnic groupings (including Black, Hispanic, Asian and Native Americans). Also, very similarly, 51 per cent of the senior volunteers were aged between 70 and 79 years; however a slightly large proportion (35 per cent) was aged between 60 and 69 years and the remaining 14 per cent aged 80 years and over. Of the clients, 14 per cent were aged under 65 years, 24 per cent were aged between 65 and 74 years, 36 per cent were aged between 75 and 84 years and the remaining 26 per cent were aged 85 years and over. The funding for the program was nearly US\$51 million of which just over US\$31 million (61 per cent) came from Federal Project Grants Allocation. This constitutes an annual mean average of US\$3 622 per volunteer or US\$1 041 per client.

At present, it is difficult to determine a direct Australian comparison, as there is no single organising body. Some similarities are to be found in community groups, including seniors' clubs, churches and service organisations, but, as noted above, their activities are fragmented.

However, Australian seniors constitute a major element of health provision through the volunteer drivers' scheme in which retired people provide transport to and from medical services, especially outpatient clinics, for people who are frail, have a disability or have a social need for assistance. The amount that this voluntary work would otherwise cost has not been estimated, but some cost-benefits of voluntary work provided by seniors for seniors may be calculated. The current costs of a Community Care Package in Australia is approximately \$8 410 (mean average per place), although there is a shortfall of daily living needs assistance like that provided by the US Senior Companions Program (Australian Institute of Health and Welfare 1999, p. 176). Such a program in Australia therefore might be expected to contribute an effective addition to overall provision at a cost of approximately 20 per cent of the equivalent in additional formal services. This does not include the benefits to senior volunteers of maintaining active engagement with the community which may be expected to increase the cost-benefit.

#### **Environmental Alliance for Seniors Involvement**

On a larger community scale, the American Association of Retired Persons reached an agreement in 1991 with the US Environmental Protection Agency to organise seniors as volunteers in environmental development projects (EASI, 2000). In less than a decade the Environmental Alliance for Senior Involvement (EASI) has grown from 26 to over 10 000 seniors and links with 12 000 local organisations, with funding from a combination of federal and state governments and private sector organisations (including charitable donation). The budget has increased from US\$10 000 in 1991 to US\$2.3 million in 1999. This represents a shift from a mean average of US\$385 per volunteer to US\$230 per volunteer, while at the same time achieving a major increase in projects supported and positive environmental impact promoted. The projects include direct work, such as clearing degraded land, revitalising development areas, planting community gardens and working as 'teachers' and mentors to young people.

# 5.3 Seniors and intergenerational—conclusions

The conclusions that may be drawn from this evidence are that programs to facilitate seniors contributing voluntary effort in the community are most effective when they receive infrastructure funding and when they are organised or coordinated. The levels of funding required are low in comparison to the costs of professional services, but the work that can be performed is of a different nature. However, there are benefits arising from the voluntary work of seniors that augments professional effort. These are to be found in social and community integration; support for children and families; youth and community projects that would otherwise not be available; and there are the positive gains for seniors themselves from having an active and valued role. Some programs described here have quantifiable cost-benefits in the short term, while all have predictable longer-term cost-benefits (although these are less easy to quantify). However, it is clear that these longer-term benefits are key elements of stronger communities and the development of social capital.

Table 4: Summary of seniors and intergenerational programs reviewed

Program/ Project Title	Program/ Project Description <sup>1</sup>	Target Community/ Group <sup>2</sup>	Funding sources Project Costs <sup>3</sup>	Outcomes <sup>4</sup>	Evaluation <sup>5</sup>	Contact Details
Supporting Grandmothers	Atlanta, Georgia (US) Counselling to provide support for grandmothers to provide continuous family-based care for grandchildren. On-going.	Grandmothers caring for grandchildren — predominantly children from low income and ethnic minority families.	Federal and state government US\$55 000 per year.	Social indicators: reduced welfare dependency; increased social capital. Strong communities' indicators: networks and partnership; local solutions.	Qualitative and quantitative data reported. Cost-benefit reported as positive (costs less than formal care plus flow on) but exact figures not available.	Not available.
Warm-Line telephone support	Oakland, California (US). Information and brief counselling provided by phone, with other community-based support further developed. Six-month pilot.	Grandparents caring for grandchildren.	Federal and state government plus private sources. USS18 000 over six months.	Social indicators: reduced welfare dependency; increased social capital. Strong communities' indicators: networks and partnership; local solutions.	Qualitative and quantitative data reported. Cost-benefit ratio of 1 to 14 or greater.	Not available.
School-based health and social support	Manhattan, New York (US) Case management of access to support services to assist grandparents in providing continuous care. On-going.	Grandparents caring for grandchildren.	Source not given. Estimated equivalent: \$30 000 per year.	Social indicators: reduced welfare dependency; increased social capital. Strong communities' indicators: networks and partnership; local solutions.	Qualitative and quantitative data reported. Estimated cost-benefit ratio of 1 to 2.3	Not available.
Grandparenting skills' education	Tempe, Arizona (US) To assist grandparents to develop better skills in relating to grandchildren as an aspect of stronger community through intergenerational ties. 12-week programs.	Grandparents of children in local school.	Source not given. Estimated equivalent: \$9 500 per program	Social indicators: increased social capital. Strong communities' indicators: knowledge/skills and volunteering; networks and partnerships.	Qualitative and quantitative data reported. No clear financial cost-benefit calculable.	Not available.

