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UNSPECIFIED National Evaluation of Sure Start (NESS) - Impact. Documentation. DfES Publications.

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IMPACT EVALUATION

The impact module of the evaluation will assess children, families and communities to investigate all aspects of the children's development, as well as demographics, health and risk factors within the family.

Why Measure The Impact Of Sure Start?

- To determine which features of the Sure Start programmes are effective in enhancing the lives of children, families and communities.
- To determine which Sure Start programmes work best for whom and under what circumstances.

How Will The Impact Of Sure Start Be Evaluated?

- Compare Sure Start and non-Sure Start communities.
- Compare different Sure Start communities.
- Focus in detail on the characteristics of communities and programmes associated with good practice

Experimental Sure Start Communities

- Information will be taken from the implementation study (*which measures what each community is doing*) and the local context analysis (*which describes demographics and social context of each community*), to select communities for detailed study.
- We will use Child Benefit records to identify all children in a community. A random sample of families with children of various ages will be selected.
- We will collect information from children, families and also community level data on 150 Sure Start communities and 50 Sure Start to-be communities.
- For each community in the impact module 120 families with a child of either 9 months old, 30-36 months old or 54-60 months old will be visited.

The Control Communities

- 50 communities earmarked for future Sure Start membership will be chosen as control communities.
- These communities will be described in terms of geographic, demographic and ethnic background, as well as indicators of deprivation.
- For each Sure Start control community 75 families with a child of either 9 months old, 30-36 month olds or 54-60 month olds will be recruited for home visits.

Longitudinal Study

Following the cross-sectional study of 150 Sure Start and 50 Sure Start-to-be communities, 100 communities will be selected for the longitudinal study. The children and families seen when the child was 9 months old will be followed up when the child is 30-36 months old and 54-60 months old. It is hoped that further follow-ups in late childhood will occur.