

SUBMISSION

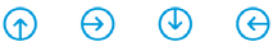
to the

PRODUCTIVITY COMMISSION

on

MORE EFFECTIVE SOCIAL SERVICES

2 DECEMBER 2014



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Introduction

1. Superu welcomes the opportunity to comment on the Productivity Commission's issues paper, *More Effective Social Services*. Our interest in this topic stems from our statutory role to monitor, research and evaluate programmes in the social sector. The Families Commission Act 2003 also gives Superu a special interest in stimulating and promoting research into any matter related to the interests of families, to whom many of the social services are directed. We have a particular focus on creating and presenting evidence to policy and programme decision-makers.
2. This submission:
 - gives further details about our role and our activities, and their relevance to more effective social services;
 - provides an overview of the current state of evaluation in the social services sector and future directions;
 - discusses the movement towards integrated social service delivery, and highlights the need for further evidence about effectiveness;
 - canvasses research, mainly conducted by Superu, which comments on social service contractual arrangements; and
 - presents lessons from Superu research on providing social services to whānau.
3. Superu is keen to help the Productivity Commission with its work on more effective social services – please contact us if we can assist.

Superu's role is relevant to developing more effective social services

4. Superu has evolved from the Families Commission, as a result of the Families Commission Amendment Act 2014 (the Act). We are an autonomous Crown entity, accountable to the Minister for Social Development. Superu has a range of statutory responsibilities related to researching social issues, and creating evidence of effectiveness for social sector programmes and interventions.¹ These responsibilities include commissioning and monitoring contracts for social science research, setting standards for monitoring and evaluating social sector programmes and interventions, and providing a data base of government social science research. We also have statutory responsibilities for promoting and conducting research on New Zealand families.² In keeping with the Act, our purpose is to increase the use of evidence by people across the social sector so that they can

¹ Families Commission Act 2004, Sections 7 and 8A.

² Families Commission Act 2004, Section 8.

make better decisions – about funding, policies or services – to improve the lives of New Zealanders, New Zealand’s communities, and families and whānau.³

5. Our role and purpose give Superu a direct interest in the development of more effective social services. This interest is further emphasised through our key initiatives as set out in our Statement of Intent, 2014-2018. These initiatives are of two types – those that are aimed at growing the evidence base on social sector issues and programmes, and those that facilitate the use of this evidence.
6. We would like to draw your attention to Superu’s role in closing evidence gaps in the social sector. Where there are research questions, such as those posed in your issues paper, a government agency can approach us for assistance with monitoring, research or evaluation to provide answers.⁴ We have some internal capacity to do this type of work, or we might contract a research company on behalf of the government agency.
7. Some relevant activities we are undertaking which aim to increase the use of evidence in the social services sector include:
 - A new contestable fund which will involve NGO social service providers participating in external evaluations funded by Superu. The evaluations aim to understand how previously under-investigated and/or innovative services and practices achieve important outcomes for groups and in locations that are of high priority to the Ministry of Social Development. The evaluations are planned to begin in May 2015 and finish in May 2016;
 - The development of evaluation standards in partnership with the Aotearoa New Zealand Evaluation Association (ANZEA). This set of standards aims to ensure that high quality and worthwhile evaluation is undertaken by policy makers, funders and providers. We are currently incorporating feedback on the draft standards to finalise them and encourage their use;
 - We manage the longitudinal study ‘Growing Up in New Zealand’. This is New Zealand’s largest and most diverse study, with a cohort of nearly 7,000 children born in Auckland and the Waikato in 2009 and 2010. Part of the study collects data about the use of social services (including Whānau Ora) by parents/caregivers and children; and
 - Our annual Families and Whānau Status Report. We recently published the second in a series that aims to enrich our understanding of family and whānau wellbeing. These reports provide valuable contextual data to decision makers and practitioners in the social sector.

³ Families Commission/Superu Statement of Intent 2014-2018, http://www.familiescommission.org.nz/sites/default/files/downloads/SOI%202014-2018_0.pdf

⁴ Ministers may also suggest research questions.