Description of project aims and location. Pilot, one-off, or on-going. Project length. By geographic location/region and/or community of interest.

Name of funding program/s or funding sources, total project costs (direct and indirect).

General effectiveness/outcomes as well as social indicators and stronger communities indicators.

Quantitative and/or qualitative evaluation. Availability of cost-benefit data.

Program/ Project Title	Program/ Project Description <sup>1</sup>	Target Community/ Group²	Funding sources Project Costs <sup>3</sup>	Outcomes <sup>4</sup>	Evaluation <sup>5</sup>	Contact Details
Grandparent volunteers in schools	Tempe, Arizona (US) Coordination for involvement of grandparents as volunteers in local schools. Short-term.	Seniors with grandchildren in local schools, where volunteers are needed as classroom assistants.	Source not given. Estimated equivalent: \$10 000 per year.	Social indicators: increased social capital. Strong communities' indicators: knowledge/ skills and volunteering; networks and partnerships.	Qualitative and quantitative data reported. Insubstantial data on cost-benefits.	Not available.
Across Ages/ Linking Lifetimes	Philadelphia, Penn (US) Case management of seniors as volunteer mentors for young people. On-going.	Seniors acting as volunteer mentors to younger people in local community.	Source not given. Estimated equivalent: \$15 000 per year per program of 20 'links' supported.	Social indicators: strengthened local economic capacity; reduced crime; better health outcomes; increased social capital. Strong communities' indicators: knowledge/skills and volunteering; networks and partnerships; community capacity to use best practice.	Qualitative and quantitative data reported. Limited data on cost-benefits — anticipated future community gains in the flow-on effects of networking and social confidence of young adults.	Not available.
National Senior Service Corps — Foster Grandparents	US —National. co-ordination of volunteer surrogate grandparents. On-going, long-term.	Assisting families in need of general support by utilising the volunteer effort of seniors in the community.	Federal and state, plus private. US\$109 million per year.	Social indicators: reduced welfare dependency; better health outcomes; increased social capital. Strong communities' indicators: knowledge/skills and volunteering; networks and partnerships; local solutions to local problems.	Qualitative data (Freedman 1997); quantitative data (NSCC web site). Estimated cost-benefit ratio of 1 to 2.3	National Senior Service Corps website

Description of project aims and location. Pilot, one-off, or on-going. Project length. By geographic location/region and/or community of interest. Name of funding program/s or funding sources, total project costs (direct and indirect). General effectiveness/outcomes as well as social indicators and stronger communities indicators. Quantitative and/or qualitative evaluation. Availability of cost-benefit data.

Program/ Project Title	Program/ Project Description <sup>1</sup>	Target Community/ Group²	Funding sources Project Costs <sup>3</sup>	Outcomes <sup>4</sup>	Evaluation <sup>5</sup>	Contact Details
Neighbourhood 2000/ Downtown 2000	New York/Honolulu (US) School students and seniors sharing in community building programs. Short-term (c. 3 months).	Seniors as advisers and a resource for school students in community building projects.	Source not given. US\$1 000 per project as incidental expenses.	Social indicators: reduced crime; increased social capital. Strong communities' indicators: knowledge/skills and volunteering; networks and partnerships; local solutions to local problems; community capacity to use best practice.	Qualitative data only. Cost-benefits can only be assumed from evidence of other studies in terms of reduced vandalism/ crime and future economic potential of positive community life.	Not available.
National Senior Service Corps—Senior Companions	US—National. Coordination of volunteer personal care. On-going, long-term.	Seniors providing general personal care for frail and disabled people in local community.	Federal and state, plus private. US\$51 million per year.	Social indicators: reduced welfare dependency; better health outcomes; increased social capital. Strong communities' indicators: knowledge/skills and volunteering; networks and partnerships; community capacity to use best practice.	Qualitative data (Freedman 1997); quantitative data (NSCC web site). Estimated cost-benefit ratio of 20 per cent increase in effort.	National Senior Service Corps web site.
Environmental Alliance for Senior Involvement	US—National. coordination of seniors as volunteers in environmental projects. On-going, long-term.	Seniors providing skills and knowledge to community environmental projects.	Federal and state, plus private. US\$2.3 million per year.	Social indicators: increased social capital. Strong communities' indicators: knowledge/skills and volunteering; networks and partnerships; leadership in communities; local solutions to local problems; community capacity to use best practice.	Qualitative and quantitative data reported. Unit costs, but limited cost-benefit information beyond that which can be assumed from community building.	EASI website.

Description of project aims and location. Pilot, one-off, or on-going. Project length.
By geographic location/region and/or community of interest.
Name of funding program/s or funding sources, total project costs (direct and indirect).
General effectiveness/outcomes as well as social indicators and stronger communities indicators.
Quantitative and/or qualitative evaluation. Availability of cost-benefit data.

### 6. Conclusion

Much of the literature relating to the notion of strong communities is framed within the context of the changing nature of society and the associated fragmentation of communities and social ties which results in a range of poor social outcomes (Cox 1995; Morrison et al. 1997; Graycar & Nelson 1999).

Strong communities are defined variously in the literature. A number of authors refer to the development of a 'civil society' in which strength is achieved through the development of social capital. Social capital can be said to include trust; cooperation; time to engage with fellow citizens; voluntarism; a sense of belonging to one's community; and democratic structures that involve citizens (Cox 1995). Others refer to a healthy community, which incorporates the physical, mental and social wellbeing of people (Rosenfeld 1997, cited in Baum et al. 1999). A healthy community may be described as one that:

- provides a clean, safe physical environment;
- meets the basic needs of residents;
- has residents that respect and support each other;
- involves the community in local government;
- promotes and celebrate its historical and cultural heritage;
- provides easily accessible health services;
- has a diverse, innovative economy; and
- rests on a sustainable ecosystem (Ontario Healthy Communities Coalition 2000).

As discussed in chapter 1, the key elements of stronger communities are knowledge and community skills including volunteering; networks and partnerships in communities; leadership in communities; local solutions to local problems; and community capacity to use best practice.

The consistent elements in all of the materials cited relating to stronger/healthy communities are the importance of a sense of connectedness between people, and between people and their community in an environment in which all people are able to participate to their full potential.

The economic costs of poor social outcomes such a juvenile delinquency, child abuse/maltreatment, homelessness and unemployment are cited in a range of literature. For example, the total expenditure on child abuse and neglect in South Australia in 1995-96 is estimated at \$354.92 million with an additional \$303.33 million attributable to associated issues (child abuse-related deaths, disability, injury and impairment) (South Australian Office for Families and Children and the Australian Institute of Family Studies 1999). Stubbs and Storer (1999) state that each incidence of entry into care per child is \$3 660. Juvenile incarceration is costed at anything between \$50 000 and \$83 000 per person per year (Potas et al. 1989; Graycar & Nelson 1999), which is 12 or 13 times more expensive than probation and community service orders (Potas et al. 1989). Homelessness has been cited as costing \$7 400 per person per year,

(Dixon 1993) or a total of \$574 million (1994 Australian dollars) (Pinkney & Ewing 1997 as quoted in Chamberlain & MacKenzie 1998).

At the same time however, it is argued that a large number of poor social outcomes are preventable. This is highlighted by the claim that if public expenditure to address preventable problems can be reduced by five per cent, the state will save over US\$3 for every US\$1 invested in prevention or early intervention initiatives (Iowa Kids Count Initiative 1995). Also, that a homelessness prevention strategy that costs \$100 million per year would break even at a success rate of only 21 per cent (Pinkney & Ewing 1997, cited in Chamberlain & MacKenzie 1998). Further, it is argued that a neighbourhood improvement program costing \$100 million over 13 years could produce a cost benefit ratio of 1:17 if the social problems on the Airds estate in New South Wales (NSW) were reduced to the NSW average, or put another way, a reduction in social problems by a mere 3.7 per cent would ensure the program broke even (Stubbs & Storer, 1996).

It is therefore hardly surprising that increasing emphasis has been placed on prevention and early intervention strategies. These are cited as being successful in terms of both the dollar value of programs as well as building stronger and healthy communities (Greenwood 1999; Bright 1997; Morrison et al. 1997; Tomison & Wise 1999; McCain & Mustard 1999; Krisberg 1992, cited in Krisberg & Austin 1993). In a range of literature, this is presented in terms of increasing 'protective factors' and reducing 'risk factors' which fall into four categories: community; school; family; and peer/individual. Indeed some programs specifically identify community disorganisation and low neighbourhood attachments as key risk factors, with the corresponding protective factor being strengthened communities (Bright 1997).