The current state of evaluation in the social services sector and future direction

8. The Productivity Commission is interested in responses to the question: “is there sufficient learning within the social services system?” (Question 46 in the Issues Paper, where the Productivity Commission define learning as “monitoring, evaluation or research”). This section provides a brief overview of the current state of evaluation and developments in the sector.
9. Although social service programmes are often subject to some form of evaluation, there are a number of barriers which limit the ability of evaluations to improve the efficiency and effectiveness of the social services system. These include:
 - Inadequate consideration of research, evaluation and monitoring at the design and implementation stage. This point was noted by Sir Peter Gluckman in his report to the Prime Minister in 2013: *“too often, social programmes that result from policy initiatives are rolled out based on an idea or a successful pilot that may not, for a variety of reasons, be successful when they are scaled up nationwide or applied in a new geographic location. This points strongly to the need to consider formal evaluation when substantive programmes are initiated.”*⁵ Evaluation activity should be planned early enough in the programme design and implementation process to ensure that appropriate data collection systems are put in place to allow effective evaluative activity;
 - Funders are primarily interested in evaluating the success of their individual programmes, but when dealing with complex social issues ‘a system-wide approach’ is required to understand whether or not long term benefits are being realised. For example, in the family violence prevention area it is well-recognised that interventions need to work across multiple settings (across the individual, family, community, institutional and societal levels). A continuum of responses is required ranging from universal interventions (aimed at preventing violence from occurring in the first place) through to targeted interventions aimed to support and prevent recurrence.⁶; and
 - Due to the short-term nature of many funding programmes, evaluations are often limited in scope and/or conducted over a limited period of time. This means that information received from monitoring and evaluation activity tends to focus on inputs and outputs rather than long-term outcomes (this focus can be a result of the way services are contracted and also relate to a lack of clarity about the intended outcomes).⁷ As noted by the Productivity Commission’s Issues Paper (on page 57) it can be difficult to measure outcomes and it may be too costly to do so for small-scale programmes.

⁵ *The role of evidence in policy formation and implementation* A report from the Prime Minister’s Chief Science Advisor September 2013 (p13)

⁶ Please refer to the Families Commission (2005) *Beyond Zero Tolerance*. And Krug, E., Dahlberg, L., Mercy, J., Zwi, A., & Lozano, R. (2002) *World report on violence and health*. World Health Organization. The evidence recognises that factors influencing violence lie at multiple and interacting levels of influence (from the societal to the individual).

⁷ A 2011 survey of 284 community organisations receiving funding from MSD’s Family and Community Services (FACS) identified the need to improve the monitoring and reporting area including working better with providers on setting objectives/targets, understanding what FACS needed to look at during an audit, and, why data was collected and how it was used.

However, as discussed below there is a strong desire among policy makers, funders and providers to measure outcomes.

10. There are examples of evaluations in the social sector which are well planned and robust. Some features of these evaluations include a system-wide approach (looking at cross-sector issues and describing impacts which may be the result of multiple programmes), a long-term focus (measuring outcomes), using robust measurement (for example, using randomised control trials or a comparison group, or at least measuring change over time), and a client or family centric approach (putting the voice of the client at the heart of the evaluation findings, rather than evaluating the funder-provider process). Examples include:

- Early Start programme evaluation.⁸ The Ministry of Social Development commissioned this report to provide a nine year follow-up of the children and parents studied in the randomised controlled trial of the Early Start programme. The evaluation looks at the extent to which involvement in Early Start had benefits for the children and families enrolled in the programme;
- The Incredible Years Pilot Study.⁹ This was a substantial cross-agency study conducted over two years. The Ministry of Education Special Education delivered the Incredible Years Parenting courses that were evaluated in the study. The Ministry of Health provided the operational funding for the study. The evaluation team is within the Ministry of Social Development;
- Family Help Trust: Monitoring Vulnerable Families¹⁰ – a two year outcome study. This study tracked the progress of a group of families and infants at ultra high-risk of maltreatment. Although the evaluation contains no control group (meaning it is not possible to say that improvements were solely due to the intervention), it does contain measures at baseline, 12 months and two years; and
- Auckland City Mission's 'Family 100 Research Project' is an example of a client-centric project providing findings on a range of issues such as housing, debt, food insecurity, health, education and employment.¹¹ Although this is not an evaluation with a control group or randomised control trial, it does provide insights on how multiple issues can work in concert to prevent people from moving forward. One key focus of the Project is to map participants interactions with a range of agencies in order to understand the ways in which people navigate a complex service landscape in order to get their needs met.