Despite the success of a range of prevention and early intervention programs, it is consistently argued that the disadvantages experienced by children, families and the community will not be solved by ameliorative programs alone, and that structural causes must also be addressed. Examples of structural causes cited are changes in employment patterns (such as the decline in manufacturing jobs); the economy and technology; increased suburbanisation; globalisation of jobs and changes in family structures (Tomison & Wise 1999; Zigler & Styfco 1996; Greenwood 1999; Bright 1997; Dixon 1993; Krisberg & Austin 1993; Blumstein 1998, cited in Krisberg & Austin 1993; Graycar & Nelson 1999; Morrison et al. 1997).

A number of programs cited include cost-benefit analyses that highlight the economic savings that can be achieved through prevention and early intervention (see Table 5). These findings indicate that there is an economic argument for government intervention through supporting community-based prevention and early intervention programs. Longer-term cost-benefits are more difficult to quantify. However, there is secondary evidence that in each case cited the cumulative gains are potentially substantial. Future continuing reductions in crime from the development of community links, networks, knowledge and skills and life opportunities provide the basis for the increase of strong local economic capacity and associated reductions in long-term unemployment of young people. Table 5 contains a summary of the benefit-cost calculations that could be gleaned from the literature surveyed in this study.

As well as the economic benefits, many programs referred to outcomes that are linked both directly and indirectly to the stronger communities' indicators that appear in the project brief. The indicators are knowledge and community skills including volunteering; networks and partnerships in communities; leadership in communities; local solutions to local problems; and community capacity to use best practice. Examples include the Health Development and Social Capital Project; the Families and Schools Together program (FAST); the Croydon Good Neighbourhood Program; the Work Force Youth Unemployment Prevention Program; the Youth Support Coordinator Initiative; Across Ages/Linking lifetimes, and Neighbourhood 2000/ Downtown 2000.

The indicators that were most frequently identified as direct outcomes of programs were knowledge and community skills, including volunteering; leadership in communities; local solutions for local problems; and networks and partnerships in communities. While not referred to explicitly, it can be extrapolated that many of the programs would have also achieved outcomes in relation to the other stronger communities' indicator, but were not reported on using the same language. For example, the notion of best practice is relatively new in terms of some of the literature that was cited.

The notion of outcomes having potential flow on to other areas was highlighted in the Department of Social Security's (as it then was) report on the Community Research Project (Smith & Herbert 1997). Specifically, it stated that changes could be effected in a range of living standards and that a change in one living standard area was highly likely to produce changes in other living standard areas (p. 63). Although this is evident in relation to some of the programs discussed, it is probable that more of the program outcomes could have had flow-on effects into other areas but that this has not been reported in the literature. This could be either because the research did not specifically examine this issue, or that when reported on in secondary sources, the author/s have not included this information.

A factor identified by Smith and Herbert (1997, pp. 20–1) that was clear in many of the programs discussed here is the propensity of prevention and early programs to create 'first order' and 'second order' outcomes. Put simply, first order outcomes are those in which there is an immediate or short-term specific benefit—a service is provided, a problem resolved, a gain is made in a particular aspect of community life. Second order outcomes are those that create opportunities that may be the basis of a tangible benefit at a later date. These include the long-term implications of skills and knowledge development; of confidence in leadership; or of capacity to draw on best practice in finding local solutions to local problems.

Despite the availability of information on the costs and evaluative findings for some programs, there is clearly a need for recording of more detailed information and for evaluations to be explicitly linked to the early stage of project development and implementation. This is evidenced by the fact that a large number of programs were identified that appeared to relate to the theme of stronger communities, but could not be included due to the absence of any evaluation because the literature did not contain sufficient information. Of the evaluations that were conducted, they varied in time and space. Some were undertaken at the time that the program was implemented, while others were constructed in hindsight after the program had concluded. In addition, others were undertaken some time later for the purposes of an entirely

different research objective. Inconsistency in what was evaluated was also evident, with some evaluations relating more to the administration of a program rather than the social objectives. This led to differing data within the literature being elicited and prevented direct comparisons between programs.

In the Australian context, there is also a need for more accessible evaluations of programs in Aboriginal communities. Those few programs that explicitly reported Aboriginal issues suggest that a social capital perspective has much to offer. The present emphasis on alcohol abuse and juvenile crime reduction in discussions of programs and a lack of widely available evaluations, while perhaps necessary, does perpetuate a deficit and problem focus that can be limiting.

This study has also identified a number of other areas in which further work may be beneficial. Some of these are quite specific, and are detailed in the relevant chapters. Two stand out for particular comment. First, the work of Hawkins, Catalano and their associates at University of Washington, Seattle, is referred to in many sources used here. An extensive review of the primary references to this body of work has not revealed any published evidence of specific cost-benefit figures, although the Communities that Care programs are widely regarded as returning positive cost savings (Toumbourou 1999). Future evaluations may produce more specific figures. Second, there are a large number of small Australian programs, about which the authors of this study have been able to gain only anecdotal evidence. (These include the study by Kippax of youth homelessness programs (see chapter 4), and the Seniors Helping at Risk intergenerational program in Western Australia (see chapter 5)). Further evaluative work to identify these locally focused, community-based and usually locally led programs would create a rich set of data that would further extend our knowledge about effectiveness in this area.