11. Understanding the importance of outcomes is not particularly new among those working in the sector but there is a widespread recognition that social sector providers often do not have the capability to conduct robust outcomes based evaluations. For this reason we have established a new contestable fund which will involve NGO social service providers participating in external evaluations funded by Superu. The fund aims to build capability in the sector to conduct evaluations so that organisations can achieve a better understanding of what works, where and for whom.

⁸ Refer to <https://www.msd.govt.nz/about-msd-and-our-work/publications-resources/evaluation/early-start/index.html> for details.

⁹ Refer to <http://www.msd.govt.nz/about-msd-and-our-work/publications-resources/evaluation/incredible-years-report/index.html> for details.

¹⁰ Refer to <http://www.familyhelptrust.org.nz/downloads/monitoring-vulnerable-families.pdf> for details.

¹¹ Refer to <http://www.aucklandcitymission.org.nz> for details.

12. Other developments are providing increased opportunities for policy makers, funders and providers to consider ways in which evidence can inform service delivery. Some of these developments are listed below.

- The introduction of Results Based Accountability (RBA) by the Ministry of Social Development (MSD). This provides a common language for assessing outcomes to drive greater accountability for the outcomes. The framework specifies population level and organisational performance results to demonstrate how services contribute to overall community results. This enables providers to describe how their activities are intended to contribute to outcomes;
- The recent development of MSD's Investing in Services for Outcomes (ISO) programme of work. ISO is intended to refocus funding contracted by MSD more towards outcomes aligned with government's priorities for vulnerable children and welfare reform. ISO also includes support for organisational capability building. The development of ISO contracting is an opportunity to improve evaluation and continuous learning within organisations. MSD have signalled that they expect a culture of continuous improvement as a result of ISO contracting.¹² (Superu's evaluation fund, described above, is part of MSD's ISO strategy); and
- Developments in sharing data (for example, Statistics New Zealand's Integrated Data Infrastructure) allow for tracking clients over the longer-term. The multi-agency nature of the data provides opportunities to examine the various touchpoints between clients and social services. A strong area of future potential is the linking of government data with non-government data (i.e. provider's own client data). However, examining such data requires resource which is often unavailable to those working in the social services sector.¹³

The rest of this paper shares some findings from the evidence-base about effective social services contracting.

There is a move towards integrated service design but there is a lack of evidence demonstrating long-term effectiveness

There is a move towards integrated services which take a more holistic view of clients with multiple needs

13. Services for a family member should ideally begin with an assessment of the family's needs. The agency commissioned to deal with the family may be capable of providing a range of services in some instances, or act as a conduit between the family and other relevant agencies. However, different arrangements may be needed to support families with the most complex issues. These arrangements should enable sharing of responsibility, resources, information and action between

¹² Refer to 'next steps' section of the Investing in Services for Outcomes document at <https://www.msd.govt.nz/documents/about-msd-and-our-work/work-programmes/investing-in-services-for-outcomes/investing-in-services-for-outcomes.pdf>

¹³ We also believe that focusing on administrative data alone will not provide a complete picture of wellbeing. For example, only primary research can identify improvements in life satisfaction and perceptions of income adequacy.

agencies. This approach is described as 'integrated service delivery' (other terms include 'joined-up services' or 'wraparound services'). The goal is to enhance the quality of support and efficiency of service among users with complex problems that cut across multiple service providers and settings.¹⁴

14. A 2014 survey of government leaders in 22 Western countries shows that there is a global movement towards the integration of government social services, so that they can be provided in a manner which reflects a more holistic view of the needs of clients.¹⁵
15. In New Zealand the Social Sector Forum (which consists of the Chief Executives of the Ministries of Social Development, Health, Education, and Justice, and the Department of Building and Housing) have recently stated that investment in the social sector could be more effective if there was an integrated approach to the design, purchase and delivery of services. The Forum argue that making sure that those most in need do not fall through the gaps requires government agencies to work closely together.¹⁶
16. A number of services have been developed in New Zealand which attempt to link different agencies in order to take a holistic client needs approach to social service provision. These include Children's Teams, Community Response Model, Social Sector Trials, Whānau Ora, Strengthening Families, Community Link, Community Link in Courts, and Heartland Services.

Although integrated service design should deliver benefits there are not yet any systematic evaluations which demonstrate long-term effectiveness

17. Integrated services have the potential to improve outcomes and services for service users, particularly users with complex problems. It is increasingly recognised that this is because complex or difficult problems cannot be solved by one group or agency alone and often requires a multi-disciplinary approach.¹⁷
18. However, to date the evidence that integrated social service delivery achieves improved outcomes for individuals and their families is scarce. This lack of evidence is due to a number of factors:
 - It is difficult to attribute 'outcomes' directly to specific programmes when there are a number of agencies working together;
 - Integrated programmes are usually evaluated before outcomes can be expected; and

¹⁴ Dominic Richardson and Pauliina Patana, *Integrated Services and Housing Consultation Draft Discussion Paper* (Organisation for Economic Cooperation and Development, 2012).

¹⁵ KPMG International, 2014, *The Integration Imperative: reshaping the delivery of human and social services*, pages 48 to 51. <http://www.kpmg.com/PH/en/industry/Documents/integration-imperative.pdf>

¹⁶ Briefing to the Income Government, Social Sector Forum 2014.

<http://www.msd.govt.nz/documents/about-msd-and-our-work/publications-resources/corporate/bims/social-sector-forum-2012.pdf>

¹⁷ Office for the Community and Voluntary Sector, *Good Practice Participate*, accessed June 10 2013, <http://www.goodpracticeparticipate.govt.nz>

- Reviews or evaluations usually focus on the process (i.e. how well agencies work together). These evaluations also tend to focus on individual projects rather than the organisational structure that supports them.¹⁸

19. While there is widespread support for integrated services much of the literature continues to acknowledge that there is little evidence that improved processes and relationships among agencies actually results in better outcomes for clients.¹⁹ New Zealand, Australian and British reviews have found that there have been few rigorous evaluations of the effectiveness of these approaches.²⁰

20. To reach robust conclusions about the most effective contractual arrangements for purchasing integrated services requires an assessment of the ability of interventions to achieve outcomes. Without further evidence, we will not know what approaches to integrated services among agencies are the most effective.

New Zealand research findings on contracting social services

21. Although there is a lack of evidence about the overall effectiveness of integrated services in New Zealand, there are some common findings from the evidence-base which describe effective mechanisms for contracting social services.

A sequenced approach to service provision can improve effectiveness

22. A Superu review of evidence on effective parenting programmes shows that stresses on families will often lead to parents dropping out of programmes and otherwise negating a programme's effectiveness.²¹ The review suggested that a sequenced approach might be needed for dealing with a family's issues, as attempting to deal with a number of issues simultaneously might be ineffective because of the confusion and complexity this creates.

¹⁸ Gray, *Service Delivery and Regional Coordination* and Ministry of Social Development, *Mosaics Whakaahua Papariki: Key Findings and Good Practice Guide for Regional Co-ordination and Integrated Service Delivery* (Wellington: Ministry of Social Development, 2003).

¹⁹ Gray, *Service Delivery and Regional Coordination* and Ministry of Social Development, *Mosaics Whakaahua Papariki*.