Nonetheless, this meta-analysis of evaluations in prevention and early intervention programs demonstrates that the cost-benefits of strengthening communities can be seen in both economic and social aspects. However, many of the programs cited were developed in response to particular social indicators (such as juvenile crime, poor educational achievement, homelessness) rather than being established with the primary objective of strengthening communities. In addition, most programs were delivered within a context narrower than the broader community, for example, within schools or families. Notwithstanding, explicit links to the broader community was a critical component to the success of many programs. It can therefore be concluded that programs delivered in environments such as schools and families are capable of producing outcomes than contribute to stronger and healthier communities. Further examination of prevention and early intervention as strategies for community building that focus on strengthening communities as a means of developing social capital is warranted. Attention is now turned to a review of the specific conclusions which might be drawn from the various areas covered in this study.

### 6.1 Community wellbeing

The chapter on community wellbeing showed that there is increasing recognition of the importance of community participation and the role that community groups play in developing healthy communities. In particular, findings indicate that:

- the building of trust and reciprocity leads to an increase in social capital, which is an important ingredient of healthy communities; and
- there is significant research to support the notion that people with diverse networks of quality relationships are healthier than people who are socially isolated. (In this context, health refers to the physical, mental and social wellbeing of people.)

Keys to building healthier, and therefore stronger, communities are:

- structures in place to identify community leaders and other highly motivated community members; and
- the inputs of relevant professionals working in the community are mobilised and where these skills are utilised in a multi-disciplinary framework.

The building of social capital through community-based programs is also facilitated where opportunities exist to:

- enable skills' development in areas such as organising groups, running meetings, lobbying, writing of grant applications, and so on;
- enable the identification of funding sources and the capacity to bid for these funds;
- build better links with other community groups and organisations; and
- publicise achievements and, in turn, to access information about other communities' achievements.

# 6.2 Early childhood and families

The literature reviewed in chapter 3 clearly establishes the benefits of community-based early childhood and family prevention and intervention and programs. The benefits arise from both the cost effectiveness of many of the programs as well as in building stronger and healthier families and, in turn stronger and healthier communities. The premise for early childhood prevention and early intervention programs is the recognition that a child's development in the first few years of life sets the foundation for lifelong learning, behaviour and health outcomes.

It is apparent from the review of the literature in chapter 3 that:

- a combined approach which links community-based programs with individual prevention and ameliorative programs targeted to at-risk children provides superior outcomes;
- similar conclusions can be drawn for family support programs—community-based programs build resilience and protective factors which address the structural causes of disadvantage in ways which are not addressed by individual programs alone;

- by building social networks and empowering communities, self-reliance and protective factors are strengthened (and there is some evidence that dependency on individual programs is thereby reduced); and
- because of the complexity and multi-dimensional nature of many social problems affecting children and families (for example, child abuse, maltreatment, and so on), community-based initiatives that are integrated with government programs, and which address combinations of problems, are likely to produce more socially and cost-effective results.

Chapter 3 shows the importance of prevention and intervention programs that are initiated early in the child's life. When programs are directed at families whose children have yet to complete primary school, they are more effective in terms of social outcomes (such as reduced substance abuse, reduced maltreatment, reduced future involvement with the justice system, increased school completion rates, future employment, and so on). In this way, education and schools, alongside the active involvement of parents and other primary care givers, play a crucial role in children's social development. As a consequence, considerably greater cost-benefits may be seen in terms of program expenditure per participant.

### 6.3 Young people

There is overwhelming evidence that for many community-based programs directed at the early prevention of social disadvantage through unemployment or homelessness and/or anti-social behaviours in young people, economic and social benefits are delivered way in excess of the costs of the programs. Key factors which contribute to effective programs are that:

- it is important that programs address the whole-of-community—society-wide social and economic forces which impact upon young people make it difficult for some of them to avoid the risk factors which lead to unemployment or homelessness or to destructive or anti-social behaviours; and
- whole-of-person and whole-of-community approaches which coordinate appropriate service delivery are more likely to address these society-wide factors through building resilience and protective barriers.

A dominant theme in the literature was the claim schools are critical in terms of laying the foundation for healthy participation in society. This is emphasised by Potas et al. (1990) who claim that 'instructionally effective' schools are also effective in reducing the potential for individuals to engage in delinquency. In addition, such schools increase the chances of achieving the educational and social skills necessary to enter employment and to avoid marginalisation. Examples discussed in chapters 4 and 5 are High/Scope Perry Preschool Project; Project Head Start; FAST; Success for All; K-Six Early Intervention Partnership; Youth Support Coordinator Initiative; Across Ages/Linking Lifetimes; and the Manhattan and Arizona intergenerational programs.