²⁰ Kerslake Hendricks, A., and Stevens, K., 2012, page 63.

McDonald, M., and Rosier, K., 2011, *Interagency Collaboration: Part A: What is it, what does it look like, when is it needed, and what supports it, and Part B: Does collaboration benefit children and families? Exploring the evidence*. Australia Family Relationships Clearinghouse, Australian Institute of Family Studies, <https://www3.aifs.gov.au/cfca/sites/default/files/publication-documents/bp21a.pdf> and http://futuresforum.org.au/sites/default/files/McDonald_Interagency%20Collaboration_Part%20B.pdf

Cameron, A., Lart, R., Bostock, L., Coomber, C., 'Factors that promote and hinder joint and integrated working between health and social care services: a review or research literature' *Health and Social Care in the Community* (2014) 22(3), 225–233, <http://onlinelibrary.wiley.com/doi/10.1111/hsc.12057/pdf>

Wilson, H., and Huntington, A., 2009, *An Exploration of the Family Partnership Model in New Zealand*, Families Commission, page 9. <http://www.familiescommission.org.nz/sites/default/files/downloads/BS-Family-Partnership-Model.pdf>

²¹ Robertson, J., *Effective Parenting Programmes: A review of the effectiveness of parenting programmes for parents of vulnerable children*, Superu, page 43 to 51. Trying to deal with multiple problems simultaneously is also likely to be ineffective, suggesting problems should be dealt with in a sequenced way (page 47).

<http://www.familiescommission.org.nz/sites/default/files/downloads/Effective-Parenting-Programme-Report.pdf>

Clients with multiple and complex needs require persistence

23. Research about services to young people with multiple and complex needs shows that it is important for service providers to develop a long-term, stable relationship with the client. Where the young person is living at home, or has an ongoing connection with their family, the service provider might need to provide or arrange long-term interventions for the family, so that they are more able to support the young person.²²
24. One of the principles underlying the UK Troubled Families Programme is persistence, and it is clear it can take many months to achieve the goals agreed for each family.²³ The forerunners to this programme, a group of programmes collectively known as the Family Intervention Projects, found that average time worked with a troubled family was 11 months.²⁴ Other programmes are based on a period of intensive support to families, followed by less intensive support to achieve a longer-term plan.²⁵

Flexibility in contracting enables success

25. In 2010, the Minister for Social Development asked the Families Commission to take a close look at the social services provided in New Zealand by examining in detail what was happening in one district. The district chosen was Masterton. The research included surveys of providers and families. The research provides information of considerable relevance to your inquiry.²⁶ The families strongly preferred services that had the flexibility to address their needs as they saw them, rather than services that dealt only with a particular need. The next best option were providers who, if they were unable to meet all of a families pressing needs, were able to refer families to other services. Providers had a clear preference for high trust contracts which allowed them to address families' needs with a degree of flexibility. Some contracts did not allow the providers to do this, and they either had to refer families to other providers, or ignore some of their needs, neither of which they felt was ideal. The providers also said that the contracts were overly complex; the accountability requirements were onerous; and the contracts did not cover the costs of training, coordinated with other services, and follow-ups with families.
26. An evaluation of Social Sector Trials found that the contracting tools available to officials needed further development. The plan had been to use integrated contracts to give the Trials sufficient flexibility to meet family needs, but this was not

²² Stevens, K., Munford, R., Sanders, J., Liebenberg, L., and Ungar, M., 2014, 'Change, relationships and implications for practice: the experiences of young people who use multiple services', *International Journal of Child, Youth and Family Studies* (2014) 5(3): 447–465, page 461.

<http://journals.uvic.ca/index.php/ijcyfs/article/view/13107/4009>

²³ The UK Department of Communities and Local Government, 2012, Working with Troubled Families: A guide to the evidence and good practice, page 10, attributed to the Social Exclusion Task Force.