In terms of the school environments, communication and effectiveness is facilitated:

- through a coordinated approach which involves both school staff and professional external agencies;
- when the level of community involvement is high, such that there are effective partnerships between the school and members of the local community (including partnerships with business people, churches, sporting and social organisations), and a capacity for working with families;
- by a different management structure to the school's management structure assists in achieving these factors;
- · when there is active parent involvement; and
- where Indigenous communities are actively involved in and exercise leadership and control programs for Indigenous young people.

In the area of crime prevention, early intervention is crucial:

- in minimising future involvement as an offender in the criminal justice system—the more that young people become involved in the criminal justice system, the more likely it is that they will continue to offend; and
- in reducing the costs of crime—both prosecution of crime and incarceration are expensive and far in excess of the cost of effective prevention and early intervention programs.

#### In addition:

- small-size programs (with small case loads) appear to be more effective than larger-scale programs;
- programs which include job training appear to reduce recidivism, as well as reduce substance abuse and other destructive behaviour; and
- these programs also tend to engender a preference for work over welfare.

# 6.4 Seniors and intergenerational programs

Seniors are often addressed by social policy as the recipients of services. While this is important, it is not the whole picture. Seniors also embody much accumulated social capital, and they often exercise local leadership and provide a major source of voluntary effort. The conclusions which may be drawn from the evidence discussed in chapter 5 are that:

- programs to facilitate seniors contributing voluntary effort in the community are most effective when they receive infrastructure funding and when they are organised and coordinated;
- the levels of funding for volunteer activities are low in comparison to the costs of professional services;
- the work that can be performed is of a different nature—however, there are benefits arising from the voluntary work of seniors that augments professional effort;

- there are the positive gains for seniors themselves from having an active and valued role;
   and
- some programs described here have quantifiable cost-benefits in the short term (first order), while all have predictable longer-term cost-benefits (although these are less easy to quantify) (second order)—however, it is clear that these longer-term benefits are key elements in stronger communities and the development of social capital.

### 6.5 Overall summary of conclusions

Although there are some quite significant differences between the four major areas of programs that have been examined in this study, there are also several key issues that may be identified as general findings that span the field.

First, the clear predominance of programs either based in schools, or working through schools as a community resource has already been noted. Not only are schools essential for the development of future generations of citizens (investing in social capital), but also schools are a focal point for most communities. They could more explicitly be seen as a community resource in this respect. Networks develop around focal points, shared interests and opportunities for people to meet.

Second, best practice in prevention and early intervention and best practice in the community building have much in common. Not only are prevention and early intervention best located in community settings, and most effective when they are responsive to local conditions, but community building too may be more effective when it is addressed at an early stage of problems in community being identified.

Third, inheritance of social capital requires that it is actively passed on between generations and nurtured by older members of communities. The intergenerational programs discussed in chapter 5 should not be seen in isolation, but many of them could be viewed from the perspective of the other main areas. Communities consist of all generations, and strong communities show evidence of positive intergenerational relationships.

Fourth, community involvement and participation is a factor in all community-based programs. This includes local leadership, volunteering, civic trust, networks and partnerships between people and between institutions. Where professionals are involved, they are more effective from a community building perspective if they are responsive to local context, work in a multi-disciplinary way and, as much as possible, adopt a facilitative approach. It is also an indicator of strength in communities when the various sectors (government, business, non-government welfare, community groups and individuals) work together towards positive social outcomes.

Fifth, government support for programs is appropriate for two reasons. It is important as seed money, especially in communities where the erosion of civil society can be seen to have had an impact (through rising crime rates, high levels of child abuse, isolation of seniors, and so on). At the same time, there is strong evidence that by adopting an active role in community

building, there is great potential for government to make downstream savings on the projected levels of spending on the resolution of social problems. Early intervention programs that encourage community building are cost-effective.

Sixth, although many of the programs reviewed in this study have a family focus, this is not in contradiction with community building. The programs that have been examined all achieve the promotion of stronger communities, and many of them do so through the interventions with families on which they are based. Families are a key element to strong communities because they are a primary building block of the social fabric.

Of the general conclusions that may be drawn, the final two particular points are those that most over-arch the study as a whole. This study posed two principal questions of the Stronger Communities Strategy (see chapter 1, p. 8):

- What is the evidence that prevention and early intervention programs promote the development of stronger communities and create measurable positive social outcomes?
- What is the evidence that there is a cost-benefit to be achieved by government supporting such programs?