²⁴ Lloyd, C., Wollny, I., White, C., Gowland, S., and Purdon, S., 2011, Monitoring and evaluation of family intervention services and projects between February 2007 and March 2011, Department of Education, page 4. https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/184031/DFE-RR174.pdf

²⁵ Thom, G., Delahunty, L., Harvey, P., and Ardill, J., 2014, *Evaluation of the Integrated Family Support Service, Final Year 3 Report*, Knowledge and Analytical Services, Welsh Government, *What is the Integrated Family Support Service?* <http://dera.ioe.ac.uk/19823/1/140328-evaluation-integrated-family-support-service-year-3-en.pdf>

²⁶ Families Commission, 2010, *Social Services in Masterton: the views of families and whānau*, pages 15, 45 to 47. <http://www.familiescommission.org.nz/sites/default/files/downloads/social-services-masterton.pdf>

fully achieved. The reason for this was that government departments were collectively not ready for integrated contracts at that time.²⁷ A similar picture emerged during the early stages of the implementation of the Children's Teams. The contract systems available were designed for specific outputs rather than integrated approaches, and contracts were prescriptive and inflexible. People involved with the Children's Teams gave clear feedback that an integrated service approach requires integrated funding.²⁸

27. Where Government is contracting non-government agencies to provide family interventions, the evidence referred to above implies the contracts should enable a flexible approach, to deal with the possibility that a family might be faced with a number of pressing needs. These contracts should allow for assessment, prioritising, co-ordinating, and sequencing of family support. The contracts also need to be flexible enough to allow providers to work with extended family or whānau members.
28. How government agencies can maintain accountability in these circumstances is an evolving issue. Funders and contractors may have different views on matters such as the plans for families, the length of contracts, and the nature of the services that should be provided. Without an agreed accountability procedure, funders will be unsure that what is being funded is actually being delivered. With integrated contracts, mutually agreed monitoring of process indicators, intermediate outcomes, and longer-term outcomes is necessary, similar to that used by the UK government for their Troubled Families Programme.²⁹ The Government also needs this information to be sufficiently robust to make decisions about which providers it should fund, and what types of services it should provide.

Providing services to Māori: some lessons from Families Commission/Superu research

29. Superu (formerly the Families Commission) has produced a body of research on whānau, and we have extracted the lessons from this which are relevant to your inquiry.
30. The report, *Te Pumautanga o te Whānau*, is of particular relevance, although it should be noted that the research is based on qualitative interviews (rather than a quantitative survey).³⁰ This reported on research on whānau resilience in the face of financial hardship and adversity. This has implications for the way that social services should be provided to whānau. The research was in two parts, the first

²⁷ Centre for Social Research and Evaluation, 2013, Final Evaluation Report: Social Sector Trials – Trialling New Approaches to Social Sector Change. Ministry of Social Development, Wellington, page 7. <http://www.msd.govt.nz/documents/about-msd-and-our-work/work-programmes/initiatives/social-sector-trials/msd-social-sector-trials-evaluation-report-may-2013.pdf> page 28.

²⁸ Social Policy Evaluation and Research Unit (Superu), 2014, *Assessment of the Design and Implementation of the Children's Teams*, Families Commission, page 24. http://www.familiescommission.org.nz/sites/default/files/downloads/Childrens-Teams-Assessment_0.pdf

²⁹ UK Department of Communities and Local Government, 2012, *ibid*.

³⁰ Baker, K., Williams, H., and Tuuta, C., 2012, *Te Pumautanga o te Whānau: Tuhoe and South Auckland Whānau*, Families Commission, <http://www.familiescommission.org.nz/sites/default/files/downloads/te-pumautanga-o-te-whanau.pdf>

focusing on Tuhoe whānau in their rohe, and the second on whānau in South Auckland.

31. Turning first to Tuhoe whānau, the research presented a picture of resilience flowing from cultural strength, in the face of material deprivation. When Tuhoe need support, they first look to the whānau, followed by the hapu and the iwi. This does not mean that government services are not needed, but they have often been too distant, and not provided on the right terms, to be useful. Part of this connects with the theme running through this submission – services need to be whānau focused. Another finding is that services to Tuhoe are better provided through Tuhoe themselves. This suggests that services are best provided to iwi living in their rohe on a partnership basis, within the framework of a high trust contractual model, and a jointly developed accountability framework.
32. The context for the South Auckland whānau was very different to that for Tuhoe. Nevertheless, they shared with the Tuhoe whānau the feeling of being alienated from the government agencies providing services, and somewhat unsupported by them. The reasons included conflicting world views, lack of integration of services, and cultural illiteracy of service providers. This suggests that services would be more effective if they were delivered by an organisation that had a good understanding of Te Ao Māori (the Māori world), that services should be whānau focused, and contractual arrangements should support this.
33. In 2011 and 2012 the Families Commission's *Whānau Rangatiratanga* work programme brought together approximately 600 people from hapū and iwi organisations, communities, and non-government and government providers to identify what works with Māori. This resulted in the report '*What works With Māori? What the people said.*'³¹ The participants identified success factors for working with Māori which in many respects echo the design of the integrated services approaches discussed earlier in this submission, but with some contextual and cultural adaptations. The participants called for services that are culturally appropriate; whānau focused; provided in partnership with Māori; integrated into the Māori community; aim for whānau to have meaningful control over their own life and cultural wellbeing; and help build Māori capacity, by investing in Māori communities and workforces.³²
34. A literature review of approaches to protecting Māori Children from maltreatment has reinforced these success factors. In particular, it found that these approaches should take account of the multiple and complex needs of whānau, and be delivered in culturally appropriate ways.³³

³¹ Irwin, K., Hetet, I., Maclean, S., and Potae, G., 2013, *What works With Māori? What the people said*, Families Commission/Superu. http://www.familiescommission.org.nz/sites/default/files/downloads/what-works-with-maori_0.pdf

³² Irwin, et al., 2013, pages 106 to 120.

³³ Cram, F., 2012, *Safety of Subsequent Children: Māori Children and Whānau: A review of selected literature*, Families Commission, <http://www.familiescommission.org.nz/sites/default/files/downloads/SoSC-Maori-and-Whanau.pdf>, pages 41 to 43.

Conclusions

35. Through the Families Commission Act 2003, Superu has a direct interest in fostering effective social services, carrying out evaluations and research towards this end, and bringing relevant evidence to decision-makers.
36. Learning within the social services sector is limited by evaluations which are often not well planned, do not use robust methodologies, and do not investigate outcomes. Furthermore, the evaluation of individual programmes limits the ability to comment on how well the sector succeeds in improving the wellbeing of clients and their family and whānau. But there are good practice examples which take a system wide approach and put the client and their family/whanau at the centre of the evaluation. This approach to generating robust evidence, and an increasing emphasis on service outcomes more generally, can improve the effectiveness of social services.
37. Integrated services have the potential to improve outcomes and services for clients, particularly those with complex problems. It is increasingly recognised that this is because complex or difficult problems cannot be solved by one group or agency alone. However, reviews of the literature suggests that there is little evidence that integrated services result in better outcomes for clients. Evaluations tends to focus on the process rather than outcomes. Further research is required to provide robust evidence about the most effective way to commission and manage integrated social services.
38. Evidence from New Zealand shows that effective mechanisms to contract social services include: a sequenced approach to service provision (to avoid attempting to deal with a number of issues simultaneously), persistence and long-term support for families with ongoing needs (to establish effective relationships between providers and clients), and a flexible approach to contracting (to cater for the multiple and evolving needs of families).
39. In addition, participants in Kaupapa Māori research recommend that for services to whānau to be effective they should be provided to Māori in partnership with Māori, by organisations that are immersed in the Māori world and communities, and be whānau focused.
40. Overall Superu believe that to achieve long-term outcomes in the social sector requires:
 - Policies based upon research with the target audience (so that interventions and intended outcomes are based on the reality of client's lives);
 - Evidence informed interventions, programmes and practices; and
 - Effective implementation evidenced by robust evaluation.