Substantial evidence to answer these questions has been presented in the preceding chapters and summarised in this conclusion. From this evidence, it may be concluded that:

- prevention and early intervention programs do contribute to the promotion of strong communities and to positive social outcomes—furthermore, they do so in a way that enables communities to continue to deal with issues through their own resilience and capacities; and
- prevention and early intervention programs contribute to community building and positive social outcomes in a cost-effective way—these cost-benefits are demonstrably cumulative in many instances.

Through a meta-analysis of available evaluative literature, this study has demonstrated the value of prevention and early intervention programs as a key dimension to the promotion of stronger communities that display the characteristics of a civil society in which social capital is nurtured for the benefit of the whole community.

 Table 5:
 Summary of benefit-cost analysis of programs surveyed

Program	Jurisdiction	Target group—issues	Benefit-cost	Chapter
Iowa Blueprint Investment Strategy and Iowa Kids Count Initiative	Iowa, United States (US).	Community—remedial services (health, education and human services); adult dependence (welfare and health care costs); and public protection (juvenile and adult corrections).	If public expenditure to address preventable problems can be reduced by 5%, the savings would be over US\$108 million, or US\$3 for every US\$1 invested in prevention initiatives, and by more than five times the cost (that is, US\$5 for each US\$1) if other potential gains were factored in (for example, increased tax revenues from a more productive workforce).	Chapters 2 and 3
Department of Housing, NSW, Neighbourhood Improvement Program	Airds Estate, western suburbs of Sydney.	Community in public estates—cost to the community of crime, family and community stress, unemployment, and so on.	Total cost of social problems in Airds is \$28.5 million per year, or 17 times annual cost of the program—that is the benefits are \$17 for every \$1 outlaid on the program. If social problems were reduced to NSW average, cost-benefit ratio would be 1:17 (a saving of \$18 million per year). Cost-benefit estimated to be 1:6, that is the value of the benefits are \$6 for every \$1 outlaid on the program (short-term). Program would break even with reduction in social problems by 3.7%.	Chapter 2
Community Research Project	Australia.	Communities with high unemployment, dependence on income support and undergoing economic decline. To test the potential of particular community-based services to improve living standards of those on low incomes.	Eighty community-based initiatives funded for 12 months at an average cost of \$18 208. Qualitative data show that 59% of the projects produced observable benefits in living standard areas; 56% reported achieving substantial living standard gains; while 26% reported success in achieving some living standard gains and 18% had only minimal effects on targeted living standard areas. Full benefit-cost analysis not undertaken.	Chapter 2
South Australia Office for Families and Children and the Australian Institute of Family Studies	South Australia.	Child abuse and neglect.	Total expenditure directly attributable to child maltreatment estimated as \$354.92 million. Potential savings through effective prevention program identified. Recommends a minimum expenditure of 1% of cost of child abuse (\$3.5 million) for a prevention program. Seen as a modest investment relative to potential gains. Full benefit-cost analysis not undertaken.	Chapter 3

Program	Jurisdiction	Target group—issues	Benefit-cost	Chapter
The Early Years Study	Ontario, Canada,	Children—how the lives of young children, including those with special needs or at-risk could be enhanced for educational, career and social success.	Expenditures for early childhood far exceed expenditures for older children and adults (\$2,800 per year for children up to six years, and \$7,250 per year for children, six to 18). Increased community-based initiatives and investment, both public and private, enhances communities through a range of effective strategies. No formal cost-benefit undertaken.	Chapter 3
High/Scope Perry Preschool Project	Michigan, US.	Children—participation in an active approach to learning, facilitated by trained teachers. Home visits a component of the program to reinforce the school curriculum.	Total benefits six times the cost of a one-year program and three times the cost of a two-year program. Cost-benefit analysis estimated that, when children were 19, there had been a return of US\$4 for every US\$1 spent. When calculated at 27 years, estimated benefit-cost was US\$7 for every US\$1 spent on the preschool program.	Chapter 3
Project Head Start	Throughout the US.	Preschool children aged 3 to 5 years from disadvantaged backgrounds.	Estimated as similar to High/Scope Perry Preschool Project, although such estimates are controversial in many cases, they are inferred from High/Scope Perry.	Chapter 3
Families and Schools Together	Nine Victorian Schools.	Collaborative, school-based early intervention program for children and families.	Qualitative and quantitative evaluation built into each program. Various evaluations show extensive favourable results, short-term and longitudinal. Some cost data is available. For example, average cost per family over two-year program was estimated to be from \$1 266 to \$1 900 and approximately US\$1 200. No full cost-benefit undertaken.	Chapter 3
Success for All	Originated in Baltimore, US. Extended elsewhere in US.	For disadvantaged students from kindergarten to grade five.	Program evaluation undertaken including an estimated US\$800 cost per student additional to a school's usual allowance. Savings in grades not being repeated and reduced special education placements were calculated to offset program costs.	Chapter 3
Provence Group Approach	New Haven, Hamden and West Haven, Connecticut, US.	Disadvantaged mothers from pregnancy to 30 months after birth.	Five-year follow up and a ten-year longitudinal study. Cost estimates of the program include US\$20 000 (in 1982 dollars) per family. Welfare and services savings of US\$40 000 (1982 dollars) estimated for families in the program compared to a control group. Thus benefit-cost ratio of 2:1—that is the value of the benefits is US\$2 for every US\$1 outlaid on the program.	Chapter 3

Program	Jurisdiction	Target group—issues	Benefit-cost	Chapter
K-Six Early Intervention Partnership	Fresno, California and expanded elsewhere in the US.	High-risk families.	Qualitative and quantitative evaluation. Cost estimate is overall program budget US\$1.2 million. Estimated program cost per family—US\$375. No formal cost-benefit analysis undertaken.	
Job Corps	US.	Unemployed youth selected from an at-risk population with regards to juvenile delinquency.	For every US\$1 invested, there is a return of US\$1.45, so cost-benefit ratio is 1:1.45.	Chapter 4
Family Ties Program	New York, U.S	7 to 16 year olds.	to 16 year olds.  Evaluation indicates that for every USS1 spent on the program, US\$7 savings to the public by averting juvenile placements in detention centres. So The cost-benefit ratio is 1:7.	
The Youth Support Coordinator Initiative	Queensland	Students located in areas with high incidence of youth homelessness and school suspensions and exclusions.	Quantitative and qualitative evaluation points to success of program, but no formal cost-benefit analysis available.	Chapter 4
Peer Group Activities	Tyneside, United Kingdom.	Comprehensive school.	A reduction of 75% in vandalism, but no formal cost-benefit analysis available.	Chapter 4
Dalston Youth Project	Hackney, London	15 to 18 year olds	Estimated value of number of crimes prevented greater than cost of project. No formal cost-benefit analysis available.	Chapter 4
Supporting Grandmothers.	Atlanta, US.	Grandmothers caring for grandchildren—predominantly low-income and ethnic-minority families.	Qualitative and quantitative data reported. Cost-benefit reported as positive (costs less than formal care, plus flow on) but exact figures not available.	Chapter 5
Warm-Line— telephone support	Oakland, California, US.	Grandparents caring for grandchildren	Qualitative and quantitative data reported. Cost-benefit ratio of 1:14 or greater — that is, the value of the benefits are at least US\$14 for every US\$1 outlaid on the program.	Chapter 5
School-based health and social support	New York, US	Grandparents caring for grandchildren	Qualitative and quantitative data reported. Estimated cost- benefit ratio of 1:2.3, that is the value of the benefits are at least US\$2.30 for every US\$1 outlaid on the program.	Chapter 5
Grandparenting skills education	Tempe, Arizona, US programs.	Grandparents of children in local school	Qualitative and quantitative data reported. No clear financial cost-benefit calculable.	Chapter 5
Across Ages/ Linking Lifetimes	Philadelphia, Penn . US.	Seniors acting as volunteer mentors to younger people in local community.	Qualitative and quantitative data reported. Limited data on costs and benefits, but formal cost-benefit analysis not performed.	Chapter 5

Program	Jurisdiction	Target group—issues	Benefit-cost	Chapter
Senior Corps— Foster Grandparents	US.	Assisting families in need of general support by utilising the volunteer effort of seniors in the community.	Qualitative data (Freedman 1997); quantitative data (NSCC website). Estimated cost-benefit ratio of 1:2.32, that is the value of the benefits are at least US\$2.32 for every US\$1 outlaid on the program.	Chapter 5
Neighbourhood 2000/ Downtown 2000	New York, Honolulu, US.	Seniors as advisors and a resource for school students in community building projects.	Qualitative data only. Cost-benefits can only be assumed from evidence of other studies in terms of reduced vandalism/crime and future economic potential of positive community life. On this basis, cost-benefit ratio estimated to be at least 1:2.2, that is the value of the benefits are at least USS2.20 for every USS1 outlaid on the program.	Chapter 5
National Senior Service Corps— Senior Companions	US.	Seniors providing general personal care for frail people and people with disabilities in local community.	Qualitative data (Freedman 1997); quantitative data (NSCC web site). Estimated effective voluntary addition to overall social service provision at a cost of 20% of cost of formal services. Thus cost-benefit ratio of 1:5—that is, the value of the benefits are at least USS5 for every USS1 outlaid on the program	Chapter 5
Environmental Alliance for Senior Involvement	US	Seniors providing skills and knowledge to community environmental projects.	Qualitative and quantitative data reported. Low unit costs (between US\$230 and US\$385 per volunteer), but limited cost-benefit information beyond that which can be assumed from community building.	Chapter 5

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